



**SAN FRANCISCO
HUMAN SERVICES AGENCY**

Department of Benefits
and Family Support

Department of Disability
and Aging Services

Office of Early Care
and Education

P.O. Box 7988
San Francisco, CA
94120-7988
www.SFHSA.org

MEMORANDUM

TO: DISABILITY AND AGING SERVICES COMMISSION

THROUGH: KELLY DEARMAN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS DS
EE

DATE: JULY 7, 2021

SUBJECT: NEW GRANTS: MULTIPLE GRANTEES FOR NUTRITION SERVICES FOR OLDER ADULTS AND ADULTS WITH DISABILITIES (see table on pages 4-7)

GRANT TERM: 07/01/2021 – 06/30/2025

GRANT AMOUNT: See table on pages 4-7

Funding Source:	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
Funding:	\$71,474,823	\$2,589,185	\$11,225,650	\$8,528,967	\$93,818,625
Percentage:	84%	3%	13%		100%

The Department of Disability and Aging Services (DAS) requests authorization to enter into new grant agreements with multiple providers for the provision of nutrition services for older adults and adults with disabilities during the period of July 1, 2021 through June 30, 2025, in a combined amount of \$85,289,658 plus a 10% contingency for a total amount not to exceed \$93,818,625. The funding amounts are detailed in the tables on pages 4-7.

London Breed
Mayor

Trent Rhorer
Executive Director

The annual amount in FY 21/22 reflects additional funding allocated in the City budget to meet the elevated demand that DAS nutrition partners are experiencing because of the coronavirus pandemic. DAS allocated the additional funding to nutrition providers who are providing nutrition services above their baseline service levels and/or anticipate a surge in FY 21/22 with a particular focus on equity factors.

Background

DAS is a state-designated Area Agency on Aging (AAA) under the federal Older Americans Act (OAA) of 1965 as amended. As an Area Agency on Aging, DAS coordinates and supports a broad array of nutrition services in the City and County of San Francisco for older adults and adults with disabilities at the community level, through partnerships with community-based organizations.



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Sound nutrition for older adults and adults with disabilities living in the community is an important factor in maintaining good health. Older adults and persons with disabilities are more likely than their peers to experience food insecurity, which is closely connected to malnutrition, poor health status, and negative health events. The provision of nutrition services, whether through a congregate setting or home-delivered meals, assists older adults and adults with disabilities in gaining access to affordable, nutritious meals and other home and community-based services.

Services to be Provided

Grantees will provide congregate, and/or home-delivered meal nutrition services. Each of the grantees will offer nutritious meals, nutrition education, and nutrition risk screening. The meals provided by the grantees will meet nutritional standards by incorporating the Dietary Guidelines for Americans and provide a minimum of one-third of the Dietary Reference Intakes (DRIs). The meals will be prepared in accordance with nutrition and food service standards set forth by California Retail Food Code (CRFC), Title 22 Regulations, California Department of Aging, and DAS OCP. Grantees may also provide nutrition compliance, nutrition counseling, and home-delivered meal assessments.

- **Congregate Nutrition Services:**

Grantees provide meals meeting nutritional standards and may include breakfast, lunch, or dinner meals. Grantees offer nutrition services in a group setting, providing opportunities for participants to socialize with one another.

Congregate nutrition services also include nutrition education and nutrition risk screening and give participants the opportunity to contribute to the meal cost.

Nutrition Compliance and Quality Assurance (NCQA): NCQA is a required component of congregate nutrition services. NCQA includes quarterly monitoring of a grantee's food service production and meal service to ensure compliance with state and local food safety and sanitation requirements. NCQA also includes nutrition education, in-service training, and nutrition counseling.

- **Home-Delivered Meal (HDM) Nutrition Services:**

Grantees deliver meals meeting nutritional standards to eligible individuals living in the City and County of San Francisco. HDM nutrition services include an initial home-delivered meal assessment, an annual comprehensive assessment, and quarterly re-assessments of the participant. The quantity of meals delivered to each individual per week depends on their unique needs as determined by the assessments. HDM nutrition services also include nutrition education and nutrition risk screening and give participants the opportunity to contribute to the meal cost.



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Nutrition Compliance and Quality Assurance (NCQA): NCQA is a required component of HDM nutrition services. NCQA includes quarterly monitoring of a grantee's food service production and meal delivery to ensure compliance with state and local food safety and sanitation requirements. NCQA also includes nutrition education, in-service training, home-delivered meal assessments, and nutrition counseling.

- **Emergency Home-Delivered Meal Nutrition Services:**

Grantees deliver meals meeting nutritional standards to eligible consumers living in the City and County of San Francisco who have an urgent or temporary need for nutrition support in the community. The grantee begins meal service to the consumer within two to five days of a request and the provision of meals does not exceed sixty days.

For more specific information regarding the breakdown of services, defined objectives, and target population, please refer to the attached Appendix A.

Grant Amount

- **Congregate Nutrition Services for Older Adults:**

Agency	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Bayview Senior Services	\$1,400,531	\$546,914	\$3,041,273	\$304,127	\$3,345,400
Centro Latino de San Francisco	\$697,236	\$532,559	\$2,294,913	\$229,491	\$2,524,404
Episcopal Community Services of San Francisco	\$412,489	\$412,489	\$1,649,956	\$164,996	\$1,814,952
Glide Foundation	\$259,951	\$168,466	\$765,349	\$76,535	\$841,884
Kimochi	\$709,023	\$511,283	\$2,242,872	\$224,287	\$2,467,159
On Lok Day Services	\$712,653	\$712,653	\$2,850,612	\$285,061	\$3,135,673
Project Open Hand	\$2,462,428	\$2,075,388	\$8,688,592	\$868,859	\$9,557,451
Russian American Community Services	\$364,207	\$325,375	\$1,340,332	\$134,033	\$1,474,365
Self-Help for the Elderly	\$2,657,343	\$1,997,307	\$8,649,264	\$864,926	\$9,514,190
Total	\$9,675,861	\$7,282,434	\$31,523,163	\$3,152,315	\$34,675,478

- **Congregate Nutrition Services for Adults with Disabilities:**

Agency	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Bayview Senior Services	\$190,375	\$84,760	\$444,655	\$44,466	\$489,121
Centro Latino de San Francisco	\$162,054	\$101,931	\$467,847	\$46,785	\$514,632
Episcopal Community Services of San Francisco	\$65,755	\$65,755	\$263,020	\$26,302	\$289,322

Glide Foundation	\$53,511	\$27,651	\$136,464	\$13,646	\$150,110
Project Open Hand	\$518,040	\$431,838	\$1,813,554	\$181,355	\$1,994,909
Russian American Community Services	\$11,943	\$11,261	\$45,726	\$4,573	\$50,299
Self-Help for the Elderly	\$34,310	\$27,066	\$115,508	\$11,551	\$127,059
Total	\$1,035,988	\$750,262	\$3,286,774	\$328,678	\$3,615,452

- **Home-Delivered Meal (HDM) Nutrition Services for Older Adults:**

Agency	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Centro Latino de San Francisco	\$401,903	\$268,595	\$1,207,688	\$120,769	\$1,328,457
Jewish Family and Children's Services	\$114,667	\$110,147	\$445,108	\$44,511	\$489,619
Kimochi	\$538,806	\$308,307	\$1,463,727	\$146,373	\$1,610,100
Meals on Wheels	\$7,792,536	\$6,942,006	\$28,618,554	\$2,861,855	\$31,480,409
On Lok Day Services	\$1,308,338	\$1,115,904	\$4,656,050	\$465,605	\$5,121,655
Russian American Community Services	\$332,438	\$316,215	\$1,281,083	\$128,108	\$1,409,191
Self-Help for the Elderly	\$1,385,049	\$1,014,172	\$4,427,565	\$442,757	\$4,870,322
Total	\$11,873,737	\$10,075,346	\$42,099,775	\$4,209,978	\$46,309,753

- **Home Delivered Meal (HDM) Nutrition Services for Adults with Disabilities:**

Agency	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Meals on Wheels	\$1,407,600	\$1,025,222	\$4,483,266	\$448,327	\$4,931,593
Project Open Hand	\$172,219	\$160,519	\$653,776	\$65,378	\$719,154
Self-Help for the Elderly	\$338,155	\$258,235	\$1,112,860	\$111,286	\$1,224,146
Total	\$1,917,974	\$1,443,976	\$6,249,902	\$624,991	\$6,874,893

- **Emergency Home-Delivered Meal Nutrition Services:**

Agency	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Meals on Wheels	\$195,440	\$166,532	\$695,036	\$69,504	\$764,540
Total	\$195,440	\$166,532	\$695,036	\$69,504	\$764,540

- **Home-Delivered Meal Assessment for Adults with Disabilities:**

Agency	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Institute on Aging	\$358,752	\$358,752	\$1,435,008	\$143,501	\$1,578,509
Total	\$358,752	\$358,752	\$1,435,008	\$143,501	\$1,578,509

- **Total:**

Program	Annual amount for FY 21/22	Annual amount for FY 22/23, FY 23/24 and FY 24/25	Grant amount	Contingency	Not to Exceed
Congregate Nutrition Services for Older Adults	\$9,675,861	\$7,282,434	\$31,523,163	\$3,152,315	\$34,675,478
Congregate Nutrition Services for Adults with Disabilities	\$1,035,988	\$750,262	\$3,286,774	\$328,678	\$3,615,452
Home-Delivered Meal (HDM) Nutrition Services for Older Adults	\$11,873,737	\$10,075,346	\$42,099,775	\$4,209,978	\$46,309,753
Home-Delivered Meal (HDM) Nutrition Services for Adults with Disabilities	\$1,917,974	\$1,443,976	\$6,249,902	\$624,991	\$6,874,893
Emergency Home-Delivered Meal Nutrition Services	\$195,440	\$166,532	\$695,036	\$69,504	\$764,540
Home-Delivered Meal Assessment for Adults with Disabilities	\$358,752	\$358,752	\$1,435,008	\$143,501	\$1,578,509
Total	\$25,057,752	\$20,077,302	\$85,289,658	\$8,528,967	\$93,818,625



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Grantee Performance

Grantees identified in the funding tables are current DAS funded nutrition program contractors. All grantees were determined to be in compliance with fiscal and programmatic requirements for FY 19-20.

Selection

Grantee was selected through RFP #940 issued in March 2021.

Funding

This grant will be funded through federal, state and local funds.

Attachments

- **Congregate Nutrition Services for Older Adults:**

- Bayview Hunter's Point Multipurpose Senior Services*

- Appendix A – Services to be Provided

- Appendix B – Budget

- Centro Latino de San Francisco*

- Appendix A – Services to be Provided

- Appendix B – Budget

- Episcopal Community Services of San Francisco*

- Appendix A – Services to be Provided

- Appendix B – Budget

- Glide Foundation*

- Appendix A – Services to be Provided

- Appendix B – Budget

- Kimochi*

- Appendix A – Services to be Provided

- Appendix B – Budget

- On Lok Day Services*

- Appendix A – Services to be Provided

- Appendix B – Budget

- Project Open Hand*

- Appendix A – Services to be Provided

- Appendix B – Budget, Lunch

- Appendix B-1 – Budget, Breakfast

- Russian American Community Services*

- Appendix A – Services to be Provided

- Appendix B – Budget



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Self-Help for the Elderly
Appendix A – Services to be Provided
Appendix B – Budget

- **Congregate Nutrition Services for Adults with Disabilities:**

Bayview Hunter’s Point Multipurpose Senior Services
Appendix A – Services to be Provided
Appendix B – Budget

Centro Latino de San Francisco
Appendix A – Services to be Provided
Appendix B – Budget

Episcopal Community Services of San Francisco
Appendix A – Services to be Provided
Appendix B – Budget

Glide Foundation
Appendix A – Services to be Provided
Appendix B – Budget

Project Open Hand
Appendix A – Services to be Provided
Appendix B – Budget

Russian American Community Services
Appendix A – Services to be Provided
Appendix B – Budget

Self-Help for the Elderly
Appendix A – Services to be Provided
Appendix B – Budget

- **Home-Delivered Meal (HDM) Nutrition Services for Older Adults:**

Centro Latino de San Francisco
Appendix A – Services to be Provided
Appendix B – Budget

Jewish Family and Children’s Services
Appendix A – Services to be Provided
Appendix B – Budget

Kimochi
Appendix A – Services to be Provided
Appendix B – Budget

Meals on Wheels
Appendix A – Services to be Provided
Appendix B – Budget



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On Lok Day Services

Appendix A – Services to be Provided

Appendix B – Budget

Russian American Community Services

Appendix A – Services to be Provided

Appendix B – Budget

Self-Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

- **Home-Delivered Meal (HDM) Nutrition Services for Adults with Disabilities:**

Meals on Wheels

Appendix A – Services to be Provided

Appendix B – Budget

Project Open Hand

Appendix A – Services to be Provided

Appendix B – Budget

Self-Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

- **Emergency Home-Delivered Meal Nutrition Services:**

Meals on Wheels

Appendix A – Services to be Provided

Appendix B – Budget

- **Home Delivered Meal Assessment for Adults with Disabilities:**

Institute on Aging

Appendix A – Services to be Provided

Appendix B – Budget

- **Site Chart**

Congregate Nutrition Services for Older Adults:

Bayview Hunter's Point Multipurpose Senior Services

Appendix A – Services to be Provided

Appendix B – Budget

Centro Latino de San Francisco

Appendix A – Services to be Provided

Appendix B – Budget

Episcopal Community Services of San Francisco

Appendix A – Services to be Provided

Appendix B – Budget

Glide Foundation

Appendix A – Services to be Provided

Appendix B – Budget

Kimochi

Appendix A – Services to be Provided

Appendix B – Budget

On Lok Day Services

Appendix A – Services to be Provided

Appendix B – Budget

Project Open Hand

Appendix A – Services to be Provided

Appendix B – Budget, Lunch

Appendix B-1 – Budget, Breakfast

Russian American Community Services

Appendix A – Services to be Provided

Appendix B – Budget

Self-Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

Appendix A - Services to be Provided
Bayview Senior Services
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Bayview Senior Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	1700	1200	1200	1200
Number of Meals	163081	62655	62655	62655

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.

7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Steve Kim
Contract Manager
HSA OCM
email: Steve.Kim@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Bayview Hunters Point Multipurpose Senior Services
(Please enter agency name here)

(Check One) New Renewal Modification

If modification, Effective Date of Mod. No. of Mod.

Program: Congregate meals for older adults

Budget Reference Page No.(s)

Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	163,081	62,655	62,655	62,655	351,046	
DAS Expenditures						
Salaries & Benefits	\$718,632	\$264,863	\$264,863	\$264,863	\$1,513,221	\$4.31
Operating Expenses	\$589,093	\$237,563	\$237,563	\$237,563	\$1,301,782	\$3.71
Subtotal	\$1,307,725	\$502,426	\$502,426	\$502,426	\$2,815,003	\$8.02
Indirect Percentage (%)	6.00%	6.00%	6.00%	6.00%	6.00%	
Indirect Cost	\$78,464	\$30,146	\$30,146	\$30,146	\$168,902	\$0.48
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$14,342	\$14,342	\$14,342	\$14,342	\$57,368	\$0.16
Total DAS Expenditures	\$1,400,531	\$546,914	\$546,914	\$546,914	\$3,041,273	\$8.66
Non DAS Expenditures						
Salaries & Benefits	\$86,325	\$54,148	\$54,148	\$54,148	\$248,769	\$0.71
Operating Expenses	\$31,828	\$21,786	\$21,786	\$21,786	\$97,186	\$0.28
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$118,153	\$75,934	\$75,934	\$75,934	\$345,955	\$0.99
TOTAL DAS AND NON DAS EXPEDITURES	\$1,518,684	\$622,848	\$622,848	\$622,848	\$3,387,228	\$9.65
DAS Revenues						
Meals- General Fund	\$1,386,189	\$532,572	\$532,572	\$532,572	\$2,983,905	\$ 8.50
Meals- State Fund						\$ -
Meals- Federal Fund						\$ -
NCQA Fund	\$14,342	\$14,342	\$14,342	\$14,342	\$57,368	\$ 0.16
Total DAS Revenue	\$1,400,531	\$546,914	\$546,914	\$546,914	\$3,041,273	\$ 8.66
PER MEAL COST, DAS	\$8.50	\$8.50	\$8.50	\$8.50	\$8.50	
PER MEAL COST (with NCQA), DAS	\$8.59	\$8.73	\$8.73	\$8.73	\$8.66	
Non DAS Revenues						
Project Income	\$18,922	\$10,922	\$10,922	\$10,922	\$51,688	\$ 0.15
Agency Cash- Fundraising	\$26,139	\$11,426	\$11,426	\$11,426	\$60,417	\$ 0.17
Agency In-kind Volunteer	\$56,784	\$47,320	\$47,320	\$47,320	\$198,744	\$ 0.57
Food Bank Donation	\$16,308	\$6,266	\$6,266	\$6,266	\$35,106	\$ 0.10
Total Non DAS Revenue	\$118,153	\$75,934	\$75,934	\$75,934	\$345,955	\$ 0.99
PER MEAL COST, Non DAS	\$0.72	\$1.21	\$1.21	\$1.21	\$0.99	
PER MEAL COST (with NCQA), Non DAS	\$0.72	\$1.21	\$1.21	\$1.21	\$0.99	
TOTAL DAS AND NON DAS REVENUE	\$1,518,684	\$622,848	\$622,848	\$622,848	\$3,387,228	\$ 9.65
PER MEAL COST, Total	\$9.22	\$9.71	\$9.71	\$9.71	\$9.49	
PER MEAL COST (with NCQA), Total	\$9.31	\$9.94	\$9.94	\$9.94	\$9.65	
Full Time Equivalent (FTE)	16.91	16.91	16.91	16.91	67.65	

Prepared by:

Date: 5/10/18

HSA #1

7/7/2021

Program: Congregate meals for older adults
(Same as Line 11 on HSA #1)

Appendix B, Page 2
Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Executive Chef	\$87,552	1.00	80.00%	0.80	\$70,042	\$35,021	\$35,021	\$35,021	\$175,105
Food Service Coordinator	\$58,240	1.00	80.00%	0.80	\$46,592				\$46,592
Cook	\$52,000	1.00	80.00%	0.80	\$41,600				\$41,600
Kitchen Assistant/Maintenance	\$45,760	1.00	80.00%	0.80	\$36,608	\$36,608	\$36,608	\$36,608	\$146,432
WASC Site Manager	\$45,760	1.00	80.00%	0.80	\$36,608	\$36,608	\$36,608	\$36,608	\$146,432
Cook	\$47,840	1.00	80.00%	0.80	\$38,272				\$38,272
Food Service Assistant	\$36,400	0.75	80.00%	0.60	\$21,840				\$21,840
Food Service Assistant	\$41,600	1.00	80.00%	0.80	\$33,280				\$33,280
Rosa Parks Site Manager	\$37,440	0.44	80.00%	0.35	\$13,104	\$13,104	\$13,104	\$13,104	\$52,416
Dr Davis Site Manager	\$39,520	1.00	80.00%	0.80	\$31,616	\$15,808	\$15,808	\$15,808	\$79,040
Food Service Assistant	\$39,520	1.00	80.00%	0.80	\$31,616				\$31,616
Kitchen Assistant/ Maintenance	\$36,400	1.00	80.00%	0.80	\$29,120				\$29,120
Driver	\$44,440	1.00	80.00%	0.80	\$35,552	\$35,552	\$35,552	\$35,552	\$142,208
Cook	\$54,080	1.00	80.00%	0.80	\$43,264	\$31,040	\$31,040	\$31,040	\$136,384
Food Service Assistants	\$36,400	1.50	80.00%	1.20	\$43,680				\$43,680
Totals	\$702,952	14.69	1200.00%	11.75	\$552,794	\$203,741	\$203,741	\$203,741	\$1,164,017
Fringe Benefits Rate	30.00%								
Employee Fringe Benefits	\$210,886				\$165,838	\$61,122	\$61,122	\$61,122	\$349,204
Total DAS Salaries and Benefits	\$913,838				\$718,632	\$264,863	\$264,863	\$264,863	\$1,513,221
Non DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
driver	\$36,400	0.60	80.00%	0.48	\$17,472				\$17,472
Date entry	\$52,520	0.13	80.00%	0.10	\$5,252	\$5,252	\$5,252	\$5,252	\$21,008
Volunteers	\$36,400	1.50	80.00%	1.20	\$43,680	\$36,400	\$36,400	\$36,400	\$152,880
Totals	\$125,320	2.23	240.00%	1.78	\$66,404	\$41,652	\$41,652	\$41,652	\$191,360
Fringe Benefits Rate	30.00%								
Employee Fringe Benefits	\$37,596				\$19,921	\$12,496	\$12,496	\$12,496	\$57,409
Total Non DAS Salaries and Benefits	\$162,916				\$86,325	\$54,148	\$54,148	\$54,148	\$248,769
Total DAS and Non DAS Salaries and Benefits	\$1,076,754				\$804,957	\$319,011	\$319,011	\$319,011	\$1,761,990

HSA #2

7/7/2021

Program: Congregate meals for older adults
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	163,081	62,655	62,655	62,655	351,046
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$5,760	\$5,760	\$5,760	\$5,760	\$23,040
Utilities (Elec, Water, Gas, Phone, Garbage)	\$28,175	\$13,175	\$13,175	\$13,175	\$67,700
Office Supplies, Postage	\$2,400	\$2,400	\$2,400	\$2,400	\$9,600
Building Maintenance Supplies and Repair	\$12,752	\$4,385	\$4,385	\$4,385	\$25,907
Printing and Reproduction					
Insurance	\$9,546	\$4,746	\$4,746	\$4,746	\$23,784
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$3.00</i>	\$489,243	\$187,965	\$187,965	\$187,965	\$1,053,138
Cong Food Svc Supplies <i>per meal \$0.20</i>	\$32,616	\$12,531	\$12,531	\$12,531	\$70,209
Catered Meals <i>per meal</i>					
<u>Other</u>					
DMV Registration	\$1,881	\$1,881	\$1,881	\$1,881	\$7,524
Gas and Car Rental	\$6,720	\$4,720	\$4,720	\$4,720	\$20,880
Total DAS Operating Expenses	\$589,093	\$237,563	\$237,563	\$237,563	\$1,301,782
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage					
Building Maintenance Supplies and Repair	\$4,800	\$4,800	\$4,800	\$4,800	\$19,200
Printing and Reproduction					
Insurance					
Staff Training	\$4,000	\$4,000	\$4,000	\$4,000	\$16,000
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$0.10</i>	\$16,308	\$6,266	\$6,266	\$6,266	\$35,106
Cong Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal</i>					
<u>Other</u>					
Small Equipment and supplies	\$3,840	\$3,840	\$3,840	\$3,840	\$15,360
Car Repair	\$2,880	\$2,880	\$2,880	\$2,880	\$11,520
Total Non DAS Operating Expenses	\$31,828	\$21,786	\$21,786	\$21,786	\$97,186
Total DAS and Non DAS Operating Expenses	\$620,921	\$259,349	\$259,349	\$259,349	\$1,398,968

HSA #3

7/7/2021

Program: Congregate meals for older adults
 (Same as Line 11 on HSA #1)

Appendix B, Page 5
 Document Date: March 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$739.00 /set	2.00	\$1,478	\$1,478	\$1,478	\$1,478	\$5,912
Kitchen and food service monitoring	\$688.00	8.00	\$5,504	\$5,504	\$5,504	\$5,504	\$22,016
Congregate site monitoring	\$264.00	16.00	\$4,224	\$4,224	\$4,224	\$4,224	\$16,896
Nutrition education	\$112.00	16.00	\$1,792	\$1,792	\$1,792	\$1,792	\$7,168
Nutrition counseling (optional)	/hour						
In-service training	\$112.00 /training	12.00	\$1,344	\$1,344	\$1,344	\$1,344	\$5,376
Total DAS NCQA Expenditure			\$14,342	\$14,342	\$14,342	\$14,342	\$57,368

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set	2.00					
Kitchen and food service monitoring		8.00					
Congregate site monitoring		16.00					
Nutrition education							
Nutrition counseling (optional)	/hour						
In-service training	/training	12.00					
Total Non DAS NCQA Expenditure							

Total DAS and Non DAS NCQA Expenditure			\$14,342	\$14,342	\$14,342	\$14,342	\$57,368
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HSA #4

7/7/2021

Appendix A - Services to be Provided
Centro Latino de San Francisco
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Centro Latino de San Francisco
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	1416	1075	1075	1075
Number of Meals	89664	68081	68081	68081

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.

6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:
 Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Tahir Shaikh
Contract Manager
HSA OCM
email: Tahir.Shaikh@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Centro Latino de San Francisco						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (X) older adults or () adults with disabilities						
Budget Reference Page No.(s) _____						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	89,664	68,081	68,081	68,081	293,907	
DAS Expenditures						
Salaries & Benefits	\$431,065	\$327,305	\$327,305	\$327,305	\$1,412,980	\$4.81
Operating Expenses	\$190,877	\$144,930	\$144,930	\$144,930	\$625,667	\$2.13
Subtotal	\$621,942	\$472,235	\$472,235	\$472,235	\$2,038,647	\$6.94
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$62,194	\$47,224	\$47,224	\$47,224	\$203,866	\$0.69
NCQA Expenditures	\$13,100	\$13,100	\$13,100	\$13,100	\$52,400	\$0.18
Total DAS Expenditures	\$697,236	\$532,559	\$532,559	\$532,559	\$2,294,913	\$7.81
Non DAS Expenditures						
Salaries & Benefits	\$77,433	\$58,795	\$58,795	\$58,795	\$253,817	\$0.86
Operating Expenses	\$81,025	\$61,521	\$61,521	\$61,521	\$265,589	\$0.90
Total Non DAS Expenditures	\$158,458	\$120,316	\$120,316	\$120,316	\$519,406	\$1.77
TOTAL DAS AND NON DAS EXPEDITURES	\$855,694	\$652,875	\$652,875	\$652,875	\$2,814,319	\$9.58
DAS Revenues						
Meals- General Fund	\$684,136	\$519,458	\$519,458	\$519,458	\$2,242,510	\$7.63
NCQA Fund	\$13,100	\$13,100	\$13,100	\$13,100	\$52,400	\$0.18
Total DAS Revenue	\$697,236	\$532,558	\$532,558	\$532,558	\$2,294,910	\$7.81
PER MEAL COST, DAS	\$7.63	\$7.63	\$7.63	\$7.63	\$7.63	
PER MEAL COST (with NCQA), DAS	\$7.78	\$7.82	\$7.82	\$7.82	\$7.81	
Non DAS Revenues						
Project Income	\$35,424	\$26,897	\$26,897	\$26,897	\$116,115	\$0.40
Agency Cash- Fundraising						
Agency In-kind Volunteer	\$123,034	\$93,419	\$93,419	\$93,419	\$403,291	\$1.37
Total Non DAS Revenue	\$158,458	\$120,316	\$120,316	\$120,316	\$519,406	\$1.77
PER MEAL COST, Non DAS	\$1.77	\$1.77	\$1.77	\$1.77	\$1.77	
PER MEAL COST (with NCQA), Non DAS	\$1.77	\$1.77	\$1.77	\$1.77	\$1.77	
TOTAL DAS AND NON DAS REVENUE	\$855,694	\$652,874	\$652,874	\$652,874	\$2,814,316	\$9.58
PER MEAL COST, Total	\$9.40	\$9.40	\$9.40	\$9.40	\$9.40	
PER MEAL COST (with NCQA), Total	\$9.55	\$9.59	\$9.59	\$9.59	\$9.58	
Full Time Equivalent (FTE)	4.64	4.64	4.64	4.64	18.58	
Prepared by:	Victor de la Rocha, Controller (469) 247-7836				Document Date: 06/29/21	
HSA-CO Review Signature:	_____					
HSA #1						10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: 06/29/21

Salaries & Benefits Detail

DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Position Title									
Nutrition Sites & Programs Manager	\$54,080	0.23	100.00%	0.23	\$12,438	\$9,444	\$9,444	\$9,444	\$40,770
Nutritionist	\$52,000	0.51	100.00%	0.51	\$26,290	\$19,962	\$19,962	\$19,962	\$86,176
Head Cook	\$45,760	0.52	100.00%	0.52	\$23,738	\$18,024	\$18,024	\$18,024	\$77,810
Cook	\$41,600	0.34	100.00%	0.34	\$14,065	\$10,679	\$10,679	\$10,679	\$46,102
Site Manager Star Hotel/Cook	\$43,680	0.50	100.00%	0.50	\$21,952	\$16,668	\$16,668	\$16,668	\$71,956
Cook	\$41,600	0.59	100.00%	0.59	\$24,399	\$18,526	\$18,526	\$18,526	\$79,977
Meal Server	\$47,840	0.23	100.00%	0.23	\$11,223	\$8,522	\$8,522	\$8,522	\$36,789
Food Prep & Meal Server	\$37,440	0.44	100.00%	0.44	\$16,469	\$12,505	\$12,505	\$12,505	\$53,984
Food Prep	\$39,520	0.26	100.00%	0.26	\$10,430	\$7,919	\$7,919	\$7,919	\$34,187
Janitor	\$39,520	0.22	100.00%	0.22	\$8,796	\$6,679	\$6,679	\$6,679	\$28,833
Dishwasher/Janitor	\$39,520	0.47	100.00%	0.47	\$18,520	\$14,062	\$14,062	\$14,062	\$60,706
Driver & Food Purchaser	\$39,520	0.11	100.00%	0.11	\$4,165	\$3,162	\$3,162	\$3,162	\$13,651
Site Manager MNC	\$39,520	0.30	100.00%	0.30	\$11,982	\$9,098	\$9,098	\$9,098	\$39,276
Site Manager VC & Food prep	\$37,440	0.71	100.00%	0.71	\$26,624	\$20,215	\$20,215	\$20,215	\$87,269
Site Manager Ed Lee & Food Purchaser	\$39,520	0.81	100.00%	0.81	\$31,952	\$24,261	\$24,261	\$24,261	\$104,735
Site Manager L.Mayores & Activities Facilitator	\$37,440	0.19	100.00%	0.19	\$7,006	\$5,320	\$5,320	\$5,320	\$22,966
Site Manager VA & Assis. Social Worker	\$43,680	0.80	100.00%	0.80	\$34,736	\$26,375	\$26,375	\$26,375	\$113,861
Social Worker/Resource Specialist	\$62,400	0.29	100.00%	0.29	\$18,181	\$13,805	\$13,805	\$13,805	\$59,596
Social Worker/Activities Facilitator	\$62,400	0.59	100.00%	0.59	\$36,598	\$27,789	\$27,789	\$27,789	\$119,965
Executive Director	\$90,350	0.22	100.00%	0.22	\$19,895	\$15,106	\$15,106	\$15,106	\$65,213
Totals	\$335,790	2.89	600.00%	2.89	\$379,459	\$288,121	\$288,121	\$288,121	\$1,243,822
Fringe Benefits Rate	14%								
Employee Fringe Benefits	\$45,667				\$51,606	\$39,184	\$39,184	\$39,184	\$169,158
Total DAS Salaries and Benefits	\$381,457				\$431,065	\$327,305	\$327,305	\$327,305	\$1,412,980

Non DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Position Title									
Food Packer/Meal Server	\$38,834	0.22	100.00%	0.22	\$8,592	\$6,524	\$6,524	\$6,524	\$28,163
Food Packer/Meal Server	\$38,834	0.22	100.00%	0.22	\$8,592	\$6,524	\$6,524	\$6,524	\$28,163
Food Packer/Meal Server	\$38,834	0.59	100.00%	0.59	\$22,912	\$17,397	\$17,397	\$17,397	\$75,103
Food Packer/Meal Server (Saturdays)	\$38,834	0.06	100.00%	0.06	\$2,291	\$1,740	\$1,740	\$1,740	\$7,510
Food Packer/Site Manager	\$38,834	0.37	100.00%	0.37	\$14,320	\$10,873	\$10,873	\$10,873	\$46,939
Meal Delivery	\$38,834	0.30	100.00%	0.30	\$11,456	\$8,698	\$8,698	\$8,698	\$37,551
Totals	\$233,002	1.76	600.00%	1.76	\$68,163	\$51,756	\$51,756	\$51,756	\$223,430
Fringe Benefits Rate	14%								
Employee Fringe Benefits	\$31,688				\$9,270	\$7,039	\$7,039	\$7,039	\$30,387
Total Non DAS Salaries and Benefits	\$264,690				\$77,433	\$58,795	\$58,795	\$58,795	\$253,817
Total DAS and Non DAS Salaries and Benefits	\$646,146				\$508,498	\$386,099	\$386,099	\$386,099	\$1,666,795

HSA #2

10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	89,664	68,081	68,081	68,081	293,907
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$6,415	\$4,870	\$4,870	\$4,870	\$21,025
Office Supplies, Postage	\$7,215	\$5,478	\$5,478	\$5,478	\$23,649
Insurance	\$6,053	\$4,596	\$4,596	\$4,596	\$19,841
<u>Food Cost</u>					
Raw Food <i>per meal</i> \$1.50	\$134,496	\$102,122	\$102,122	\$102,122	\$440,862
Cong Food Svc Supplies <i>per meal</i> \$0.24	\$21,519	\$16,339	\$16,339	\$16,339	\$70,536
Catered Meals <i>per meal</i>					
<u>Other</u>					
Stipends	\$1,565	\$1,188	\$1,188	\$1,188	\$5,129
Auto - Fuel, Insurance & Misc.	\$13,613	\$10,337	\$10,337	\$10,337	\$44,624
Total DAS Operating Expenses	\$190,877	\$144,930	\$144,930	\$144,930	\$625,667
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$45,601	\$34,624	\$34,624	\$34,624	\$149,474
<u>Food Cost</u>					
Raw Food <i>per meal</i> \$0.34	\$30,538	\$23,187	\$23,187	\$23,187	\$100,099
Cong Food Svc Supplies <i>per meal</i> \$0.05	\$4,886	\$3,710	\$3,710	\$3,710	\$16,016
Catered Meals <i>per meal</i>					
Total Non DAS Operating Expenses	\$81,025	\$61,521	\$61,521	\$61,521	\$265,589
Total DAS and Non DAS Operating Expenses	\$271,902	\$206,451	\$206,451	\$206,451	\$891,256
HSA #3					10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

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 Document Date: 06/29/21

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$700.00 /set	1.00	\$700	\$700	\$700	\$700	\$2,800
Kitchen and food service monitoring	\$600.00	2.00	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
Congregate site monitoring	\$300.00	24.00	\$7,200	\$7,200	\$7,200	\$7,200	\$28,800
Nutrition education	\$150.00	24.00	\$3,600	\$3,600	\$3,600	\$3,600	\$14,400
Other TA	\$100.00 /hour	4.00	\$400	\$400	\$400	\$400	\$1,600
Total DAS NCQA Expenditure			\$13,100	\$13,100	\$13,100	\$13,100	\$52,400
Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set	1.00					
Kitchen and food service monitoring		2.00					
Congregate site monitoring		24.00					
Nutrition education		24.00					
Nutrition counseling (optional)	/hour	4.00					
Total Non DAS NCQA Expenditure							
Total DAS and Non DAS NCQA Expenditure			\$13,100	\$13,100	\$13,100	\$13,100	\$52,400
HSA #4							10/25/2016

Appendix A - Services to be Provided
Episcopal Community Services
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Episcopal Community Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	1,200	1,200	1,200	1,200
Number of Meals	49,667	49,667	49,667	49,667

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.

