The City’s budget projections forecast continued weakness in local revenues and increasing expenditures, largely stemming from the Covid-19 pandemic and ensuing economic recession. These events have led to a projected Citywide deficit of $411.1 million in FY 21-22 and a deficit of $242.1 million FY 22-23. The Mayor’s Office has asked for all City departments to reduce their discretionary General Fund budgets by 7.5% in both of the upcoming fiscal years. Departments have also been asked to identify 2.5% in contingency reductions that would be available to implement if conditions worsen. For the Human Services Agency, including all three of its departments and its administrative division, this results in an ongoing budget reduction target in each fiscal year:

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<tr>
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<th>FY 2021-22</th>
<th>FY 2022-23</th>
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<tr>
<td>Ongoing Reduction (7.5%)</td>
<td>$7,328,543</td>
<td>$7,328,543</td>
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<tr>
<td>Contingency (2.5%) if fiscal conditions worsen</td>
<td>$2,442,848</td>
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The Mayor’s Office has also asked that departments not grow their overall staffing levels. The Mayor has made clear her intention to prioritize efforts that support the City’s economic recovery, COVID
response, homelessness services, and initiatives that advance racial equity.

**HSA Budget Strategies**

HSA is using the following principles in building its proposed budget:

- Maintain client services
- Maximize revenue opportunities in existing programs
- Look for opportunities to repurpose existing position vacancies and funds to meet new needs

HSA will work to leverage State and Federal revenues to meet budget reduction targets in the coming year. As a safety net agency, many of our revenues are tied to our caseloads and our caseloads go up during economic downturns. The relative health of the State’s budget, as well as the passage of several substantial Federal relief measures, has led to higher-than-anticipated revenues in the current year. We anticipate those will continue in the budget year, which may allow us to offset some local funding, while maintaining service levels.

**DAS Program Highlights:**

As DAS prepares its budget submission, it is looking at community needs and key organizational issues across the department. Below are highlights of those current year developments and accomplishments that will shape the budget-planning process.

**Covid-19 Food Support**

This year, the Human Services Agency has taken a lead role in the City’s emergency response to the Covid-19 public health emergency. In addition to the Agency’s critical work on sheltering San Franciscans during the crisis, the Department of Disability and Aging Services (DAS) has been the lead department in addressing the City’s dramatic spike in food insecurity. The outbreak of Covid-19 both exacerbated existing food insecurity and created new food needs among many San Francisco residents. Individuals with heightened risk of infection—due to factors such as age, health status, living conditions, and/or systemic inequities—have faced particular challenges in safely obtaining the food they need. As part of the City’s response to this pandemic-driven
increase in demand for food resources, $46.7 million was added to the DAS budget in the current fiscal year. Deployment of this budget follows a generally program-based, Citywide approach, and has positively impacted many thousands of residents since the pandemic’s outset.

The City’s partnership with the San Francisco-Marin Food Bank represents its primary mass food support strategy, providing groceries to anyone in need of food assistance. The program has distributed just shy of 500,000 bags of groceries through December and serves roughly 20,000 households per week. Great Plates Delivered—a State/Federal/Local partnership—provides three home-delivered restaurant meals per day to older adults, while also supporting small businesses; Great Plates has delivered almost 1,500,000 meals since its launch in May, and currently has over 2,600 enrollees. The Isolation and Quarantine Helpline delivers meals and/or groceries to food insecure households with a positive or suspected Covid-19 case, allowing recipients to shelter in place and minimize spread of the virus; utilization is closely tied to Citywide transmission rates so demand has fluctuated, but to date the program has provided food assistance to over 15,000 residents. Funding has also been directed to the established DAS nutrition network of meal and grocery providers, most of whom have been overserving—some dramatically—their original budgetary allocations for the current fiscal year. Financial support through the City’s food budget has also targeted specific communities, areas and populations, from Latinx-focused efforts primarily in the Mission, to meals in place at homeless encampments, and for low-income residents in Single Room Occupancy (SRO) hotels throughout the City, to name just a few of these diverse efforts.

**Direct Services Division**

**In-Home Supportive Services**

The FY 19-20 State Budget included changes to the In-Home Supportive Services (IHSS) Maintenance of Effort (MOE) that improved the outlook for the City’s MOE obligation relative to prior projections. These changes put the MOE on a more sustainable path for counties going forward, reducing uncertainty. No further changes are anticipated in the coming years. However, the costs to the City of the program continue to grow due to required 4% inflation rate on the MOE, wage increases for IHSS providers, and increases in the hourly rate paid for contract mode services. Under the City’s Minimum
Compensation Ordinance and the agreement with the IHSS Independent Providers’ (IPs’) union, wages for IHSS workers increased to $16.00 per hour on February 1, 2019, $16.50 on July 1, 2019, and there were further additional increases scheduled, provided sufficient funding was available. However, due to the economic downturn, the City initially suspended the wage increase to $17.50 per hour scheduled for July 1, 2020. It ultimately moved forward with a partial wage increase, implementing a rate of $17.25 per hour effective September 1, 2020, and the full $17.50 per hour rate will now be implemented on February 1, 2021. Future increases, provided funding is available, are scheduled as follows: $18.00 on July 1, 2021, and $18.75 on July 1, 2022, followed by cost of living increases in line with the Consumer Price Index. In total, the City’s MOE is projected to be $144.7 million in FY20-21 and then, assuming the proposed wage increases can be implemented, it will grow another $9.6 million in FY 21-22 and $12.9 million in FY 22-23, to a total of $167.2 million.

