



London Breed, Mayor

Department of Human Services
 Department of Aging and Adult Services
 Office of Early Care and Education

Trent Rhorer, Executive Director

MEMORANDUM

TO: AGING & ADULT SERVICES COMMISSION

THROUGH: SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
 JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS JWJ

DATE: MAY 1, 2019

SUBJECT: NEW GRANT: INSTITUTE ON AGING (NON-PROFIT) FOR THE PROVISION OF THE COMMUNITY LIVING FUND

GRANT TERM: 7/1/2019-6/30/2021

GRANT AMOUNT:

	<u>New</u>	<u>Contingency</u>	<u>Total</u>
	\$8,904,306	\$890,430	\$9,794,736

ANNUAL AMOUNT

<u>FY 19/20</u>	<u>FY 20/21</u>
\$4,452,153	\$4,452,153

Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
FUNDING:	\$6,711,664		\$2,192,642	\$890,430	\$9,794,736
PERCENTAGE:	75%		25%		100%

The Department of Aging and Adult Services (DAAS) requests authorization to enter into a new grant with Institute on Aging for the period of July 1, 2019 to June 30, 2021, in an amount of \$8,904,306 plus a 10% contingency for a total amount not to exceed \$9,794,736. The purpose of the grant is to provide case management and purchase of services for older adults and adults with disabilities who are currently in a skilled nursing facility and are ready to live in the community, or those at risk of being institutionalized.

Background

In July 2006, the City and County of San Francisco created the Community Living Fund (CLF) so that older adults and adults with disabilities could access the services necessary to allow them to live independently in the community. The Institute on Aging (IOA) has been awarded the CLF

grant since the program's inception. The organization has developed CLF into a dynamic program that consistently responds to shifts in service priorities and emerging client needs. IOA is an important collaborative partner in the City's approach to long-term services and supports for older adults and adults with disabilities in the community.

Since CLF is the payor of last resort, the program provides resources and services not typically available through other mechanisms. The CLF program reduces unnecessary institutionalization by providing older adults and adults with disabilities with options for how they receive assistance, care, and support.

Services to be Provided

The CLF Program provides goods and services to eligible individuals through a two-pronged approach: (1) coordinated case management, and (2) purchase of services.

Institute on Aging, as the single contractor, and its sub-contractors, work in collaboration to provide services from a culturally diverse staff, including social work and nurse case managers, and a unique expertise in a variety of areas including, older adults, adults with disabilities, mental health, and substance abuse services. Sub-contractors include: Catholic Charities CYO, Conard House, and Self-Help for the Elderly.

Individuals living in skilled nursing facilities (SNFs) in San Francisco who are capable of living in the community are among CLF's targeted population. Priority is given to individuals at Laguna Honda Hospital (LHH). The program's purchase of services component focuses on the following three categories: housing (both board & care and independent housing), home care, and home modifications.

For additional detail of the services to be provided, please refer to the attached Appendix A.

Selection

Contractor was selected through Request for Proposals #816 which was competitively bid in October of 2018.

Funding

Funding for this service will be provided through County General Fund, leveraging Federal Community Services Block Grant (CSBG) Health Related and Skilled Professional Medical Personnel funds.

ATTACHMENTS

Appendix A-Scope of Services

Appendix B-Budget

Appendix A – Services to be Provided

Effective July 1, 2019 to June 30, 2021

Institute on Aging Community Living Fund - Case Management and Purchase of Services

I. Purpose of Grant

The purpose of this grant is to provide case management and other services as part of the Community Living Fund (CLF) Program that is being administered by the Department of Aging and Adult Services. The CLF Program is used to fund services, or a combination of goods and services, that help individuals who are currently in or at imminent risk of being institutionalized.

The CLF Program is intended to reduce unnecessary institutionalization by providing older adults and younger adults with disabilities with options for where and how they receive assistance, care and support. The design of the CLF Program includes a two-pronged approach: (1) coordinated case management; and (2) purchase of services.