7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Rocio Duenas

Contract Manager
HSA OCM
email: rocio.duenas@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
EPISCOPAL COMMUNITY SERVICES OF SF						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (X) older adults or () adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	49,667	49,667	49,667	49,667	198,668	
DAS Expenditures						
Salaries & Benefits	\$226,015	\$226,015	\$226,015	\$226,015	\$904,060	\$4.55
Operating Expenses	\$141,520	\$141,520	\$141,520	\$141,520	\$566,080	\$2.85
Subtotal	\$367,535	\$367,535	\$367,535	\$367,535	\$1,470,140	\$7.40
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$36,754	\$36,754	\$36,754	\$36,754	\$147,016	\$0.74
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$8,200	\$8,200	\$8,200	\$8,200	\$32,800	\$0.17
Total DAS Expenditures	\$412,489	\$412,489	\$412,489	\$412,489	\$1,649,956	\$8.31
Non DAS Expenditures						
Salaries & Benefits	\$180,415	\$180,415	\$180,415	\$180,415	\$721,660	\$3.63
Operating Expenses	\$134,959	\$134,959	\$134,959	\$134,959	\$539,835	\$2.72
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$315,374	\$315,374	\$315,374	\$315,374	\$1,261,495	\$6.35
TOTAL DAS AND NON DAS EXPEDITURES	\$727,863	\$727,863	\$727,863	\$727,863	\$2,911,451	\$14.65
DAS Revenues						
Meals- General Fund	\$404,289	\$404,289	\$404,289	\$404,289	\$1,617,156	\$8.14
Meals- State Fund						
Meals- Federal Fund						
NCQA Fund	\$8,200	\$8,200	\$8,200	\$8,200	\$32,800	\$0.17
Total DAS Revenue	\$412,489	\$412,489	\$412,489	\$412,489	\$1,649,956	\$8.31
<i>PER MEAL COST, DAS</i>	\$8.14	\$8.14	\$8.14	\$8.14	\$8.14	\$8.14
<i>PER MEAL COST (with NCQA), DAS</i>	\$8.31	\$8.31	\$8.31	\$8.31	\$8.31	\$8.31
Non DAS Revenues						
Project Income	\$1,100	\$1,100	\$1,100	\$1,100	\$4,400	\$0.02
Agency Cash- Fundraising	\$314,274	\$314,274	\$314,274	\$314,274	\$1,257,096	\$6.33
Agency In-kind Volunteer						
NCQA Revenue						
Total Non DAS Revenue	\$315,374	\$315,374	\$315,374	\$315,374	\$1,261,496	\$6.35
<i>PER MEAL COST, Non DAS</i>	\$6.35	\$6.35	\$6.35	\$6.35	\$6.35	\$6.35
<i>PER MEAL COST (with NCQA), Non DAS</i>	\$6.35	\$6.35	\$6.35	\$6.35	\$6.35	\$6.35
TOTAL DAS AND NON DAS REVENUE	\$727,863	\$727,863	\$727,863	\$727,863	\$2,911,452	\$14.65
<i>PER MEAL COST, Total</i>	\$14.49	\$14.49	\$14.49	\$14.49	\$14.49	\$14.49
<i>PER MEAL COST (with NCQA), Total</i>	\$14.66	\$14.66	\$14.66	\$14.66	\$14.66	\$14.66
Full Time Equivalent (FTE)	7.00	7.00	7.00	7.00	28.00	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:	_____					
HSA #1						10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Chef and Culinary Training Instructor	\$78,191	0.56	0.85	0.47	\$36,960	\$36,960	\$36,960	\$36,960	\$147,840
Director of Impact and Analytics	\$154,302	0.56	0.17	0.09	\$14,587	\$14,587	\$14,587	\$14,587	\$58,348
Assistant Chef	\$64,855	0.56	0.85	0.47	\$30,656	\$30,656	\$30,656	\$30,656	\$122,624
Database Specialist/Compliance Monitor	\$77,516	0.56	0.17	0.09	\$7,328	\$7,328	\$7,328	\$7,328	\$29,312
Culinary Training Manager	\$91,729	0.56	0.85	0.47	\$43,359	\$43,359	\$43,359	\$43,359	\$173,436
Part-Time Cook	\$44,396	0.56	0.68	0.38	\$16,788	\$16,788	\$16,788	\$16,788	\$67,152
Part- Time Delivery Driver	\$44,396	0.56	0.43	0.24	\$10,616	\$10,616	\$10,616	\$10,616	\$42,464
Totals	\$555,385	3.89	400.00%	2.22	\$160,294	\$160,294	\$160,294	\$160,294	\$641,176
Fringe Benefits Rate	41.00%								
Employee Fringe Benefits	\$227,708				\$65,721	\$65,721	\$65,721	\$65,721	\$262,884
Total DAS Salaries and Benefits	\$783,093				\$226,015	\$226,015	\$226,015	\$226,015	\$904,060
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Chef and Culinary Training Instructor	\$78,191	0.44	0.85	0.38	\$29,503	\$29,503	\$29,503	\$29,503	\$118,012
Director of Impact and Analytics	\$154,302	0.44	0.17	0.08	\$11,644	\$11,644	\$11,644	\$11,644	\$46,576
Assistant Chef	\$64,855	0.44	0.85	0.38	\$24,471	\$24,471	\$24,471	\$24,471	\$97,884
Database Specialist/Compliance Monitor	\$77,516	0.44	0.17	0.08	\$5,850	\$5,850	\$5,850	\$5,850	\$23,400
Culinary Training Manager	\$91,729	0.44	0.85	0.38	\$34,611	\$34,611	\$34,611	\$34,611	\$138,444
Part-Time Cook	\$44,396	0.44	0.68	0.30	\$13,401	\$13,401	\$13,401	\$13,401	\$53,604
Part- Time Delivery Driver	\$44,396	0.44	0.43	0.19	\$8,474	\$8,474	\$8,474	\$8,474	\$33,896
Totals	\$555,385	3.11	400.00%	1.78	\$127,954	\$127,954	\$127,954	\$127,954	\$511,816
Fringe Benefits Rate	41.00%								
Employee Fringe Benefits	\$227,708				\$52,461	\$52,461	\$52,461	\$52,461	\$209,844
Total Non DAS Salaries and Benefits	\$783,093				\$180,415	\$180,415	\$180,415	\$180,415	\$721,660
Total DAS and Non DAS Salaries and Benefits	\$1,566,186				\$406,430	\$406,430	\$406,430	\$406,430	\$1,625,720
HSA #2									10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
49,667	49,667	49,667	49,667	49,667	198,668
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage	\$573	\$573	\$573	\$573	\$2,294
Building Maintenance Supplies and Repair	\$8,601	\$8,601	\$8,601	\$8,601	\$34,405
Printing and Reproduction	\$1,338	\$1,338	\$1,338	\$1,338	\$5,352
Insurance	\$6,885	\$6,885	\$6,885	\$6,885	\$27,538
Staff Recruitment	\$142	\$142	\$142	\$142	\$567
Auto/Gas/Oil Maintenance: Van	\$2,130	\$2,130	\$2,130	\$2,130	\$8,519
IT Equipment	\$250	\$250	\$250	\$250	\$1,001
Food Cost					
Raw Food	<i>per meal</i> \$4.00	\$110,482	\$110,482	\$110,482	\$441,928
Cong Food Svc Supplies	<i>per meal</i> \$0.21	\$5,800	\$5,800	\$5,800	\$23,200
Catered Meals	<i>per meal</i>				
Other					
Equipment Repairs	\$5,005	\$5,005	\$5,005	\$5,005	\$20,020
Program Supplies	\$314	\$314	\$314	\$314	\$1,257
Total DAS Operating Expenses	\$141,520	\$141,520	\$141,520	\$141,520	\$566,080
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage	\$133	\$133	\$133	\$133	\$533
Building Maintenance Supplies and Repair	\$1,998	\$1,998	\$1,998	\$1,998	\$7,990
Printing and Reproduction	\$311	\$311	\$311	\$311	\$1,243
Insurance	\$5,495	\$5,495	\$5,495	\$5,495	\$21,982
Staff Recruitment	\$113	\$113	\$113	\$113	\$453
Auto/Gas/Oil Maintenance: Van	\$1,700	\$1,700	\$1,700	\$1,700	\$6,800
IT Equipment	\$200	\$200	\$200	\$200	\$799
Food Cost					
Raw Food	<i>per meal</i> \$5.27	\$116,133	\$116,133	\$116,133	\$464,532
Cong Food Svc Supplies	<i>per meal</i> \$0.21	\$4,630	\$4,630	\$4,630	\$18,519
Catered Meals	<i>per meal</i>				
Other					
Equipment Repairs	\$3,995	\$3,995	\$3,995	\$3,995	\$15,980
Program Supplies	\$251	\$251	\$251	\$251	\$1,003
Total Non DAS Operating Expenses	\$134,959	\$134,959	\$134,959	\$134,959	\$539,835
Total DAS and Non DAS Operating Expenses	\$276,479	\$276,479	\$276,479	\$276,479	\$1,105,915
HSA #3					10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

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 Document Date: March 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$700.00 /set	2.00	\$1,400	\$1,400	\$1,400	\$1,400	\$5,600
Kitchen and food service monitoring	\$600.00	4.00	\$2,400	\$2,400	\$2,400	\$2,400	\$9,600
Congregate site monitoring	\$300.00	8.00	\$2,400	\$2,400	\$2,400	\$2,400	\$9,600
Nutrition education	\$150.00	8.00	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
Nutrition counseling (optional)	/hour						
In-service training	\$100.00 /training	8.00	\$800	\$800	\$800	\$800	\$3,200
Total DAS NCQA Expenditure			\$8,200	\$8,200	\$8,200	\$8,200	\$32,800

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis							
Kitchen and food service monitoring							
Congregate site monitoring							
Nutrition education							
Nutrition counseling (optional)							
In-service training							
Total Non DAS NCQA Expenditure							

Total DAS and Non DAS NCQA Expenditure			\$8,200	\$8,200	\$8,200	\$8,200	\$32,800
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HSA #4

10/25/2016

Appendix A - Services to be Provided
Glide Foundation
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Glide Foundation
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	425	200	200	200
Number of Meals	52,000	33,146	33,146	33,146

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.

7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Tiffany Kearney, RD
 Program Analyst & Lead Nutritionist
 DAS OCP
 email: Tiffany.Kearney@sfgov.org

and

Tara Alvarez
Contract Manager
HSA OCM
email: Tara.Alvarez@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Board of Trustees of the Glide Foundation						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (X) older adults or () adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	52,000	33,146	33,146	33,146	151,438	
DAS Expenditures						
Salaries & Benefits	\$90,354	\$55,850	\$55,850	\$55,850	\$257,904	\$1.70
Operating Expenses	\$139,391	\$90,727	\$90,727	\$90,727	\$411,572	\$2.72
Subtotal	\$229,745	\$146,577	\$146,577	\$146,577	\$669,476	\$4.42
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$22,975	\$14,658	\$14,658	\$14,658	\$66,949	\$0.44
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$7,231	\$7,231	\$7,231	\$7,231	\$28,924	\$0.19
Total DAS Expenditures	\$259,951	\$168,466	\$168,466	\$168,466	\$765,349	\$5.05
Non DAS Expenditures						
Salaries & Benefits	\$67,876	\$67,876	\$67,876	\$67,876	\$271,504	\$1.79
Operating Expenses	\$18,170	\$18,170	\$18,170	\$18,170	\$72,680	\$0.48
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$86,046	\$86,046	\$86,046	\$86,046	\$344,184	\$2.27
TOTAL DAS AND NON DAS EXPEDITURES	\$345,997	\$254,512	\$254,512	\$254,512	\$1,109,533	\$7.33
DAS Revenues						
Meals- General Fund	\$252,720	\$161,235	\$161,235	\$161,235	\$736,425	\$4.86
NCQA Fund	\$7,231	\$7,231	\$7,231	\$7,231	\$28,924	\$0.19
Total DAS Revenue	\$259,951	\$168,466	\$168,466	\$168,466	\$765,349	\$5.05
<i>PER MEAL COST, DAS</i>	\$4.86	\$4.86	\$4.86	\$4.86	\$4.86	
<i>PER MEAL COST (with NCQA), DAS</i>	\$5.00	\$5.08	\$5.08	\$5.08	\$5.05	
Non DAS Revenues						
Project Income						
Agency Cash- Fundraising	\$80,010	\$50,900	\$50,900	\$50,900	\$232,710	\$1.54
Agency In-kind Volunteer						
NCQA Revenue						
Total Non DAS Revenue	\$80,010	\$50,900	\$50,900	\$50,900	\$232,710	\$1.54
<i>PER MEAL COST, Non DAS</i>	\$1.54	\$1.54	\$1.54	\$1.54	\$1.54	
<i>PER MEAL COST (with NCQA), Non DAS</i>	\$1.54	\$1.54	\$1.54	\$1.54	\$1.54	
TOTAL DAS AND NON DAS REVENUE	\$339,961	\$219,366	\$219,366	\$219,366	\$998,059	\$6.59
<i>PER MEAL COST, Total</i>	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	
<i>PER MEAL COST (with NCQA), Total</i>	\$6.54	\$6.62	\$6.62	\$6.62	\$6.59	
Full Time Equivalent (FTE)	4.00	4.00	4.00	4.00	16.00	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits										
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	FY 21/22 Adjusted FTE	FY 22-25 Adjusted FTE	Budgeted Salary				
Chef	\$41,327	100%	13.00%	0.13	0.12	\$5,700	\$5,230	\$5,230	\$5,230	\$21,390
Purchasing Agent	\$61,273	100%	13.00%	0.13	0.12	\$7,965	\$7,353	\$7,353	\$7,353	\$30,024
Program Navigator	\$53,217	100%	55.00%	0.55	0.30	\$29,269	\$15,965	\$15,965	\$15,965	\$77,164
Program Navigator	\$50,282	100%	55.00%	0.55	0.30	\$27,655	\$15,085	\$15,085	\$15,085	\$72,910
Totals	\$206,099	4.00	136.00%	1.36	0.84	\$70,589	\$43,633	\$43,633	\$43,633	\$201,488
Fringe Benefits Rate	28.00%									
Employee Fringe Benefits	\$57,708					\$19,765	\$12,217	\$12,217	\$12,217	\$56,416
Total DAS Salaries and Benefits	\$263,807					\$90,354	\$55,850	\$55,850	\$55,850	\$257,904
Non DAS Salaries & Benefits										
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	
	Time Salary for	Total FTE	funded by	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary
Program Director	\$161,589		10.00%	0.10	\$16,159	\$16,159	\$16,159	\$16,159	\$16,159	\$64,636
Program Manager	\$89,255		10.00%	0.10	\$8,925	\$8,925	\$8,925	\$8,925	\$8,925	\$35,700
Chef	\$41,327		5.00%	0.05	\$2,066	\$2,066	\$2,066	\$2,066	\$2,066	\$8,264
Shift Lead	\$53,839		10.00%	0.10	\$5,384	\$5,384	\$5,384	\$5,384	\$5,384	\$21,536
Shift Lead	\$47,240		10.00%	0.10	\$4,724	\$4,724	\$4,724	\$4,724	\$4,724	\$18,896
Purchasing Agent	\$61,273		5.00%	0.05	\$3,064	\$3,064	\$3,064	\$3,064	\$3,064	\$12,256
Dishwasher (2)	\$75,305		10.00%	0.10	\$7,531	\$7,531	\$7,531	\$7,531	\$7,531	\$30,124
Program Navigator	\$53,217		5.00%	0.05	\$2,661	\$2,661	\$2,661	\$2,661	\$2,661	\$10,644
Program Navigator	\$50,282		5.00%	0.05	\$2,514	\$2,514	\$2,514	\$2,514	\$2,514	\$10,056
Totals	\$633,327		70.00%	0.70	\$53,028	\$53,028	\$53,028	\$53,028	\$53,028	\$212,112
Fringe Benefits Rate	28.00%									
Employee Fringe Benefits	\$177,331				\$14,848	\$14,848	\$14,848	\$14,848	\$14,848	\$59,392
Total Non DAS Salaries and Benefits	\$810,658				\$67,876	\$67,876	\$67,876	\$67,876	\$67,876	\$271,504
Total DAS and Non DAS Salaries and Benefits	\$1,074,464				\$158,230	\$123,726	\$123,726	\$123,726	\$123,726	\$529,408

HSA #2

10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	52,000	33,146	33,146	33,146	151,438
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$4,026	\$2,673	\$2,673	\$2,673	\$12,045
Utilities (Elec, Water, Gas, Phone, Garbage)	\$437	\$290	\$290	\$290	\$1,307
Office Supplies, Postage	\$469	\$311	\$311	\$311	\$1,402
Building Maintenance Supplies and Repair	\$9,015	\$5,985 #	\$5,985 #	\$5,985	\$26,970
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment	\$2,587	\$1,717	\$1,717	\$1,717	\$7,738
Occupancy	\$60,604	\$40,233	\$40,233	\$40,233	\$181,303
Small equipment & Supplies	\$401	\$266	\$266	\$266	\$1,199
Information Technology	\$8,658	\$5,231	\$5,231	\$5,231	\$24,351
Food storage/Refrigeration	\$798	\$530	\$530	\$530	\$2,388
Garbage & Recycling	\$3,516	\$2,334	\$2,334	\$2,334	\$10,518
Food Cost					
Raw Food <i>per meal \$0.76</i>	\$39,520	\$25,191	\$25,191	\$25,191	\$115,093
Cong Food Svc Supplies <i>per meal \$0.18</i>	\$9,360	\$5,966	\$5,966	\$5,966	\$27,258
Catered Meals <i>per meal</i>					
Total DAS Operating Expenses	\$139,391	\$90,727	\$90,727	\$90,727	\$411,572
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$92	\$92	\$92	\$92	\$368
Office Supplies, Postage	\$99	\$99	\$99	\$99	\$396
Building Maintenance Supplies and Repair	\$1,894	\$1,894	\$1,894	\$1,894	\$7,576
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Occupancy	\$12,732	\$12,732	\$12,732	\$12,732	\$50,928
Rental of Equipment	\$543	\$543	\$543	\$543	\$2,172
Small equipment & Supplies	\$84	\$84	\$84	\$84	\$336
Information Technology	\$1,819	\$1,819	\$1,819	\$1,819	\$7,276
Food storage/Refrigeration	\$168	\$168	\$168	\$168	\$672
Garbage & Recycling	\$739	\$739	\$739	\$739	\$2,956
Total Non DAS Operating Expenses	\$18,170	\$18,170	\$18,170	\$18,170	\$72,680
Total DAS and Non DAS Operating Expenses	\$157,561	\$108,897	\$108,897	\$108,897	\$484,252

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	717.5 /set	2.00	\$1,435	\$1,435	\$1,435	\$1,435	\$5,740
Kitchen and food service monitoring	584	4.00	\$2,336	\$2,336	\$2,336	\$2,336	\$9,344
Congregate site monitoring	378.25	4.00	\$1,513	\$1,513	\$1,513	\$1,513	\$6,052
Nutrition education	229	4.00	\$916	\$916	\$916	\$916	\$3,664
Nutrition counseling (optional)	/hour						
In-service training	257.75 /training	4.00	\$1,031	\$1,031	\$1,031	\$1,031	\$4,124
Total DAS NCQA Expenditure			\$7,231	\$7,231	\$7,231	\$7,231	\$28,924

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set	2.00					
Kitchen and food service monitoring		4.00					
Congregate site monitoring		4.00					
Nutrition education		4.00					
Nutrition counseling (optional)	/hour						
In-service training	/training	4.00					
Total Non DAS NCQA Expenditure							

Total DAS and Non DAS NCQA Expenditure			\$7,231	\$7,231	\$7,231	\$7,231	\$28,924
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HSA #4

10/25/2016

Appendix A - Services to be Provided
Kimochi Inc.
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Kimochi Inc.
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	1550	1350	1350	1350
Number of Meals	91026	66857	66857	66857

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.

6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:
 Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Ella Lee
Contract Manager
HSA OCM
email: Ella.Lee@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Kimochi, Inc.						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (X) older adults or () adults with disabilities						
Budget Reference Page No.(s)						Average cost/meal
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	
Annual # Meals Contracted	91,026	66,857	66,857	66,857	291,597	
DAS Expenditures						
Salaries & Benefits	\$272,889	\$272,889	\$272,889	\$272,889	\$1,091,556	\$3.74
Operating Expenses	\$350,225	\$184,777	\$184,777	\$184,777	\$904,556	\$3.10
Subtotal	\$623,114	\$457,666	\$457,666	\$457,666	\$1,996,112	\$6.85
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$62,312	\$45,768	\$45,768	\$45,768	\$199,616	\$0.68
Capital/Subcontractor Expenditures	\$15,748				\$15,748	\$0.05
NCQA Expenditures	\$7,849	\$7,849	\$7,849	\$7,849	\$31,396	\$0.11
Total DAS Expenditures	\$709,023	\$511,283	\$511,283	\$511,283	\$2,242,872	\$7.69
Non DAS Expenditures						
Salaries & Benefits	\$91,520	\$91,520	\$91,520	\$91,520	\$366,080	\$1.26
Operating Expenses	\$214,763	\$227,453	\$227,453	\$227,453	\$897,122	\$3.08
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$400	\$400	\$400	\$400	\$1,600	\$0.01
Total Non DAS Expenditures	\$306,683	\$319,373	\$319,373	\$319,373	\$1,264,802	\$4.34
TOTAL DAS AND NON DAS EXPEDITURES	\$1,015,706	\$830,656	\$830,656	\$830,656	\$3,507,674	\$12.03
DAS Revenues						
Meals- General Fund	\$693,275	\$511,283	\$511,283	\$511,283	\$2,227,124	\$7.64
Meals- State Fund						
Meals- Federal Fund						
OTO	\$15,748				\$15,748	\$0.05
Total DAS Revenue	\$709,023	\$511,283	\$511,283	\$511,283	\$2,242,872	\$7.69
PER MEAL COST, DAS	\$7.53	\$7.53	\$7.53	\$7.53	\$7.53	
PER MEAL COST (with NCQA), DAS	\$7.62	\$7.65	\$7.65	\$7.65	\$7.64	
Non DAS Revenues						
Project Income	\$68,270	\$60,171	\$60,171	\$60,171	\$248,783	\$0.85
Agency Cash- Fundraising	\$64,970	\$107,511	\$107,511	\$107,511	\$387,503	\$1.33
Agency In-kind Food	\$81,923	\$60,171	\$60,171	\$60,171	\$262,436	\$0.90
Agency In-Kind Vounteer	\$91,520	\$91,520	\$91,520	\$91,520	\$366,080	\$1.26
NCQA Revenue						
Total Non DAS Revenue	\$306,683	\$319,373	\$319,373	\$319,373	\$1,264,802	\$4.34
PER MEAL COST (with NCQA), Non DAS	\$3.37	\$4.78	\$4.78	\$4.78	\$4.34	
TOTAL DAS AND NON DAS REVENUE	\$1,015,706	\$830,656	\$830,656	\$830,656	\$3,507,674	\$12.03
PER MEAL COST (with NCQA), Total	\$10.99	\$12.43	\$12.43	\$12.43	\$11.98	
Full Time Equivalent (FTE)	5.75	5.75	5.75	5.75	23.00	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Senior Center Coordinator	\$53,040	0.75	100.00%	0.75	\$39,780	\$39,780	\$39,780	\$39,780	\$159,120
Head Cook	\$46,800	0.50	100.00%	0.50	\$23,400	\$23,400	\$23,400	\$23,400	\$93,600
Senior Center Assistant	\$44,096	1.00	100.00%	1.00	\$44,096	\$44,096	\$44,096	\$44,096	\$176,384
Assistant Cook 1	\$37,960	0.50	100.00%	0.50	\$18,980	\$18,980	\$18,980	\$18,980	\$75,920
Assistant Cook 2	\$26,598	1.00	100.00%	1.00	\$26,598	\$26,598	\$26,598	\$26,598	\$106,392
Nutrition Aide	\$26,598	1.00	100.00%	1.00	\$26,598	\$26,598	\$26,598	\$26,598	\$106,392
Dishwasher 1	\$28,860	0.50	100.00%	0.50	\$14,430	\$14,430	\$14,430	\$14,430	\$57,720
Dishwasher 2	\$28,860	0.50	100.00%	0.50	\$14,430	\$14,430	\$14,430	\$14,430	\$57,720
Totals	\$292,812	5.75	800.00%	5.75	\$208,312	\$208,312	\$208,312	\$208,312	\$833,248
Fringe Benefits Rate	31.00%								
Employee Fringe Benefits	\$90,772				\$64,577	\$64,577	\$64,577	\$64,577	\$258,308
Total DAS Salaries and Benefits	\$383,584				\$272,889	\$272,889	\$272,889	\$272,889	\$1,091,556
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Volunteer					\$91,520	\$91,520	\$91,520	\$91,520	\$366,080
Totals					\$91,520	\$91,520	\$91,520	\$91,520	\$366,080
Fringe Benefits Rate									
Employee Fringe Benefits									
Total Non DAS Salaries and Benefits					\$91,520	\$91,520	\$91,520	\$91,520	\$366,080
Total DAS and Non DAS Salaries and Benefits	\$383,584				\$364,409	\$364,409	\$364,409	\$364,409	\$1,457,636

HSA #2

10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 4
 Document Date: March 2021

Capital & Subcontractor Expenditure Detail

DAS Capital Expenditure

<u>Equipment (Qty)</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Steamer	\$6,500				\$6,500
Natural Gas, 10 Burner, 2 Convection Ovens	\$9,248				\$9,248
Total Equipment Cost	\$15,748				\$15,748

<u>Remodeling</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Total Remodeling Cost					

<u>Subcontractor</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Total Subcontractor Cost					

Total DAS Capital & Subcontractor Expenditure	\$15,748				\$15,748
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Total Non DAS Capital & Subcontractor Expenditure					
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Total DAS and Non DAS Capital & Subcontractor Expenditure	\$15,748				\$15,748
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HSA #4					10/25/2016
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Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 5
 Document Date: March 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$799.00 /set	1.00	\$799	\$799	\$799	\$799	\$3,196
Kitchen and food service monitoring	\$875.00	2.00	\$1,750	\$1,750	\$1,750	\$1,750	\$7,000
Congregate site monitoring	\$315.00	12.00	\$3,780	\$3,780	\$3,780	\$3,780	\$15,120
Nutrition education	\$190.00	8.00	\$1,520	\$1,520	\$1,520	\$1,520	\$6,080
Nutrition counseling (optional)	/hour						
In-service training	/training						
Total DAS NCQA Expenditure			\$7,849	\$7,849	\$7,849	\$7,849	\$31,396

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set	1.00					
Kitchen and food service monitoring		2.00					
Congregate site monitoring		12.00					
Nutrition education		8.00					
Nutrition counseling (optional)	/hour						
In-service training	\$200.00 /training	2.00	\$400	\$400	\$400	\$400	\$1,600
Total Non DAS NCQA Expenditure			\$400	\$400	\$400	\$400	\$1,600

Total DAS and Non DAS NCQA Expenditure			\$8,249	\$8,249	\$8,249	\$8,249	\$32,996
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HSA #4

10/25/2016

Appendix A - Services to be Provided
On Lok Day Services
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	On Lok Day Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	2,394	2,394	2,394	2,394
Number of Meals	92,074	92,074	92,074	92,074

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.

7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Patrick Garcia
Contract Manager
HSA OCM
email: Patrick.garcia@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name On Lok Day Services						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (x) older adults or () adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	92,074	92,074	92,074	92,074	368,296	
DAS Expenditures						
Salaries & Benefits	\$281,777	\$261,687	\$261,687	\$261,687	\$1,066,838	\$2.90
Operating Expenses	\$357,671	\$377,761	\$377,761	\$377,761	\$1,490,954	\$4.05
Subtotal	\$639,448	\$639,448	\$639,448	\$639,448	\$2,557,792	\$6.94
Indirect Percentage (%)	9.00%	9.00%	9.00%	9.00%	9.00%	
Indirect Cost	\$57,552	\$57,552	\$57,552	\$57,552	\$230,208	\$0.63
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$15,653	\$15,653	\$15,653	\$15,653	\$62,612	\$0.17
Total DAS Expenditures	\$712,653	\$712,653	\$712,653	\$712,653	\$2,850,612	\$7.74
Non DAS Expenditures						
Salaries & Benefits	\$270,771	\$265,748	\$265,748	\$265,748	\$1,068,015	\$2.90
Operating Expenses	\$372,138	\$350,048	\$350,048	\$350,048	\$1,422,283	\$3.86
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$70	\$70	\$70	\$70	\$280	\$0.00
Total Non DAS Expenditures	\$642,979	\$615,866	\$615,866	\$615,866	\$2,490,578	\$6.76
TOTAL DAS AND NON DAS EXPEDITURES	\$1,355,632	\$1,328,519	\$1,328,519	\$1,328,519	\$5,341,190	\$14.50
DAS Revenues						
Meals- General Fund	\$697,000	\$697,000	\$697,000	\$697,000	\$2,788,001	\$7.57
Meals- State Fund						
Meals- Federal Fund						
NCQA Fund	\$15,653	\$15,653	\$15,653	\$15,653	\$62,612	\$0.17
Total DAS Revenue	\$712,653	\$712,653	\$712,653	\$712,653	\$2,850,613	\$7.74
PER MEAL COST, DAS	\$ 7.57	\$ 7.57	\$ 7.57	\$ 7.57	\$ 7.57	
PER MEAL COST (with NCQA), DAS	\$ 7.74	\$ 7.74	\$ 7.74	\$ 7.74	\$ 7.74	
Non DAS Revenues						
Project Income	\$56,165	\$56,165	\$56,165	\$56,165	\$224,660	\$0.61
Agency Cash- Fundraising	\$430,661	\$403,548	\$403,548	\$403,548	\$1,641,306	\$4.46
Agency In-kind Volunteer	\$156,083	\$156,083	\$156,083	\$156,083	\$624,332	\$1.70
NCQA Revenue	\$70	\$70	\$70	\$70	\$280	\$0.00
Total Non DAS Revenue	\$642,979	\$615,866	\$615,866	\$615,866	\$2,490,578	\$6.76
PER MEAL COST, Non DAS	\$6.98	\$6.69	\$6.69	\$6.69	\$6.76	
PER MEAL COST (with NCQA), Non DAS	\$6.98	\$6.69	\$6.69	\$6.69	\$6.76	
TOTAL DAS AND NON DAS REVENUE	\$1,355,632	\$1,328,519	\$1,328,519	\$1,328,519	\$5,341,190	\$14.50
PER MEAL COST, Total	\$14.55	\$14.26	\$14.26	\$14.26	\$14.33	
PER MEAL COST (with NCQA), Total	\$14.72	\$14.43	\$14.43	\$14.43	\$14.50	
Full Time Equivalent (FTE)	10.53	10.28	10.28	10.28	41.36	
HSA #1					6/16/2021	

Program: Congregate meals for (x) older adults or () adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	92,074	92,074	92,074	92,074	368,296
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$17,490	\$30,980	\$30,980	\$30,980	\$110,430
Office Supplies, Postage	\$250	\$250	\$250	\$250	\$1,000
Building Maintenance Supplies and Repair	\$47,700	\$47,700	\$47,700	\$47,700	\$190,800
Printing and Reproduction	\$650	\$650	\$650	\$650	\$2,600
Insurance		\$6,600	\$6,600	\$6,600	\$19,800
Staff Training					
Staff Travel-(Local & Out of Town)	\$135	\$135	\$135	\$135	\$540
Rental of Equipment					
Food Cost					
Catered Meals <i>per meal</i> \$ 3.02	\$278,370	\$278,370	\$278,370	\$278,370	\$1,113,479
Consultant					
Consultant-Translator	\$1,628	\$1,628	\$1,628	\$1,628	\$6,512
Catholic Charities	\$11,448	\$11,448	\$11,448	\$11,448	\$45,792
Total DAS Operating Expenses	\$357,671	\$377,761	\$377,761	\$377,761	\$1,490,954
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$15,510	\$2,020	\$2,020	\$2,020	\$21,570
Office Supplies, Postage					
Building Maintenance Supplies and Repair	\$42,300	\$42,300	\$42,300	\$42,300	\$169,200
Printing and Reproduction					
Insurance	\$6,600				\$6,600
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment	\$2,000				\$2,000
Food Cost					
Catered Meals <i>per meal</i> \$ 2.84	\$261,644	\$261,644	\$261,644	\$261,644	\$1,046,577
Consultant					
Consultant-Translator	\$372	\$372	\$372	\$372	\$1,488
Catholic Charities	\$10,152	10,152	10,152	10,152	\$40,608
Other					
Small equipment & Supplies	\$5,800	\$5,800	\$5,800	\$5,800	\$23,200
Auto - Fuel/Parking & Insurance	\$8,500	\$8,500	\$8,500	\$8,500	\$34,000
Repair/Maintenance	\$2,800	\$2,800	\$2,800	\$2,800	\$11,200
Payroll Processing	\$800	\$800	\$800	\$800	\$3,200
Freezer Rental	\$10,200	\$10,200	\$10,200	\$10,200	\$40,800
Van Deep Cleaning	\$5,460	\$5,460	\$5,460	\$5,460	\$21,840
Total Non DAS Operating Expenses	\$372,138	\$350,048	\$350,048	\$350,048	\$1,422,283
Total DAS and Non DAS Operating Expenses	\$729,809	\$727,809	\$727,809	\$727,809	\$2,913,237
HSA #3					6/16/2021

Program: Congregate meals for (x) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Document Date: June 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$1,061.00 /set	1.00	\$1,061	\$1,061	\$1,061	\$1,061	\$4,244
Kitchen and food service monitoring	\$876.00	4.00	\$3,504	\$3,504	\$3,504	\$3,504	\$14,016
Congregate site monitoring	\$294.00	24.00	\$7,056	\$7,056	\$7,056	\$7,056	\$28,224
Nutrition education	\$155.00	24.00	\$3,720	\$3,720	\$3,720	\$3,720	\$14,880
Nutrition counseling (optional)	/hour						
In-service training	\$78.00 /training	4.00	\$312	\$312	\$312	\$312	\$1,248
Total DAS NCQA Expenditure			\$15,653	\$15,653	\$15,653	\$15,653	\$62,612

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$4.54 /set	1.00	\$5	\$5	\$5	\$5	\$18
Kitchen and food service monitoring	\$2.85	4.00	\$11	\$11	\$11	\$11	\$46
Congregate site monitoring	\$0.79	24.00	\$19	\$19	\$19	\$19	\$76
Nutrition education	\$1.42	24.00	\$34	\$34	\$34	\$34	\$136
Nutrition counseling (optional)	/hour						
In-service training	\$0.25 /training	4.00	\$1	\$1	\$1	\$1	\$4
Total Non DAS NCQA Expenditure			\$70	\$70	\$70	\$70	\$280

Total DAS and Non DAS NCQA Expenditure			\$15,723	\$15,723	\$15,723	\$15,723	\$62,892
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HSA #4

6/16/2021

Appendix A - Services to be Provided
Project Open Hand
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Project Open Hand
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A and B below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed below:

Table A- Breakfast	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	150	150	150	150
Number of Meals	54,750	43,223	43,223	43,223

Table B- Lunch/Dinner	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	4,440	4,043	4,043	4,043
Number of Meals	218,640	199,117	199,117	199,117

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.