In response to the pandemic, the IHSS program worked closely with key partners to develop innovative homecare programming with the goal of ensuring that adults with disabilities and older people maintain consistent access to in-home care. This work is particularly critical, as people whose homecare needs go unmet are likely to end up in the hospital system. The creative programs that were established at the start of the pandemic continue to offer vital support today.

Expanding the pool of available home care providers during the pandemic has been a top priority for the program. IHSS worked closely with the Public Authority to increase the number of in-home providers who were available to provide substitute care for IHSS recipients through the Emergency On-Call program. Additionally, for the benefit of individuals who rely on homecare outside of the IHSS system, the program worked with community-based home care organizations to augment the back-up options for people whose homecare provider was unavailable.

Additionally, IHSS supported Homebridge’s development of a specialized Caregiver Emergency Response Team (CERT) to care for both Covid-19-positive individuals and individuals sheltering in place with personal care needs. This team of experienced caregivers primarily provide home care to individuals residing at the city’s Shelter-in-Place (SIP) and Isolation and Quarantine (I/Q) hotels. The team received training in COVID precautions, a heightened level of Personal
Protective Equipment (PPE), and they operate under the direction of a nurse practitioner. Over the course of the pandemic, CERT has provided care to over 300 adults with disabilities and older people with complex needs.

Enrollment for new IHSS recipients residing at the SIP hotels was supported by a specialized team of IHSS social workers. This team has conducted outreach and assessment services to over 400 individuals residing at the hotels.

For the benefit of IHSS providers, the program moved enrollment and assistance services into a fully remote platform. The program’s Independent Provider Assistance Center responds to more than 6,500 calls every month. Additionally, IHSS collaborated with the Public Authority to distribute PPE to providers located throughout San Francisco.

IHSS has successfully enrolled almost 100% of San Francisco’s IHSS recipients and providers into the new electronic timesheet system. Federal Medicaid rules require that all recipients and providers of personal-care services must now capture and approve time worked through an electronic visit verification (EVV) system. EVV requires home care providers to confirm in real-time that services were delivered to their recipient. It was a massive undertaking for the IHSS staff, who provided outreach, training, and registration assistance to more than 23,000 clients and 22,000 home care providers. This effort will continue into calendar year 2021 in response to additional EVV requirements imposed by the State, which will impact providers who do not reside with their IHSS recipient.

**Adult Protective Services**

In calendar year 2020, the Adult Protective Services (APS) unit responded to over 8,000 referrals of abuse, neglect, exploitation, and self-neglect. Throughout the pandemic, and in spite of the risks presented by Covid-19, the Adult Protective Services program has been on the frontlines, fulfilling its role as a critical part of the City’s safety net. The impact of the pandemic has heightened the protection and advocacy role that is carried out by the APS program. In order to further its impact, APS staff have been working closely with Institute on Aging’s Elder Abuse Prevention program to conduct education and outreach regarding Covid-19 scams that target older people and adults with disabilities.
The APS program has also been collaborating with the Department of Homelessness and Supportive Housing and the Department of Public Health to coordinate care and services for individuals with complex needs. At the SIP hotels, a specialized team of APS social workers are responding to reports of abuse and self-neglect involving formerly homeless adults. Additionally, APS has been assisting Zuckerberg San Francisco General Hospital to coordinate discharges for adults with complicated needs, the goal being to assist the hospital in thinning its census, thereby freeing up capacity to effectively care for Covid-19-positive patients.

In July 2019, APS launched the two-year Home Safe pilot program in collaboration with the Department of Homelessness and Supportive Housing (HSH) and Institute on Aging. The goal of this program is to support the safety and housing stability of low-income older adults and adults with disabilities who are at imminent risk of homelessness due to self-neglect. Drawing on lessons from APS’s earlier High-Risk Self-Neglect and Eviction Prevention pilot, Home Safe provides clients with intensive case management, financial and legal assistance, referral to other social and housing services—and in some cases, assisted living facility placement—to help keep them housed safely in the community. The program leveraged $773,981 in State grant funding against $1.1 million in local funding supported by the Mayor’s Office. Since its inception, the Home Safe pilot program has enabled 50 older adults and/or adults with disabilities referred to the program to remain housed and safe, by enhancing their ability for self-care and self-protection through intensive case management interventions. It is anticipated that an additional ten clients will be served before the end of FY 20-21. The newly-released Governor’s budget does not appear to include funding for continuance of the Home Safe program beyond the current fiscal year, unfortunately, and DAS will be partnering with other counties to advocate for continued support.