The CLF Program will provide the resources and services not available by other means, to vulnerable older adults and younger adults with disabilities.

The purposes of the Community Living Fund are to:

- Enable older adults and adults with disabilities who are eligible for this Fund to remain living safely in their own homes and communities as long as possible.
- Provide financial support for home and community-based long-term care and supportive services beyond what is currently available.
- Offer flexible funding to create “wrap-around” services that provide essential community-based assistance, care and support.
- Facilitate the development of service delivery models that strengthen the community-based long-term care systems and work force.
- Expand, not supplant, existing funding, in order to fill funding gaps until new sources of financial support for community-based long-term care services can be secured through federal Medicaid waivers and other means.

II. Eligibility for Services under the CLF Program

In order to obtain services, an individual must, at a minimum, be:

- 18 years or older;
- Institutionalized or deemed, at assessment, to be at imminent risk of being institutionalized;
- A resident of San Francisco;
- Willing and able to live in the community with appropriate supports; and
- At an income level of 300% of federal poverty or less plus assets up to \$6000.

Further, an individual must have a demonstrated need for a service and/or resource that will serve to prevent institutionalization or enable community living.

Specific conditions or situations such as substance abuse or chronic mental illness shall not be a deterrent to services if the eligibility criteria are met.

III. Definitions

HSA: Human Services Agency of the City and County of San Francisco

DAAS: Department of Aging and Adult Services

Case Management: Case management is a formal strategy that coordinates and facilitates access to a variety of services in a timely manner for people who need assistance in organizing and managing their care and/or supportive services. It includes a standardized process of client intake, assessment, care planning, care plan implementation, monitoring, reassessment and discharge/termination. Case management is an integral component of long term care service delivery and is central to accessing additional services through the CLF.

While some people can organize assistance, care and support for themselves, others need case management services to do this. Case managers assist the individual, family, and friends to identify the client's needs and options to meet them. Case managers arrange for services, when necessary, and provide assistance as client's needs change. Case managers, through the CLF program, will be the conduits to the CLF dollars set aside for the purchase of goods and services for clients.

Grantee will provide different levels of case management, as follows:

- Intensive (for unstable clients) case management (15 to 25 clients per case load) will be provided for persons with complex medical, cognitive, behavioral, and psychological needs who require a maximum amount of care and supervision and access to ongoing resources and services. Intensive case management for persons with chronic and acute complex needs will require extensive coordination of and access to a full range of social, behavioral, mental health, and medical services.

Institute on Aging

Community Living Fund – Case Management and Purchase of Services

Appendix A

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- Case management will be provided for persons who require moderate to minimal assistance and support as well as access to one-time resources and services. This level of case management ensures stabilization and avoidance of hospitalization and nursing home placement.

Grantee: Institute on Aging. The Grantee will work in collaboration with other agencies or community-based organizations through sub-contracts or MOUs to provide the necessary variety of expertise and skills in order to: (1) provide case management services, staff, and organizational infrastructure; and (2) manage CLF Program dollars to provide needed goods, services, equipment and other resources not available through other means.

Expertise required. Participating agencies or community-based organizations must have staffing and expertise in the following areas:

- Social work and/or nurse case managers with sufficient education and experience to perform all levels of case management that may be required by CLF clients. For example, case managers will have either: (a) a master's degree in nursing, social work services, or related field, with a minimum of one-year case management experience with geriatric and younger disabled populations; or (b) a bachelor's degree in nursing, social work services, or related field, with a minimum of five years case management experience with the geriatric and younger disabled populations.
- Clinical supervision staffing with the education and experience necessary to supervise, direct and coordinate the work of the case managers. For example, clinical supervisors will have a master's degree in nursing or social work services, or a related field, with a minimum of five years combined supervisory and case management experience with the geriatric and younger disabled populations.
- Staffing and protocols for overseeing and verifying that the goods and services purchased for the clients by or through the Grantee comply with normal business practices, that all purchase(s) are reasonable in nature, that any and all request for the purchases of goods or services are not excessive in nature or cost, that the expenditure can be justified and verified, and that there is supporting documentation that can verify the expenditures.
- Unique expertise in a variety of areas including, but not limited to: older adults, younger adults with disabilities, mental health and substance abuse services, and housing.
- Strong relationships with other programs that can enhance the expertise required for this grant. These include the Department of Public Health (DPH) Targeted Case Management, Zuckerberg San Francisco General Hospital Social Services, Laguna Honda Hospital Social Services, other San Francisco acute care hospitals and skilled nursing facilities, and the Department of Public Health (DPH) and the Department of Homelessness and Supportive Housing (HSH) housing.