5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:
 Lauren McCasland
 Nutritionist

DAS OCP
email: lauren.mccasland@sfgov.org

and

Tara Alvarez
Contract Manager
HSA OCM
email: tara.alvarez@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name PROJECT OPEN HAND						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (X) older adults or () adults with disabilities						
Budget Reference Page No.(s)						Average cost/meal
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	
Annual # Meals Contracted	218,640	199,117	199,117	199,117	815,991	
DAS Expenditures						
Salaries & Benefits	\$1,189,421	\$1,189,421	\$1,189,421	\$1,189,421	\$4,757,684	\$5.83
Operating Expenses	\$599,452	\$439,718	\$439,718	\$439,718	\$1,918,606	\$2.35
Subtotal	\$1,788,873	\$1,629,139	\$1,629,139	\$1,629,139	\$6,676,290	\$8.18
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$178,887	\$162,914	\$162,914	\$162,914	\$667,629	\$0.82
One Time Only Expenses	\$143,900				\$143,900	\$0.18
NCQA Expenditures	\$26,546	\$26,546	\$26,546	\$26,546	\$106,184	\$0.13
Total DAS Expenditures	\$2,138,206	\$1,818,599	\$1,818,599	\$1,818,599	\$7,594,003	\$9.31
Non DAS Expenditures						
Salaries & Benefits	\$657,729	\$657,729	\$657,729	\$657,729	\$2,630,916	\$3.22
Operating Expenses	\$499,102	\$611,930	\$613,888	\$615,906	\$2,340,826	\$2.87
One Time Only Expenses						
NCQA Expenditures	\$5,934	\$5,934	\$5,934	\$5,934	\$23,736	\$0.03
Total Non DAS Expenditures	\$1,162,765	\$1,275,593	\$1,277,551	\$1,279,569	\$4,995,478	\$6.12
TOTAL DAS AND NON DAS EXPEDITURES	\$3,300,971	\$3,094,192	\$3,096,150	\$3,098,168	\$12,589,481	\$15.43
DAS Revenues						
Meals- General Fund	\$2,111,660	\$1,792,053	\$1,792,053	\$1,792,053	\$7,487,819	\$9.18
Meals- State Fund						
Meals- Federal Fund						
NCQA Fund	\$26,546	\$26,546	\$26,546	\$26,546	\$106,184	\$0.13
Total DAS Revenue	\$2,138,206	\$1,818,599	\$1,818,599	\$1,818,599	\$7,594,003	\$9.31
PER MEAL COST, DAS	\$9.00	\$9.00	\$9.00	\$9.00	\$9.00	
PER MEAL COST (with NCQA), DAS	\$9.78	\$9.13	\$9.13	\$9.13	\$9.31	
Non DAS Revenues						
Project Income	\$43,728	\$39,823	\$39,823	\$39,823	\$163,198	\$0.20
Agency Cash- Fundraising	\$695,549	\$812,281	\$814,240	\$816,257	\$3,138,326	\$3.85
Agency In-kind Volunteer	\$97,952	\$97,952	\$97,952	\$97,952	\$391,810	\$0.48
Agency Property	\$325,536	\$325,536	\$325,536	\$325,536	\$1,302,144	\$1.60
NCQA Revenue						
Total Non DAS Revenue	\$1,162,765	\$1,275,593	\$1,277,551	\$1,279,569	\$4,995,478	\$6.12
PER MEAL COST, Non DAS	\$5.32	\$6.41	\$6.42	\$6.43	\$6.12	
PER MEAL COST (with NCQA), Non DAS	\$5.32	\$6.41	\$6.42	\$6.43	\$6.12	
TOTAL DAS AND NON DAS REVENUE	\$3,300,971	\$3,094,192	\$3,096,150	\$3,098,168	\$12,589,481	\$15.43
PER MEAL COST, Total	\$14.32	\$15.41	\$15.42	\$15.43	\$15.12	
PER MEAL COST (with NCQA), Total	\$15.10	\$15.54	\$15.55	\$15.56	\$15.43	
Full Time Equivalent (FTE)	44.69	44.69	44.69	44.69	178.77	
Prepared by: Darin Raffaelli, Project Open Hand					Date: 6/11/21	
HSA #1					10/25/2016	

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
DAS Salaries & Benefits									
Program Staff:									
Sites Manager	\$67,420	0.70	100.00%	0.70	\$47,194	\$47,194	\$47,194	\$47,194	\$188,776
Sites Manager	\$68,624	0.70	100.00%	0.70	\$48,037	\$48,037	\$48,037	\$48,037	\$192,148
CNP Assistant	\$47,433	0.65	100.00%	0.65	\$30,831	\$30,831	\$30,831	\$30,831	\$123,324
CNP Assistant Manager	\$65,759	0.65	100.00%	0.65	\$42,744	\$42,744	\$42,744	\$42,744	\$170,976
Director, CNP	\$86,572	0.65	100.00%	0.65	\$56,272	\$56,272	\$56,272	\$56,272	\$225,088
Aquatic Park Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
Booker T Washington									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Castro Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Curry Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.80	100.00%	0.80	\$31,533	\$31,533	\$31,533	\$31,533	\$126,132
Community Nutrition Site Coordinator	\$39,416	0.80	100.00%	0.80	\$31,533	\$31,533	\$31,533	\$31,533	\$126,132
Community Nutrition Site Coordinator	\$39,416	0.80	100.00%	0.80	\$31,533	\$31,533	\$31,533	\$31,533	\$126,132
Community Nutrition Site Coordinator	\$39,416	0.80	100.00%	0.80	\$31,533	\$31,533	\$31,533	\$31,533	\$126,132
Community Nutrition Site Coordinator	\$39,416	0.40	100.00%	0.40	\$15,766	\$15,766	\$15,766	\$15,766	\$63,064
Community Nutrition Site Coordinator	\$39,416	0.40	100.00%	0.40	\$15,766	\$15,766	\$15,766	\$15,766	\$63,064
Downtown Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
IT Bookman									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Richmond Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Stanford Hotel									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
Telegraph Hill Neighborhood Center									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Visitation Valley Community Center									
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.35	100.00%	0.35	\$13,796	\$13,796	\$13,796	\$13,796	\$55,184
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
Community Nutrition Site Coordinator	\$39,416	0.18	100.00%	0.18	\$6,898	\$6,898	\$6,898	\$6,898	\$27,592
Kitchen Staff:									
Cook I	\$37,513	0.65	30.57%	0.20	\$7,454	\$7,454	\$7,454	\$7,454	\$29,816
Cook I	\$37,513	0.65	30.57%	0.20	\$7,454	\$7,454	\$7,454	\$7,454	\$29,816
Cook I	\$37,513	0.33	30.57%	0.10	\$3,727	\$3,727	\$3,727	\$3,727	\$14,908
Cook II	\$39,720	0.65	30.57%	0.20	\$7,893	\$7,893	\$7,893	\$7,893	\$31,572
Cook II	\$39,720	0.65	30.57%	0.20	\$7,893	\$7,893	\$7,893	\$7,893	\$31,572
Cook II	\$39,720	0.65	30.57%	0.20	\$7,893	\$7,893	\$7,893	\$7,893	\$31,572
Cook II	\$39,720	0.33	30.57%	0.10	\$3,946	\$3,946	\$3,946	\$3,946	\$15,784
Lead Cook	\$44,005	0.65	30.57%	0.20	\$8,744	\$8,744	\$8,744	\$8,744	\$34,976
Sous Chef	\$47,518	0.33	30.57%	0.10	\$4,721	\$4,721	\$4,721	\$4,721	\$18,884
Porter I	\$37,578	0.65	30.57%	0.20	\$7,467	\$7,467	\$7,467	\$7,467	\$29,868
Porter I	\$37,578	0.65	30.57%	0.20	\$7,467	\$7,467	\$7,467	\$7,467	\$29,868
Porter I	\$37,578	0.65	30.57%	0.20	\$7,467	\$7,467	\$7,467	\$7,467	\$29,868
Porter I	\$37,578	0.26	30.57%	0.08	\$2,987	\$2,987	\$2,987	\$2,987	\$11,948
Porter I	\$37,578	0.26	30.57%	0.08	\$2,987	\$2,987	\$2,987	\$2,987	\$11,948
Porter I	\$37,578	0.15	30.57%	0.05	\$1,773	\$1,773	\$1,773	\$1,773	\$7,092
Porter I	\$37,578	0.15	30.57%	0.05	\$1,773	\$1,773	\$1,773	\$1,773	\$7,092
Kitchen Administrative Manager	\$70,116	0.33	30.57%	0.10	\$6,966	\$6,966	\$6,966	\$6,966	\$27,864
Kitchen Office Administrator	\$50,211	0.46	30.57%	0.14	\$6,984	\$6,984	\$6,984	\$6,984	\$27,936
Director, Kitchen Operations	\$86,570	0.46	30.57%	0.14	\$12,041	\$12,041	\$12,041	\$12,041	\$48,164
Executive Chef	\$93,330	0.33	30.57%	0.10	\$9,273	\$9,273	\$9,273	\$9,273	\$37,092
Purchasing Supervisor	\$60,389	0.39	30.57%	0.12	\$7,200	\$7,200	\$7,200	\$7,200	\$28,800
Kitchen Operations Coordinator II	\$40,560	0.39	30.57%	0.12	\$4,836	\$4,836	\$4,836	\$4,836	\$19,344
Kitchen Operations Coordinator II	\$40,560	0.33	30.57%	0.10	\$4,030	\$4,030	\$4,030	\$4,030	\$16,120
Kitchen Logistics Supervisor	\$49,962	0.13	30.57%	0.04	\$1,986	\$1,986	\$1,986	\$1,986	\$7,944
Inventory Operations Coordinator II	\$41,475	0.26	30.57%	0.08	\$3,297	\$3,297	\$3,297	\$3,297	\$13,188
Inventory Operations Coordinator II	\$41,475	0.20	30.57%	0.06	\$2,472	\$2,472	\$2,472	\$2,472	\$9,888
Distribution Staff:									
Driver	\$42,453	0.37	30.57%	0.11	\$4,745	\$4,745	\$4,745	\$4,745	\$18,980
Driver	\$39,104	0.37	30.57%	0.11	\$4,371	\$4,371	\$4,371	\$4,371	\$17,484
Driver	\$41,392	0.37	30.57%	0.11	\$4,626	\$4,626	\$4,626	\$4,626	\$18,504

Driver	\$39,104	0.13	30.57%	0.04	\$1,554	\$1,554	\$1,554	\$1,554	\$6,216
Director, Distribution	\$82,347	0.07	30.57%	0.02	\$1,636	\$1,636	\$1,636	\$1,636	\$6,544
Operations Staff:									
Security Manager	\$78,021	0.04	30.57%	0.01	\$954	\$954	\$954	\$954	\$3,816
Director, Operations	\$84,469	0.10	30.57%	0.03	\$2,518	\$2,518	\$2,518	\$2,518	\$10,072
Totals	\$3,163,391	27.96	4539.38%	18.94	\$861,899	\$861,899	\$861,899	\$861,899	\$3,447,596
Fringe Benefits Rate	38.00%								
Employee Fringe Benefits	\$1,202,089				\$327,522	\$327,522	\$327,522	\$327,522	\$1,310,088
Total DAS Salaries and Benefits	\$4,365,480				\$1,189,421	\$1,189,421	\$1,189,421	\$1,189,421	\$4,757,684
Non DAS Salaries & Benefits									
	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Kitchen Staff:									
Cook I	\$37,513	0.65	69.43%	0.45	\$16,930	\$16,930	\$16,930	\$16,930	\$67,720
Cook I	\$37,513	0.65	69.43%	0.45	\$16,930	\$16,930	\$16,930	\$16,930	\$67,720
Cook I	\$37,513	0.33	69.43%	0.23	\$8,465	\$8,465	\$8,465	\$8,465	\$33,860
Cook II	\$39,720	0.65	69.43%	0.45	\$17,925	\$17,925	\$17,925	\$17,925	\$71,700
Cook II	\$39,720	0.65	69.43%	0.45	\$17,925	\$17,925	\$17,925	\$17,925	\$71,700
Cook II	\$39,720	0.65	69.43%	0.45	\$17,925	\$17,925	\$17,925	\$17,925	\$71,700
Cook II	\$39,720	0.33	69.43%	0.23	\$8,963	\$8,963	\$8,963	\$8,963	\$35,852
Lead Cook	\$44,005	0.65	69.43%	0.45	\$19,859	\$19,859	\$19,859	\$19,859	\$79,436
Sous Chef	\$47,518	0.33	69.43%	0.23	\$10,722	\$10,722	\$10,722	\$10,722	\$42,888
Porter I	\$37,578	0.65	69.43%	0.45	\$16,959	\$16,959	\$16,959	\$16,959	\$67,836
Porter I	\$37,578	0.65	69.43%	0.45	\$16,959	\$16,959	\$16,959	\$16,959	\$67,836
Porter I	\$37,578	0.65	69.43%	0.45	\$16,959	\$16,959	\$16,959	\$16,959	\$67,836
Porter I	\$37,578	0.65	69.43%	0.45	\$16,959	\$16,959	\$16,959	\$16,959	\$67,836
Porter I	\$37,578	0.26	69.43%	0.18	\$6,783	\$6,783	\$6,783	\$6,783	\$27,132
Porter I	\$37,578	0.26	69.43%	0.18	\$6,783	\$6,783	\$6,783	\$6,783	\$27,132
Porter I	\$37,578	0.15	69.43%	0.11	\$4,028	\$4,028	\$4,028	\$4,028	\$16,112
Porter I	\$37,578	0.15	69.43%	0.11	\$4,028	\$4,028	\$4,028	\$4,028	\$16,112
Kitchen Administrative Manager	\$70,116	0.33	69.43%	0.23	\$15,822	\$15,822	\$15,822	\$15,822	\$63,288
Kitchen Office Administrator	\$50,211	0.46	69.43%	0.32	\$15,862	\$15,862	\$15,862	\$15,862	\$63,448
Director, Kitchen Operations	\$86,570	0.46	69.43%	0.32	\$27,348	\$27,348	\$27,348	\$27,348	\$109,392
Executive Chef	\$93,330	0.33	69.43%	0.23	\$21,060	\$21,060	\$21,060	\$21,060	\$84,240
Purchasing Supervisor	\$60,389	0.39	69.43%	0.27	\$16,352	\$16,352	\$16,352	\$16,352	\$65,408
Kitchen Operations Coordinator II	\$40,560	0.39	69.43%	0.27	\$10,983	\$10,983	\$10,983	\$10,983	\$43,932
Kitchen Operations Coordinator II	\$40,560	0.33	69.43%	0.23	\$9,152	\$9,152	\$9,152	\$9,152	\$36,608
Kitchen Logistics Supervisor	\$49,962	0.13	69.43%	0.09	\$4,510	\$4,510	\$4,510	\$4,510	\$18,040
Inventory Operations Coordinator II	\$41,475	0.26	69.43%	0.18	\$7,487	\$7,487	\$7,487	\$7,487	\$29,948
Inventory Operations Coordinator II	\$41,475	0.20	69.43%	0.14	\$5,615	\$5,615	\$5,615	\$5,615	\$22,460
Distribution Staff:									
Driver	\$42,453	0.37	69.43%	0.25	\$10,777	\$10,777	\$10,777	\$10,777	\$43,108
Driver	\$39,104	0.37	69.43%	0.25	\$9,927	\$9,927	\$9,927	\$9,927	\$39,708
Driver	\$41,392	0.37	69.43%	0.25	\$10,508	\$10,508	\$10,508	\$10,508	\$42,032
Driver	\$39,104	0.13	69.43%	0.09	\$3,529	\$3,529	\$3,529	\$3,529	\$14,116
Director, Distribution	\$82,347	0.07	69.43%	0.05	\$3,716	\$3,716	\$3,716	\$3,716	\$14,864
Operations Staff:									
Security Manager	\$78,021	0.04	69.43%	0.03	\$2,167	\$2,167	\$2,167	\$2,167	\$8,668
Director, Operations	\$84,469	0.10	69.43%	0.07	\$5,718	\$5,718	\$5,718	\$5,718	\$22,872
In-Kind									
Kitchen Volunteers	29,120	3.75	65.00%	2.44	\$70,980	\$70,980	\$70,980	\$70,980	\$283,920
Totals	\$1,674,223	16.73	2425.62%	11.45	\$476,615	\$476,615	\$476,615	\$476,615	\$1,906,460
Fringe Benefits Rate	38.00%								
Employee Fringe Benefits	\$636,205				\$181,114	\$181,114	\$181,114	\$181,114	\$724,456
Total Non DAS Salaries and Benefits	\$2,310,428				\$657,729	\$657,729	\$657,729	\$657,729	\$2,630,916
Total DAS and Non DAS Salaries and Benefits	\$6,675,908				\$1,847,150	\$1,847,150	\$1,847,150	\$1,847,150	\$7,388,600

Program: Congregate meals for (X) older adults or () adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	218,640	199,117	199,117	199,117	815,991
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property (see table at right)	\$7,200	\$7,200	\$7,200	\$7,200	\$28,800
Utilities (Elec, Water, Gas, Phone, Garbage)	\$27,915	\$ 27,915	\$27,915	\$27,915	\$111,662
Office Supplies, Postage	\$1,290	\$ 1,290	\$1,290	\$1,290	\$5,161
Building Maintenance Supplies and Repair	\$8,557	\$ 8,557	\$8,557	\$8,557	\$34,226
Printing and Reproduction					
Insurance	\$5,416	\$5,416	\$5,416	\$5,416	\$21,666
Staff Training	\$1,083	\$1,083	\$1,083	\$1,083	\$4,334
Staff Travel-(Local & Out of Town)	\$1,211	\$1,211	\$1,211	\$1,211	\$4,842
Rental of Equipment					
Food Cost					
Raw Food <i>per meal \$2.09 \$1.52</i>	\$457,708	\$302,855	\$302,855	\$302,855	\$1,366,273
Cong Food Svc Supplies <i>per meal \$0.25</i>	\$54,660	\$49,779	\$49,779	\$49,779	\$203,997
Catered Meals <i>per meal</i>					
Consultant					
Pest Control (AP & DSC) & Staffing (AP)-see table at right	\$4,140	\$4,140	\$4,140	\$4,140	\$16,560
Janitorial & Shared Utilities (VVCC)-see table at right	\$6,900	\$6,900	\$6,900	\$6,900	\$27,600
Security at VVCC-see table at right	\$7,488	\$7,488	\$7,488	\$7,488	\$29,952
Other					
Vehicle Fees (Fuel, Maintenance, Parking)	\$6,410	\$6,410	\$6,410	\$6,410	\$25,641
Data Communication, Licenses, Dues	\$5,207	\$5,207	\$5,207	\$5,207	\$20,827
Other Supplies (Janitorial, Facilities)	\$4,266	\$4,266	\$4,266	\$4,266	\$17,065
Total DAS Operating Expenses	\$599,452	\$439,718	\$439,718	\$439,718	\$1,918,606
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Occupancy of Property	\$325,536	\$325,536	\$325,536	\$325,536	\$1,302,144
Utilities (Elec, Water, Gas, Phone, Garbage)	\$63,385	\$65,286	\$67,245	\$69,262	\$265,178
Office Supplies, Postage	\$2,931	\$2,931	\$2,931	\$2,931	\$11,723
Building Maintenance Supplies and Repair	\$19,433	\$19,433	\$19,433	\$19,433	\$77,734
Printing and Reproduction					
Insurance	\$12,302	\$12,302	\$12,302	\$12,302	\$49,206
Staff Training	\$2,461	\$2,461	\$2,461	\$2,461	\$9,842
Staff Travel-(Local & Out of Town)	\$2,749	\$2,749	\$2,749	\$2,749	\$10,998
Rental of Equipment					
Food Cost					
Raw Food <i>per meal \$0.16 \$0.73</i>	\$34,232	\$145,158	\$145,158	\$145,158	\$469,706
Cong Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal</i>					
Other					
Vehicle Fees (Fuel, Maintenance, Parking)	\$14,559	\$14,559	\$14,559	\$14,559	\$58,235
Data Communication, Licenses, Dues	\$11,825	\$11,825	\$11,825	\$11,825	\$47,301
Other Supplies (Janitorial, Facilities)	\$9,690	\$9,690	\$9,690	\$9,690	\$38,759
Total Non DAS Operating Expenses	\$499,102	\$611,930	\$613,888	\$615,906	\$2,340,826
Total DAS and Non DAS Operating Expenses	\$1,098,554	\$1,051,648	\$1,053,606	\$1,055,624	\$4,259,432
HSA #3					10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 4
 Document Date: March 2021

One Time Only Expenses

DAS OTO Expenditure

<u>Staffing</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Bilingual Linkage Coordinator (\$55,000 salary + 38% fringe)	\$75,900				\$75,900
Total Staffing Cost	\$75,900				\$75,900

<u>Software/IT</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
New Client Database: Migration & CAGetCare Integration	\$33,000				\$33,000
IT Support for New Client Database	\$10,000				\$10,000
Foodservice Software License (1/4 of \$20,000 annual fee)	\$5,000				\$5,000
Total Software/IT Cost	\$48,000				\$48,000

<u>Subcontractor</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
DEI Training \$5,000/session x 4 sessions (quarterly)	\$20,000				\$20,000
Total Subcontractor Cost	\$20,000				\$20,000

Total DAS Capital & Subcontractor Expenditure	\$143,900				\$143,900
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Total Non DAS Capital & Subcontractor Expenditure					
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Total DAS and Non DAS Capital & Subcontractor Expenditure	\$143,900				\$143,900
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HSA #4					10/25/2016
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Program: Congregate meals for (X) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Document Date: March 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$1,967.03 /set	2.00	\$3,934	\$3,934	\$3,934	\$3,934	\$15,736
Kitchen and food service monitoring	\$616.91	4.00	\$2,468	\$2,468	\$2,468	\$2,468	\$9,872
Congregate site monitoring	\$263.67	48.00	\$12,656	\$12,656	\$12,656	\$12,656	\$50,624
Nutrition education	\$131.42	48.00	\$6,308	\$6,308	\$6,308	\$6,308	\$25,232
Nutrition counseling (optional)	/hour						
In-service training	\$295.05 /training	4.00	\$1,180	\$1,180	\$1,180	\$1,180	\$4,720
Total DAS NCQA Expenditure			\$26,546	\$26,546	\$26,546	\$26,546	\$106,184

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$439.62 /set	2.00	\$879	\$879	\$879	\$879	\$3,516
Kitchen and food service monitoring	\$137.88	4.00	\$552	\$552	\$552	\$552	\$2,208
Congregate site monitoring	\$58.93	48.00	\$2,829	\$2,829	\$2,829	\$2,829	\$11,316
Nutrition education	\$29.37	48.00	\$1,410	\$1,410	\$1,410	\$1,410	\$5,640
Nutrition counseling (optional)	/hour						
In-service training	\$65.94 /training	4.00	\$264	\$264	\$264	\$264	\$1,056
Total Non DAS NCQA Expenditure			\$5,934	\$5,934	\$5,934	\$5,934	\$23,736

Total DAS and Non DAS NCQA Expenditure			\$32,480	\$32,480	\$32,480	\$32,480	\$129,920
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HSA #4

10/25/2016

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name PROJECT OPEN HAND						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for (X) older adults or () adults with disabilities: Breakfast						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	54,750	43,223	43,223	43,223	184,419	
DAS Expenditures						
Salaries & Benefits	\$171,776	\$171,776	\$171,776	\$171,776	\$687,104	\$3.73
Operating Expenses	\$119,394	\$58,092	\$58,092	\$58,092	\$293,670	\$1.59
Subtotal	\$291,170	\$229,868	\$229,868	\$229,868	\$980,774	\$5.32
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$29,118	\$22,987	\$22,987	\$22,987	\$98,079	\$0.53
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$3,934	\$3,934	\$3,934	\$3,934	\$15,736	\$0.09
Total DAS Expenditures	\$324,222	\$256,789	\$256,789	\$256,789	\$1,094,589	\$5.94
Non DAS Expenditures						
Salaries & Benefits	\$69,235	\$69,235	\$69,235	\$69,235	\$276,940	\$1.50
Operating Expenses	\$82,938	\$119,291	\$119,475	\$119,666	\$441,370	\$2.39
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$879	\$879	\$879	\$879	\$3,516	\$0.02
Total Non DAS Expenditures	\$153,052	\$189,405	\$189,589	\$189,780	\$721,826	\$3.91
TOTAL DAS AND NON DAS EXPEDITURES	\$477,274	\$446,194	\$446,378	\$446,569	\$1,816,415	\$9.85
DAS Revenues						
Meals- General Fund	\$320,288	\$252,855	\$252,855	\$252,855	\$1,078,853	\$5.85
NCQA Fund	\$3,934	\$3,934	\$3,934	\$3,934	\$15,736	\$0.09
Total DAS Revenue	\$324,222	\$256,789	\$256,789	\$256,789	\$1,094,589	\$5.94
PER MEAL COST, DAS	\$5.85	\$5.85	\$5.85	\$5.85	\$5.85	
PER MEAL COST (with NCQA), DAS	\$5.92	\$5.94	\$5.94	\$5.94	\$5.94	
Non DAS Revenues						
Project Income						
Agency Cash- Fundraising	\$86,047	\$122,399	\$122,584	\$122,774	\$453,804	\$2.46
Agency In-kind Volunteer	\$15,070	\$15,070	\$15,070	\$15,070	\$60,278	\$0.33
Agency Property	\$51,936	\$51,936	\$51,936	\$51,936	\$207,744	\$1.13
NCQA Revenue						
Total Non DAS Revenue	\$153,052	\$189,405	\$189,589	\$189,780	\$721,826	\$3.91
PER MEAL COST, Non DAS	\$2.80	\$4.38	\$4.39	\$4.39	\$3.91	
PER MEAL COST (with NCQA), Non DAS	\$2.80	\$4.38	\$4.39	\$4.39	\$3.91	
TOTAL DAS AND NON DAS REVENUE	\$477,274	\$446,194	\$446,378	\$446,569	\$1,816,415	\$9.85
PER MEAL COST, Total	\$8.65	\$10.23	\$10.24	\$10.24	\$9.76	
PER MEAL COST (with NCQA), Total	\$8.72	\$10.32	\$10.33	\$10.33	\$9.85	
Full Time Equivalent (FTE)	9.44	9.44	9.44	9.44	37.77	
Prepared by: Darin Raffaelli, Project Open Hand				Date: 06/10/21		
HSA-CO Review Signature: _____						
HSA #1				10/25/2016		

Cook II	\$39,720	0.10	43.90%	0.04	\$1,744	\$1,744	\$1,744	\$1,744	\$6,976
Cook II	\$39,720	0.10	43.90%	0.04	\$1,744	\$1,744	\$1,744	\$1,744	\$6,976
Cook II	\$39,720	0.05	43.90%	0.02	\$872	\$872	\$872	\$872	\$3,488
Lead Cook	\$44,005	0.10	43.90%	0.04	\$1,932	\$1,932	\$1,932	\$1,932	\$7,728
Sous Chef	\$47,518	0.05	43.90%	0.02	\$1,043	\$1,043	\$1,043	\$1,043	\$4,172
Porter I	\$37,578	0.10	43.90%	0.04	\$1,650	\$1,650	\$1,650	\$1,650	\$6,600
Porter I	\$37,578	0.10	43.90%	0.04	\$1,650	\$1,650	\$1,650	\$1,650	\$6,600
Porter I	\$37,578	0.10	43.90%	0.04	\$1,650	\$1,650	\$1,650	\$1,650	\$6,600
Porter I	\$37,578	0.10	43.90%	0.04	\$1,650	\$1,650	\$1,650	\$1,650	\$6,600
Porter I	\$37,578	0.04	43.90%	0.02	\$660	\$660	\$660	\$660	\$2,640
Porter I	\$37,578	0.04	43.90%	0.02	\$660	\$660	\$660	\$660	\$2,640
Porter I	\$37,578	0.02	43.90%	0.01	\$392	\$392	\$392	\$392	\$1,568
Porter I	\$37,578	0.02	43.90%	0.01	\$392	\$392	\$392	\$392	\$1,568
Kitchen Administrative Manager	\$70,116	0.05	43.90%	0.02	\$1,539	\$1,539	\$1,539	\$1,539	\$6,156
Kitchen Office Administrator	\$50,211	0.07	43.90%	0.03	\$1,543	\$1,543	\$1,543	\$1,543	\$6,172
Director, Kitchen Operations	\$86,570	0.07	43.90%	0.03	\$2,660	\$2,660	\$2,660	\$2,660	\$10,640
Executive Chef	\$93,330	0.05	43.90%	0.02	\$2,049	\$2,049	\$2,049	\$2,049	\$8,196
Purchasing Supervisor	\$60,389	0.06	43.90%	0.03	\$1,591	\$1,591	\$1,591	\$1,591	\$6,364
Kitchen Operations Coordinator II	\$40,560	0.06	43.90%	0.03	\$1,068	\$1,068	\$1,068	\$1,068	\$4,272
Kitchen Operations Coordinator II	\$40,560	0.05	43.90%	0.02	\$890	\$890	\$890	\$890	\$3,560
Kitchen Logistics Supervisor	\$49,962	0.02	43.90%	0.01	\$439	\$439	\$439	\$439	\$1,756
Inventory Operations Coordinator II	\$41,475	0.04	43.90%	0.02	\$728	\$728	\$728	\$728	\$2,912
Inventory Operations Coordinator II	\$41,475	0.03	43.90%	0.01	\$546	\$546	\$546	\$546	\$2,184
Distribution Staff:									
Driver	\$42,453	0.06	43.90%	0.02	\$1,048	\$1,048	\$1,048	\$1,048	\$4,192
Driver	\$39,104	0.06	43.90%	0.02	\$966	\$966	\$966	\$966	\$3,864
Driver	\$41,392	0.06	43.90%	0.02	\$1,022	\$1,022	\$1,022	\$1,022	\$4,088
Driver	\$39,104	0.02	43.90%	0.01	\$343	\$343	\$343	\$343	\$1,372
Director, Distribution	\$82,347	0.01	43.90%	0.004	\$362	\$362	\$362	\$362	\$1,448
Operations Staff:									
Director, Operations	\$84,469	0.02	43.90%	0.007	\$556	\$556	\$556	\$556	\$2,224
In-Kind									
Kitchen Volunteers	\$29,120	3.75	10.00%	0.38	\$10,920	\$10,920	\$10,920	\$10,920	\$43,680
Totals	\$1,596,202	5.74	1458.70%	1.25	\$50,170	\$50,170	\$50,170	\$50,170	\$200,680
Fringe Benefits Rate	38.00%								
Employee Fringe Benefits	\$606,557				\$19,065	\$19,065	\$19,065	\$19,065	\$76,260
Total Non DAS Salaries and Benefits	\$2,202,759				\$69,235	\$69,235	\$69,235	\$69,235	\$276,940
Total DAS and Non DAS Salaries and Benefits	\$5,481,476				\$241,011	\$241,011	\$241,011	\$241,011	\$964,044
HSA #2									

Program: Congregate meals for (X) older adults or () adults with disabilities: Breakfast
 (Same as Line 11 on HSA #1)

Appendix B-1, Page 3
 Document Date: March 2021

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	54,750	43,223	43,223	43,223	184,419
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property (see table at right)					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$7,642	\$ 7,872	\$7,872	\$7,872	\$31,258
Office Supplies, Postage	\$353	\$ 353	\$353	\$353	\$1,414
Building Maintenance Supplies and Repair	\$2,343	\$ 2,343	\$2,343	\$2,343	\$9,371
Printing and Reproduction					
Insurance	\$1,483	\$1,483	\$1,483	\$1,483	\$5,933
Staff Training	\$297	\$297	\$297	\$297	\$1,187
Staff Travel-(Local & Out of Town)	\$332	\$332	\$332	\$332	\$1,326
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$1.62 \$0.70</i>	\$88,907	\$30,256	\$30,256	\$30,256	\$179,675
Cong Food Svc Supplies <i>per meal \$0.25</i>	\$13,688	\$10,806	\$10,806	\$10,806	\$46,106
Catered Meals <i>per meal</i>					
<u>Other</u>					
Vehicle Fees (Fuel, Maintenance, Parking)	\$1,755	\$1,755	\$1,755	\$1,755	\$7,021
Data Communication, Licenses, Dues	\$1,426	\$1,426	\$1,426	\$1,426	\$5,704
Other Supplies (Janitorial, Facilities)	\$1,169	\$1,169	\$1,169	\$1,169	\$4,674
Total DAS Operating Expenses	\$119,394	\$58,092	\$58,092	\$58,092	\$293,669
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Occupancy of Property	\$51,936	\$51,936	\$51,936	\$51,936	\$207,744
Utilities (Elec, Water, Gas, Phone, Garbage)	\$5,980	\$6,159	\$6,344	\$6,535	\$25,018
Office Supplies, Postage	\$277	\$277	\$277	\$277	\$1,106
Building Maintenance Supplies and Repair	\$1,833	\$1,833	\$1,833	\$1,833	\$7,333
Printing and Reproduction					
Insurance	\$1,161	\$1,161	\$1,161	\$1,161	\$4,643
Staff Training	\$232	\$232	\$232	\$232	\$929
Staff Travel-(Local & Out of Town)	\$259	\$259	\$259	\$259	\$1,038
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$0.33 \$1.25</i>	\$17,856	\$54,029	\$54,029	\$54,029	\$179,943
<u>Other</u>					
Vehicle Fees (Fuel, Maintenance, Parking)	\$1,374	\$1,374	\$1,374	\$1,374	\$5,495
Data Communication, Licenses, Dues	\$1,116	\$1,116	\$1,116	\$1,116	\$4,464
Other Supplies (Janitorial, Facilities)	\$914	\$914	\$914	\$914	\$3,658
Total Non DAS Operating Expenses	\$82,938	\$119,291	\$119,475	\$119,666	\$441,370
Total DAS and Non DAS Operating Expenses	\$202,332	\$177,383	\$177,567	\$177,758	\$735,040
HSA #3					10/25/2016

Program: Congregate meals for (X) older adults or () adults with disabilities: Breakfast
 (Same as Line 11 on HSA #1)

Appendix B-1, Page 5
 Document Date: March 2021

NCQA Expenditure Detail

DAS NCQA Expenditure							
	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$1,967.03 /set	2.00	\$3,934	\$3,934	\$3,934	\$3,934	\$15,736
Kitchen and food service monitoring							
Congregate site monitoring							
Nutrition education							
Nutrition counseling (optional)	/hour						
In-service training	/training						
Total DAS NCQA Expenditure			\$3,934	\$3,934	\$3,934	\$3,934	\$15,736
Non DAS NCQA Expenditure							
	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$439.62 /set	2.00	\$879	\$879	\$879	\$879	\$3,516
Kitchen and food service monitoring							
Congregate site monitoring							
Nutrition education							
Nutrition counseling (optional)	/hour						
In-service training	/training						
Total Non DAS NCQA Expenditure			\$879	\$879	\$879	\$879	\$3,516
Total DAS and Non DAS NCQA Expenditure			\$4,813	\$4,813	\$4,813	\$4,813	\$19,252
HSA #4							10/25/2016

Appendix A - Services to be Provided
Russian American Community Services
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Russian American Community Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	350	350	350	350
Number of Meals	46,435	41,418	41,418	41,418

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.

7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Ella Lee

Contract Manager
HSA OCM
email: ella.lee@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name

Russian American Community Services(Check One) New Renewal Modification

If modification, Effective Date of Mod. No. of Mod.