Public Conservator

The Office of the Public Conservator (PC) is in the process of implementing a new referral pathway for Lanterman-Petris-Short (LPS) conservatorship that is not reliant upon acute-care hospitals. The Outpatient LPS Referral Pilot will instead facilitate mental health conservatorships directly from the community. The target population for this pilot will be gravely disabled adults who are not in imminent danger. This referral mechanism is already authorized in the current
statute, and it has the advantage of avoiding lengthy and costly hospital stays that carry heightened health risks during the pandemic.

The cases that result from this new pilot will be managed by the PC’s Community Based Conservatorship Unit that was formed with new staffing resources last fiscal year. This specialized unit of clinicians have smaller caseloads, allowing them to work on a more intensive basis with clients. This unit assists individuals under conservatorship who are living in community-based settings, as opposed to licensed-care facilities, including clients who are part of the Housing Conservatorship program.

**Public Guardian**

The Office of the Public Guardian (PG) is in the process of implementing a Quality Assurance (QA) program that is focused on promoting consistent best practices and identifying service areas for improvement. QA activities include the development of enhanced program and case-level reports that reflect adherence to State law and internal protocols, in-depth supervisory review of cases facilitated by the use of standardized tools, and targeted training for staff.

Improving the ability of PG staff to screen, identify and intervene in situations of abuse, neglect, and exploitation is a priority QA activity. The majority of the individuals who are under a PG conservatorship reside in licensed long-term care settings, and in-person visits have been restricted throughout the pandemic for the protection of residents. The PG has adapted to these COVID protocols, and staff are now communicating with conservatees and monitoring their status virtually. Staff will be receiving advanced level training to conduct effective investigations in spite of communication barriers and to enhance their ability to conduct screenings for abuse and neglect.

**Community Services Division**

**Office of Community Partnerships**

With the onset of the Covid-19 pandemic, Office of Community Partnerships’ (OCP) staff focused work efforts on supporting continuity of operations for its network of community-based organizations and the tens of thousands of clients receiving services through this network. OCP staff worked on modification of program designs and delivery of services to operate in a safe manner, while developing
solutions for increased demand and cost of services. OCP staff coordinated with contracting and budget staff on the receipt and allocation of Federal emergency funding through the Families First Coronavirus Relief Act (FFCRA), the Coronavirus Aid, Relief and Economic Security (CARES) act, as well as private funding through the City’s Give2SF campaign. OCP staff also served as a link between the City’s Emergency Operations Center (EOC) and community-based organizations for the purchase, distribution, and delivery of shipments of personal protective equipment (PPE) used by provider staff and clients. OCP staff carried out multiple disaster service worker deployments as part of the Citywide pandemic response effort. Deployment tasks varied, including work with feeding and nutrition efforts, the HSA Departmental Operations Center (HSA DOC), HSA shelter-in-place hotel operations, and other Emergency Operations Center (EOC) roles. OCP staff have also taken on time-limited roles supporting operations in other DAS units where capacity has allowed.

For the four-year Dignity Fund Service and Allocation Plan cycle, FY 20-21 focuses on the start of new contracts in the Access and Empowerment, Caregiver Support, and Housing Support program areas. FY 20-21 saw the completion of contract procurement and entry into new multi-year contracts for programs including Aging and Disability Resource Centers (ADRC) (10 providers), Advocacy and Empowerment (1 provider), Family Caregiver Services (1 provider), HICAP (1 provider), Housing Subsidies (3 providers), Legal Services (7 providers), and Naturalization Services (6 providers). Additional funding was provided to support the continuing and expanded operations of ADRC, Family Caregiver, and Legal Services programming.

The City’s shelter-in-place order highlighted the importance of the internet and how it connects clients to resources, information, and provides opportunities for social interaction. OCP efforts to bridge the “digital divide” for older adults and adults with disabilities have expanded in response to this heightened need. Completion of new 3.5-year contracts with six community-based organizations will continue to serve as the foundation of digital literacy programming efforts funded by DAS. An increase in funding for this program area has allowed for the inclusion of a new disability-focused provider (The Arc San Francisco), while also supporting transition of program models from congregate computer labs to new virtual and one-on-one focused programs. Additional funds have also allowed DAS to shift its digital literacy efforts to increase the focus on placing devices and supportive
training into the hands of clients with nascent technological skills or limited internet access.