Imminent Risk of Institutionalization: In order to be considered “at imminent risk of institutionalization”, an individual must have, at a minimum, one of the following:

- functional impairment in a minimum of two Activities of Daily Living (ADL): eating, dressing, transfer, bathing, toileting, and grooming; **or**
- a medical condition to the extent requiring the level of care that would be provided in a nursing facility; **or**
- be unable to manage his/her own affairs due to emotional and/or cognitive impairment.

III. Target Population

The CLF Program will serve people whose incomes are up to 300% of the federal poverty level and who are unable to live safely in the community without appropriate supports.

The following groups of people will be served:

- Priority. Patients of Laguna Honda Hospital (LHH) and Zuckerberg San Francisco General (ZSFG) who are willing and able to be discharged to community living.
- Patients at other San Francisco acute care hospitals and skilled nursing facilities.
- Nursing home eligible individuals on the LHH waiting list (some of whom are at ZSFG and other hospitals) who are willing and able to remain living in the community.
- Individuals who are at imminent risk for nursing home or institutional placement, willing and able to remain living in the community with appropriate support.

IV. Description of Services

Program infrastructure must include, at a minimum:

- Administrative assistance, data entry, database maintenance, processing invoices, and making payments to vendors.
- Purchased service vendor contracts and procurement policies.
- Clinical supervision across all sub-contracted agencies.
- All accounting procedures and reporting functions
- A dedicated database to capture care planning, case management, client information tracking, purchased services and dollars spent to help older adults and younger adults with disabilities remain living in the community. Documentation is coordinated between all sub-contracted agencies to ensure that necessary data is reported consistently.

Purchase of Services Component

The grant includes funds with which the Grantee and their sub-contractors can purchase goods and services for their clients. The CLF will support a menu of services options and level of assistance, care, and support, and a range of housing, and supportive services. These services must be deemed necessary by a CLF case manager and the funds are only used as a last resort, when all other payment options for that service have been exhausted. Purchased services will

supplement other available resources to ensure that that each client receives the comprehensive array of appropriate services that are necessary to allow for community living.

The Grantee will:

- Coordinate all case management services through clinical supervision; including collaboration between multidisciplinary staff, across all sub-contracted organizations, through weekly scheduled case conferencing. There must be strong collaboration to share expertise.
- Work collaboratively with other community organizations presently working with the client and additional ones who can provide specific expertise.
- Ensure that the purchase of all proposed goods and services is reasonable, prudent and properly procured.
- Work collaboratively with DAAS to strategize program direction and be responsive in addressing programmatic and contractual issues in an efficient and effective manner.
- Develop and maintain collaborations with both City departments and community-based organizations in order to reach a target population reflective of San Francisco's diverse population and eligible for the services supported by the CLF program.
- Support a CLF Advisory Council to provide a forum for consumer and community feedback. Members should include current and former program participants as well as representatives from community agencies.
- Mail out consumer satisfaction surveys annually (at a minimum) to gather additional input from participants regarding their direct experience in an anonymous format.
- Work closely with DAAS Planning Unit to ensure appropriate and accurate collection of data for evaluation and program design analysis. In addition, Grantee will work with DAAS in an ongoing evaluation of the program.
- Continue to utilize the CLF dedicated database--developed with RTZ Associates Inc. for the CLF program that tracks client information, assessments, care plans, progress notes, service authorizations and purchased services.
- Continue to explore potential opportunities from state and federal resources for revenue offsets to ensure that CLF is a payor of last resort.