Program: Congregate meals for (x) older adults or () adults with disabilities

Budget Reference Page No.(s)

Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	46,435	41,418	41,418	41,418	170,689	
DAS Expenditures						
Salaries & Benefits	\$203,052	\$203,049	\$203,049	\$203,049	\$812,199	\$4.76
Operating Expenses	\$136,011	\$105,196	\$105,196	\$105,196	\$451,599	\$2.65
Subtotal	\$339,063	\$308,245	\$308,245	\$308,245	\$1,263,798	\$7.40
Indirect Percentage (%)	6.00%	4.00%	4.00%	4.00%	4.00%	
Indirect Cost	\$20,344	\$12,330	\$12,330	\$12,330	\$57,334	\$0.34
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$4,800	\$4,800	\$4,800	\$4,800	\$19,200	\$0.11
Total DAS Expenditures	\$364,207	\$325,375	\$325,375	\$325,375	\$1,340,332	\$7.85
Non DAS Expenditures						
Salaries & Benefits	\$36,400	\$36,400	\$36,400	\$36,400	\$145,600	\$0.85
Operating Expenses	\$96,021	\$112,790	\$112,790	\$112,790	\$434,391	\$2.54
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$400	\$400	\$400	\$400	\$1,600	\$0.01
Total Non DAS Expenditures	\$132,821	\$149,590	\$149,590	\$149,590	\$581,591	\$3.41
TOTAL DAS AND NON DAS EXPEDITURES	\$497,028	\$474,965	\$474,965	\$474,965	\$1,921,923	\$11.26
DAS Revenues						
Meals- General Fund	\$364,207	\$325,375	\$325,375	\$325,375	\$1,340,332	\$7.85
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$364,207	\$325,375	\$325,375	\$325,375	\$1,340,332	\$7.85
PER MEAL COST, DAS	\$7.74	\$7.74	\$7.74	\$7.74	\$7.74	
PER MEAL COST (with NCQA), DAS	\$7.84	\$7.86	\$7.86	\$7.86	\$7.85	
Non DAS Revenues						
Project Income	\$46,435	\$41,418	\$41,418	\$41,418	\$170,689	\$1.00
Agency Cash- Fundraising	\$1,586	\$23,372	\$23,372	\$23,372	\$71,702	\$0.42
Agency In-kind Volunteer	\$36,400	\$36,400	\$36,400	\$36,400	\$145,600	\$0.85
in kind rent	\$48,000	\$48,000	\$48,000	\$48,000	\$192,000	\$1.12
NCQA Revenue	\$400	\$400	\$400	\$400	\$1,600	\$0.01
Total Non DAS Revenue	\$132,821	\$149,590	\$149,590	\$149,590	\$581,591	\$3.41
PER MEAL COST (with NCQA), Non DAS	\$2.86	\$3.61	\$3.61	\$3.61	\$3.41	
TOTAL DAS AND NON DAS REVENUE	\$497,028	\$474,965	\$474,965	\$474,965	\$1,921,923	\$11.26
PER MEAL COST (with NCQA), Total	\$10.70	\$11.47	\$11.47	\$11.47	\$11.26	

Full Time Equivalent (FTE)

5.04

5.04

5.04

5.04

5.04

5.04

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5.04

5.04

5.04

5.04

Date: 4/7/21

Prepared by:

HSA-CO Review Signature: _____

HSA #1

Salaries & Benefits Detail

DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary					
Executive Director	\$82,476	0.22	100.00%	0.22	\$18,557	\$18,557	\$18,557	\$18,557	\$18,557	\$74,228
Program Coordinator	\$53,244	0.45	100.00%	0.45	\$23,960	\$23,960	\$23,960	\$23,960	\$23,960	\$95,840
Cook I	\$53,244	0.50	100.00%	0.50	\$26,622	\$26,622	\$26,622	\$26,622	\$26,622	\$106,488
Cook II	\$40,716	0.47	100.00%	0.47	\$19,340	\$19,340	\$19,340	\$19,340	\$19,340	\$77,360
Cook III	\$40,716	0.31	100.00%	0.31	\$12,724	\$12,724	\$12,724	\$12,724	\$12,724	\$50,896
Dish Washer	\$36,541	0.44	100.00%	0.44	\$15,987	\$15,987	\$15,987	\$15,987	\$15,987	\$63,948
Kitchen Aid/ Janitor	\$35,464	0.36	100.00%	0.36	\$12,920	\$12,920	\$12,920	\$12,920	\$12,920	\$51,680
DR Hostess	\$37,584	0.75	100.00%	0.75	\$28,188	\$28,188	\$28,188	\$28,188	\$28,188	\$112,752
Route manager/ data entry	\$39,673	0.27	100.00%	0.27	\$10,910	\$10,910	\$10,910	\$10,910	\$10,910	\$43,640
Totals	\$419,658	3.79	900.00%	3.79	\$169,208	\$169,208	\$169,208	\$169,208	\$169,208	\$676,832
Fringe Benefits Rate	20.00%									
Employee Fringe Benefits	\$83,932				\$33,844	\$33,841	\$33,841	\$33,841	\$33,841	\$135,367
Total DAS Salaries and Benefits	\$503,590				\$203,052	\$203,049	\$203,049	\$203,049	\$203,049	\$812,199
Non DAS Salaries & Benefits										
Non DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary					
kitchen volunteers	29,120	0.25	100.00%	0.25	\$7,280	\$7,280	\$7,280	\$7,280	\$7,280	\$29,120
Route runners volunteers	29,120	1.00	100.00%	1.00	\$29,120	\$29,120	\$29,120	\$29,120	\$29,120	\$116,480
Totals	\$58,240	1.25	200.00%	1.25	\$36,400	\$36,400	\$36,400	\$36,400	\$36,400	\$145,600
Fringe Benefits Rate										
Employee Fringe Benefits										
Total Non DAS Salaries and Benefits	\$58,240				\$36,400	\$36,400	\$36,400	\$36,400	\$36,400	\$145,600
Total DAS and Non DAS Salaries and Benefits	\$561,830				\$239,452	\$239,449	\$239,449	\$239,449	\$239,449	\$957,799
HSA #2										

Program: Congregate meals for (x) older adults or () adults with disabilities

Russian American Community Services

Operating Expense Detail

		<u>FY 21/22</u>	<u>FY 22/23</u>	<u>FY 23/24</u>	<u>FY 24/25</u>	<u>Total</u>
Annual # Meals Contracted		46,435	41,418	41,418	41,418	170,689
DAS Operating Expenses						
<u>Expenditure Category</u>						
Rental of Property						
Utilities (Elec, Water, Gas, Phone, Garbage)		\$10,498	\$1,542	\$1,542	\$1,542	\$15,124
Office Supplies, Postage		\$1,200				\$1,200
Building Maintenance Supplies and Repair		\$4,500				\$4,500
Printing and Reproduction		\$1,000				\$1,000
Insurance		\$7,778	\$4,615	\$4,615	\$4,615	\$21,623
Staff Training						
Staff Travel-(Local & Out of Town)						
Rental of Equipment						
<u>Food Cost</u>						
Raw Food	<i>per meal \$2.01</i>	\$93,390	\$83,300	\$83,300	\$83,300	\$343,290
Cong Food Svc Supplies	<i>per meal \$0.38</i>	\$17,645	\$15,739	\$15,739	\$15,739	\$64,862
Catered Meals	<i>per meal</i>					
Total DAS Operating Expenses		\$136,011	\$105,196	\$105,196	\$105,196	\$451,599
Non DAS Operating Expenses						
<u>Expenditure Category</u>						
Rental of Property		\$48,000	\$48,000	\$48,000	\$48,000	\$192,000
Utilities (Elec, Water, Gas, Phone, Garbage)			\$8,956	\$8,956	\$8,956	\$26,868
Office Supplies, Postage		\$7,000	\$8,200	\$8,200	\$8,200	\$31,600
Building Maintenance Supplies and Repair		\$15,000	\$19,500	\$19,500	\$19,500	\$73,500
Printing and Reproduction		\$4,180	\$5,180	\$5,180	\$5,180	\$19,720
Insurance		\$2,060	\$5,310	\$5,310	\$5,310	\$17,990
Staff Training						
Staff Travel-(Local & Out of Town)						
Rental of Equipment						
<u>Food Cost</u>						
Raw Food	<i>per meal \$0.43</i>	\$19,781	\$17,644	\$17,644	\$17,644	\$72,713
Cong Food Svc Supplies	<i>per meal</i>					
Catered Meals	<i>per meal</i>					
Total Non DAS Operating Expenses		\$96,021	\$112,790	\$112,790	\$112,790	\$434,391
Total DAS and Non DAS Operating Expenses		\$232,032	\$217,986	\$217,986	\$217,986	\$885,990

HSA #3

Program: Congregate meals for (x) older adults or () adults with disabilities
Russian American Community Services

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$700.00 /set	2.00	\$1,400	\$1,400	\$1,400	\$1,400	\$5,600
Kitchen and food service monitoring	\$600.00	2.00	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
Congregate site monitoring	\$300.00	4.00	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
Nutrition education	\$150.00	4.00	\$600	\$600	\$600	\$600	\$2,400
Nutrition counseling (optional)	/hour						
In-service training	\$100.00 /training	4.00	\$400	\$400	\$400	\$400	\$1,600
Total DAS NCQA Expenditure			\$4,800	\$4,800	\$4,800	\$4,800	\$19,200

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set						
Kitchen and food service monitoring							
Congregate site monitoring							
Nutrition education							
Nutrition counseling (optional)	/hour						
In-service training	\$100.00 /training	4.00	\$400	\$400	\$400	\$400	\$1,600
Total Non DAS NCQA Expenditure			\$400	\$400	\$400	\$400	\$1,600

Total DAS and Non DAS NCQA Expenditure			\$5,200	\$5,200	\$5,200	\$5,200	\$20,800
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HSA #4

Appendix A - Services to be Provided
Self Help for the Elderly
 Congregate Nutrition Services for Older Adults

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for older adults living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Self Help for the Elderly
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

LGBTQ+	An acronym/term used to refer to persons who self-identify as non-heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older; used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.

SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is 60 years of age or older (older adult).
2. The spouse or domestic partner of an older adult, regardless of age.
3. A person with a disability, under the age of sixty (60) who resides in housing facilities occupied primarily by older adults at which congregate nutrition services are provided.
4. A disabled individual who resides at home with and accompanies an older adult who participates in the program.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.

2. Grantee will provide congregate nutrition services for older adults. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring.

- HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
- v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	5,700	5,500	5,500	5,500
Number of Meals	340,000	254,834	254,834	254,834

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, and the food security screening into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.

6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:
 DAS OCP
 Tiffany Kearney, RD
 Lead Nutritionist
Tiffany.Kearney@sfgov.org

and

Tahir Contract Manager
HSA OCM
Shaikh, Tahir
Contract Manager
Tahir.Shaikh@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
SELF-HELP FOR THE ELDERLY						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. No. of Mod.						
Program: Congregate meals for (x) older adults or () adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	340,000	254,834	254,834	254,834	1,104,502	
DAS Expenditures						
Salaries & Benefits	\$773,864	\$603,601	\$603,601	\$603,601	\$2,584,667	\$2.34
Operating Expenses	\$1,621,591	\$1,191,821	\$1,191,821	\$1,191,821	\$5,197,054	\$4.71
Subtotal	\$2,395,455	\$1,795,422	\$1,795,422	\$1,795,422	\$7,781,721	\$7.05
Indirect Percentage (%)	10%	10%	10%	10%	10%	
Indirect Cost	\$239,545	\$179,542	\$179,542	\$179,542	\$778,171	\$0.70
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$22,343	\$22,343	\$22,343	\$22,343	\$89,372	\$0.08
Total DAS Expenditures	\$2,657,343	\$1,997,307	\$1,997,307	\$1,997,307	\$8,649,264	\$7.83
Non DAS Expenditures						
Salaries & Benefits	\$690,944	\$861,208	\$861,208	\$861,208	\$3,274,568	\$2.96
Operating Expenses	\$414,700	\$375,922	\$375,922	\$375,922	\$1,542,466	\$1.40
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$1,105,644	\$1,237,130	\$1,237,130	\$1,237,130	\$4,817,034	\$4.36
TOTAL DAS AND NON DAS EXPEDITURES	\$3,762,987	\$3,234,437	\$3,234,437	\$3,234,437	\$13,466,298	\$12.19
DAS Revenues						
Meals- General Fund	\$2,635,000	\$1,974,964	\$1,974,964	\$1,974,964	\$8,559,891	\$7.75
Meals- State Fund						
Meals- Federal Fund						
NCQA Fund	\$22,343	\$22,343	\$22,343	\$22,343	\$89,372	\$0.08
Total DAS Revenue	\$2,657,343	\$1,997,307	\$1,997,307	\$1,997,307	\$8,649,263	\$7.83
PER MEAL COST, DAS	\$7.75	\$7.75	\$7.75	\$7.75	\$7.75	
PER MEAL COST (with NCQA), DAS	\$7.82	\$7.84	\$7.84	\$7.84	\$7.83	
Non DAS Revenues						
Project Income	\$578,000	\$433,218	\$433,218	\$433,218	\$1,877,653	\$1.70
Agency Cash- Fundraising	\$527,644	\$803,912	\$803,912	\$803,912	\$2,939,381	\$2.66
Agency In-kind Volunteer	\$527,936	\$527,936	\$527,936	\$527,936	\$2,111,744	\$1.91
NCQA Revenue						
Total Non DAS Revenue	\$1,633,580	\$1,765,066	\$1,765,066	\$1,765,066	\$6,928,778	\$6.27
PER MEAL COST, Non DAS	\$4.80	\$6.93	\$6.93	\$6.93	\$6.27	
PER MEAL COST (with NCQA), Non DAS	\$4.80	\$6.93	\$6.93	\$6.93	\$6.27	
TOTAL DAS AND NON DAS REVENUE	\$4,290,923	\$3,762,373	\$3,762,373	\$3,762,373	\$15,578,041	\$14.10
PER MEAL COST, Total	\$12.55	\$14.68	\$14.68	\$14.68	\$14.02	
PER MEAL COST (with NCQA), Total	\$12.62	\$14.77	\$14.77	\$14.77	\$14.10	
Full Time Equivalent (FTE)	43.48	43.48	43.48	43.48	174	
Prepared by: Leny Nair						Date: 6/15/2021
HSA #1						10/25/2016

Program: Congregate meals for (x) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: June 15, 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Nutrition Director	\$92,700	1.00	30.00%	0.30	\$27,810				\$27,810
Nutrition Manager	\$72,100	1.00	15.00%	0.15	\$10,815	\$10,815	\$10,815	\$10,815	\$43,260
Office Manager	\$60,000	1.00	30.00%	0.30	\$18,000	\$18,000	\$18,000	\$18,000	\$72,000
Program Assistant	\$39,520	1.00	60.00%	0.60	\$23,712	\$23,712	\$23,712	\$23,712	\$94,848
Program Assistant	\$39,520	1.00	60.00%	0.60	\$23,712	\$23,712	\$23,712	\$23,712	\$94,848
Program Assistant	\$41,600	1.00	60.00%	0.60	\$24,960	\$24,960	\$24,960	\$24,960	\$99,840
Administrative Coordinator	\$41,496	0.70	50.00%	0.35	\$14,524	\$14,524	\$14,524	\$14,524	\$58,096
Center Coordinator	\$35,464	0.75	100.00%	0.75	\$26,598	\$26,598	\$26,598	\$26,598	\$106,392
Center Coordinator	\$39,520	1.00	100.00%	1.00	\$39,520	\$39,520	\$39,520	\$39,520	\$158,080
Center Coordinator	\$39,520	1.00	100.00%	1.00	\$39,520	\$39,520	\$39,520	\$39,520	\$158,080
Center Coordinator	\$39,520	1.00	50.00%	0.50	\$19,760	\$19,760	\$19,760	\$19,760	\$79,040
Center Coordinator	\$39,520	0.75	50.00%	0.38	\$14,820	\$14,820	\$14,820	\$14,820	\$59,280
Center Coordinator	\$39,520	0.75	50.00%	0.38	\$14,820	\$14,820	\$14,820	\$14,820	\$59,280
Center Coordinator	\$39,520	0.75	50.00%	0.38	\$14,820	\$14,820	\$14,820	\$14,820	\$59,280
Center Coordinator	\$39,520	1.00	50.00%	0.50	\$19,760	\$19,760	\$19,760	\$19,760	\$79,040
Center Coordinator	\$39,520	1.00	50.00%	0.50	\$19,760	\$19,760	\$19,760	\$19,760	\$79,040
Center Coordinator Supervisor	\$46,800	1.00	45.00%	0.45	\$21,060	\$21,060	\$21,060	\$21,060	\$84,240
Center Coordinator Supervisor	\$46,800	1.00	45.00%	0.45	\$21,060	\$21,060	\$21,060	\$21,060	\$84,240
Meal Site Worker	\$35,464	1.00	50.00%	0.50	\$17,732	\$17,732	\$17,732	\$17,732	\$70,928
Meal Site Worker	\$35,464	1.00	50.00%	0.50	\$17,732	\$17,732	\$17,732	\$17,732	\$70,928
Meal Site Worker	\$35,464	0.88	50.00%	0.44	\$15,516	\$15,516	\$15,516	\$15,516	\$62,064
Meal Site Worker	\$35,464	1.00	50.00%	0.50	\$17,732	\$17,732	\$17,732	\$17,732	\$70,928
Meal Site Worker	\$35,464	1.00	50.00%	0.50	\$17,732	\$3,082	\$3,082	\$3,082	\$26,978
Meal Site Worker	\$35,464	1.00	50.00%	0.50	\$17,732				\$17,732
Meal Site Worker	\$35,464	0.75	75.00%	0.56	\$19,949				\$19,949
Meal Site Worker	\$35,464	0.70	50.00%	0.35	\$12,412				\$12,412
Meal Site Worker	\$35,464	0.63	50.00%	0.31	\$11,083				\$11,083
Meal Site Worker	\$35,464	0.63	50.00%	0.31	\$11,083				\$11,083
Meal Site Worker	\$35,464	0.50	50.00%	0.25	\$8,866				\$8,866
Meal Site Worker	\$35,464	0.25	100.00%	0.13	\$4,433				\$4,433
Totals	\$1,297,248	26.78	1720.00%	14.40	\$581,853	\$453,835	\$453,835	\$453,835	\$1,943,358
Fringe Benefits Rate	33.00%								
Employee Fringe Benefits	\$428,092				\$192,011	\$149,766	\$149,766	\$149,766	\$641,309
Total DAS Salaries and Benefits	\$1,725,340				\$773,864	\$603,601	\$603,601	\$603,601	\$2,584,667
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
HDM Driver	\$38,480	1.00	10.00%	0.10	\$3,848	\$3,848	\$3,848	\$3,848	\$15,392
HDM Driver	\$36,400	1.00	10.00%	0.10	\$3,640	\$3,640	\$3,640	\$3,640	\$14,560
HDM Driver	\$36,400	1.00	10.00%	0.10	\$3,640	\$3,640	\$3,640	\$3,640	\$14,560
HDM Driver	\$38,400	1.00	10.00%	0.10	\$3,840	\$3,840	\$3,840	\$3,840	\$15,360
HDM Worker	\$35,464	1.00	10.00%	0.10	\$3,546	\$3,546	\$3,546	\$3,546	\$14,184
HDM Worker	\$35,464	1.00	10.00%	0.10	\$3,546	\$3,546	\$3,546	\$3,546	\$14,184
HDM Worker	\$35,464	1.00	10.00%	0.10	\$3,546	\$3,546	\$3,546	\$3,546	\$14,184
HDM Worker	\$35,464	1.00	10.00%	0.10	\$3,546	\$3,546	\$3,546	\$3,546	\$14,184
Nutrition Director	\$92,700	1.00	40.00%	0.40	\$9,270	\$37,080	\$37,080	\$37,080	\$120,510
Nutrition Manager	\$72,100	1.00	10.00%	0.25	\$18,025	\$18,025	\$18,025	\$18,025	\$72,100
HDM Worker	\$35,464	0.25	1.00%	12.50	\$443,300	\$443,300	\$443,300	\$443,300	\$1,773,200
Center Coordinator	\$39,520	1.00	50.00%	0.50	\$19,760	\$19,760	\$19,760	\$19,760	\$79,040
Meal Site Worker	\$35,464	1.00	50.00%	0.50		\$17,732	\$17,732	\$17,732	
Meal Site Worker	\$35,464	0.75	75.00%	0.56		\$19,949	\$19,949	\$19,949	
Meal Site Worker	\$35,464	0.70	50.00%	0.35		\$12,412	\$12,412	\$12,412	
Meal Site Worker	\$35,464	0.63	50.00%	0.31		\$11,083	\$11,083	\$11,083	
Meal Site Worker	\$35,464	0.63	50.00%	0.31		\$11,083	\$11,083	\$11,083	
Meal Site Worker	\$35,464	0.50	50.00%	0.25		\$8,866	\$8,866	\$8,866	
Meal Site Worker	\$35,464	0.25	100.00%	0.13		\$4,433	\$4,433	\$4,433	
Meal Site Worker	\$35,464	1.00	50.00%	0.50		\$14,650	\$14,650	\$14,650	
Totals	\$815,032	16.70	656.00%	17.36	\$519,507	\$647,525	\$647,525	\$647,525	\$2,462,082
Fringe Benefits Rate	33.00%								
Employee Fringe Benefits	\$268,961				\$171,437	\$213,683	\$213,683	\$213,683	\$812,486

Total Non DAS Salaries and Benefits	\$1,083,993				\$690,944	\$861,208	\$861,208	\$861,208	\$3,274,568
Total DAS and Non DAS Salaries and Benefits	\$2,809,333				\$1,464,808	\$1,464,809	\$1,464,809	\$1,464,809	\$5,859,235
HSA #2									10/25/2016

Program: Congregate meals for (x) older adults or () adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	340,000	254,834	254,834	254,834	1,104,502
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$32,045				\$32,045
Utilities (Elec, Water, Gas, Phone, Garbage)	\$1,746	\$1,746	\$1,746	\$1,746	\$6,984
Office Supplies, Postage					
Building Maintenance Supplies and Repair					
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$0.12</i>	\$40,800	\$30,580	\$30,580	\$30,580	\$132,540
Cong Food Svc Supplies <i>per meal \$0.05</i>	\$17,000	\$12,742	\$12,742	\$12,742	\$55,226
Catered Meals <i>per meal \$4.50</i>	\$1,530,000	\$1,146,753	\$1,146,753	\$1,146,753	\$4,970,259
Total DAS Operating Expenses	\$1,621,591	\$1,191,821	\$1,191,821	\$1,191,821	\$5,197,054
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$53,700	\$85,980	\$85,980	\$85,980	\$311,640
Utilities (Elec, Water, Gas, Phone, Garbage)	\$65,000	\$65,000	\$65,000	\$65,000	\$260,000
Office Supplies, Postage	\$2,500	\$2,500	\$2,500	\$2,500	\$10,000
Building Maintenance Supplies and Repair	\$30,000	\$22,000	\$22,000	\$22,000	\$96,000
Printing and Reproduction	\$1,000	\$500	\$500	\$500	\$2,500
Insurance	\$20,000	\$20,000	\$20,000	\$20,000	\$80,000
Staff Training	\$500	\$500	\$500	\$500	\$2,000
Staff Travel-(Local & Out of Town)	\$2,000	\$2,000	\$2,000	\$2,000	\$8,000
Rental of Equipment	\$4,000	\$4,000	\$4,000	\$4,000	\$16,000
<u>Food Cost</u>					
Raw Food <i>per meal \$0.12</i>	\$40,800	\$30,580	\$30,580	\$30,580	\$132,540
Cong Food Svc Supplies <i>per meal \$0.03</i>	\$10,200	\$7,645	\$7,645	\$7,645	\$33,135
Catered Meals <i>per meal \$0.50</i>	\$170,000	\$127,417	\$127,417	\$127,417	\$552,251
<u>Other</u>					
Recruitment Expense	\$2,000	\$2,000	\$2,000	\$2,000	\$8,000
Taxes & Licenses	\$1,000	\$600	\$600	\$600	\$2,800
Office Furniture	\$1,500				\$1,500
Membership & Dues	\$500	\$200	\$200	\$200	\$1,100
Vehicle Expenses	\$10,000	\$5,000	\$5,000	\$5,000	\$25,000
Total Non DAS Operating Expenses	\$414,700	\$375,922	\$375,922	\$375,922	\$1,542,466
Total DAS and Non DAS Operating Expenses	\$2,036,291	\$1,567,743	\$1,567,743	\$1,567,743	\$6,739,520

Program: Congregate meals for (x) older adults or () adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 5
 Document Date: June 15, 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$728.02 /set	2.00	\$1,456	\$1,456	\$1,456	\$1,456	\$5,824
Kitchen and food service monitoring	\$623.48	4.00	\$2,494	\$2,494	\$2,494	\$2,494	\$9,976
Congregate site monitoring	\$286.64	44.00	\$12,612	\$12,612	\$12,612	\$12,612	\$50,448
Nutrition education	\$100.85	44.00	\$4,437	\$4,437	\$4,437	\$4,437	\$17,748
Nutrition counseling (optional)	/hour						
In-service training	\$112.00 /training	12.00	\$1,344	\$1,344	\$1,344	\$1,344	\$5,376
Total DAS NCQA Expenditure			\$22,343	\$22,343	\$22,343	\$22,343	\$89,372

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set	2.00					
Kitchen and food service monitoring		4.00					
Congregate site monitoring		44.00					
Nutrition education		44.00					
Nutrition counseling (optional)	/hour						
In-service training	/training	12.00					
Total Non DAS NCQA Expenditure							

Total DAS and Non DAS NCQA Expenditure			\$22,343	\$22,343	\$22,343	\$22,343	\$89,372
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HSA #4

10/25/2016

Congregate Nutrition Services for Adults with Disabilities:

Bayview Hunter's Point Multipurpose Senior Services

Appendix A – Services to be Provided

Appendix B – Budget

Centro Latino de San Francisco

Appendix A – Services to be Provided

Appendix B – Budget

Episcopal Community Services of San Francisco

Appendix A – Services to be Provided

Appendix B – Budget

Glide Foundation

Appendix A – Services to be Provided

Appendix B – Budget

Project Open Hand

Appendix A – Services to be Provided

Appendix B – Budget

Russian American Community Services

Appendix A – Services to be Provided

Appendix B – Budget

Self-Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

Appendix A - Services to be Provided
Bayview Senior Services
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Bayview Senior Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf
DGA/Dietary Guidelines for Americans	Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).
DRI/ Dietary Reference Intakes	Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.
Disability	Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)
Frail	An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)
HACCP	Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
- (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
- 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
- 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
- 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
- 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
- 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

- 1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	240	150	150	150
Number of Meals	22397	9972	9972	9972

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.

11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Steve Kim
 Contract Manager
 HSA OCM
 email: Steve.Kim@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-

GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Bayview Hunters Point Multipurpose Senior Services
(Please enter agency name here)

(Check One) New Renewal Modification

If modification, Effective Date of Mod. _____ No. of Mod. _____

Program: Congregate Meals for Adults with Disabilities

Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	22,397	9,972	9,972	9,972	52,313	
DAS Expenditures						
Salaries & Benefits	\$98,812	\$42,326	\$42,326	\$42,326	\$225,790	\$4.32
Operating Expenses	\$80,787	\$37,636	\$37,636	\$37,636	\$193,695	\$3.70
Subtotal	\$179,599	\$79,962	\$79,962	\$79,962	\$419,485	\$8.02
Indirect Percentage (%)	6.00%	6.00%	6.00%	6.00%	6.00%	
Indirect Cost	\$10,776	\$4,798	\$4,798	\$4,798	\$25,170	\$0.48
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total DAS Expenditures	\$190,375	\$84,760	\$84,760	\$84,760	\$444,655	\$8.50
Non DAS Expenditures						
Salaries & Benefits	\$11,869	\$6,144	\$6,144	\$6,144	\$30,301	\$0.58
Operating Expenses	\$4,374	\$3,131	\$3,131	\$3,131	\$13,767	\$0.26
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$16,243	\$9,275	\$9,275	\$9,275	\$44,068	\$0.84
TOTAL DAS AND NON DAS EXPEDITURES	\$206,618	\$94,035	\$94,035	\$94,035	\$488,723	\$9.34
DAS Revenues						
Meals- General Fund	\$190,375	\$84,760	\$84,760	\$84,760	\$444,655	\$8.50
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$190,375	\$84,760	\$84,760	\$84,760	\$444,655	\$8.50
PER MEAL COST, DAS	\$8.50	\$8.50	\$8.50	\$8.50	\$8.50	
PER MEAL COST (with NCQA), DAS	\$8.50	\$8.50	\$8.50	\$8.50	\$8.50	
Non DAS Revenues						
Project Income	\$2,102	\$1,102	\$1,102	\$1,102	\$5,408	\$0.10
Agency Cash- Fundraising	\$4,093	\$1,971	\$1,971	\$1,971	\$10,006	\$0.19
Agency In-kind Volunteer	\$7,808	\$5,205	\$5,205	\$5,205	\$23,423	\$0.45
Food Bank Donation	\$2,240	\$997	\$997	\$997	\$5,231	\$0.10
Total Non DAS Revenue	\$16,243	\$9,275	\$9,275	\$9,275	\$44,068	\$0.84
PER MEAL COST, Non DAS	\$0.73	\$0.93	\$0.93	\$0.93	\$0.84	
PER MEAL COST (with NCQA), Non DAS	\$0.73	\$0.93	\$0.93	\$0.93	\$0.84	
TOTAL DAS AND NON DAS REVENUE	\$206,618	\$94,035	\$94,035	\$94,035	\$488,723	\$9.34
PER MEAL COST, Total	\$9.23	\$9.43	\$9.43	\$9.43	\$9.34	
PER MEAL COST (with NCQA), Total	\$9.23	\$9.43	\$9.43	\$9.43	\$9.34	
Full Time Equivalent (FTE)	16.91	16.91	16.91	16.91	67.65	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						7/7/2021

Program: Congregate Meals for Adults with Disabilities
(Same as Line 11 on HSA #1)

Appendix B, Page 2
Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary
Executive Chef	\$87,552	1.00	11.00%	0.11	\$9,631	\$9,631	\$9,631	\$9,631	\$9,631	\$38,524
Food Service Coordinator	\$58,240	1.00	11.00%	0.11	\$6,406					\$6,406
Cook	\$52,000	1.00	11.00%	0.11	\$5,720					\$5,720
Kitchen Assistant/Maintenance	\$45,760	1.00	11.00%	0.11	\$5,034	\$5,034	\$5,034	\$5,034	\$5,034	\$20,136
WASC Site Manager	\$45,760	1.00	11.00%	0.11	\$5,034	\$5,034	\$5,034	\$5,034	\$5,034	\$20,136
Cook	\$47,840	1.00	11.00%	0.11	\$5,262					\$5,262
Food Service Assistant	\$36,400	0.75	11.00%	0.08	\$3,003					\$3,003
Food Service Assistant	\$41,600	1.00	11.00%	0.11	\$4,576					\$4,576
Rosa Parks Site Manager	\$37,440	0.44	11.00%	0.05	\$1,802	\$1,802	\$1,802	\$1,802	\$1,802	\$7,208
Dr Davis Site Manager	\$39,520	1.00	11.00%	0.11	\$4,347	\$2,174	\$2,174	\$2,174	\$2,174	\$10,869
Food Service Assistant	\$39,520	1.00	11.00%	0.11	\$4,347					\$4,347
Kitchen Assistant/ Maintenance	\$36,400	1.00	11.00%	0.11	\$4,004					\$4,004
Driver	\$44,440	1.00	11.00%	0.11	\$4,888	\$4,888	\$4,888	\$4,888	\$4,888	\$19,552
Cook	\$54,080	1.00	11.00%	0.11	\$5,949	\$3,995	\$3,995	\$3,995	\$3,995	\$17,934
Food Service Assistants	\$36,400	1.50	11.00%	0.17	\$6,006					\$6,006
Totals	\$702,952	14.69	165.00%	1.62	\$76,009	\$32,558	\$32,558	\$32,558	\$32,558	\$173,683
Fringe Benefits Rate	30.00%									
Employee Fringe Benefits	\$210,886				\$22,803	\$9,767	\$9,767	\$9,767	\$9,767	\$52,104
Total DAS Salaries and Benefits	\$913,838				\$98,812	\$42,326	\$42,326	\$42,326	\$42,326	\$225,790
Non DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary
driver	\$36,400	0.60	11.00%	0.07	\$2,402					\$2,402
Date entry	\$52,520	0.13	11.00%	0.01	\$722	\$722	\$722	\$722	\$722	\$2,888
Volunteers	\$36,400	1.50	11.00%	0.17	\$6,006	\$4,004	\$4,004	\$4,004	\$4,004	\$18,018
Totals	\$125,320	2.23	33.00%	0.24	\$9,130	\$4,726	\$4,726	\$4,726	\$4,726	\$23,308
Fringe Benefits Rate	30.00%									
Employee Fringe Benefits	\$37,596				\$2,739	\$1,418	\$1,418	\$1,418	\$1,418	\$6,993
Total Non DAS Salaries and Benefits	\$162,916				\$11,869	\$6,144	\$6,144	\$6,144	\$6,144	\$30,301
Total DAS and Non DAS Salaries and Benefits	\$1,076,754				\$110,681	\$48,470	\$48,470	\$48,470	\$48,470	\$256,091

HSA #2

7/7/2021

Program: Congregate Meals for Adults with Disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 3
 Document Date: March 2021

Operating Expense Detail

	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Annual # Meals Contracted	22,397	9,972	9,972	9,972	52,313
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$648	\$648	\$648	\$648	\$2,592
Utilities (Elec, Water, Gas, Phone, Garbage)	\$3,874	\$2,174	\$2,174	\$2,174	\$10,396
Office Supplies, Postage	\$330	\$330	\$330	\$330	\$1,320
Building Maintenance Supplies and Repair	\$1,769	\$1,276	\$1,276	\$1,276	\$5,597
Printing and Reproduction					
Insurance	\$1,313	\$515	\$515	\$515	\$2,858
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$3.00</i>	\$67,191	\$29,916	\$29,916	\$29,916	\$156,939
Cong Food Svc Supplies <i>per meal \$0.20</i>	\$4,479	\$1,994	\$1,994	\$1,994	\$10,461
Catered Meals <i>per meal</i>					
<u>Other</u>					
DMV Registration	\$259	\$259	\$259	\$259	\$1,036
Gas and Car Rental	\$924	\$524	\$524	\$524	\$2,496
Total DAS Operating Expenses					
	\$80,787	\$37,636	\$37,636	\$37,636	\$193,695
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage					
Building Maintenance Supplies and Repair	\$660	\$660	\$660	\$660	\$2,640
Printing and Reproduction					
Insurance					
Staff Training	\$550	\$550	\$550	\$550	\$2,200
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$0.10</i>	\$2,240	\$997	\$997	\$997	\$5,231
Cong Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal</i>					
<u>Other</u>					
Small Equipment and supplies	\$528	\$528	\$528	\$528	\$2,112
Car Repair	\$396	\$396	\$396	\$396	\$1,584
Total Non DAS Operating Expenses					
	\$4,374	\$3,131	\$3,131	\$3,131	\$13,767
Total DAS and Non DAS Operating Expenses					
	\$85,161	\$40,767	\$40,767	\$40,767	\$207,462
HSA #3					7/7/2021