The Community Living Fund (CLF) program, administered by the Institute on Aging, provides intensive case management and tangible goods and services to provide wrap-around care and services for vulnerable clients living in the community. During the pandemic, the program pivoted to virtual and telephonic engagement with clients to follow health orders and social distancing guidelines set by local and State mandates. CLF continued to positively impact institution-to-community transitions with one or fewer unplanned acute hospital admissions within the last six-month reporting period (January-June 2020) for 94% of clients.

Support at Home, a home-care voucher pilot program subsidizing home-care costs for older people and adults with disabilities, will continue as an ongoing program in the OCP portfolio as of January 2021. The program has shown success in improving quality of life for participants and caregivers, as well reducing client stress, emergency room visits, and hospitalizations.

With funding in place through the Dignity Fund, work continues on the development of San Francisco’s Disability Community Cultural Center. A workgroup focused on this effort has convened and will collaboratively identify gaps, needs, and desires for a successful launch of the Center. The launch of a “virtual” Center in advance of a brick-and-mortar location is under study and discussion. The workgroup membership consists of representatives from both City departments and community-based organizations.

**Benefits and Resource Hub**

The DAS Benefits and Resource Hub (BRH) had a busy year responding to the Covid-19 pandemic, initially moving the entire program to telecommute then reopening in the fall to in-person visits by appointment only. The BRH is currently open for in-person service transactions for DAS Medi-Cal/CalFresh Eligibility Unit consumers and County Veterans Services Office (CVSO) consumers. The CVSO piloted use of Microsoft Bookings so consumers can schedule Zoom meetings with a Veterans Services Representative online. With the use of this new technology, the CVSO team has been able to meet with the same number of veterans as they did prior to the onset of the pandemic.
The 2018 Dignity Fund Community Needs Assessment (DFCNA) informed development of the DAS Outreach Plan in early 2020. Unfortunately, the plan was delayed in 2020 due to the pandemic. However, many outreach activities still occurred and led to a record 33,000 calls to the BRH in 2020. The Integrated Intake unit was a critical link in ensuring older adults and adults with disabilities were able to safely shelter in place and receive healthy meals. The launch of the Great Plates Delivered Program and Shanti Project’s Covid-19 Emergency Volunteer (CERV) program provided a great deal of publicity and traffic to the Hub. The BRH also engaged in in-reach activities and partnered with HSA’s ESSS Division to send postcards about DAS Services to over 70,000 consumers. Over the next year, the outreach strategy will focus on improving public awareness of services and how to access them. In particular, outreach will be targeted to communities of color within San Francisco, with the goal of increasing service utilization within these communities.

Finally, the BRH was awarded funding from the California Department on Aging as a designated Aging and Disability Resource Connection (ADRC). The BRH is utilizing this funding to support the creation of an online resource directory. DAS is uniquely suited to develop and launch a dynamic online directory that will serve as a “front door” to services and information for consumers and partners alike. The directory is meant to be the first place an individual can go to get accurate information on all aspects of life related to aging or living with a disability. Making this available on our website will allow us to keep resources current and accessible to individuals 24 hours a day, seven days a week.

**Age- and Disability-Friendly San Francisco**

Launched in 2017, the Age and Disability Friendly (ADF) initiative is a Citywide collaboration and long-range planning effort that seeks to ensure San Francisco is inclusive and accessible to residents of all abilities and ages. Based on a framework developed by the World Health Organization, the ADF seeks to ensure an age- and disability-friendly City through the development and implementation of a dynamic three-year Action Plan.

December 2020 wrapped up the third and final year of Action Plan 2018-2021, which encompassed 24 recommendations covering a wide range of topics including policy, programmatic and infrastructure initiatives, training, advocacy, and outreach efforts. All
recommendations are organized within eight domains, specifically: transportation; communication, information and technology; housing; community support and health services; engagement and inclusion; resiliency and emergency preparedness; employment and economic security; outdoor spaces and buildings. As each recommendation is unique, based on identified gaps and assets, the effort has engaged over 45 partners, including City departments, community-based organizations, academia, and other members of the community.

The ADF Workgroup, convened in January 2018, is the oversight body tasked with implementing the Action Plan. It is co-chaired by the Director of the Mayor's Office on Disability and the Executive Director of the IHSS Public Authority, and staffed by DAS. Currently 15 of the 24 recommendations have been completed. Due to the Covid-19 public health emergency, the other nine recommendations were delayed, with three unable to move forward. In 2021, the workgroup will assess and evaluate the ADF Action Plan, and share those results publicly. The group will also spend the year conducting outreach, reviewing community needs, and developing the next draft of the Action Plan for 2022-2025, which is to be released by December 2021 and to begin implementation by January 2022.

Next Steps

At the next meeting of the Department of Disability and Aging Services Commission on February 3, we will present you with a full proposal of the DAS budget for FY 2021-22 and FY 2022-23, for review and final approval.