V. Department Responsibilities (DAAS)

DAAS Intake and Screening Unit. All referrals to the CLF Program come through the DAAS Intake and Screening Unit, which is the initial entry point for accessing the fund. This Unit is the "Hub" of the "No Wrong Door" model of improved access to services. While community-based long-term care services can be accessed in many ways, CLF is the fund of last resort and any request for support from the CLF Program must come through this Unit. The DAAS Intake and Screening Unit completes an initial screening and refers those presumed eligible for the fund to the Grantee for the CLF Program.

DAAS will access other funding. DAAS will leverage CLF Program funding by qualifying for state and federal funding available through programs such as the Community Services Block

Grant (CSBG). The Grantee is required to provide time certifications for staff involved in service delivery and service support activities.

VI. Collaborative Responsibilities (DAAS and Grantee)

Management of the CLF wait list is an important consideration for the Grantee and DAAS. Financial considerations, prioritizations, and trends will be taken into account when considering strategies and decisions for caseload and wait list management.

The DAAS Program Analyst, the DAAS Intake and Screening Unit, and the Grantee will collaborate on undertaking outreach activities, as necessary, to ensure that the needs of the groups of people in the target population are identified and addressed. DAAS and the Grantee will also work collaboratively with LHH to ensure referral pipeline for scattered site housing units is sufficient and ongoing.

The DAAS Program Analyst, in collaboration with the DAAS Director of Quality Management, will work with the CLF Director to develop a quality assurance plan and process that fulfills the needs of both parties and the clients.

VII. Service Objectives

On an annual basis, Grantee will meet the following service objectives:

- Objective 1. Number of unduplicated consumers receiving intensive case management and/or purchased services. Target = 425.
- Objective 2. Number of clients newly enrolled in CLF. Target = 175.

VIII. Outcome Objectives

DAAS is committed to measuring the impact of its investments in community services.

On an annual basis and as needed, Grantee will report progress towards meeting the following outcome Objectives:

- Objective 1. Successfully support community living for a period of at least six months for at least 80% of CLF clients who are being discharged from LHH at the time of enrollment. Identify reasons for re-institutionalization when it occurs.
- Objective 2. At least 80% of care plan problems resolved, on average, after one year of enrollment in CLF (excluding clients with ongoing purchases).
- Objective 3. At least 80% of respondents believe that CLF services helped maintain or improve their ability for successful community living.

IX. Reporting Requirements

Grantee will provide various reports during the term of the grant agreement.

- A. Grantee will provide an annual report summarizing the contract activities, referencing the tasks as described in Section IV– Description of Services, VI- Service Objectives, and VII - Outcome Objectives. This report will also include accomplishments and challenges encountered by the Contractor. This report is due 45 days after the completion of the program year.
- B. On an annual basis, Grantee will provide results of the Client and Provider Satisfaction Surveys. This may or may not be provided at the same time as the annual report.
- C. On an annual basis, Grantee will provide results of the Client and Provider Impact Surveys which details the program impacts such as improvements in participant health outcomes and/or quality of life as a result of program participation. This may or may not be provided at the same time as the annual report.
- D. Quarterly and Annual Reports will be entered into the Contracts Administration, Billing and Reporting Online (CARBON) system.
- E. Grantee shall develop and deliver ad hoc reports as requested by HSA.
- F. Reports requested to be sent via e-mail to the Program Analyst and/or Contract Manager to the following addresses:

Fanny Lapitan, Program Analyst
Long Term Care Operations
Department of Aging and Adult Services
PO Box 7988
San Francisco, CA 94120

Fanny.Lapitan@sfgov.org

David Kashani, Contract Manager
Office of Contracts Management
Human Services Agency
PO Box 7988
San Francisco, CA 94120

David.Kashani@sfgov.org

X. Monitoring Activities

- A. 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, 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; program operation, which includes a review of a written policies and procedures manual, 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 director list and whether services are provided appropriately according to Sections VII and VIII.

B. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, the 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 Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and MOUs, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

	A	B	C	D
1	Appendix B, Page 1			
2	Document Date: 02/14/19			
3	HUMAN SERVICES AGENCY GRANT BUDGET SUMMARY			
4	BY PROGRAM			
5	Name	Term		
6	Institute on Aging	July 1, 2019 - June 30, 2021		
7	(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>			
8	If modification, Effective Date of Mod.		No. of Mod.	
9	Program: Community Living Fund			
10	Budget Reference Page No.(s)			Total
11	Program Term	FY 19-20	FY 20-21	7/1/19-6/30/21
12	Expenditures			
13	Salaries & Benefits	\$1,732,875	\$1,722,750	\$3,455,625
14	Operating Expense	\$278,890	\$278,890	\$557,780
15	Subtotal	\$2,011,765	\$2,001,640	\$4,013,405
16	Indirect Percentage (%)	15%	15%	15%
17	Indirect Cost (Line 16 X Line 15)	\$301,765	\$300,246	\$602,011
18	Capital & Subcontract Expenditures	\$469,881	\$455,525	\$925,406
19	Indirect from Subcontracts	\$12,750	\$12,750	\$25,500
20	Sub-total Expenditures	\$2,796,161	\$2,770,161	\$5,566,322
21	Purchase of Services	\$1,655,992	\$1,681,992	\$3,337,984
22				
23	TOTAL EXPENDITURES	\$4,452,153	\$4,452,153	\$8,904,306
24	HSA-DAAS Revenues			
25				
26	General Fund	\$3,355,832	\$3,355,832	\$6,711,664
27	Federal	\$1,096,321	\$1,096,321	\$2,192,642
28				
29	TOTAL REVENUE (Includes all sources)	\$4,452,153	\$4,452,153	\$8,904,306
30				
31				
32				
33	Total Revenues	\$4,452,153	\$4,452,153	\$8,904,306
34	Full Time Equivalent (FTE)			
36	Prepared by: Dustin Harper	Telephone No.: 41		2/14/2017
37	HSA-CO Review Signature:	_____		
38	HSA #1			11/15/2007

Program Name: Community Living Fund
 (Same as Line 9 on HSA #1)

Purchase of Service Detail

<u>Purchase of Service Category</u>	<u>TERM</u>	<u>FY 19-20</u>	<u>FY 20-21</u>	<u>TOTAL</u>
Global Purchase of Services		\$1,655,992	\$1,681,992	\$3,337,984
TOTAL PURCHASE OF SERVICE EXPENSE		<u>\$1,655,992</u>	<u>\$1,681,992</u>	<u>\$3,337,984</u>
HSA #4				5/23/2013

Program: Community Living Fund
 (Same as Line 9 on HSA #1)

Program Expenditure Detail

SUBCONTRACTORS		FY 19-20	FY 20-21	7/1/19-6/30/21
	Catholic Charities	\$158,700	\$158,700	\$317,400
	Self-Help for the Elderly	\$157,450	\$157,450	\$314,900
	Conard House	\$113,850	\$113,850	\$227,700
	Temporary Contract Employees	\$13,881	\$25,525	\$39,406
TOTAL SUBCONTRACTOR COST		\$443,881	\$455,525	\$899,406
EQUIPMENT		FY 19-20	FY 20-21	7/1/19-6/30/21
No.	ITEM/DESCRIPTION			
	NetSuite Vendor system	\$26,000		\$26,000
				\$0
				\$0
TOTAL EQUIPMENT COST		\$26,000	\$0	\$26,000
R E M O D E L I N G				
Description:		FY 19-20	FY 20-21	7/1/19-6/30/21
				\$0
				\$0
TOTAL REMODELING COST		\$0	\$0	\$0
TOTAL CAPITAL/SUBCONTRACTOR EXPENDITURE		\$469,881	\$455,525	\$925,406
HSA #4				10/25/2016