Appendix A - Services to be Provided
Centro Latino de San Francisco
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Centro Latino de San Francisco
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>
<p>LGBTQ+</p>	<p>An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.</p>

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
- (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
- 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
- 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
- 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
- 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
- 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

- 1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	271	170	170	170
Number of Meals	21239	13359	13359	13359

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
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14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
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Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Tahir Shaikh
 Contract Manager
 HSA OCM
 email: Tahir.Shaikh@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-

GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Centro Latino de San Francisco						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for () older adults or (X) adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	21,239	13,359	13,359	13,359	61,316	
DAS Expenditures						
Salaries & Benefits	\$102,426	\$64,425	\$64,425	\$64,425	\$295,701	\$4.82
Operating Expenses	\$44,896	\$28,240	\$28,240	\$28,240	\$129,616	\$2.11
Subtotal	\$147,322	\$92,665	\$92,665	\$92,665	\$425,317	\$6.94
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$14,732	\$9,266	\$9,266	\$9,266	\$42,530	\$0.69
Total DAS Expenditures	\$162,054	\$101,931	\$101,931	\$101,931	\$467,847	\$7.63
Non DAS Expenditures						
Salaries & Benefits	\$18,375	\$11,557	\$11,557	\$11,557	\$53,046	\$0.87
Operating Expenses	\$11,807	\$7,427	\$7,427	\$7,427	\$34,087	\$0.56
Total Non DAS Expenditures	\$30,182	\$18,984	\$18,984	\$18,984	\$87,133	\$1.42
TOTAL DAS AND NON DAS EXPEDITURES	\$192,236	\$120,915	\$120,915	\$120,915	\$554,980	\$9.05
DAS Revenues						
Meals- General Fund	\$162,053	\$101,929	\$101,929	\$101,929	\$467,840	\$7.63
Total DAS Revenue	\$162,053	\$101,929	\$101,929	\$101,929	\$467,840	\$7.63
PER MEAL COST, DAS	\$7.63	\$7.63	\$7.63	\$7.63	\$7.63	
PER MEAL COST (with NCQA), DAS	\$7.63	\$7.63	\$7.63	\$7.63	\$7.63	
Non DAS Revenues						
Project Income	\$6,779	\$4,263	\$4,263	\$4,263	\$19,568	\$0.32
Agency Cash- Fundraising						
Agency In-kind Volunteer	\$23,403	\$14,720	\$14,720	\$14,720	\$67,563	\$1.10
Total Non DAS Revenue	\$30,182	\$18,983	\$18,983	\$18,983	\$87,131	\$1.42
PER MEAL COST, Non DAS	\$1.42	\$1.42	\$1.42	\$1.42	\$1.42	
PER MEAL COST (with NCQA), Non DAS	\$1.42	\$1.42	\$1.42	\$1.42	\$1.42	
TOTAL DAS AND NON DAS REVENUE	\$192,235	\$120,912	\$120,912	\$120,912	\$554,971	\$9.05
PER MEAL COST, Total	\$9.05	\$9.05	\$9.05	\$9.05	\$9.05	
PER MEAL COST (with NCQA), Total	\$9.05	\$9.05	\$9.05	\$9.05	\$9.05	
Full Time Equivalent (FTE)	1.10	1.10	1.10	1.10	4.42	
Prepared by:	Victor de la Rocha, Controller (469) 247-7836				Date: 04/12/21	
HSA-CO Review Signature:	_____					
HSA #1						10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	21,239	13,359	13,359	13,359	61,316
DAS Operating Expenses					
<u>Expenditure Category</u>					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$1,200	\$755	\$755	\$755	\$3,465
Office Supplies, Postage	\$1,709	\$1,076	\$1,076	\$1,076	\$4,937
Insurance	\$1,435	\$903	\$903	\$903	\$4,144
<u>Food Cost</u>					
Raw Food <i>per meal \$1.50</i>	\$31,859	\$20,039	\$20,039	\$20,039	\$91,976
Cong Food Svc Supplies <i>per meal \$0.24</i>	\$5,097	\$3,206	\$3,206	\$3,206	\$14,715
Catered Meals <i>per meal</i>					
<u>Other</u>					
Stipends	\$371	\$233	\$233	\$233	\$1,070
Auto - Fuel, Insurance & Misc.	\$3,225	\$2,028	\$2,028	\$2,028	\$9,309
Total DAS Operating Expenses	\$44,896	\$28,240	\$28,240	\$28,240	\$129,616
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$5,028	\$3,163	\$3,163	\$3,163	\$14,516
<u>Food Cost</u>					
Raw Food <i>per meal \$0.28</i>	\$5,844	\$3,676	\$3,676	\$3,676	\$16,872
Cong Food Svc Supplies <i>per meal \$0.04</i>	\$935	\$588	\$588	\$588	\$2,699
Total Non DAS Operating Expenses	\$11,807	\$7,427	\$7,427	\$7,427	\$34,087
Total DAS and Non DAS Operating Expenses	\$56,703	\$35,667	\$35,667	\$35,667	\$163,703
HSA #3					10/25/2016

Appendix A - Services to be Provided
Episcopal Community Services
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Episcopal Community Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>
<p>LGBTQ+</p>	<p>An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.</p>

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	215	215	215	215
Number of Meals	8,078	8,078	8,078	8,078

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
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11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
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15. For assistance with reporting and contract requirements, please contact:
 Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Rocio Duenas
 Contract Manager
 HSA OCM
 email: rocio.duenas@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-

GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
EPISCOPAL COMMUNITY SERVICES OF SF						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for () older adults or (X) adults with disabilities						
Budget Reference Page No.(s) _____						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	8,078	8,078	8,078	8,078	32,312	
DAS Expenditures						
Salaries & Benefits	\$36,674	\$36,674	\$36,674	\$36,674	\$146,696	\$4.54
Operating Expenses	\$23,103	\$23,103	\$23,103	\$23,103	\$92,412	\$2.86
Subtotal	\$59,777	\$59,777	\$59,777	\$59,777	\$239,108	\$7.40
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$5,978	\$5,978	\$5,978	\$5,978	\$23,912	\$0.74
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total DAS Expenditures	\$65,755	\$65,755	\$65,755	\$65,755	\$263,020	\$8.14
Non DAS Expenditures						
Salaries & Benefits	\$34,678	\$34,678	\$34,678	\$34,678	\$138,712	\$4.29
Operating Expenses	\$25,923	\$25,923	\$25,923	\$25,923	\$103,693	\$3.21
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$60,601	\$60,601	\$60,601	\$60,601	\$242,405	\$7.50
TOTAL DAS AND NON DAS EXPEDITURES	\$126,356	\$126,356	\$126,356	\$126,356	\$505,425	\$15.64
DAS Revenues						
Meals- General Fund	\$65,755	\$65,755	\$65,755	\$65,755	\$263,020	\$8.14
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$65,755	\$65,755	\$65,755	\$65,755	\$263,020	\$8.14
PER MEAL COST, DAS	\$8.14	\$8.14	\$8.14	\$8.14	\$8.14	
PER MEAL COST (with NCQA), DAS	\$8.14	\$8.14	\$8.14	\$8.14	\$8.14	
Non DAS Revenues						
Project Income	\$400	\$400	\$400	\$400	\$1,600	\$0.05
Agency Cash- Fundraising	\$60,202	\$60,202	\$60,202	\$60,202	\$240,808	\$7.45
Agency In-kind Volunteer						
Total Non DAS Revenue	\$60,602	\$60,602	\$60,602	\$60,602	\$242,408	\$7.50
PER MEAL COST, Non DAS	\$7.50	\$7.50	\$7.50	\$7.50	\$7.50	
PER MEAL COST (with NCQA), Non DAS	\$7.50	\$7.50	\$7.50	\$7.50	\$7.50	
TOTAL DAS AND NON DAS REVENUE	\$126,357	\$126,357	\$126,357	\$126,357	\$505,428	\$15.64
PER MEAL COST, Total	\$15.64	\$15.64	\$15.64	\$15.64	\$15.64	
PER MEAL COST (with NCQA), Total	\$15.64	\$15.64	\$15.64	\$15.64	\$15.64	
Full Time Equivalent (FTE)	7.00	7.00	7.00	7.00	28.00	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Chef and Culinary Training Instructor	\$78,191	0.51	0.15	0.08	\$6,029	\$6,029	\$6,029	\$6,029	\$24,116
Director of Impact and Analytics	\$154,302	0.51	0.03	0.02	\$2,379	\$2,379	\$2,379	\$2,379	\$9,516
Assistant Chef	\$64,855	0.51	0.15	0.08	\$5,000	\$5,000	\$5,000	\$5,000	\$20,000
Database/Compliance Specialist	\$77,516	0.51	0.03	0.02	\$1,195	\$1,195	\$1,195	\$1,195	\$4,780
Culinary Training Manager	\$91,729	0.51	0.15	0.08	\$7,072	\$7,072	\$7,072	\$7,072	\$28,288
Part-Time Cook	\$44,396	0.51	0.12	0.06	\$2,738	\$2,738	\$2,738	\$2,738	\$10,952
Part- Time Delivery Driver	\$44,396	0.51	0.07	0.04	\$1,597	\$1,597	\$1,597	\$1,597	\$6,388
Totals	\$555,385	3.60	70.00%	0.36	\$26,010	\$26,010	\$26,010	\$26,010	\$104,040
Fringe Benefits Rate	41.00%								
Employee Fringe Benefits	\$227,708				\$10,664	\$10,664	\$10,664	\$10,664	\$42,656
Total DAS Salaries and Benefits	\$783,093				\$36,674	\$36,674	\$36,674	\$36,674	\$146,696
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Chef and Culinary Training Instructor	\$78,191	0.49	0.15	0.07	\$5,700	\$5,700	\$5,700	\$5,700	\$22,800
Director of Impact and Analytics	\$154,302	0.49	0.03	0.01	\$2,250	\$2,250	\$2,250	\$2,250	\$9,000
Assistant Chef	\$64,855	0.49	0.15	0.07	\$4,728	\$4,728	\$4,728	\$4,728	\$18,912
Database/Compliance Specialist	\$77,516	0.49	0.03	0.01	\$1,130	\$1,130	\$1,130	\$1,130	\$4,520
Culinary Training Manager	\$91,729	0.49	0.15	0.07	\$6,687	\$6,687	\$6,687	\$6,687	\$26,748
Part-Time Cook	\$44,396	0.49	0.12	0.06	\$2,589	\$2,589	\$2,589	\$2,589	\$10,356
Part- Time Delivery Driver	\$44,396	0.49	0.07	0.03	\$1,510	\$1,510	\$1,510	\$1,510	\$6,040
Totals	\$555,385	3.40	70.00%	0.34	\$24,594	\$24,594	\$24,594	\$24,594	\$98,376
Fringe Benefits Rate	41.00%								
Employee Fringe Benefits	\$227,708				\$10,084	\$10,084	\$10,084	\$10,084	\$40,336
Total Non DAS Salaries and Benefits	\$783,093				\$34,678	\$34,678	\$34,678	\$34,678	\$138,712
Total DAS and Non DAS Salaries and	\$1,566,186				\$71,352	\$71,352	\$71,352	\$71,352	\$285,408

HSA #2

10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	8,078	8,078	8,078	8,078	32,312
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage	\$31	\$31	\$31	\$31	\$123
Building Maintenance Supplies and Repair	\$1,174	\$1,174	\$1,174	\$1,174	\$4,698
Printing and Reproduction	\$67	\$67	\$67	\$67	\$267
Insurance	\$1,054	\$1,054	\$1,054	\$1,054	\$4,215
Staff Recruitment	\$33	\$33	\$33	\$33	\$134
Auto/Gas/Oil Maintenance: Van	\$984	\$984	\$984	\$984	\$3,937
IT Equipment	\$41	\$41	\$41	\$41	\$164
Food Cost					
Raw Food <i>per meal \$4.40</i>	\$18,283	\$18,283	\$18,283	\$18,283	\$73,134
Cong Food Svc Supplies <i>per meal \$0.22</i>	\$913	\$913	\$913	\$913	\$3,654
Catered Meals <i>per meal</i>					
Other					
Equipment Repairs	\$463	\$463	\$463	\$463	\$1,850
Program Supplies	\$59	\$59	\$59	\$59	\$236
Total DAS Operating Expenses	\$23,103	\$23,103	\$23,103	\$23,103	\$92,412
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage	\$29	\$29	\$29	\$29	\$117
Building Maintenance Supplies and Repair	\$1,111	\$1,111	\$1,111	\$1,111	\$4,442
Printing and Reproduction	\$63	\$63	\$63	\$63	\$253
Insurance	\$996	\$996	\$996	\$996	\$3,985
Staff Recruitment	\$32	\$32	\$32	\$32	\$126
Auto/Gas/Oil Maintenance: Van	\$931	\$931	\$931	\$931	\$3,723
IT Equipment	\$39	\$39	\$39	\$39	\$156
Food Cost					
Raw Food <i>per meal \$5.44</i>	\$21,366	\$21,366	\$21,366	\$21,366	\$85,464
Cong Food Svc Supplies <i>per meal \$0.22</i>	\$864	\$864	\$864	\$864	\$3,454
Catered Meals <i>per meal</i>					
Other					
Equipment Repairs	437.4	437.4	437.4	437.4	\$1,750
Program Supplies	55.89	55.89	55.89	55.89	\$224
Total Non DAS Operating Expenses	\$25,923	\$25,923	\$25,923	\$25,923	\$103,693
Total DAS and Non DAS Operating Expenses	\$49,026	\$49,026	\$49,026	\$49,026	\$196,105
HSA #3					10/25/2016

Appendix A - Services to be Provided
Glide Foundation
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Glide Foundation
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>
<p>LGBTQ+</p>	<p>An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.</p>

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
- (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
- 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
- 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
- 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
- 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
- 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

- 1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	80	40	40	40
Number of Meals	11,000	5,684	5,684	5,684

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.

11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:
Tiffany Kearney, RD
Program Analyst & Lead Nutritionist
DAS OCP
email: Tiffany.Kearney@sfgov.org

and

Tara Alvarez
Contract Manager
HSA OCM
email: Tara.Alvarez@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-

GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
Board of Trustees of the Glide Foundation						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for () older adults or (X) adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	11,000	5,684	5,684	5,684	28,052	
DAS Expenditures						
Salaries & Benefits	\$14,335	\$8,362	\$8,362	\$8,362	\$39,421	\$1.41
Operating Expenses	\$34,311	\$16,775	\$16,775	\$16,775	\$84,636	\$3.02
Subtotal	\$48,646	\$25,137	\$25,137	\$25,137	\$124,057	\$4.42
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$4,865	\$2,514	\$2,514	\$2,514	\$12,407	\$0.44
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total DAS Expenditures	\$53,511	\$27,651	\$27,651	\$27,651	\$136,464	\$4.86
Non DAS Expenditures						
Salaries & Benefits	\$12,981	\$12,981	\$12,981	\$12,981	\$51,924	\$1.85
Operating Expenses	\$5,624	\$5,624	\$5,624	\$5,624	\$22,496	\$0.80
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$18,605	\$18,605	\$18,605	\$18,605	\$74,420	\$2.65
TOTAL DAS AND NON DAS EXPEDITURES	\$72,116	\$46,256	\$46,256	\$46,256	\$210,884	\$7.52
DAS Revenues						
Meals- General Fund	\$53,511	\$27,651	\$27,651	\$27,651	\$136,464	\$4.86
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$53,511	\$27,651	\$27,651	\$27,651	\$136,464	\$4.86
PER MEAL COST, DAS	\$4.86	\$4.86	\$4.86	\$4.86	\$4.86	
PER MEAL COST (with NCQA), DAS	\$4.86	\$4.86	\$4.86	\$4.86	\$4.86	
Non DAS Revenues						
Project Income						
Agency Cash- Fundraising	\$16,900	\$8,730	\$8,730	\$8,730	\$43,090	\$1.54
Agency In-kind Volunteer						
Total Non DAS Revenue	\$16,900	\$8,730	\$8,730	\$8,730	\$43,090	\$1.54
PER MEAL COST, Non DAS	\$1.54	\$1.54	\$1.54	\$1.54	\$1.54	
PER MEAL COST (with NCQA), Non DAS	\$1.54	\$1.54	\$1.54	\$1.54	\$1.54	
TOTAL DAS AND NON DAS REVENUE	\$70,411	\$36,381	\$36,381	\$36,381	\$179,554	\$6.40
PER MEAL COST, Total	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	
PER MEAL COST (with NCQA), Total	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	
Full Time Equivalent (FTE)	13.00	13.00	13.00	13.00	52.00	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	FY 21/22 Adjusted FTE	FY 22 - 25 Adjusted FTE	Budgeted Salary				
Chef	\$41,327	100%	4.00%	0.04	0.02	\$1,694	\$1,168	\$1,168	\$1,168	\$5,198
Purchasing Agent	\$61,273	100%	2.00%	0.02	0.02	\$1,225	\$1,225	\$1,225	\$1,225	\$4,900
Program Navigator	\$53,217	100%	8.00%	0.08	0.04	\$4,257	\$2,129	\$2,129	\$2,129	\$10,644
Program Navigator	\$50,282	100%	8.00%	0.08	0.04	\$4,023	\$2,011	\$2,011	\$2,011	\$10,056
Totals	\$206,099	4.00	22.00%	0.22	0.12	\$11,199	\$6,533	\$6,533	\$6,533	\$30,798
Fringe Benefits Rate	28.00%									
Employee Fringe Benefits	\$57,708					\$3,136	\$1,829	\$1,829	\$1,829	\$8,623
Total DAS Salaries and Benefits	\$263,807					\$14,335	\$8,362	\$8,362	\$8,362	\$39,421
Non DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Time Salary for	Total FTE	by HSA	Adjusted FTE		Budgeted Salary				
Program Director	\$161,589	100%	2.00%	0.02		\$3,232	\$3,232	\$3,232	\$3,232	\$12,928
Program Manager	\$89,255	100%	2.00%	0.02		\$1,785	\$1,785	\$1,785	\$1,785	\$7,140
Chef	\$41,327	100%	1.00%	0.01		\$413	\$413	\$413	\$413	\$1,652
Shift Lead	\$53,839	100%	3.00%	0.03		\$1,615	\$1,615	\$1,615	\$1,615	\$6,460
Shift Lead	\$47,240	100%	3.00%	0.03		\$1,417	\$1,417	\$1,417	\$1,417	\$5,668
Purchasing Agent	\$61,273	100%	2.00%	0.02		\$1,225	\$1,225	\$1,225	\$1,225	\$4,900
Dishwasher (2)	\$75,305	100%	3.00%	0.03		\$2,259	\$2,259	\$2,259	\$2,259	\$9,036
Program Navigator	\$53,217	100%	1.00%	0.01		\$532	\$532	\$532	\$532	\$2,128
Program Navigator	\$50,282	100%	1.00%	0.01		\$503	\$503	\$503	\$503	\$2,012
Totals	\$633,327	9.00	18.00%	0.18		\$12,981	\$12,981	\$12,981	\$12,981	\$51,924
Fringe Benefits Rate										
Employee Fringe Benefits										
Total Non DAS Salaries and Benefits	\$633,327					\$12,981	\$12,981	\$12,981	\$12,981	\$51,924
Total DAS and Non DAS Salaries and Benefits	\$897,133					\$27,316	\$21,343	\$21,343	\$21,343	\$91,345

HSA #2

10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
 (Same as Line 11 on HSA #1)

Operating Expense Detail

	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Annual # Meals Contracted	11,000	5,684	5,684	5,684	28,052
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$1,565	\$814	\$814	\$814	\$4,007
Utilities (Elec, Water, Gas, Phone, Garbage)	\$118	\$62	\$62	\$62	\$304
Office Supplies, Postage	\$713	\$371	\$371	\$371	\$1,826
Building Maintenance Supplies and Repair	\$2,273	\$1,182	\$1,182	\$1,182	\$5,819
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment	\$652	\$339	\$339	\$339	\$1,669
Occupancy	\$15,278	\$7,140	\$7,140	\$7,140	\$36,698
Small equipment & Supplies	\$101	\$53	\$53	\$53	\$260
Information Technology	\$2,183	\$905	\$905	\$905	\$4,898
Food storage/Refrigeration	\$201	\$105	\$105	\$105	\$516
Garbage & Recycling	\$887	\$461	\$461	\$461	\$2,270
<u>Food Cost</u>					
Raw Food <i>per meal \$0.76</i>	\$8,360	\$4,320	\$4,320	\$4,320	\$21,320
Cong Food Svc Supplies <i>per meal \$0.18</i>	\$1,980	\$1,023	\$1,023	\$1,023	\$5,049
Catered Meals <i>per meal</i>					
Total DAS Operating Expenses	\$34,311	\$16,775	\$16,775	\$16,775	\$84,636
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$28	\$28	\$28	\$28	\$112
Office Supplies, Postage	\$30	\$30	\$30	\$30	\$120
Building Maintenance Supplies and Repair	\$568	\$568	\$568	\$568	\$2,272
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Occupancy	\$3,820	\$3,820	\$3,820	\$3,820	\$15,280
Rental of Equipment	\$163	\$163	\$163	\$163	\$652
Small equipment & Supplies	\$25	\$25	\$25	\$25	\$100
Information Technology	\$546	\$546	\$546	\$546	\$2,184
Food storage/Refrigeration	\$222	\$222	\$222	\$222	\$888
Garbage & Recycling	\$222	\$222	\$222	\$222	\$888
<u>Food Cost</u>					
Raw Food <i>per meal</i>					
Cong Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal</i>					
Total Non DAS Operating Expenses	\$5,624	\$5,624	\$5,624	\$5,624	\$22,496
Total DAS and Non DAS Operating Expenses	\$39,935	\$22,399	\$22,399	\$22,399	\$107,132
HSA #3					10/25/2016

Appendix A - Services to be Provided
Project Open Hand
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Project Open Hand
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>
<p>LGBTQ+</p>	<p>An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.</p>

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	870	725	725	725
Number of Meals	57,560	47,982	47,982	47,982

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.

11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Tara Alvarez
 Contract Manager
 HSA OCM
 email: tara.alvarez@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected

and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name PROJECT OPEN HAND						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for () older adults or (X) adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	57,560	47,982	47,982	47,982	201,506	
DAS Expenditures						
Salaries & Benefits	\$336,066	\$336,066	\$336,066	\$336,066	\$1,344,264	\$6.67
Operating Expenses	\$134,879	\$56,514	\$56,514	\$56,514	\$304,421	\$1.51
Subtotal	\$470,945	\$392,580	\$392,580	\$392,580	\$1,648,685	\$8.18
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$47,095	\$39,258	\$39,258	\$39,258	\$164,869	\$0.82
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total DAS Expenditures	\$518,040	\$431,838	\$431,838	\$431,838	\$1,813,554	\$9.00
Non DAS Expenditures						
Salaries & Benefits	\$154,769	\$154,769	\$154,769	\$154,769	\$619,076	\$3.07
Operating Expenses	\$181,375	\$236,566	\$237,359	\$238,175	\$893,475	\$4.43
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$336,144	\$391,335	\$392,128	\$392,944	\$1,512,551	\$7.51
TOTAL DAS AND NON DAS EXPEDITURES	\$854,184	\$823,173	\$823,966	\$824,782	\$3,326,105	\$16.51
DAS Revenues						
Meals- General Fund	\$518,040	\$431,838	\$431,838	\$431,838	\$1,813,554	\$9.00
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$518,040	\$431,838	\$431,838	\$431,838	\$1,813,554	\$9.00
PER MEAL COST, DAS	\$9.00	\$9.00	\$9.00	\$9.00	\$9.00	
PER MEAL COST (with NCQA), DAS	\$9.00	\$9.00	\$9.00	\$9.00	\$9.00	
Non DAS Revenues						
Project Income						
Agency Cash- Fundraising	\$220,036	\$275,226	\$276,019	\$276,836	\$1,048,117	\$5.20
Agency In-kind Volunteer	\$22,604	\$22,604	\$22,604	\$22,604	\$90,418	\$0.45
Agency Property	\$93,504	\$93,504	\$93,504	\$93,504	\$374,016	\$1.86
Total Non DAS Revenue	\$336,144	\$391,335	\$392,128	\$392,944	\$1,512,551	\$7.51
PER MEAL COST, Non DAS	\$5.84	\$8.16	\$8.17	\$8.19	\$7.51	
PER MEAL COST (with NCQA), Non DAS	\$5.84	\$8.16	\$8.17	\$8.19	\$7.51	
TOTAL DAS AND NON DAS REVENUE	\$854,184	\$823,173	\$823,966	\$824,782	\$3,326,105	\$16.51
PER MEAL COST, Total	\$14.84	\$17.16	\$17.17	\$17.19	\$16.51	
PER MEAL COST (with NCQA), Total	\$14.84	\$17.16	\$17.17	\$17.19	\$16.51	
Full Time Equivalent (FTE)	13.59	13.59	13.59	13.59	54.35	
Prepared by:						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Program Staff:									
Sites Manager	\$67,420	0.18	100.00%	0.18	\$12,136	\$12,136	\$12,136	\$12,136	\$48,544
Sites Manager	\$68,624	0.18	100.00%	0.18	\$12,352	\$12,352	\$12,352	\$12,352	\$49,408
CNP Assistant	\$47,433	0.20	100.00%	0.20	\$9,487	\$9,487	\$9,487	\$9,487	\$37,948
CNP Assistant Manager	\$65,759	0.10	100.00%	0.10	\$6,576	\$6,576	\$6,576	\$6,576	\$26,304
Director, CNP	\$86,572	0.10	100.00%	0.10	\$8,657	\$8,657	\$8,657	\$8,657	\$34,628
Aquatic Park Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.08	100.00%	0.08	\$2,956	\$2,956	\$2,956	\$2,956	\$11,824
Booker T Washington									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Castro Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Downtown Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.10	100.00%	0.10	\$3,942	\$3,942	\$3,942	\$3,942	\$15,768
Community Nutrition Site Coordinator	\$39,416	0.10	100.00%	0.10	\$3,942	\$3,942	\$3,942	\$3,942	\$15,768
Community Nutrition Site Coordinator	\$39,416	0.05	100.00%	0.05	\$1,971	\$1,971	\$1,971	\$1,971	\$7,884
Community Nutrition Site Coordinator	\$39,416	0.05	100.00%	0.05	\$1,971	\$1,971	\$1,971	\$1,971	\$7,884
IT Bookman									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Polk Street									
Community Nutrition Site Coordinator	\$39,416	0.50	100.00%	0.50	\$19,708	\$19,708	\$19,708	\$19,708	\$78,832
Community Nutrition Site Coordinator	\$39,416	0.50	100.00%	0.50	\$19,708	\$19,708	\$19,708	\$19,708	\$78,832
Pomeroy Center									
Community Nutrition Site Coordinator	\$39,416	0.50	100.00%	0.50	\$19,708	\$19,708	\$19,708	\$19,708	\$78,832
Community Nutrition Site Coordinator	\$39,416	0.50	100.00%	0.50	\$19,708	\$19,708	\$19,708	\$19,708	\$78,832
Richmond Senior Center									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Stanford Hotel									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.08	100.00%	0.08	\$2,956	\$2,956	\$2,956	\$2,956	\$11,824
Community Nutrition Site Coordinator	\$39,416	0.08	100.00%	0.08	\$2,956	\$2,956	\$2,956	\$2,956	\$11,824
Telegraph Hill Neighborhood Center									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Visitacion Valley Community Center									
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.15	100.00%	0.15	\$5,912	\$5,912	\$5,912	\$5,912	\$23,648
Community Nutrition Site Coordinator	\$39,416	0.08	100.00%	0.08	\$2,956	\$2,956	\$2,956	\$2,956	\$11,824
Community Nutrition Site Coordinator	\$39,416	0.08	100.00%	0.08	\$2,956	\$2,956	\$2,956	\$2,956	\$11,824
Kitchen Staff:									
Cook I	\$37,513	0.10	6.00%	0.01	\$225	\$225	\$225	\$225	\$900
Cook I	\$37,513	0.10	6.00%	0.01	\$225	\$225	\$225	\$225	\$900
Cook I	\$37,513	0.05	6.00%	0.00	\$113	\$113	\$113	\$113	\$452
Cook II	\$39,720	0.10	6.00%	0.01	\$238	\$238	\$238	\$238	\$952
Cook II	\$39,720	0.10	6.00%	0.01	\$238	\$238	\$238	\$238	\$952
Cook II	\$39,720	0.10	6.00%	0.01	\$238	\$238	\$238	\$238	\$952
Cook II	\$39,720	0.05	6.00%	0.00	\$119	\$119	\$119	\$119	\$476
Lead Cook	\$44,005	0.10	6.00%	0.01	\$264	\$264	\$264	\$264	\$1,056
Sous Chef	\$47,518	0.05	6.00%	0.00	\$143	\$143	\$143	\$143	\$572
Porter I	\$37,578	0.10	6.00%	0.01	\$225	\$225	\$225	\$225	\$900
Porter I	\$37,578	0.10	6.00%	0.01	\$225	\$225	\$225	\$225	\$900
Porter I	\$37,578	0.10	6.00%	0.01	\$225	\$225	\$225	\$225	\$900
Porter I	\$37,578	0.10	6.00%	0.01	\$225	\$225	\$225	\$225	\$900
Porter I	\$37,578	0.04	6.00%	0.00	\$90	\$90	\$90	\$90	\$360
Porter I	\$37,578	0.04	6.00%	0.00	\$90	\$90	\$90	\$90	\$360
Porter I	\$37,578	0.02	6.00%	0.00	\$54	\$54	\$54	\$54	\$216
Porter I	\$37,578	0.02	6.00%	0.00	\$54	\$54	\$54	\$54	\$216
Kitchen Administrative Manager	\$70,116	0.05	6.00%	0.00	\$210	\$210	\$210	\$210	\$840
Kitchen Office Administrator	\$50,211	0.07	6.00%	0.00	\$211	\$211	\$211	\$211	\$844
Director, Kitchen Operations	\$86,570	0.07	6.00%	0.00	\$364	\$364	\$364	\$364	\$1,456
Executive Chef	\$93,330	0.05	6.00%	0.00	\$280	\$280	\$280	\$280	\$1,120
Purchasing Supervisor	\$60,389	0.06	6.00%	0.00	\$217	\$217	\$217	\$217	\$868
Kitchen Operations Coordinator II	\$40,560	0.06	6.00%	0.00	\$146	\$146	\$146	\$146	\$584
Kitchen Operations Coordinator II	\$40,560	0.05	6.00%	0.00	\$122	\$122	\$122	\$122	\$488
Kitchen Logistics Supervisor	\$49,962	0.02	6.00%	0.00	\$60	\$60	\$60	\$60	\$240
Inventory Operations Coordinator II	\$41,475	0.04	6.00%	0.00	\$100	\$100	\$100	\$100	\$400
Inventory Operations Coordinator II	\$41,475	0.03	6.00%	0.00	\$75	\$75	\$75	\$75	\$300
Distribution Staff:									
Driver	\$42,453	0.06	6.00%	0.00	\$143	\$143	\$143	\$143	\$572
Driver	\$39,104	0.06	6.00%	0.00	\$132	\$132	\$132	\$132	\$528
Driver	\$41,392	0.06	6.00%	0.00	\$140	\$140	\$140	\$140	\$560
Driver	\$39,104	0.02	6.00%	0.00	\$47	\$47	\$47	\$47	\$188
Director, Distribution	\$82,347	0.01	6.00%	0.00	\$49	\$49	\$49	\$49	\$196

Operations Staff:									
Security Manager	\$78,021	0.16	6.00%	0.01	\$749	\$749	\$749	\$749	\$2,996
Director, Operations	\$84,469	0.02	6.00%	0.00	\$76	\$76	\$76	\$76	\$304
Totals	\$3,045,143	7.69	3404.00%	5.66	\$243,526	\$243,526	\$243,526	\$243,526	\$974,104
Fringe Benefits Rate	38.00%								
Employee Fringe Benefits	\$1,157,154				\$92,540	\$92,540	\$92,540	\$92,540	\$370,160
Total DAS Salaries and Benefits	\$4,202,297				\$336,066	\$336,066	\$336,066	\$336,066	\$1,344,264
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Kitchen Staff:									
Cook I	\$37,513	0.10	94.00%	0.09	\$3,526	\$3,526	\$3,526	\$3,526	\$14,104
Cook I	\$37,513	0.10	94.00%	0.09	\$3,526	\$3,526	\$3,526	\$3,526	\$14,104
Cook I	\$37,513	0.05	94.00%	0.05	\$1,763	\$1,763	\$1,763	\$1,763	\$7,052
Cook II	\$39,720	0.10	94.00%	0.09	\$3,734	\$3,734	\$3,734	\$3,734	\$14,936
Cook II	\$39,720	0.10	94.00%	0.09	\$3,734	\$3,734	\$3,734	\$3,734	\$14,936
Cook II	\$39,720	0.10	94.00%	0.09	\$3,734	\$3,734	\$3,734	\$3,734	\$14,936
Cook II	\$39,720	0.05	94.00%	0.05	\$1,867	\$1,867	\$1,867	\$1,867	\$7,468
Lead Cook	\$44,005	0.10	94.00%	0.09	\$4,136	\$4,136	\$4,136	\$4,136	\$16,544
Sous Chef	\$47,518	0.05	94.00%	0.05	\$2,233	\$2,233	\$2,233	\$2,233	\$8,932
Porter I	\$37,578	0.10	94.00%	0.09	\$3,532	\$3,532	\$3,532	\$3,532	\$14,128
Porter I	\$37,578	0.10	94.00%	0.09	\$3,532	\$3,532	\$3,532	\$3,532	\$14,128
Porter I	\$37,578	0.10	94.00%	0.09	\$3,532	\$3,532	\$3,532	\$3,532	\$14,128
Porter I	\$37,578	0.04	94.00%	0.04	\$1,413	\$1,413	\$1,413	\$1,413	\$5,652
Porter I	\$37,578	0.04	94.00%	0.04	\$1,413	\$1,413	\$1,413	\$1,413	\$5,652
Porter I	\$37,578	0.02	94.00%	0.02	\$839	\$839	\$839	\$839	\$3,356
Porter I	\$37,578	0.02	94.00%	0.02	\$839	\$839	\$839	\$839	\$3,356
Kitchen Administrative Manager	\$70,116	0.05	94.00%	0.05	\$3,295	\$3,295	\$3,295	\$3,295	\$13,180
Kitchen Office Administrator	\$50,211	0.07	94.00%	0.07	\$3,304	\$3,304	\$3,304	\$3,304	\$13,216
Director, Kitchen Operations	\$86,570	0.07	94.00%	0.07	\$5,696	\$5,696	\$5,696	\$5,696	\$22,784
Executive Chef	\$93,330	0.05	94.00%	0.05	\$4,387	\$4,387	\$4,387	\$4,387	\$17,548
Purchasing Supervisor	\$60,389	0.06	94.00%	0.06	\$3,406	\$3,406	\$3,406	\$3,406	\$13,624
Kitchen Operations Coordinator II	\$40,560	0.06	94.00%	0.06	\$2,288	\$2,288	\$2,288	\$2,288	\$9,152
Kitchen Operations Coordinator II	\$40,560	0.05	94.00%	0.05	\$1,906	\$1,906	\$1,906	\$1,906	\$7,624
Kitchen Logistics Supervisor	\$49,962	0.02	94.00%	0.02	\$939	\$939	\$939	\$939	\$3,756
Inventory Operations Coordinator II	\$41,475	0.04	94.00%	0.04	\$1,559	\$1,559	\$1,559	\$1,559	\$6,236
Inventory Operations Coordinator II	\$41,475	0.03	94.00%	0.03	\$1,170	\$1,170	\$1,170	\$1,170	\$4,680
Distribution Staff:									
Driver	\$42,453	0.06	94.00%	0.05	\$2,245	\$2,245	\$2,245	\$2,245	\$8,980
Driver	\$39,104	0.06	94.00%	0.05	\$2,068	\$2,068	\$2,068	\$2,068	\$8,272
Driver	\$41,392	0.06	94.00%	0.05	\$2,189	\$2,189	\$2,189	\$2,189	\$8,756
Driver	\$39,104	0.02	94.00%	0.02	\$735	\$735	\$735	\$735	\$2,940
Director, Distribution	\$82,347	0.01	94.00%	0.01	\$774	\$774	\$774	\$774	\$3,096
Operations Staff:									
Security Manager	\$78,021	0.16	94.00%	0.15	\$11,734	\$11,734	\$11,734	\$11,734	\$46,936
Director, Operations	\$84,469	0.02	94.00%	0.01	\$1,191	\$1,191	\$1,191	\$1,191	\$4,764
In-Kind									
Kitchen Volunteers	\$29,120	3.75	15.00%	0.5625	\$16,380	\$16,380	\$16,380	\$16,380	\$65,520
Totals	\$1,674,223	5.90	3211.00%	2.58	\$112,151	\$112,151	\$112,151	\$112,151	\$448,604
Fringe Benefits Rate	38.00%								
Employee Fringe Benefits	\$636,205				\$42,618	\$42,618	\$42,618	\$42,618	\$170,472
Total Non DAS Salaries and Benefits	\$2,310,428				\$154,769	\$154,769	\$154,769	\$154,769	\$619,076
Total DAS and Non DAS Salaries and Benefits	\$6,512,725				\$490,835	\$490,835	\$490,835	\$490,835	\$1,963,340

Program: Congregate meals for () older adults or (X) adults with disabilities
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
57,560	47,982	47,982	47,982	47,982	201,506
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property (see table at right)					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$1,638	\$1,640	\$1,640	\$1,640	\$6,557
Office Supplies, Postage	\$76	\$76	\$76	\$76	\$303
Building Maintenance Supplies and Repair	\$502	\$502	\$502	\$502	\$2,008
Printing and Reproduction					
Insurance	\$318	\$318	\$318	\$318	\$1,271
Staff Training	\$64	\$64	\$64	\$64	\$254
Staff Travel-(Local & Out of Town)	\$71	\$71	\$71	\$71	\$284
Rental of Equipment					
Food Cost					
	<u>FY21/22</u>	<u>FY23-25</u>			
Raw Food <i>per meal</i>	\$1.90	\$0.66	\$109,551	\$31,663	\$31,663
Cong Food Svc Supplies <i>per meal</i>	\$0.05	\$0.05	\$2,878	\$2,399	\$2,399
Catered Meals <i>per meal</i>					
Consultant					
Security at Polk Street-see table at right	\$18,850	\$18,850	\$18,850	\$18,850	\$75,400
Other					
Vehicle Fees (Fuel, Maintenance,Parking)	\$376	\$376	\$376	\$376	\$1,505
Data Communication, Licenses, Dues	\$306	\$306	\$306	\$306	\$1,222
Other Supplies (Janitorial, Facilities)	\$250	\$250	\$250	\$250	\$1,001
Total DAS Operating Expenses	\$134,879	\$56,514	\$56,514	\$56,514	\$304,421
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Occupancy of Property	\$93,504	\$93,504	\$93,504	\$93,504	\$374,016
Utilities (Elec, Water, Gas, Phone, Garbage)	\$25,658	\$26,428	\$27,221	\$28,037	\$107,345
Office Supplies, Postage	\$1,187	\$1,187	\$1,187	\$1,187	\$4,749
Building Maintenance Supplies and Repair	\$7,866	\$7,866	\$7,866	\$7,866	\$31,464
Printing and Reproduction					
Insurance	\$4,979	\$4,979	\$4,979	\$4,979	\$19,917
Staff Training	\$995	\$995	\$995	\$995	\$3,982
Staff Travel-(Local & Out of Town)	\$1,113	\$1,113	\$1,113	\$1,113	\$4,452
Rental of Equipment					
Food Cost					
	<u>FY21/22</u>	<u>FY23-25</u>			
Raw Food <i>per meal</i>	\$0.35	\$1.59	\$19,959	\$76,296	\$76,296
Cong Food Svc Supplies <i>per meal</i>	\$0.20	\$0.20	\$11,512	\$9,596	\$9,596
Catered Meals <i>per meal</i>					
Other					
Vehicle Fees (Fuel, Maintenance,Parking)	\$5,893	\$5,893	\$5,893	\$5,893	\$23,571
Data Communication, Licenses, Dues	\$4,786	\$4,786	\$4,786	\$4,786	\$19,146
Other Supplies (Janitorial, Facilities)	\$3,922	\$3,922	\$3,922	\$3,922	\$15,687
Total Non DAS Operating Expenses	\$181,375	\$236,566	\$237,359	\$238,175	\$893,475
Total DAS and Non DAS Operating Expenses	\$316,254	\$293,080	\$293,873	\$294,689	\$1,197,896
HSA #3					10/25/2016

Appendix A - Services to be Provided
Russian American Community Services
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Russian American Community Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>
<p>LGBTQ+</p>	<p>An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.</p>

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	8	8	8	8
Number of Meals	1,506	1,420	1,420	1,420

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.

11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:
 Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Ella Lee
 Contract Manager
 HSA OCM
 email: ella.lee@sfgov.org

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-

GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
Russian American Community Services						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for () older adults or (x) adults with disabilities						
Budget Reference Page No.(s) _____						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	1,506	1,420	1,420	1,420	5,766	
DAS Expenditures						
Salaries & Benefits	\$7,027	\$7,027	\$7,027	\$7,027	\$28,108	\$4.87
Operating Expenses	\$4,240	\$3,998	\$3,998	\$3,998	\$16,234	\$2.82
Subtotal	\$11,267	\$11,025	\$11,025	\$11,025	\$44,342	\$7.69
Indirect Percentage (%)	6.00%	2.15%	2.15%	2.15%	3.11%	
Indirect Cost	\$676	\$236	\$236	\$236	\$1,384	\$0.24
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total DAS Expenditures	\$11,943	\$11,261	\$11,261	\$11,261	\$45,726	\$7.93
Non DAS Expenditures						
Salaries & Benefits						
Operating Expenses						
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures						
TOTAL DAS AND NON DAS EXPEDITURES	\$11,943	\$11,261	\$11,261	\$11,261	\$45,726	\$7.93
DAS Revenues						
Meals- General Fund	\$11,943	\$11,261	\$11,261	\$11,261	\$45,726	\$7.93
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$11,943	\$11,261	\$11,261	\$11,261	\$45,726	\$7.93
PER MEAL COST, DAS	\$7.93	\$7.93	\$7.93	\$7.93	\$7.93	\$7.93
PER MEAL COST (with NCQA), DAS	\$7.93	\$7.93	\$7.93	\$7.93	\$7.93	\$7.93
Non DAS Revenues						
Project Income						
Agency Cash- Fundraising						
Agency In-kind Volunteer						
Total Non DAS Revenue						
PER MEAL COST (with NCQA), Non DAS						
TOTAL DAS AND NON DAS REVENUE	\$11,943	\$11,261	\$11,261	\$11,261	\$45,726	\$7.93
PER MEAL COST (with NCQA), Total	\$7.93	\$7.93	\$7.93	\$7.93	\$7.93	\$7.93
Full Time Equivalent (FTE)	0.16	0.16	0.16	0.16	0.66	
Prepared by:						Date:04/07/2021
HSA-CO Review Signature:	_____					
HSA #1						10/25/2016

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
substitutue kitchen labor	\$35,600	0.16	100.00%	0.16	\$5,869	\$5,869	\$5,869	\$5,869	\$23,476
Totals	\$35,600	0.16	100.00%	0.16	\$5,869	\$5,869	\$5,869	\$5,869	\$23,476
Fringe Benefits Rate	20.00%								
Employee Fringe Benefits	\$7,120				\$1,158	\$1,158	\$1,158	\$1,158	\$4,632
Total DAS Salaries and Benefits	\$42,720				\$7,027	\$7,027	\$7,027	\$7,027	\$28,108
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Totals									
Fringe Benefits Rate									
Employee Fringe Benefits									
Total Non DAS Salaries and Benefits									
Total DAS and Non DAS Salaries and Benefits	\$42,720				\$7,027	\$7,027	\$7,027	\$7,027	\$28,108

Program: Congregate meals for () older adults or (x) adults with disabilities

Russian American Community Services

Operating Expense Detail

			<u>FY 21/22</u>	<u>FY 22/23</u>	<u>FY 23/24</u>	<u>FY 24/25</u>	<u>Total</u>
Annual # Meals Contracted			1,506	1,420	1,420	1,420	5,766
DAS Operating Expenses							
<u>Expenditure Category</u>							
Rental of Property							
Utilities (Elec, Water, Gas, Phone, Garbage)							
Office Supplies, Postage							
Building Maintenance Supplies and Repair							
Printing and Reproduction							
Insurance							
Staff Training							
Staff Travel-(Local & Out of Town)							
Rental of Equipment							
<u>Food Cost</u>							
Raw Food	<i>per meal</i>	\$2.44	\$3,668	\$3,458	\$3,458	\$3,458	\$14,042
Cong Food Svc Supplies	<i>per meal</i>	\$0.38	\$572	\$540	\$540	\$540	\$2,192
Catered Meals	<i>per meal</i>						
Total DAS Operating Expenses			\$4,240	\$3,998	\$3,998	\$3,998	\$16,234
Non DAS Operating Expenses							
<u>Expenditure Category</u>							
Rental of Property							
Utilities (Elec, Water, Gas, Phone, Garbage)							
Office Supplies, Postage							
Building Maintenance Supplies and Repair							
Printing and Reproduction							
Insurance							
Staff Training							
Staff Travel-(Local & Out of Town)							
Rental of Equipment							
<u>Food Cost</u>							
Raw Food	<i>per meal</i>						
Cong Food Svc Supplies	<i>per meal</i>						
Catered Meals	<i>per meal</i>						
Total Non DAS Operating Expenses							
Total DAS and Non DAS Operating Expenses			\$4,240	\$3,998	\$3,998	\$3,998	\$16,234

Appendix A - Services to be Provided
Self Help for the Elderly
 Congregate Nutrition Services for Adults with Disabilities

July 1, 2021 – June 30, 2025

I. Purpose

The purpose of this grant is to provide congregate nutrition services for adults with disabilities living in the City and County of San Francisco. Congregate nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Congregate nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Self Help for the Elderly
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>
<p>LGBTQ+</p>	<p>An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.</p>

Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for enrollment and/or participation is not means tested. Consumers self-report income status.
Menu Planning and Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers’ physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)

Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who participates in congregate nutrition services and the grantee reflects consumer participation in CA-GetCare through enrollment.
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III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide congregate nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the location(s) and time(s) for the provision of congregate nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP.
2. Grantee will provide congregate nutrition services for adults with disabilities. The provision of services will include the following:
 - i. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day,

the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.

- iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in congregate nutrition services. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
4. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
 - i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation.
 - iv. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of quarterly congregate site monitoring reports.
 - v. Conduct and document an on-site HACCP safety and sanitation monitoring of each congregate meal site at least once per quarter and a minimum of four times during the fiscal year. The RD on staff, consultant RD, or a qualified staff member must conduct and document the results of the HACCP safety and sanitation monitoring for each site.
 - vi. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:

- (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
- vii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per meal site shall be a sample size of the average number of meals served daily.
 6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in the CCR Title 22 Regulations Sec. 7636.3 and DAS OCP policy memoranda.
 7. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
 8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
 9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	18	18	18	18
Number of Meals	4,726	3,728	3,728	3,728

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
4. Consumers feel a greater sense of connection to their community. Target: 85%.
5. Consumers feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to or greater than the average number of daily meals served by the grantee.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.

11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Nutritionist
DAS OCP
email:

and

Contract Manager
HSA OCM
email:

I. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff

regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
SELF-HELP FOR THE ELDERLY						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Congregate meals for () older adults or (X) adults with disabilities						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	4,726	3,728	3,728	3,728	15,910	
DAS Expenditures						
Salaries & Benefits	\$10,904	\$7,862	\$7,862	\$7,862	\$34,490	\$2.2
Operating Expenses	\$20,287	\$16,743	\$16,743	\$16,743	\$70,516	\$4.43
Subtotal	\$31,191	\$24,605	\$24,605	\$24,605	\$105,006	\$6.60
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$3,119	\$2,461	\$2,461	\$2,461	\$10,502	\$1
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total DAS Expenditures	\$34,310	\$27,066	\$27,066	\$27,066	\$115,508	\$7.26
Non DAS Expenditures						
Salaries & Benefits		\$3,042	\$3,042	\$3,042	\$9,126	\$1
Operating Expenses	\$7,376	\$5,720	\$5,720	\$5,720	\$24,536	\$2
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$7,376	\$8,762	\$8,762	\$8,762	\$33,662	\$2
TOTAL DAS AND NON DAS EXPEDITURES	\$41,686	\$35,828	\$35,828	\$35,828	\$149,170	\$9
DAS Revenues						
Meals- General Fund	\$34,310	\$27,066	\$27,066	\$27,066	\$115,508	\$7.26
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$34,310	\$27,066	\$27,066	\$27,066	\$115,508	\$7.26
PER MEAL COST, DAS	\$7.26	\$7.26	\$7.26	\$7.26	\$7.26	
PER MEAL COST (with NCQA), DAS	\$7.26	\$7.26	\$7.26	\$7.26	\$7.26	
Non DAS Revenues						
Project Income	\$7,089	\$5,592	\$5,592	\$5,592	\$23,865	\$1.50
Agency Cash- Fundraising	\$287	\$3,170	\$3,170	\$3,170	\$9,797	\$0.62
Agency In-kind Volunteer						
Total Non DAS Revenue	\$7,376	\$8,762	\$8,762	\$8,762	\$33,662	\$2.12
PER MEAL COST, Non DAS	\$1.56	\$2.35	\$2.35	\$2.35	\$2.12	
PER MEAL COST (with NCQA), Non DAS	\$1.56	\$2.35	\$2.35	\$2.35	\$2.12	
TOTAL DAS AND NON DAS REVENUE	\$41,686	\$35,828	\$35,828	\$35,828	\$149,170	\$9.38
PER MEAL COST, Total	\$8.82	\$9.61	\$9.61	\$9.61	\$9.38	
PER MEAL COST (with NCQA), Total	\$8.82	\$9.61	\$9.61	\$9.61	\$9.38	
Full Time Equivalent (FTE)	4.00	4.00	4.00	4.00	16.00	
Prepared by: Leny Nair						Date: 6/4/2021
HSA-CO Review Signature: _____						
HSA #1						10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: 06/04/2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Nutrition Director	\$92,700	1.00	4.00%	0.04	\$3,708	\$3,708	\$3,708	\$3,708	\$14,832
Center Supervisor	\$46,800	1.00	5.00%	0.05	\$2,340	\$2,340	\$2,340	\$2,340	\$9,360
Center supervisor	\$46,800	1.00	5.00%	0.05	\$2,340				\$2,340
Totals	\$186,300	3.00	14.00%	0.14	\$8,388	\$6,048	\$6,048	\$6,048	\$26,532
Fringe Benefits Rate	30.00%								
Employee Fringe Benefits	\$55,890				\$2,516	\$1,814	\$1,814	\$1,814	\$7,958
Total DAS Salaries and Benefits	\$242,190				\$10,904	\$7,862	\$7,862	\$7,862	\$34,490
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
	\$46,800	1.00	5.00%	0.05		\$2,340	\$2,340	\$2,340	\$7,020
Totals	\$46,800	1.00	5.00%	0.05		\$2,340	\$2,340	\$2,340	\$7,020
Fringe Benefits Rate	30.00%								
Employee Fringe Benefits	\$14,040					\$702	\$702	\$702	\$2,106
Total Non DAS Salaries and Benefits	\$60,840					\$3,042	\$3,042	\$3,042	\$9,126
Total DAS and Non DAS Salaries and Benefits	\$303,030				\$10,904	\$10,904	\$10,904	\$10,904	\$43,616

HSA #2

10/25/2016

Program: Congregate meals for () older adults or (X) adults with disabilities
 (Same as Line 11 on HSA #1)

Operating Expense Detail

	<u>FY 21/22</u>	<u>FY 22/23</u>	<u>FY 23/24</u>	<u>FY 24/25</u>	<u>Total</u>
Annual # Meals Contracted	4,726	3,728	3,728	3,728	15,910
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$633	\$1,291	\$1,291	\$1,291	\$4,506
Utilities (Elec, Water, Gas, Phone, Garbage)	\$200	\$200	\$200	\$200	\$800
Office Supplies, Postage	\$93				\$93
Building Maintenance Supplies and Repair	\$257	\$140	\$140	\$140	\$677
Printing and Reproduction					
Insurance	\$200	\$200	\$200	\$200	\$800
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal</i>					
Cong Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal \$4.00</i>	\$18,904	\$14,912	\$14,912	\$14,912	\$63,640
Total DAS Operating Expenses	\$20,287	\$16,743	\$16,743	\$16,743	\$70,516
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$700	\$42	\$42	\$42	\$826
Utilities (Elec, Water, Gas, Phone, Garbage)	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
Office Supplies, Postage	\$250	\$250	\$250	\$250	\$1,000
Building Maintenance Supplies and Repair					
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal</i>					
Cong Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal \$1.00</i>	\$4,726	\$3,728	\$3,728	\$3,728	\$15,910
Total Non DAS Operating Expenses	\$7,376	\$5,720	\$5,720	\$5,720	\$24,536
Total DAS and Non DAS Operating Expenses	\$27,663	\$22,463	\$22,463	\$22,463	\$95,052
HSA #3					10/25/2016

Home-Delivered Meal (HDM) Nutrition Services for Older Adults:

Centro Latino de San Francisco

Appendix A – Services to be Provided

Appendix B – Budget

Jewish Family and Children's Services

Appendix A – Services to be Provided

Appendix B – Budget

Kimochi

Appendix A – Services to be Provided

Appendix B – Budget

Meals on Wheels

Appendix A – Services to be Provided

Appendix B – Budget

On Lok Day Services

Appendix A – Services to be Provided

Appendix B – Budget

Russian American Community Services

Appendix A – Services to be Provided

Appendix B – Budget

Self-Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

Appendix A– Services to be Provided
Centro Latino de San Francisco
Home-Delivered Nutrition Services for Older Adults

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Centro Latino de San Francisco
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	158	123	123	123
Number of Meals	41975	29576	29576	29576

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved HDM intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and delivered
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. Grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Tahir Shaikh
 Contract Manager
 HSA OCM
 email: Tahir.Shaikh@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP-funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of

service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Centro Latino de San Francisco						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency						
Budget Reference Page No.(s)					Total	
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	FY 21/25	cost/meal
Annual # Meals Contracted	41,975	29,576	29,576	29,576	130,703	
DAS Expenditures						
Salaries & Benefits	\$203,525	\$140,778	\$140,778	\$140,778	\$625,859	\$4.79
Operating Expenses	\$96,406	\$70,556	\$70,556	\$70,556	\$308,074	\$2.36
Subtotal	\$299,931	\$211,334	\$211,334	\$211,334	\$933,933	\$7.15
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$29,993	\$21,133	\$21,133	\$21,133	\$93,392	\$0.71
Capital/Subcontractor Expenditures	\$27,591				\$27,591	\$0.21
NCQA Expenditures	\$44,388	\$36,128	\$36,128	\$36,128	\$152,772	\$1.17
Total DAS Expenditures	\$401,903	\$268,595	\$268,595	\$268,595	\$1,207,688	\$9.24
Non DAS Expenditures						
Salaries & Benefits	\$35,436	\$24,513	\$24,513	\$24,513	\$108,975	\$0.83
Operating Expenses	\$34,184	\$23,823	\$23,823	\$23,823	\$105,653	\$0.81
Total Non DAS Expenditures	\$69,620	\$48,336	\$48,336	\$48,336	\$214,628	\$1.64
TOTAL DAS AND NON DAS EXPEDITURES	\$471,523	\$316,931	\$316,931	\$316,931	\$1,422,316	\$10.88
DAS Revenues						
Meals- General Fund	\$329,924	\$232,467	\$232,467	\$232,467	\$1,027,325	\$7.86
OTO - New Vehicle	\$27,591				\$27,591	\$0.21
NCQA Fund	\$44,388	\$36,128	\$36,128	\$36,128	\$152,772	\$1.17
Total DAS Revenue	\$401,903	\$268,595	\$268,595	\$268,595	\$1,207,688	\$9.24
PER MEAL COST, DAS	\$7.86	\$7.86	\$7.86	\$7.86	\$8.07	
PER MEAL COST (with NCQA), DAS	\$9.57	\$9.08	\$9.08	\$9.08	\$9.24	
Non DAS Revenues						
Project Income	\$13,746	\$9,686	\$9,686	\$9,686	\$42,804	\$0.33
Agency Cash- Fundraising						
Agency In-kind Volunteer	\$55,874	\$38,650	\$38,650	\$38,650	\$171,824	\$1.31
Total Non DAS Revenue	\$69,620	\$48,336	\$48,336	\$48,336	\$214,628	\$1.64
PER MEAL COST, Non DAS	\$1.66	\$1.63	\$1.63	\$1.63	\$1.64	
PER MEAL COST (with NCQA), Non DAS	\$1.66	\$1.63	\$1.63	\$1.63	\$1.64	
TOTAL DAS AND NON DAS REVENUE	\$471,523	\$316,931	\$316,931	\$316,931	\$1,422,316	\$10.88
PER MEAL COST, Total	\$9.52	\$9.49	\$9.49	\$9.49	\$9.71	
PER MEAL COST (with NCQA), Total	\$11.23	\$10.71	\$10.71	\$10.71	\$10.88	
Full Time Equivalent (FTE)	1.30	1.30	1.30	1.30	5.20	
Prepared by:	Victor de la Rocha, Controller (469) 247-7836				Document Date: 06/09/21	
HSA-CO Review Signature:	_____					
HSA #1						10/25/2016

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: 06/09/21

Salaries & Benefits Detail

DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	FY 21/25
Position Title									
Nutrition Sites & Programs Manager	\$54,080	0.11	100.00%	0.11	\$5,710	\$3,950	\$3,950	\$3,950	\$17,560
Nutritionist	\$52,000	0.24	100.00%	0.24	\$12,307	\$8,513	\$8,513	\$8,513	\$37,845
Head Cook	\$45,760	0.24	100.00%	0.24	\$11,112	\$7,686	\$7,686	\$7,686	\$34,170
Cook	\$41,600	0.16	100.00%	0.16	\$6,584	\$4,554	\$4,554	\$4,554	\$20,246
Site Manager Star Hotel/Cook	\$43,680	0.24	100.00%	0.24	\$10,277	\$7,109	\$7,109	\$7,109	\$31,603
Cook	\$41,600	0.27	100.00%	0.27	\$11,422	\$7,901	\$7,901	\$7,901	\$35,124
Meal Server	\$47,840	0.11	100.00%	0.11	\$5,254	\$3,634	\$3,634	\$3,634	\$16,157
Food Prep & Meal Server	\$37,440	0.21	100.00%	0.21	\$7,710	\$5,333	\$5,333	\$5,333	\$23,709
Food Prep	\$39,520	0.12	100.00%	0.12	\$4,883	\$3,378	\$3,378	\$3,378	\$15,016
Janitor	\$39,520	0.10	100.00%	0.10	\$4,118	\$2,848	\$2,848	\$2,848	\$12,663
Dishwasher/Janitor	\$39,520	0.22	100.00%	0.22	\$8,670	\$5,997	\$5,997	\$5,997	\$26,661
Driver HDM	\$39,520	0.21	100.00%	0.21	\$29,640	\$20,502	\$20,502	\$20,502	\$91,146
Driver HDM	\$39,520	0.05	100.00%	0.17	\$6,643	\$4,595	\$4,595	\$4,595	\$20,428
Driver HDM	\$39,520	0.17	100.00%	0.62	\$24,465	\$16,922	\$16,922	\$16,922	\$75,231
Driver & Food Purchaser	\$39,520	0.05	100.00%	0.05	\$1,950	\$1,349	\$1,349	\$1,349	\$5,996
Social Worker/Resource Specialist	\$62,400	0.10	100.00%	0.01	\$334	\$231	\$231	\$231	\$1,027
Social Worker/Activities Facilitator	\$62,400	0.27	100.00%	0.27	\$17,133	\$11,851	\$11,851	\$11,851	\$52,686
Executive Director	\$90,350	0.12	100.00%	0.12	\$10,947	\$7,572	\$7,572	\$7,572	\$33,663
Totals	\$215,150	0.50	300.00%	0.40	\$179,159	\$123,924	\$123,924	\$123,924	\$550,931
Fringe Benefits Rate	14%								
Employee Fringe Benefits	\$29,260				\$24,366	\$16,854	\$16,854	\$16,854	\$74,928
Total DAS Salaries and Benefits	\$244,410				\$203,525	\$140,778	\$140,778	\$140,778	\$625,859
Non DAS Salaries & Benefits									
Position Title									
Food Packer/Meal Server	\$38,834	0.10	100.00%	0.10	\$3,932	\$2,720	\$2,720	\$2,720	\$12,092
Food Packer/Meal Server	\$38,834	0.10	100.00%	0.10	\$3,932	\$2,720	\$2,720	\$2,720	\$12,092
Food Packer/Meal Server	\$38,834	0.27	100.00%	0.27	\$10,485	\$7,252	\$7,252	\$7,252	\$32,241
Food Packer/Meal Server (Saturdays)	\$38,834	0.03	100.00%	0.03	\$1,049	\$726	\$726	\$726	\$3,227
Food Packer/Site Manager	\$38,834	0.17	100.00%	0.17	\$6,553	\$4,533	\$4,533	\$4,533	\$20,152
Meal Delivery	\$38,834	0.14	100.00%	0.14	\$5,243	\$3,627	\$3,627	\$3,627	\$16,124
Totals	\$233,002	0.80	600.00%	0.80	\$31,194	\$21,578	\$21,578	\$21,578	\$95,928
Fringe Benefits Rate	13.60%								
Employee Fringe Benefits	\$31,688				\$4,242	\$2,935	\$2,935	\$2,935	\$13,047
Total Non DAS Salaries and Benefits	\$264,690				\$35,436	\$24,513	\$24,513	\$24,513	\$108,975
Total DAS and Non DAS Salaries and Benefits	\$509,099				\$238,961	\$165,291	\$165,291	\$165,291	\$734,834

HSA #2

10/25/2016

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
(Same as Line 11 on HSA #1)

			Operating Expense Detail				Total
			FY 21/22	FY 22/23	FY 23/24	FY 24/25	FY 21/25
Annual # Meals Contracted			41,975	29,576	29,576	29,576	130,703
DAS Operating Expenses							
<u>Expenditure Category</u>							
Rental of Property							
Utilities (Elec, Water, Gas, Phone, Garbage)			\$6,007	\$7,085	\$7,085	\$7,085	\$27,262
Office Supplies, Postage			\$3,378	\$2,337	\$2,337	\$2,337	\$10,388
Insurance			\$2,834	\$1,960	\$1,960	\$1,960	\$8,715
<u>Food Cost</u>							
Raw Food	<i>per meal</i>	\$1.50	\$62,963	\$44,364	\$44,364	\$44,364	\$196,055
Cong Food Svc Supplies	<i>per meal</i>	\$0.24	\$10,074	\$7,098	\$7,098	\$7,098	\$31,368
Catered Meals	<i>per meal</i>						
<u>Other</u>							
Stipends			\$4,777	\$3,304	\$3,304	\$3,304	\$14,690
Auto - Fuel, Insurance & Misc.			\$6,373	\$4,408	\$4,408	\$4,408	\$19,598
Total DAS Operating Expenses			\$96,406	\$70,556	\$70,556	\$70,556	\$308,075
Non DAS Operating Expenses							
<u>Expenditure Category</u>							
Rental of Property			\$20,438	\$14,137	\$14,137	\$14,137	\$62,849
<u>Food Cost</u>							
Raw Food	<i>per meal</i>	\$0.28	\$11,850	\$8,350	\$8,350	\$8,350	\$36,900
Cong Food Svc Supplies	<i>per meal</i>	\$0.05	\$1,896	\$1,336	\$1,336	\$1,336	\$5,904
Total Non DAS Operating Expenses			\$34,184	\$23,823	\$23,823	\$23,823	\$105,653
Total DAS and Non DAS Operating Expenses			\$130,590	\$94,379	\$94,379	\$94,379	\$413,727
HSA #3							10/25/2016

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

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 Document Date: 06/09/21

Capital & Subcontractor Expenditure Detail

DAS Capital Expenditure					Total
<u>Equipment (Qty)</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	FY 21/25
New Delivery Vehicle	\$27,591				\$27,591
Total Equipment Cost	\$27,591				\$27,591
Total DAS Capital & Subcontractor Expenditure	\$27,591				\$27,591
Non DAS Capital Expenditure					
Total Non DAS Capital & Subcontractor Expenditure					
Total DAS and Non DAS Capital & Subcontractor Expenditure	\$27,591				\$27,591
HSA #4	10/25/2016				

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

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 Document Date: 06/09/21

NCQA Expenditure Detail

Total

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	FY 21/25
Menu planning and nutrition analysis	\$700.00 /set	1.00	\$700	\$700	\$700	\$700	\$2,800
Kitchen and food service monitoring	\$600.00	2.00	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
HDM route monitoring	\$350.00	12.00	\$4,200	\$4,200	\$4,200	\$4,200	\$16,800
Nutrition education	\$150.00	4.00	\$600	\$600	\$600	\$600	\$2,400
Other TA	\$100.00 /hour	4.00	\$400	\$400	\$400	\$400	\$1,600
HDM Route Assessment	\$236.00	158.00	\$37,288	\$29,028	\$29,028	\$29,028	\$124,372
Total DAS NCQA Expenditure			\$44,388	\$36,128	\$36,128	\$36,128	\$152,772

Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	FY 21/25
Menu planning and nutrition analysis	/set	1.00					
Kitchen and food service monitoring		2.00					
Congregate site monitoring		12.00					
Nutrition education		4.00					
Nutrition counseling (optional)	/hour	4.00					
In-service training	/training	158.00					
Total Non DAS NCQA Expenditure							

Total DAS and Non DAS NCQA Expenditure			\$44,388	\$36,128	\$36,128	\$36,128	\$152,772
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HSA #4

10/25/2016

Appendix A– Services to be Provided
Jewish Family and Children’s Services
Home-Delivered Nutrition Services for Older Adults

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Jewish Family and Children’s Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	62	62	62	62
Number of Meals	11,025	10,500	10,500	10,500

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved HDM intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and delivered
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. Grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Ella Lee
 Contract Manager
 HSA OCM
 email: ella.lee@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP-funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of

service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						
Jewish Family & Children's Services						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. No. of Mod.						
Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency						07/1/21-06/30/25
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	11,025	10,500	10,500	10,500	42,525	
DAS Expenditures						
Salaries & Benefits						
Operating Expenses	\$90,405	\$86,100	\$86,100	\$86,100	\$348,705	\$8.20
Subtotal	\$90,405	\$86,100	\$86,100	\$86,100	\$348,705	\$8.20
Indirect Percentage (%)	5.00%	5.00%	5.00%	5.00%	5.00%	
Indirect Cost	\$4,520	\$4,305	\$4,305	\$4,305	\$17,435	\$0.41
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$19,742	\$19,742	\$19,742	\$19,742	\$78,968	\$1.86
Total DAS Expenditures	\$114,667	\$110,147	\$110,147	\$110,147	\$445,108	\$10.47
Non DAS Expenditures						
Salaries & Benefits	\$90,113	\$90,113	\$90,113	\$90,113	\$360,452	\$8.48
Operating Expenses	\$76,928	\$76,377	\$76,377	\$76,377	\$306,059	\$7.20
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$50	\$50	\$50	\$50	\$200	\$0.00
Total Non DAS Expenditures	\$167,091	\$166,540	\$166,540	\$166,540	\$666,711	\$15.68
TOTAL DAS AND NON DAS EXPEDITURES	\$281,758	\$276,687	\$276,687	\$276,687	\$1,111,819	\$26.15
DAS Revenues						
Meals- General Fund	\$114,667	\$110,147	\$110,147	\$110,147	\$445,108	\$10.47
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$114,667	\$110,147	\$110,147	\$110,147	\$445,108	\$10.47
PER MEAL COST, DAS	\$8.61	\$8.61	\$8.61	\$8.61	\$8.61	
PER MEAL COST (with NCQA), DAS	\$10.40	\$10.49	\$10.49	\$10.49	\$10.47	
Non DAS Revenues						
Project Income	\$45,000	\$45,000	\$45,000	\$45,000	\$180,000	\$4.23
Agency Cash- Fundraising	\$35,797	\$35,246	\$35,246	\$35,246	\$141,535	\$3.33
Agency In-kind Contribution	\$7,574	\$7,574	\$7,574	\$7,574	\$30,296	\$0.71
Agency Grants-Foundation	\$78,720	\$78,720	\$78,720	\$78,720	\$314,880	\$7.40
Total Non DAS Revenue	\$167,091	\$166,540	\$166,540	\$166,540	\$666,711	\$15.68
PER MEAL COST (with NCQA), Non DAS	\$15.16	\$15.86	\$15.86	\$15.86	\$15.68	
TOTAL DAS AND NON DAS REVENUE	\$281,758	\$276,687	\$276,687	\$276,687	\$1,111,819	\$26.15
PER MEAL COST (with NCQA), Total	\$26	\$26	\$26	\$26	\$26	
Full Time Equivalent (FTE)	1.64	1.64	1.64	1.64	6.56	
Prepared by:	Norman Santos				Date:06/01/2021	
HSA-CO Review Signature:	_____					
HSA #1						10/25/2016

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: April 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Totals									
Fringe Benefits Rate									
Employee Fringe Benefits									
Total DAS Salaries and Benefits									
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Director of SAH	\$130,320	0.03	100.00%	0.03	\$3,475	\$3,475	\$3,475	\$3,475	\$13,900
Director Nutrition Programs	\$57,385	0.60	60.00%	0.60	\$34,431	\$34,431	\$34,431	\$34,431	\$137,724
Driver	\$35,802	0.27	100.00%	0.27	\$9,547	\$9,547	\$9,547	\$9,547	\$38,188
KMOW Driver	\$31,337	0.21	100.00%	0.21	\$6,685	\$6,685	\$6,685	\$6,685	\$26,740
KMOW Backup Driver	\$31,337	0.53	100.00%	0.53	\$16,713	\$16,713	\$16,713	\$16,713	\$66,852
Totals	\$286,180	1.64	460.00%	1.64	\$70,851	\$70,851	\$70,851	\$70,851	\$283,404
Fringe Benefits Rate	27.19%								
Employee Fringe Benefits	\$77,804				\$19,262	\$19,262	\$19,262	\$19,262	\$77,048
Total Non DAS Salaries and Benefits	\$363,984				\$90,113	\$90,113	\$90,113	\$90,113	\$360,452
Total DAS and Non DAS Salaries and Benefits	\$363,984				\$90,113	\$90,113	\$90,113	\$90,113	\$360,452