**HUMAN SERVICES AGENCY
SUBCONTRACTOR BUDGET SUMMARY**

Name	Term		
Catholic Charties	7/1/18-6/30/20		
(Check One) New Renewal <input type="checkbox"/> Modification <input type="checkbox"/>			
If modification, Effective Date of Mod.		No. of Mod.	
Program: CLF Subcontract			
Budget Reference Page No.(s)			
Program Term	7/1/18-6/30/19	7/1/19-6/30/20	Total
Expenditures			
Salaries & Benefits	\$127,000	\$127,000	\$254,000
Operating Expenses	\$11,000	\$11,000	\$22,000
Subtotal	\$138,000	\$138,000	\$276,000
Indirect Percentage (%)	15%	15%	15.00%
Indirect Cost (Line 16 X Line 15)	\$20,700	\$20,700	\$41,400
Total Expenditures	\$158,700	\$158,700	\$317,400
HSA Revenues			
IOA CLF	\$158,700	\$158,700	\$317,400
TOTAL HSA REVENUES	\$158,700	\$158,700	\$317,400
Other Revenues			
Total Revenues	\$158,700	\$158,700	\$317,400
Full Time Equivalent (FTE)			
Prepared by:	Telephone No.:	Date: 04/02/2018	
HSA-CO Review Signature: _____			
HSA #1			10/25/2016

**HUMAN SERVICES AGENCY
SUBCONTRACTOR BUDGET SUMMARY**

Name	Term		
Self-Help for the Elderly	7/1/18-6/30/20		
(Check One) New Renewal _____ Modification _____			
If modification, Effective Date of Mod.		No. of Mod.	
Program: CLF Subcontract			
Budget Reference Page No.(s)			
Program Term	7/1/18-6/30/19	7/1/19-6/30/20	Total
Expenditures			
Salaries & Benefits	\$127,913	\$127,913	\$255,826
Operating Expenses	\$9,000	\$9,000	\$18,000
Subtotal	\$136,913	\$136,913	\$273,826
Indirect Percentage (%)	15%	15%	15.00%
Indirect Cost (Line 16 X Line 15)	\$20,537	\$20,537	\$41,074
Total Expenditures	\$157,450	\$157,450	\$314,900
HSA Revenues			
IOA CLF	\$157,450	\$157,450	\$314,900
TOTAL HSA REVENUES	\$157,450	\$157,450	\$314,900
Other Revenues			
Total Revenues	\$157,450	\$157,450	\$314,900
Full Time Equivalent (FTE)			
Prepared by:	Telephone No.:	Date: 04/02/2018	
HSA-CO Review Signature:	_____		
HSA #1			10/25/2016

**HUMAN SERVICES AGENCY
SUBCONTRACTOR BUDGET SUMMARY**

Name	Term		
Conard House	7/1/18-6/30/20		
(Check One) New Renewal ___ Modification ___			
If modification, Effective Date of Mod.		No. of Mod.	
Program: CLF Subcontract			
Budget Reference Page No.(s)			
Program Term	7/1/18-6/30/19	7/1/19-6/30/20	Total
Expenditures			
Salaries & Benefits	\$79,000	\$79,000	\$158,000
Operating Expenses	\$20,000	\$20,000	\$40,000
Subtotal	\$99,000	\$99,000	\$198,000
Indirect Percentage (%)	15%	15%	15.00%
Indirect Cost (Line 16 X Line 15)	\$14,850	\$14,850	\$29,700
Total Expenditures	\$113,850	\$113,850	\$227,700
HSA Revenues			
IOA CLF	\$113,850	\$113,850	\$227,700
TOTAL HSA REVENUES	\$113,850	\$113,850	\$227,700
Other Revenues			
Total Revenues	\$113,850	\$113,850	\$227,700
Full Time Equivalent (FTE)			
Prepared by:	Telephone No.:	Date: 04/02/2018	
HSA-CO Review Signature: _____			
HSA #1			10/25/2016