HSA #2

10/25/2016

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 3
 Document Date: April 2021

Operating Expense Detail

	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Annual # Meals Contracted	11,025	10,500	10,500	10,500	42,525
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage					
Building Maintenance Supplies and Repair					
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal</i>					
HDM Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal \$8.20</i>	\$90,405	\$86,100	\$86,100	\$86,100	\$348,705
Total DAS Operating Expenses	\$90,405	\$86,100	\$86,100	\$86,100	\$348,705
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$9,595	\$9,595	\$9,595	\$9,595	\$38,380
Utilities (Elec, Water, Gas, Phone, Garbage)	\$4,430	\$4,430	\$4,430	\$4,430	\$17,720
Office Supplies, Postage	\$6,881	\$6,881	\$6,881	\$6,881	\$27,524
Building Maintenance Supplies and Repair	\$2,973	\$2,973	\$2,973	\$2,973	\$11,892
Printing and Reproduction	\$299	\$299	\$299	\$299	\$1,196
Insurance	\$2,984	\$2,984	\$2,984	\$2,984	\$11,936
Staff Training	\$150	\$150	\$150	\$150	\$600
Staff Travel-(Local & Out of Town)	\$534	\$534	\$534	\$534	\$2,136
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal</i>					
HDM Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal \$1.05</i>	\$11,576	\$11,025	\$11,025	\$11,025	\$44,651
<u>Other</u>					
Independednt Contractor-Drivers	\$26,000	\$26,000	\$26,000	\$26,000	\$104,000
Auto Repair and Maintenance	\$5,552	\$5,552	\$5,552	\$5,552	\$22,208
Auto Fuel	\$5,700	\$5,700	\$5,700	\$5,700	\$22,800
Equipment Maintenance	\$254	\$254	\$254	\$254	\$1,016
Total Non DAS Operating Expenses	\$76,928	\$76,377	\$76,377	\$76,377	\$306,059
Total DAS and Non DAS Operating Expenses	\$167,333	\$162,477	\$162,477	\$162,477	\$654,764
HSA #3					10/25/2016

Program: Home-delivered meals for (X) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B-1, Page 5
 Document Date: April 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$700.00 /set	2.00	\$1,400	\$1,400	\$1,400	\$1,400	\$5,600
Kitchen and food service monitoring	\$600.00 visit	4.00	\$2,400	\$2,400	\$2,400	\$2,400	\$9,600
HDM Route Monitoring - Nutritionist	\$350.00 /route	4.00	\$1,400	\$1,400	\$1,400	\$1,400	\$5,600
HDM Route Monitoring - Program Director	\$195.00 /route	2.00	\$390	\$390	\$390	\$390	\$1,560
Meal Temperature Testing	\$8.61 /meal	78.00	\$672	\$672	\$672	\$672	\$2,688
Nutrition education	\$150.00 /session	4.00	\$600	\$600	\$600	\$600	\$2,400
Nutrition counseling (optional)	/hour						
In-service training	\$100.00 /training	4.00	\$400	\$400	\$400	\$400	\$1,600
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$195.00 /assessment	64.00	\$12,480	\$12,480	\$12,480	\$12,480	\$49,920
Annual Assessment for the HDM program for Adults with Disabilities (optional)	/annual assessment						
Total DAS NCQA Expenditure			\$19,742	\$19,742	\$19,742	\$19,742	\$78,968
Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set						
Kitchen and food service monitoring							
HDM Route Monitoring	/route						
Meal Temperature Testing	\$0.64 /meal	78.00	\$50	\$50	\$50	\$50	\$200
Nutrition education							
Nutrition counseling (optional)	/hour						
In-service training	/training						
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	/assessment						
Annual Assessment for HDM program for Adults with Disabilities (optional)	/annual assessment						
Total Non DAS NCQA Expenditure			\$50	\$50	\$50	\$50	\$200

Appendix A– Services to be Provided
Kimochi Inc.
Home-Delivered Nutrition Services for Older Adults

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Kimochi Inc.
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	190	120	120	120
Number of Meals	51064	31908	31908	31908

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved HDM intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and delivered
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. Grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Ella Lee
 Contract Manager
 HSA OCM
 email: Ella.Lee@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP-funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of

service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Kimochi, Inc.						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. No. of Mod.						
Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency						
Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	51,064	31,908	31,908	31,908	146,788	
DAS Expenditures						
Salaries & Benefits	\$204,479	\$198,496	\$198,496	\$198,496	\$799,967	\$5.45
Operating Expenses	\$190,106	\$44,885	\$44,885	\$44,885	\$324,761	\$2.21
Subtotal	\$394,585	\$243,381	\$243,381	\$243,381	\$1,124,728	\$7.66
Indirect Percentage (%)	10.00%	10.00%	10.00%	10.00%	10.00%	
Indirect Cost	\$39,459	\$27,837	\$27,837	\$27,837	\$122,970	\$0.84
Capital/Subcontractor Expenditures	\$46,673				\$46,673	\$0.32
NCQA Expenditures	\$58,089	\$37,089	\$37,089	\$37,089	\$169,356	\$1.15
Total DAS Expenditures	\$538,806	\$308,307	\$308,307	\$308,307	\$1,463,727	\$9.97
Non DAS Expenditures						
Salaries & Benefits		\$26,147	\$26,147	\$26,147	\$78,441	\$0.53
Operating Expenses	\$208,950	\$140,946	\$140,946	\$140,946	\$631,788	\$4.30
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$400	\$400	\$400	\$400	\$1,600	\$0.01
Total Non DAS Expenditures	\$209,350	\$167,493	\$167,493	\$167,493	\$711,829	\$4.85
TOTAL DAS AND NON DAS EXPEDITURES	\$748,156	\$475,800	\$475,800	\$475,800	\$2,175,556	\$14.82
DAS Revenues						
Meals- General Fund	\$492,131	\$308,307	\$308,307	\$308,307	\$1,417,052	\$9.65
Meals- State Fund						
Meals- Federal Fund						
OTO	\$46,673				\$46,673	\$0.32
Total DAS Revenue	\$538,804	\$308,307	\$308,307	\$308,307	\$1,463,725	\$9.97
PER MEAL COST, DAS	\$8.50	\$8.50	\$8.50	\$8.50	\$8.50	
PER MEAL COST (with NCQA), DAS	\$9.64	\$9.66	\$9.66	\$9.66	\$9.65	
Non DAS Revenues						
Project Income	\$98,000	\$63,816	\$63,816	\$63,816	\$289,448	\$1.97
Agency Cash- Fundraising	\$65,392	\$74,960	\$74,960	\$74,960	\$290,272	\$1.98
Agency In-kind Food	\$45,958	\$28,717	\$28,717	\$28,717	\$132,109	\$0.90
Total Non DAS Revenue	\$209,350	\$167,493	\$167,493	\$167,493	\$711,829	\$4.85
PER MEAL COST (with NCQA), Non DAS	\$4.10	\$5.25	\$5.25	\$5.25	\$4.85	
TOTAL DAS AND NON DAS REVENUE	\$748,154	\$475,800	\$475,800	\$475,800	\$2,175,554	\$14.82
PER MEAL COST (with NCQA), Total	\$13.74	\$14.91	\$14.91	\$14.91	\$14.50	
Full Time Equivalent (FTE)	5.75	5.75	5.75	5.75	23.00	
Prepared by: Shawne O'Connell						Date: 5/10/18
HSA-CO Review Signature:						
HSA #1						10/25/2016

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: March 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Senior Center Coordinator	\$53,040	0.25	100.00%	0.25	\$13,260	\$13,260	\$13,260	\$13,260	\$53,040
Head Cook	\$46,800	0.50	100.00%	0.50	\$23,400	\$23,400	\$23,400	\$23,400	\$93,600
Assistant Cook 1	\$37,960	0.50	100.00%	0.50	\$18,980	\$18,980	\$18,980	\$18,980	\$75,920
Driver 1	\$30,420	1.00	100.00%	1.00	\$30,420	\$30,420	\$30,420	\$30,420	\$121,680
Driver 2	\$19,240	1.00	100.00%	1.00	\$19,240	\$19,240	\$19,240	\$19,240	\$76,960
Driver 3	\$43,472	0.50	100.00%	0.50	\$21,736	\$21,736	\$21,736	\$21,736	\$86,944
Dishwasher 1	\$29,250	0.50	100.00%	0.50	\$14,625	\$14,625	\$14,625	\$14,625	\$58,500
Dishwasher 2	\$28,860	0.50	100.00%	0.50	\$14,430	\$9,863	\$9,863	\$9,863	\$44,019
Totals	\$289,042	4.75	800.00%	4.75	\$156,091	\$151,524	\$151,524	\$151,524	\$610,663
Fringe Benefits Rate	31.00%								
Employee Fringe Benefits	\$89,603				\$48,388	\$46,972	\$46,972	\$46,972	\$189,304
Total DAS Salaries and Benefits	\$378,645				\$204,479	\$198,496	\$198,496	\$198,496	\$799,967
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Dishwasher 2	\$28,860	0.50	31.65%	0.16		\$4,567	\$4,567	\$4,567	\$13,701
Driver 4	\$43,160	0.50	100.00%	0.50		\$21,580	\$21,580	\$21,580	\$64,740
Totals	\$72,020	1.00	131.65%	0.66		\$26,147	\$26,147	\$26,147	\$78,441
Fringe Benefits Rate									
Employee Fringe Benefits									
Total Non DAS Salaries and Benefits	\$72,020					\$26,147	\$26,147	\$26,147	\$78,441
Total DAS and Non DAS Salaries and Benefits	\$450,665				\$204,479	\$224,643	\$224,643	\$224,643	\$878,408

HSA #2

10/25/2016

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	51,064	31,908	31,908	31,908	146,788
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$13,150	\$13,150	\$13,150	\$13,150	\$52,600
Rent, Parking	\$15,500	\$15,500	\$15,500	\$15,500	\$62,000
Auto - Insurance	\$13,500	\$13,500	\$13,500	\$13,500	\$54,000
Auto - Maintenance	\$3,898	\$2,735	\$2,735	\$2,735	\$12,103
Dues/Subscriptions					
Insurance - General					
Outside Services					
Prof Svcs - Acctg					
Office Supplies					
Telephone					
Utilities					
<u>Food Cost</u>					
Raw Food <i>per meal</i>					
HDM Food Svc Supplies <i>per meal</i>					
HDM Catered Frozen Meals <i>per meal \$2.82</i>	\$144,058				\$144,058
Total DAS Operating Expenses	\$190,106	\$44,885	\$44,885	\$44,885	\$324,761
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Prof Svcs - Acctg	\$1,000	\$1,000	\$1,000	\$1,000	\$4,000
Office Supplies/Printing	\$2,500	\$2,500	\$2,500	\$2,500	\$10,000
Telephone	\$3,000	\$3,000	\$3,000	\$3,000	\$12,000
Utilities	\$9,944	\$9,944	\$9,944	\$9,944	\$39,776
Auto - Fuel	\$5,000	\$5,000	\$5,000	\$5,000	\$20,000
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$2.10</i>	\$107,234	\$67,007	\$67,007	\$67,007	\$308,255
HDM Food Svc Supplies <i>per meal \$0.55</i>	\$28,085	\$17,549	\$17,549	\$17,549	\$80,732
In-Kind Food <i>per meal \$0.90</i>	\$45,958	\$28,717	\$28,717	\$28,717	\$132,109
<u>Consultant</u>					
Registered Dietician	\$6,229	\$6,229	\$6,229	\$6,229	\$24,916
Total Non DAS Operating Expenses	\$208,950	\$140,946	\$140,946	\$140,946	\$631,788
Total DAS and Non DAS Operating Expenses	\$399,056	\$185,831	\$185,831	\$185,831	\$956,549

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 4
 Document Date: March 2021

Capital & Subcontractor Expenditure Detail

DAS Capital Expenditure

<u>Equipment (Qty)</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Tray Sealer	\$7,000				\$7,000
Two Section Solid Door Reach in Refrigerator	\$4,575				\$4,575
Thermal Bag, Cold	\$2,400				\$2,400
Total Equipment Cost	\$13,975				\$13,975

<u>Remodeling</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Total Remodeling Cost					

<u>Subcontractor</u>	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
HDM Social Worker	\$32,698				\$32,698
Total Subcontractor Cost	\$32,698				\$32,698

Total DAS Capital & Subcontractor Expenditure	\$46,673				\$46,673
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Total Non DAS Capital & Subcontractor Expenditure					
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Total DAS and Non DAS Capital & Subcontractor Expenditure	\$46,673				\$46,673
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HSA #4	10/25/2016
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Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

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 Document Date: March 2021

NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	FY21/22 Unit	FY22/25 Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$799.00 /set	1.00	1.00	\$799	\$799	\$799	\$799	\$3,196
Kitchen and food service monitoring	\$875.00	6.00	2.00	\$5,250	\$1,750	\$1,750	\$1,750	\$10,500
HDM Route Monitoring	\$315.00 /route	12.00	12.00	\$3,780	\$3,780	\$3,780	\$3,780	\$15,120
Nutrition education	\$190.00	4.00	4.00	\$760	\$760	\$760	\$760	\$3,040
Nutrition counseling (optional)	/hour							
In-service training	/training							
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$250.00 /assessment	190.00	120.00	\$47,500	\$30,000	\$30,000	\$30,000	\$137,500
Annual Assessment for the HDM program for Adults with Disabilities (optional)	/annual assessment							
Total DAS NCQA Expenditure				\$58,089	\$37,089	\$37,089	\$37,089	\$169,356
Non DAS NCQA Expenditure								
Menu planning and nutrition analysis	/set							
Kitchen and food service monitoring								
HDM Route Monitoring	/route							
Nutrition education								
Nutrition counseling (optional)	/hour							
In-service training	\$200.00 /training	2.00	2.00	\$400	\$400	\$400	\$400	\$1,600
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	/assessment							
Annual Assessment for HDM program for Adults with Disabilities (optional)	/annual assessment							
Total Non DAS NCQA Expenditure				\$400	\$400	\$400	\$400	\$1,600
Total DAS and Non DAS NCQA Expenditure				\$58,489	\$37,489	\$37,489	\$37,489	\$170,956
HSA #4								10/25/2016

Appendix A– Services to be Provided
Meals on Wheels of San Francisco
Home-Delivered Nutrition Services for Older Adults

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Meals on Wheels of San Francisco
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	3,600	3,200	3,200	3,200
Number of Meals	1,620,000	1,446,658	1,446,658	1,446,658

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved HDM intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and delivered
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. Grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Ella Lee
 Contract Manager
 HSA OCM
 email: Ella.Lee@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP-funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of

service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Meals on Wheel San Francisco
(Please enter agency name here)

(Check One) New Renewal Modification

If modification, Effective Date of Mod. No. of Mod.

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency

Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	1,620,000	1,446,658	1,446,658	1,446,658	5,959,974	
DAS Expenditures						
Salaries & Benefits	\$3,414,394	\$3,049,048	\$3,049,048	\$3,049,048	\$12,561,538	\$2.11
Operating Expenses	\$3,341,006	\$2,983,516	\$2,983,516	\$2,983,516	\$12,291,554	\$2.06
Subtotal	\$6,755,400	\$6,032,564	\$6,032,564	\$6,032,564	\$24,853,092	\$4.17
Indirect Percentage (%)						
Indirect Cost						
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$1,037,136	\$909,442	\$909,442	\$909,442	\$3,765,462	\$0.63
Total DAS Expenditures	\$7,792,536	\$6,942,006	\$6,942,006	\$6,942,006	\$28,618,554	\$4.80
Non DAS Expenditures						
Salaries & Benefits	\$1,149,086	\$1,026,136	\$1,026,136	\$1,026,136	\$4,227,494	\$0.71
Operating Expenses	\$1,471,164	\$1,313,748	\$1,313,748	\$1,313,748	\$5,412,408	\$0.91
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$919,952	\$806,566	\$806,566	\$806,566	\$3,339,650	\$0.56
Total Non DAS Expenditures	\$3,540,202	\$3,146,450	\$3,146,450	\$3,146,450	\$12,979,552	\$2.18
TOTAL DAS AND NON DAS EXPEDITURES	\$11,332,738	\$10,088,456	\$10,088,456	\$10,088,456	\$41,598,106	\$6.98
DAS Revenues						
Meals- General Fund	\$5,403,633	\$4,813,844	\$4,813,844	\$4,813,844	\$19,845,165	\$3.33
Meals- State Fund	\$485,156	\$432,203	\$432,203	\$432,203	\$1,781,765	\$0.30
Meals- Federal Fund	\$1,903,747	\$1,695,959	\$1,695,959	\$1,695,959	\$6,991,624	\$1.17
Total DAS Revenue	\$7,792,536	\$6,942,006	\$6,942,006	\$6,942,006	\$28,618,554	\$4.80
PER MEAL COST, DAS	\$4.17	\$4.17	\$4.17	\$4.17	\$4.17	
PER MEAL COST (with NCQA), DAS	\$4.81	\$4.80	\$4.80	\$4.80	\$4.80	
Non DAS Revenues						
Project Income	\$100,722	\$100,722	\$100,722	\$100,722	\$402,888	\$0.07
Agency Cash- Fundraising	\$3,427,480	\$3,033,728	\$3,033,728	\$3,033,728	\$12,528,664	\$2.10
Agency In-kind Volunteer	\$12,000	\$12,000	\$12,000	\$12,000	\$48,000	\$0.01
Total Non DAS Revenue	\$3,540,202	\$3,146,450	\$3,146,450	\$3,146,450	\$12,979,552	\$2.18
PER MEAL COST (with NCQA), Non DAS	\$2.19	\$2.17	\$2.17	\$2.17	\$2.18	
TOTAL DAS AND NON DAS REVENUE	\$11,332,738	\$10,088,456	\$10,088,456	\$10,088,456	\$41,598,106	\$6.98
PER MEAL COST (with NCQA), Total	\$7.00	\$6.97	\$6.97	\$6.97	\$6.98	
Full Time Equivalent (FTE)	188.00	188.00	188.00	188.00	752.00	

Prepared by: Patrick Schmalz

Date: 6/8/21

HSA-CO Review Signature: _____

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: June 2021

Salaries & Benefits Detail

DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Drivers (28)	\$46,823	28.00	58.44%	16.36	\$766,188	\$684,205	\$684,205	\$684,205	\$2,818,803
HDM Supervisor/Lead/ Driver (PM	\$66,950	1.00	60.91%	0.61	\$40,779	\$36,416	\$36,416	\$36,416	\$150,027
Customer Service Lead	\$68,855	1.00	60.91%	0.61	\$41,940	\$37,452	\$37,452	\$37,452	\$154,296
HDM Supervisor/Driver Lead/AM	\$58,423	1.00	60.91%	0.61	\$35,585	\$31,777	\$31,777	\$31,777	\$130,916
Senior HDM Driver Manager	\$87,560	1.00	60.91%	0.61	\$53,333	\$47,626	\$47,626	\$47,626	\$196,211
Senior HDM Client Waitlist & Com	\$84,542	1.00	60.91%	0.61	\$51,495	\$45,985	\$45,985	\$45,985	\$189,450
Senior HDM Operations Manager	\$87,560	1.00	60.91%	0.61	\$53,333	\$47,626	\$47,626	\$47,626	\$196,211
Client Support Specialist	\$49,276	1.00	60.91%	0.61	\$30,014	\$26,802	\$26,802	\$26,802	\$110,420
HDM Safety Board Lead	\$53,560	1.00	56.50%	0.57	\$30,261	\$27,023	\$27,023	\$27,023	\$111,330
HDM Lead Intake Coordinator	\$58,460	1.00	60.91%	0.61	\$35,608	\$31,798	\$31,798	\$31,798	\$131,002
Chief Prog Off	\$155,752	1.00	35.91%	0.36	\$55,931	\$49,946	\$49,946	\$49,946	\$205,769
SalesForce Administrator	\$110,624	1.00	51.47%	0.51	\$56,938	\$50,846	\$50,846	\$50,846	\$209,476
SalesForce Analyst	\$63,865	1.00	51.47%	0.51	\$32,871	\$29,354	\$29,354	\$29,354	\$120,933
Chief Food & Operations Officer: \$	\$167,553	1.00	45.68%	0.46	\$76,538	\$68,348	\$68,348	\$68,348	\$281,582
Food Safety/Compliance Manager	\$87,550	1.00	49.14%	0.49	\$43,022	\$38,419	\$38,419	\$38,419	\$158,279
Assistant Food Service Director	\$101,700	1.00	49.14%	0.49	\$49,975	\$44,628	\$44,628	\$44,628	\$183,859
Chef	\$99,386	1.00	49.14%	0.49	\$48,838	\$43,612	\$43,612	\$43,612	\$179,674
Food Service Director	\$108,150	1.00	49.14%	0.49	\$53,145	\$47,458	\$47,458	\$47,458	\$195,519
Procurement/Purchasing Manager	\$108,150	1.00	49.14%	0.49	\$53,145	\$47,458	\$47,458	\$47,458	\$195,519
Warehouse Manager	\$56,650	1.00	39.90%	0.40	\$22,603	\$20,184	\$20,184	\$20,184	\$83,155
Kitchen Staff (37)	\$42,572	37.00	44.82%	16.58	\$705,942	\$630,405	\$630,405	\$630,405	\$2,597,157
Maintenance Associate	\$39,634	1.00	39.90%	0.40	\$15,814	\$14,122	\$14,122	\$14,122	\$58,180
Fleet & Facilities Manager	\$82,400	1.00	39.90%	0.40	\$32,878	\$29,360	\$29,360	\$29,360	\$120,958
Maintenance Associate	\$39,634	1.00	39.90%	0.40	\$15,814	\$14,122	\$14,122	\$14,122	\$58,180
St. Administrative Assistant	\$66,950	1.00	39.90%	0.40	\$26,713	\$23,855	\$23,855	\$23,855	\$98,278
Maintenance Technician Supervis	\$72,100	1.00	39.90%	0.40	\$28,768	\$25,690	\$25,690	\$25,690	\$105,838
Director of Fleet & Facilities	\$118,775	1.00	39.90%	0.40	\$47,391	\$42,320	\$42,320	\$42,320	\$174,351
Volunteer Program Manager	\$66,886	1.00	10.47%	0.10	\$7,000	\$6,251	\$6,251	\$6,251	\$25,753
Volunteer Program Manager	\$63,865	1.00							
Volunteer Program Manager	\$64,890	1.00							
Director of Volunteer Programs &	\$100,114	1.00	14.50%	0.14	\$14,512	\$12,959	\$12,959	\$12,959	\$53,389
Totals	\$2,479,209	94.00	1381.53%	45.73	\$2,526,374	\$2,256,047	\$2,256,047	\$2,256,047	\$9,294,515
Fringe Benefits Rate	35.15%								
Employee Fringe Benefits	\$871,442				\$888,020	\$793,001	\$793,001	\$793,001	\$3,267,023
Total DAS Salaries and Benefits	\$3,350,651				\$3,414,394	\$3,049,048	\$3,049,048	\$3,049,048	\$12,561,538
Non DAS Salaries & Benefits									
Position Title	Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary				
Drivers (28)	\$46,823	28.00							
HDM Supervisor/Lead/ Driver (PM	\$66,950	1.00	22.00%	0.22	\$14,729	\$13,153	\$13,153	\$13,153	\$54,188
Customer Service Lead	\$68,855	1.00	22.00%	0.22	\$15,148	\$13,527	\$13,527	\$13,527	\$55,729
HDM Supervisor/Driver Lead/AM	\$58,423	1.00	22.00%	0.22	\$12,853	\$11,478	\$11,478	\$11,478	\$47,287
Senior HDM Driver Manager	\$87,560	1.00	22.00%	0.22	\$19,263	\$17,202	\$17,202	\$17,202	\$70,869
Senior HDM Client Waitlist & Com	\$84,542	1.00	22.00%	0.22	\$18,599	\$16,609	\$16,609	\$16,609	\$68,426
Senior HDM Operations Manager	\$87,560	1.00	22.00%	0.22	\$19,263	\$17,202	\$17,202	\$17,202	\$70,869
Client Support Specialist	\$49,276	1.00	22.00%	0.22	\$10,841	\$9,681	\$9,681	\$9,681	\$39,884
HDM Safety Board Lead	\$53,560	1.00	22.00%	0.22	\$11,783	\$10,522	\$10,522	\$10,522	\$43,349
HDM Lead Intake Coordinator	\$58,460	1.00	22.00%	0.22	\$12,861	\$11,485	\$11,485	\$11,485	\$47,316
Chief Prog Off	\$155,752	1.00	23.18%	0.23	\$36,103	\$32,240	\$32,240	\$32,240	\$132,823
SalesForce Administrator	\$110,624	1.00	19.00%	0.19	\$21,019	\$18,770	\$18,770	\$18,770	\$77,329
SalesForce Analyst	\$63,865	1.00	19.00%	0.19	\$12,134	\$10,836	\$10,836	\$10,836	\$44,642
Chief Food & Operations Officer: \$	\$167,553	1.00	19.61%	0.20	\$32,857	\$29,341	\$29,341	\$29,341	\$120,880
Food Safety/Compliance Manager	\$87,550	1.00	20.00%	0.20	\$17,510	\$15,636	\$15,636	\$15,636	\$64,418
Assistant Food Service Director	\$101,700	1.00	19.90%	0.20	\$20,238	\$18,073	\$18,073	\$18,073	\$74,457
Chef	\$99,386	1.00	19.90%	0.20	\$19,778	\$17,662	\$17,662	\$17,662	\$72,764
Food Service Director	\$108,150	1.00	19.90%	0.20	\$21,522	\$19,219	\$19,219	\$19,219	\$79,179
Procurement/Purchasing Manager	\$108,150	1.00	19.90%	0.20	\$21,522	\$19,219	\$19,219	\$19,219	\$79,179
Warehouse Manager	\$56,650	1.00	29.49%	0.29	\$16,709	\$14,921	\$14,921	\$14,921	\$61,472
Kitchen Staff (37)	\$42,572	37.00	21.62%	8.00	\$340,576	\$304,134	\$304,134	\$304,134	\$1,252,978
Maintenance Associate	\$39,634	1.00	30.57%	0.31	\$12,116	\$10,820	\$10,820	\$10,820	\$44,576
Fleet & Facilities Manager	\$82,400	1.00	29.49%	0.29	\$24,303	\$21,703	\$21,703	\$21,703	\$89,412
Maintenance Associate	\$39,634	1.00	30.57%	0.31	\$12,116	\$10,820	\$10,820	\$10,820	\$44,576

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
	1,620,000	1,446,658	1,446,658	1,446,658	5,959,974
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$1,257	\$1,122	\$1,122	\$1,122	\$4,623
Utilities (Elec, Water, Gas, Phone, Garbage)	\$88,396	\$78,938	\$78,938	\$78,938	\$325,210
Office Supplies, Postage	\$113,559	\$101,410	\$101,410	\$101,410	\$417,789
Building Maintenance Supplies and Repair	\$107,024	\$95,572	\$95,572	\$95,572	\$393,740
Printing and Reproduction	\$4,273	\$3,816	\$3,816	\$3,816	\$15,721
Insurance	\$39,003	\$34,830	\$34,830	\$34,830	\$143,493
Staff Training	\$6,047	\$5,400	\$5,400	\$5,400	\$22,247
Staff Travel-(Local & Out of Town)	\$3,771	\$3,367	\$3,367	\$3,367	\$13,872
Rental of Equipment	\$2,011	\$1,796	\$1,796	\$1,796	\$7,399
<u>Food Cost</u>					
Raw Food <i>per meal \$1.67</i>	\$2,705,400	\$2,415,919	\$2,415,919	\$2,415,919	\$9,953,157
<u>Consultant</u>					
Consultants-Temp Employees	\$81,904	\$73,140	\$73,140	\$73,140	\$301,324
Consultants-IT Operations	\$46,104	\$41,171	\$41,171	\$41,171	\$169,617
Consultants-Audit	\$21,932	\$19,585	\$19,585	\$19,585	\$80,687
Consultants-Payroll Service	\$8,936	\$7,980	\$7,980	\$7,980	\$32,876
Consultants-Legal	\$12,570	\$11,225	\$11,225	\$11,225	\$46,245
Consultants-Other	\$4,525	\$4,041	\$4,041	\$4,041	\$16,648
<u>Other</u>					
Delivery Costs	\$64,934	\$57,986	\$57,986	\$57,986	\$238,892
Volunteer and Client Costs	\$29,360	\$26,218	\$26,218	\$26,218	\$108,014
Total DAS Operating Expenses	\$3,341,006	\$2,983,516	\$2,983,516	\$2,983,516	\$12,291,554
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$990	\$884	\$884	\$884	\$3,642
Utilities (Elec, Water, Gas, Phone, Garbage)	\$50,485	\$45,083	\$45,083	\$45,083	\$185,734
Office Supplies, Postage	\$90,186	\$80,536	\$80,536	\$80,536	\$331,794
Building Maintenance Supplies and Repair	\$85,030	\$75,932	\$75,932	\$75,932	\$312,826
Printing and Reproduction	\$3,366	\$3,006	\$3,006	\$3,006	\$12,384
Insurance	\$30,720	\$27,433	\$27,433	\$27,433	\$113,019
Staff Training	\$4,763	\$4,253	\$4,253	\$4,253	\$17,522
Staff Travel-(Local & Out of Town)	\$2,970	\$2,652	\$2,652	\$2,652	\$10,926
Rental of Equipment	\$1,584	\$1,415	\$1,415	\$1,415	\$5,829
<u>Food Cost</u>					
Raw Food <i>per meal \$0.61</i>	\$988,200	\$882,461	\$882,461	\$882,461	\$3,635,583
<u>Consultant</u>					
Consultants-Temp Employees	\$64,510	\$57,607	\$57,607	\$57,607	\$237,331
Consultants-IT Operations	\$36,314	\$32,428	\$32,428	\$32,428	\$133,598
Consultants-Audit	\$17,274	\$15,426	\$15,426	\$15,426	\$63,552
Consultants-Payroll Service	\$7,038	\$6,285	\$6,285	\$6,285	\$25,893
Consultants-Legal	\$9,900	\$8,841	\$8,841	\$8,841	\$36,423
Consultants-Other	\$3,564	\$3,183	\$3,183	\$3,183	\$13,113
<u>Other</u>					

Delivery Costs	\$51,144	\$45,672	\$45,672	\$45,672	\$188,160
Volunteer and Client Costs	\$23,126	\$20,651	\$20,651	\$20,651	\$85,079
Total Non DAS Operating Expenses	\$1,471,164	\$1,313,748	\$1,313,748	\$1,313,748	\$5,412,408
Total DAS and Non DAS Operating Expenses	\$4,812,170	\$4,297,264	\$4,297,264	\$4,297,264	\$17,703,962
HSA #3					10/25/2016

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

NCQA Expenditure Detail

DAS NCQA Expenditure								
	Unit price	FY21/22 Unit	FY22/25 Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$589.76 /set	2.00	2.00	\$1,180	\$1,180	\$1,180	\$1,180	\$4,720
Kitchen and food service monitoring	\$655.64	4.00	4.00	\$2,623	\$2,623	\$2,623	\$2,623	\$10,492
HDM Route Monitoring	\$202.15 /route	84.00	84.00	\$16,981	\$16,981	\$16,981	\$16,981	\$67,924
Nutrition education	\$178.48	4.00	4.00	\$714	\$714	\$714	\$714	\$2,856
Nutrition counseling (optional)	\$118.25 /hour	1550.00	1350.00	\$183,288	\$159,638	\$159,638	\$159,638	\$662,202
In-service training	/training							
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$260.11 /assessment	3200.00	2800.00	\$832,350	\$728,306	\$728,306	\$728,306	\$3,017,268
Annual Assessment for the HDM program for Adults with Disabilities (optional)	/annual assessment							
Total DAS NCQA Expenditure				\$1,037,136	\$909,442	\$909,442	\$909,442	\$3,765,462
Non DAS NCQA Expenditure								
	Unit price	FY21/22 Unit	FY22/25 Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$482.00 /set	2.00	2.00	\$964	\$964	\$964	\$964	\$3,856
Kitchen and food service monitoring	\$542.75	4.00	4.00	\$2,171	\$2,171	\$2,171	\$2,171	\$8,684
HDM Route Monitoring	\$167.19 /route	84.00	84.00	\$14,044	\$14,044	\$14,044	\$14,044	\$56,176
Nutrition education	\$144.33	4.00	4.00	\$577	\$577	\$577	\$577	\$2,308
Nutrition counseling (optional)	\$97.86 /hour	1550.00	1350.00	\$151,676	\$132,105	\$132,105	\$132,105	\$547,991
In-service training	/training							
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$234.54 /assessment	3200.00	2800.00	\$750,520	\$656,705	\$656,705	\$656,705	\$2,720,635
Annual Assessment for HDM program for Adults with Disabilities (optional)	/annual assessment							
Total Non DAS NCQA Expenditure				\$919,952	\$806,566	\$806,566	\$806,566	\$3,339,650
Total DAS and Non DAS NCQA Expenditure				\$1,957,088	\$1,716,008	\$1,716,008	\$1,716,008	\$7,105,112
HSA #4								10/25/2016

**Appendix A– Services to be Provided
On Lok Day Services
Home-Delivered Nutrition Services for Older Adults**

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	On Lok Day Services
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	450	405	405	405
Number of Meals	228,556	190,146	190,146	190,146

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved HDM intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and delivered
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. Grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Patrick Garcia
 Contract Manager
 HSA OCM
 email: patrick.garcia@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP-funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of

service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name On Lok Day Services						
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
If modification, Effective Date of Mod. _____ No. of Mod. _____						
Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency						
Budget Reference Page No.(s) _____						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	Average cost/meal
Annual # Meals Contracted	228,556	190,146	190,146	190,146	798,994	
DAS Expenditures						
Salaries & Benefits	\$338,166	\$318,076	\$318,076	\$318,076	\$1,292,394	\$1.62
Operating Expenses	\$712,351	\$555,897	\$555,897	\$555,897	\$2,380,042	\$2.98
Subtotal	\$1,050,517	\$873,973	\$873,973	\$873,973	\$3,672,436	\$4.60
Indirect Percentage (%)	9.00%	9.00%	9.00%	9.00%	9.00%	
Indirect Cost	\$94,548	\$78,658	\$78,658	\$78,658	\$330,522	\$0.41
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$163,273	\$163,273	\$163,273	\$163,273	\$653,092	\$0.82
Total DAS Expenditures	\$1,308,338	\$1,115,904	\$1,115,904	\$1,115,904	\$4,656,050	\$5.83
Non DAS Expenditures						
Salaries & Benefits	\$88,310	\$83,287	\$83,287	\$83,287	\$338,171	\$0.42
Operating Expenses	\$434,557	\$426,154	\$426,154	\$426,154	\$1,713,019	\$2.14
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$599	\$599	\$599	\$599	\$2,395	\$0.00
Total Non DAS Expenditures	523,466	\$510,040	\$510,040	\$510,040	\$2,053,585	\$2.57
TOTAL DAS AND NON DAS EXPEDITURES	\$1,831,803	\$1,625,944	\$1,625,944	\$1,625,944	\$6,709,635	\$8.40
DAS Revenues						
Meals- General Fund	\$1,145,065	\$952,631	\$952,631	\$952,631	\$4,002,959	\$5.01
NCQA Fund	\$163,273	\$163,273	\$163,273	\$163,273	\$653,092	\$0.82
Total DAS Revenue	\$1,308,338	\$1,115,904	\$1,115,904	\$1,115,904	\$4,656,051	\$5.83
PER MEAL COST, DAS	\$5.01	\$5.01	\$5.01	\$5.01	\$5.01	
PER MEAL COST (with NCQA), DAS	\$5.72	\$5.87	\$5.87	\$5.87	\$5.83	
Non DAS Revenues						
Project Income	93,708.00	\$77,960	\$77,960	\$77,960	\$327,588	\$0.41
Agency Cash- Fundraising	429,159	431,481	431,481	431,481	\$1,723,601	\$2.16
Agency In-kind Volunteer						
NCQA Revenue	\$599	\$599	\$599	\$599	\$2,396	\$0.00
Total Non DAS Revenue	\$523,466	\$510,040	\$510,040	\$510,040	\$2,053,585	\$2.57
PER MEAL COST, Non DAS	\$2.29	\$2.68	\$2.68	\$2.68	\$2.57	
PER MEAL COST (with NCQA), Non DAS	\$2.29	\$2.68	\$2.68	\$2.68	\$2.57	
TOTAL DAS AND NON DAS REVENUE	\$1,831,803	\$1,625,944	\$1,625,944	\$1,625,944	\$6,709,636	\$8.40
PER MEAL COST, Total	\$7.30	\$7.69	\$7.69	\$7.69	\$7.58	
PER MEAL COST (with NCQA), Total	\$8.01	\$8.55	\$8.55	\$8.55	\$8.40	
Full Time Equivalent (FTE)	6.69	6.44	6.44	6.44	26.03	
Prepared by: Meko Ma						Date: 06/10/2021
HSA-CO Review Signature: _____						
HSA #1						6/16/2021

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

Appendix B, Page 2
 Document Date: June 2021

Salaries & Benefits Detail

DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22		Agency Totals		HSA Program		FY 22/23		FY 23/24		FY 24/25		Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary							
ACCOUNTANT	\$63,993	29%	79%	0.23	\$14,718	\$63,993	29%	79%	0.23	\$14,718	\$14,718	\$14,718	\$14,718	\$14,718	\$14,718	\$14,718	\$59,872
ADMINISTRATIVE SECRETARY	\$60,780	8%	75%	0.06	\$3,647	\$60,780	8%	75%	0.06	\$3,647	\$3,647	\$3,647	\$3,647	\$3,647	\$3,647	\$3,647	\$14,588
ASSISTANT DIRECTOR OF OPERATIONS	\$97,337	8%	80%	0.06	\$6,230	\$97,337	8%	80%	0.06	\$6,230	\$6,230	\$6,230	\$6,230	\$6,230	\$6,230	\$6,230	\$24,920
DIRECTOR	\$137,917	6%	83%	0.05	\$6,896	\$137,917	6%	83%	0.05	\$6,896	\$6,896	\$6,896	\$6,896	\$6,896	\$6,896	\$6,896	\$27,584
SR. CTR PROGRAM MANAGER-NUTRITIO	\$93,600	6%	80%	0.05	\$4,408	\$93,600	6%	80%	0.05	\$4,408	\$4,408	\$4,408	\$4,408	\$4,408	\$4,408	\$4,408	\$17,632
NUTRITION OPERATIONS MANAGER	\$78,476	25%	80%	0.20	\$15,695	\$78,476	25%	80%	0.20	\$15,695	\$15,695	\$15,695	\$15,695	\$15,695	\$15,695	\$15,695	\$15,695
NUTRITION PROGRAM COORDINATOR	\$56,281	55%	80%	0.44	\$24,764	\$56,281	55%	80%	0.44	\$24,764	\$24,764	\$24,764	\$24,764	\$24,764	\$24,764	\$24,764	\$99,056
HOSPITALITY COORDINATOR	\$49,875	20%	80%	0.16	\$7,980	\$49,875	20%	80%	0.16	\$7,980	\$7,980	\$7,980	\$7,980	\$7,980	\$7,980	\$7,980	\$31,920
DRIVERS #1	\$37,470	79%	80%	0.63	\$23,606	\$37,470	79%	80%	0.63	\$23,606	\$23,606	\$23,606	\$23,606	\$23,606	\$23,606	\$23,606	\$94,424
DRIVERS #2	\$37,320	49%	80%	0.39	\$14,695	\$37,320	49%	80%	0.39	\$14,695	\$14,695	\$14,695	\$14,695	\$14,695	\$14,695	\$14,695	\$58,780
DRIVERS #3	\$42,891	49%	80%	0.39	\$16,888	\$42,891	49%	80%	0.39	\$16,888	\$16,888	\$16,888	\$16,888	\$16,888	\$16,888	\$16,888	\$67,552
DRIVERS #4	\$38,478	49%	80%	0.39	\$15,151	\$38,478	49%	80%	0.39	\$15,151	\$15,151	\$15,151	\$15,151	\$15,151	\$15,151	\$15,151	\$60,604
DRIVERS #5	\$36,720	49%	80%	0.39	\$14,459	\$36,720	49%	80%	0.39	\$14,459	\$14,459	\$14,459	\$14,459	\$14,459	\$14,459	\$14,459	\$57,836
DRIVERS #6	\$36,571	83%	76%	0.63	\$23,040	\$36,571	83%	76%	0.63	\$23,040	\$23,040	\$23,040	\$23,040	\$23,040	\$23,040	\$23,040	\$92,160
DRIVERS #7	\$42,270	42%	76%	0.32	\$13,315	\$42,270	42%	76%	0.32	\$13,315	\$13,315	\$13,315	\$13,315	\$13,315	\$13,315	\$13,315	\$53,260
ON CALL DRIVERS (1)	\$35,464	32%	80%	0.25	\$8,937	\$35,464	32%	80%	0.25	\$8,937	\$8,937	\$8,937	\$8,937	\$8,937	\$8,937	\$8,937	\$35,748
NUTRITION SERVICE COORDINATOR	\$54,203	10%	80%	0.08	\$4,336	\$54,203	10%	80%	0.08	\$4,336	\$4,336	\$4,336	\$4,336	\$4,336	\$4,336	\$4,336	\$17,344
DELIVERY SUPERVISOR	\$81,120	70%	80%	0.56	\$45,427	\$81,120	70%	80%	0.56	\$45,427	\$45,427	\$45,427	\$45,427	\$45,427	\$45,427	\$45,427	\$181,708
Totals	\$1,080,766	6.69	1427.93%	5.29	\$264,192	\$1,080,766	6.44	1347.93%	5.09	\$248,497	\$248,497	\$248,497	\$248,497	\$248,497	\$248,497	\$248,497	\$1,009,683
Fringe Benefits Rate	28.00%					28.00%											
Employee Fringe Benefits	\$302,614				\$73,974	\$302,614				\$69,579	\$69,579	\$69,579	\$69,579	\$69,579	\$69,579	\$69,579	\$282,711
Total DAS Salaries and Benefits	\$1,383,380				\$338,166	\$1,383,380				\$318,076	\$1,292,394						

Non DAS Salaries & Benefits	Agency Totals		HSA Program		FY 21/22		Agency Totals		HSA Program		FY 22/23		FY 23/24		FY 24/25		Total
Position Title	Time Salary for	Total FTE	by HSA	Adjusted FTE	Budgeted Salary	Time Salary for	Total FTE	by HSA	Adjusted FTE	Budgeted Salary							
ACCOUNTANT	\$63,993	29%	21%	0.06	\$3,840	\$63,993	29%	21%	0.06	\$3,840	\$3,840	\$3,840	\$3,840	\$3,840	\$3,840	\$3,840	\$15,360
ADMINISTRATIVE SECRETARY	\$60,780	8%	25%	0.02	\$1,216	\$60,780	8%	25%	0.02	\$1,216	\$1,216	\$1,216	\$1,216	\$1,216	\$1,216	\$1,216	\$4,864
ASSISTANT DIRECTOR OF OPERATIONS	\$97,337	8%	20%	0.02	\$1,557	\$97,337	8%	20%	0.02	\$1,557	\$1,557	\$1,557	\$1,557	\$1,557	\$1,557	\$1,557	\$6,228
DIRECTOR	\$137,917	6%	17%	0.01	\$1,379	\$137,917	6%	17%	0.01	\$1,379	\$1,379	\$1,379	\$1,379	\$1,379	\$1,379	\$1,379	\$5,516
SR. CTR PROGRAM MANAGER-NUTRITIO	\$93,600	6%	20%	0.01	\$1,102	\$93,600	6%	20%	0.01	\$1,102	\$1,102	\$1,102	\$1,102	\$1,102	\$1,102	\$1,102	\$4,408
NUTRITION OPERATIONS MANAGER	\$78,476	25%	20%	0.05	\$3,924	\$78,476	25%	20%	0.05	\$3,924	\$3,924	\$3,924	\$3,924	\$3,924	\$3,924	\$3,924	\$15,924
NUTRITION PROGRAM COORDINATOR	\$56,281	55%	20%	0.11	\$6,191	\$56,281	55%	20%	0.11	\$6,191	\$6,191	\$6,191	\$6,191	\$6,191	\$6,191	\$6,191	\$24,764
HOSPITALITY COORDINATOR	\$49,875	20%	20%	0.04	\$1,995	\$49,875	20%	20%	0.04	\$1,995	\$1,995	\$1,995	\$1,995	\$1,995	\$1,995	\$1,995	\$7,980
DRIVERS #1	\$37,470	79%	20%	0.16	\$5,995	\$37,470	79%	20%	0.16	\$5,995	\$5,995	\$5,995	\$5,995	\$5,995	\$5,995	\$5,995	\$23,960
DRIVERS #2	\$37,320	49%	20%	0.10	\$3,732	\$37,320	49%	20%	0.10	\$3,732	\$3,732	\$3,732	\$3,732	\$3,732	\$3,732	\$3,732	\$14,928
DRIVERS #3	\$42,891	49%	20%	0.10	\$4,289	\$42,891	49%	20%	0.10	\$4,289	\$4,289	\$4,289	\$4,289	\$4,289	\$4,289	\$4,289	\$17,156
DRIVERS #4	\$38,478	49%	20%	0.10	\$3,848	\$38,478	49%	20%	0.10	\$3,848	\$3,848	\$3,848	\$3,848	\$3,848	\$3,848	\$3,848	\$15,392
DRIVERS #5	\$36,720	49%	20%	0.10	\$3,672	\$36,720	49%	20%	0.10	\$3,672	\$3,672	\$3,672	\$3,672	\$3,672	\$3,672	\$3,672	\$14,688
DRIVERS #6	\$36,571	83%	24%	0.20	\$7,314	\$36,571	83%	24%	0.20	\$7,314	\$7,314	\$7,314	\$7,314	\$7,314	\$7,314	\$7,314	\$29,256
DRIVERS #7	\$42,270	42%	24%	0.10	\$4,227	\$42,270	42%	24%	0.10	\$4,227	\$4,227	\$4,227	\$4,227	\$4,227	\$4,227	\$4,227	\$16,908
ON CALL DRIVERS (1)	\$35,464	32%	20%	0.06	\$2,270	\$35,464	32%	20%	0.06	\$2,270	\$2,270	\$2,270	\$2,270	\$2,270	\$2,270	\$2,270	\$9,080
NUTRITION SERVICE COORDINATOR	\$54,203	10%	20%	0.02	\$1,084	\$54,203	10%	20%	0.02	\$1,084	\$1,084	\$1,084	\$1,084	\$1,084	\$1,084	\$1,084	\$4,336
DELIVERY SUPERVISOR	\$81,120	70%	20%	0.14	\$11,357	\$81,120	70%	20%	0.14	\$11,357	\$11,357	\$11,357	\$11,357	\$11,357	\$11,357	\$11,357	\$45,428
Totals	\$1,080,766	6.69	372.07%	1.40	\$68,992	\$1,080,766	6.44	372.07%	1.35	\$65,068	\$65,068	\$65,068	\$65,068	\$65,068	\$65,068	\$65,068	\$264,196
Fringe Benefits Rate	28.00%					28.00%											
Employee Fringe Benefits	\$302,614				\$19,318	\$302,614				\$18,219	\$18,219	\$18,219	\$18,219	\$18,219	\$18,219	\$18,219	\$73,975
Total Non DAS Salaries and Benefits	\$1,383,380				\$88,310	\$1,383,380				\$83,287	\$338,171						
Total DAS and Non DAS Salaries and Benefits	\$1,383,380				\$426,476	\$1,383,380				\$401,363	\$1,630,565						

HSA #2

6/16/2021

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
(Same as Line 11 on HSA #1)

Operating Expense Detail

Annual # Meals Contracted	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
228,556	190,146	190,146	190,146	190,146	798,994
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$19,500	\$19,500	\$19,500	\$19,500	\$78,000
Office Supplies, Postage	\$4,020	\$221	\$221	\$221	\$4,683
Building Maintenance Supplies and Repair	\$45,500				\$45,500
Printing and Reproduction					
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)	\$65	\$65	\$65	\$65	\$260
Rental of Equipment					
Food Cost					
Catered Meals <i>per meal</i> \$2.71 \$2.69	\$619,362	\$512,207	\$512,207	\$512,207	\$2,155,984
Other					
Small equipment & Supplies	\$1,263	\$1,264	\$1,264	\$1,264	\$5,055
Auto - Fuel/Parking & Insurance	\$22,100	\$22,100	\$22,100	\$22,100	\$88,400
Repair/Maintenance					
Payroll Processing	\$540	\$540	\$540	\$540	\$2,160
Total DAS Operating Expenses	\$712,351	\$555,897	\$555,897	\$555,897	\$2,380,042
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)	\$10,500	\$10,500	\$10,500	\$10,500	\$42,000
Office Supplies, Postage	\$480	\$4,279	\$4,279	\$4,279	\$13,317
Building Maintenance Supplies and Repair	\$24,500	\$70,000	\$70,000	\$70,000	\$234,500
Printing and Reproduction	\$625	\$625	\$625	\$625	\$2,500
Insurance	\$4,500	\$4,500	\$4,500	\$4,500	\$18,000
Staff Training					
Staff Travel-(Local & Out of Town)	\$35	\$35	\$35	\$35	\$140
Rental of Equipment	\$3,400	\$3,400	\$3,400	\$3,400	\$13,600
Food Cost					
Catered Meals <i>per meal</i> \$1.58 \$1.60	\$361,600	\$303,899	\$303,899	\$303,899	\$1,273,297
Other					
Small equipment & Supplies	\$717	\$716	\$716	\$716	\$2,865
Auto - Fuel/Parking & Insurance	\$11,900	\$11,900	\$11,900	\$11,900	\$47,600
Repair/Maintenance	\$350	\$350	\$350	\$350	\$1,400
Payroll Processing	\$290	\$290	\$290	\$290	\$1,160
Freezer Rental	\$10,200	\$10,200	\$10,200	\$10,200	\$40,800
Van Deep Cleaning	\$5,460	\$5,460	\$5,460	\$5,460	\$21,840
Total Non DAS Operating Expenses	\$434,557	\$426,154	\$426,154	\$426,154	\$1,713,019
Total DAS and Non DAS Operating Expenses	\$1,146,907	\$982,051	\$982,051	\$982,051	\$4,093,061

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency
 (Same as Line 11 on HSA #1)

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NCQA Expenditure Detail

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$1,061.00 /set	1.00	\$1,061	\$1,061	\$1,061	\$1,061	\$4,244
Kitchen and food service monitoring	\$875.00	4.00	\$3,500	\$3,500	\$3,500	\$3,500	\$14,000
HDM Route Monitoring	\$250.00 /route	18.00	\$4,500	\$4,500	\$4,500	\$4,500	\$18,000
Nutrition education	\$168.00	4.00	\$672	\$672	\$672	\$672	\$2,688
Nutrition counseling (optional)	\$152.00 /hour	339.00	\$51,528	\$51,528	\$51,528	\$51,528	\$206,112
In-service training	\$78.00 /training	4.00	\$312	\$312	\$312	\$312	\$1,248
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$226.00 /assessment	450.00	\$101,700	\$101,700	\$101,700	\$101,700	\$406,800
Annual Assessment for the HDM program for Adults with Disabilities (optional)	/annual assessment						
Total DAS NCQA Expenditure			\$163,273	\$163,273	\$163,273	\$163,273	\$653,092
Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$4.54 /set	1.00	\$5	\$5	\$5	\$5	\$18
Kitchen and food service monitoring	\$2.85	4.00	\$11	\$11	\$11	\$11	\$46
HDM Route Monitoring	\$0.83 /route	18.00	\$15	\$15	\$15	\$15	\$60
Nutrition education	\$3.25	4.00	\$13	\$13	\$13	\$13	\$52
Nutrition counseling (optional)	\$1.31 /hour	339.00	\$443	\$443	\$443	\$443	\$1,771
In-service training	\$0.25 /training	4.00	\$1	\$1	\$1	\$1	\$4
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$0.25 /assessment	450.00	\$111	\$111	\$111	\$111	\$445
Annual Assessment for HDM program for Adults with Disabilities (optional)	/annual assessment						
Total Non DAS NCQA Expenditure			\$599	\$599	\$599	\$599	\$2,395
Total DAS and Non DAS NCQA Expenditure			\$163,872	\$163,872	\$163,872	\$163,872	\$655,487
HSA #4							6/16/2021

Appendix A– Services to be Provided
Russian American Community Services
Home-Delivered Nutrition Services for Older Adults

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Russian American Community Service
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	160	160	160	160
Number of Meals	38,325	36,162	36,162	36,162

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using the DAS OCP approved HDM intake form, which includes the annual nutrition risk screening and the food security screening, into the CA-GetCare database in accordance to DAS OCP policy memorandum.
2. Grantee will enter into the CA-GetCare Service Unit section all service objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers served
 - Number of meals prepared and delivered
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly reports due Oct. 15; Jan. 15; April 15; and June 15.
5. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
6. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. Grantee must submit the report in the CARBON system.
7. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
14. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resources Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Ella Lee
 Contract Manager
 HSA OCM
 email: ella.lee@sfgov.org

X. Monitoring Activities

1. Nutrition Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP-funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of

service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

7-Apr-21

Name

Russian American Community Services(Check One) New Renewal Modification

If modification, Effective Date of Mod. No. of Mod.

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency

Budget Reference Page No.(s)						
Program Term	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total	cost/meal
Annual # Meals Contracted	38,325	36,162	36,162	36,162	146,811	
DAS Expenditures						
Salaries & Benefits	\$215,768	\$215,764	\$215,764	\$215,764	\$863,060	5.88
Operating Expenses	\$55,400	\$52,659	\$52,659	\$52,659	\$213,377	1.45
Subtotal	\$271,168	\$268,423	\$268,423	\$268,423	\$1,076,437	7.33
Indirect Percentage (%)	6.00%	1.04%	1.04%	1.04%	2.28%	
Indirect Cost	\$16,270	\$2,792	\$2,792	\$2,792	\$24,646	17%
Capital/Subcontractor Expenditures						
NCQA Expenditures	\$45,000	\$45,000	\$45,000	\$45,000	\$180,000	1.23
Total DAS Expenditures	\$332,438	\$316,215	\$316,215	\$316,215	\$1,281,083	8.73
Non DAS Expenditures						
Salaries & Benefits	\$7,280	\$7,280	\$7,280	\$7,280	\$29,120	0.20
Operating Expenses	\$106,229	\$102,891	\$102,891	\$102,891	\$414,902	2.83
Capital/Subcontractor Expenditures						
NCQA Expenditures						
Total Non DAS Expenditures	\$113,509	\$110,171	\$110,171	\$110,171	\$444,022	3.02
TOTAL DAS AND NON DAS EXPEDITURES	\$445,947	\$426,386	\$426,386	\$426,386	\$1,725,105	11.75
DAS Revenues						
Meals- General Fund	\$332,438	\$316,215	\$316,215	\$316,215	\$1,281,083	8.73
Meals- State Fund						
Meals- Federal Fund						
Total DAS Revenue	\$332,438	\$316,215	\$316,215	\$316,215	\$1,281,083	8.73
PER MEAL COST, DAS	\$7.50	\$7.50	\$7.50	\$7.50	\$7.50	
PER MEAL COST (with NCQA), DAS	\$8.67	\$8.74	\$8.74	\$8.74	\$8.73	
Non DAS Revenues						
Project Income	\$45,990	\$43,394	\$43,394	\$43,394	\$176,172	1.20
Agency Cash- Fundraising	\$48,239	\$47,497	\$47,497	\$47,497	\$190,730	1.30
Agency In-kind Volunteer	\$7,280	\$7,280	\$7,280	\$7,280	\$29,120	0.20
in kind rent	\$12,000	\$12,000	\$12,000	\$12,000	\$48,000	33%
Total Non DAS Revenue	\$113,509	\$110,171	\$110,171	\$110,171	\$444,022	3.02
PER MEAL COST (with NCQA), Non DAS	\$2.96	\$3.05	\$3.05	\$3.05	\$3.02	
TOTAL DAS AND NON DAS REVENUE	\$445,947	\$426,386	\$426,386	\$426,386	\$1,725,105	11.75
PER MEAL COST (with NCQA), Total	\$11.63	\$11.79	\$11.79	\$11.79	\$11.75	
Full Time Equivalent (FTE)	4.40	4.40	4.40	4.40	4.40	4.88

Prepared by:

Date: 4/7/21

HSA-CO Review Signature: _____

HSA #1

10/25/2016

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency

Russian American Community Services

Salaries & Benefits Detail

DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary					
Executive Director	\$82,476	0.22	100.00%	0.22	\$18,557	\$18,557	\$18,557	\$18,557	\$18,557	\$74,228
Cook I	\$53,244	0.50	100.00%	0.50	\$26,622	\$26,622	\$26,622	\$26,622	\$26,622	\$106,488
Cook II	\$40,716	0.47	100.00%	0.47	\$19,340	\$19,340	\$19,340	\$19,340	\$19,340	\$77,360
Cook III	\$40,716	0.31	100.00%	0.31	\$12,724	\$12,724	\$12,724	\$12,724	\$12,724	\$50,896
Kitchen aide	\$35,464	0.12	100.00%	0.12	\$4,307	\$4,307	\$4,307	\$4,307	\$4,307	\$17,228
Dish Washer	\$36,541	0.44	100.00%	0.44	\$15,987	\$15,987	\$15,987	\$15,987	\$15,987	\$63,948
Program Coordinator/ Assmnts	\$53,248	0.13	100.00%	0.13	\$6,656	\$6,656	\$6,656	\$6,656	\$6,656	\$26,624
Drivers 1	\$38,628	0.84	100.00%	0.84	\$32,351	\$32,351	\$32,351	\$32,351	\$32,351	\$129,404
Drivers 2	\$38,628	0.84	100.00%	0.84	\$32,351	\$32,351	\$32,351	\$32,351	\$32,351	\$129,404
Route Coordinator/ Data Entry	\$39,673	0.27	100.00%	0.27	\$10,910	\$10,910	\$10,910	\$10,910	\$10,910	\$43,640
Totals	\$459,334		1000.00%	4.15	\$179,805	\$179,805	\$179,805	\$179,805	\$179,805	\$719,220
Fringe Benefits Rate	20.00%									
Employee Fringe Benefits	\$91,867				\$35,963	\$35,959	\$35,959	\$35,959	\$35,959	\$143,840
Total DAS Salaries and Benefits	\$551,201				\$215,768	\$215,764	\$215,764	\$215,764	\$215,764	\$863,060
Non DAS Salaries & Benefits		Agency Totals		HSA Program		FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Position Title	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary					
kitchen volunteers	29,120	0.25	100.00%	0.25	\$7,280	\$7,280	\$7,280	\$7,280	\$7,280	\$29,120
Totals	\$29,120	0.25	100.00%	0.25	\$7,280	\$7,280	\$7,280	\$7,280	\$7,280	\$29,120
Fringe Benefits Rate										
Employee Fringe Benefits										
Total Non DAS Salaries and Benefits	\$29,120				\$7,280	\$7,280	\$7,280	\$7,280	\$7,280	\$29,120
Total DAS and Non DAS Salaries and Benefits	\$580,321				\$223,048	\$223,044	\$223,044	\$223,044	\$223,044	\$892,180
HSA #2										10/25/2016

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency

Russian American Community Services**Operating Expense Detail**

	<u>FY 21/22</u>	<u>FY 22/23</u>	<u>FY 23/24</u>	<u>FY 24/25</u>	<u>Total</u>
Annual # Meals Contracted	38,325	36,162	36,162	36,162	146,811
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property					
Utilities (Elec, Water, Gas, Phone, Garbage)					
Office Supplies, Postage	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
Building Maintenance Supplies and Repair	\$3,760	\$3,810	\$3,810	\$3,810	\$15,190
Printing and Reproduction	\$1,000	\$1,000	\$1,000	\$1,000	\$4,000
Insurance					
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
<u>Food Cost</u>					
Raw Food <i>per meal \$0.91</i>	\$34,876	\$32,907	\$32,907	\$32,907	\$133,597
HDM Food Svc Supplies <i>per meal \$0.38</i>	\$14,564	\$13,742	\$13,742	\$13,742	\$55,790
Catered Meals <i>per meal</i>					
Total DAS Operating Expenses	\$55,400	\$52,659	\$52,659	\$52,659	\$213,377
Non DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$9,500	\$9,500	\$9,500	\$9,500	\$38,000
Utilities (Elec, Water, Gas, Phone, Garbage)	\$10,285	\$10,285	\$10,285	\$10,285	\$41,140
Office Supplies, Postage					
Building Maintenance Supplies and Repair	\$740	\$690	\$690	\$690	\$2,810
Printing and Reproduction					
Insurance	\$15,450	\$15,450	\$15,450	\$15,450	\$61,800
Staff Training					
Staff Travel-(Local & Out of Town)					
Rental of Equipment					
In kind Rent (building)	\$12,000	\$12,000	\$12,000	\$12,000	\$48,000
<u>Food Cost</u>					
Raw Food <i>per meal \$1.52</i>	\$58,254	\$54,966	\$54,966	\$54,966	\$223,152
HDM Food Svc Supplies <i>per meal</i>					
Catered Meals <i>per meal</i>					
Total Non DAS Operating Expenses	\$106,229	\$102,891	\$102,891	\$102,891	\$414,902
Total DAS and Non DAS Operating Expenses	\$161,629	\$155,550	\$155,550	\$155,550	\$628,279
HSA #3					10/25/2016

Program: Home-delivered meals for (x) older adults, () adults with disabilities or () emergency

Russian American Community Services**NCQA Expenditure Detail**

DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	\$700.00 /set	2.00	\$1,400	\$1,400	\$1,400	\$1,400	\$5,600
Kitchen and food service monitoring	\$600.00	2.00	\$1,200	\$1,200	\$1,200	\$1,200	\$4,800
HDM Route Monitoring	\$350.00 /route	4.00	\$1,400	\$1,400	\$1,400	\$1,400	\$5,600
Nutrition education	\$150.00	4.00	\$600	\$600	\$600	\$600	\$2,400
Nutrition counseling (optional)	/hour						
In-service training	\$100.00 /training	4.00	\$400	\$400	\$400	\$400	\$1,600
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	\$250.00 /assessment	160.00	\$40,000	\$40,000	\$40,000	\$40,000	\$40,000
Annual Assessment for the HDM program for Adults with Disabilities (optional)	/annual assessment						
Total DAS NCQA Expenditure			\$45,000	\$45,000	\$45,000	\$45,000	\$180,000
Non DAS NCQA Expenditure	Unit price	Unit	FY 21/22	FY 22/23	FY 23/24	FY 24/25	Total
Menu planning and nutrition analysis	/set						
Kitchen and food service monitoring							
HDM Route Monitoring	/route						
Nutrition education							
Nutrition counseling (optional)	/hour						
In-service training	/training						
HDM Assessment for ENP/C2 nutrition program (Initial and annual)	/assessment						
Annual Assessment for HDM program for Adults with Disabilities (optional)	/annual assessment						
Total Non DAS NCQA Expenditure							
Total DAS and Non DAS NCQA Expenditure			\$45,000	\$45,000	\$45,000	\$45,000	\$180,000
HSA #4							10/25/2016

Appendix A– Services to be Provided
Self Help for the Elderly
Home-Delivered Nutrition Services for Older Adults

July 1, 2021 - June 30, 2025

I. Purpose

The purpose of this grant is to provide home-delivered nutrition services for older adults living in the City and County of San Francisco. Home-delivered nutrition services include the provision of nutritious meals, nutrition education, and nutrition risk screening. Home-delivered nutrition services support individuals to live independently in their own homes and communities, help ensure health and well-being through improved nutrition and reduced isolation, and serve as an access point for other home and community-based services.

II. Definitions

Grantee	Self Help for the Elderly
Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf</p>
<p>DGA/ Dietary Guidelines for Americans</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (2) and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Agriculture (USDA).</p>
<p>DRI/ Dietary Reference Intakes</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations.</p>
<p>Disability</p>	<p>Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment. (CCR Title 22 Sec. 7630)</p>
<p>ENP</p>	<p>Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.</p>
<p>Frail</p>	<p>An individual determined to be functionally impaired in one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others. (CCR Title 22 Sec. 7119)</p>
<p>HACCP</p>	<p>Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)</p>

Home-Delivered Nutrition Services/HDM Nutrition Services	The procurement, preparation, transporting and delivery of meals that meet nutrition requirements to eligible consumers who are homebound by reason of illness, disability, or are otherwise isolated, and have no safe, healthy alternative for meals. Home-delivered nutrition services also include initial assessments, annual assessments, and reassessments of consumer edibility, nutrition education, health promotion, and nutrition risk screening.
HDM Nutrition Services Assessment (Initial and Annual)	An assessment conducted by a qualified staff member in the home of an individual within two weeks of beginning meal service and annually thereafter that documents the need for service and the type of meal appropriate for the participant in their living environment. The assessment covers physiological, socioeconomic, and psychological factors including acute or chronic disease, syndromes or conditions, family/support system and functional ability including activities of daily living (ADL) and instrumental activities of daily living (IADL) which contribute to an individual's need for meals and other related services. (CCR Title 22 Sec. 7638.3)
LGBTQ+	An acronym/term used to refer to persons who self-identify as non - heterosexual and/or whose gender identity does not correspond to their birth sex. This includes, but is not limited to, lesbian, gay, bisexual, transgender, genderqueer, and gender non-binary.
Low-Income	Having income at or below 100% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and participation is not means tested. Consumers self-report income status.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A Registered Dietitian conducts the menu analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals. (CDA Program Memo 12-17 as amended)

Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. (CCR Title 22 Sec. 7130)
Modified Diet	A menu approved by a registered dietitian (RD) that meets the current DGA and adjusts the typical home-delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered nutrition services shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)

Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	A person who is 60 years of age or older, used interchangeably with the term “senior”.
Reassessment	A reassessment conducted quarterly by qualified staff that documents the need for service. Such reassessment shall be done in the home of the participant at least every six months. (CCR Title 22 Sec. 7638.3) Initial and annual assessments count towards the quarterly reassessment requirement.
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
Senior	A person who is 60 years of age or older, used interchangeably with the term “older adult”.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

Unduplicated Consumer (UDC)	An individual who receives home-delivered nutrition services and the grantee reflects their participation in CA-GetCare through program enrollment.
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III. Target Population

The target population is older adults living in the City and County of San Francisco who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals, and with particular attention to the following individuals:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in home-delivered nutrition services, an individual must meet one of the following criteria:

1. An older adult living in the City and County of San Francisco who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee's social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide home-delivered nutrition services in the City and County of San Francisco. The grantee, with approval from DAS OCP, will determine the service and delivery times for the provision of home-delivered nutrition services.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), CCR Title 22, CDA, and DAS OCP. Policies and procedures shall also include consumer assessment and reassessment guidelines.
2. Grantee will provide home-delivered nutrition services for older adults and individuals who are determined eligible by the grantee. The provision of services will include the following:

- i. Enrollment of consumers in home-delivered nutrition services and the delivery of meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - ii. Provision of home-delivered meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - iii. Annual nutrition screenings for each consumer and documentation of individual responses in CA-GetCare within one month of obtaining them. Required screenings include a nutritional risk screening using the DETERMINE Checklist and a food security screening. The grantee will refer clients screened at high nutritional risk to the DAS funded citywide nutrition counseling and education program.
3. Grantee will conduct Nutrition Compliance-Quality Assurance (NCQA) as follows:
- i. Submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding menu analysis. The registered dietitian (RD) on staff or consultant RD must participate in menu planning and complete the corresponding nutrient analysis. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
 - ii. Document menu substitutions. The RD on staff or consultant RD must review and approve menu substitutions in advance of their use.
 - iii. Provide nutrition education to consumers enrolled and participating in services at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one set of nutrition education material given to each consumer.
 - iv. Conduct end-of-route home-delivered meal temperature checks every other week per route to ensure the meals maintain temperatures that meet food safety standards during the timeframe of the route. The grantee will document, and keep on file the temperatures for quarterly review by the registered dietitian.
 - v. Monitor the food safety and sanitation of the HDM routes including but not limited to the packing, transporting, and delivery of meals. A qualified staff member, trained by a food safety manager or RD, may monitor routes, and document and submit the results to the agency within two weeks of the monitoring. The grantee will monitor each HDM route, at minimum, two (2) times per year.

- vi. Conduct and document an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. The RD on staff or consultant RD must conduct and document the results of the HACCP safety and sanitation monitoring. HACCP monitoring must also include, but is not limited to the review of HDM route temperature checks and monitoring reports.
 - vii. Provide orientation and training to all new staff, paid and volunteers, to perform their assigned responsibilities and tasks as described in the CCR Title 22 Regulations Sec. 7636.5. Training, at a minimum, shall include:
 - (1) Food safety, prevention of foodborne illness, and HACCP principles.
 - (2) Accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness, and other emergency procedures.
 - viii. Provide a minimum of four (4) hours annually of in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in the CCR-Title 22 Regulations Sec. 7636.5 and DAS OCP policy memoranda. The grantee will also document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
 - ix. Conduct initial in-home assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed. The welcome packet at minimum must be available in the language of the majority of the program participants.
 - x. Conduct in-home assessments annually to evaluate a consumer's eligibility for continued program enrollment. Qualified staff must complete the annual assessment, document the need for service, and evaluate function and ability as described in DAS OCP policy memoranda.
 - xi. Conduct quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
4. Grantee will ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
 5. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the

grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

6. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possesses a food safety manager certification and has the required qualifications as described in CCR Title 22 Sec. 7636.3 and DAS OCP policy memoranda.
7. Grantee will ensure there is a sufficient number of qualified staff, paid and/or volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
8. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers as needed.
9. Grantee shall follow guidance or instructions from the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments related to the provision of services in the community. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and clients receiving services

VII. Service Objectives

1. Grantee will enroll at minimum the number of unduplicated consumers and provide the units of service detailed in Table A below:

Table A	FY 21/22	FY 22/23	FY 23/24	FY 24/25
Number of Unduplicated Consumers (UDC)	486	371	371	371
Number of Meals	146,000	111,361	111,361	111,361

VIII. Outcome Objectives

1. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
3. Consumers rate the quality of meals they received as excellent or good. Target: 85%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.