



**SAN FRANCISCO
HUMAN SERVICES AGENCY**

Department of Benefits
and Family Support

Department of Disability
and Aging Services

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: JILL NIELSEN, DEPUTY DIRECTOR
ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS

DATE: MAY 3, 2023

SUBJECT: NEW GRANT: **SAN FRANCISCO IN-HOME SUPPORTIVE SERVICES PUBLIC AUTHORITY (NON-PROFIT)** TO PROVIDE IN-HOME SUPPORTIVE SERVICES BACK-UP PROVIDER SERVICES

DS
EL

GRANT TERM: 7/1/2023-6/30/2027

GRANT AMOUNT:	<u>New</u>	<u>Contingency</u>	<u>Total</u>
	\$1,302,316	\$130,232	\$1,432,548



London Breed
Mayor

Trent Rhorer
Executive Director

ANNUAL AMOUNTS	<u>FY23/24</u>	<u>FY24/25</u>	<u>FY25/26</u>	<u>FY26/27</u>
	\$325,579	\$325,579	\$325,579	\$325,579

Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
FUNDING:	\$216,953	\$434,205	\$651,158	\$130,232	\$1,432,548
PERCENTAGE:	20%	30%	50%	100%	

The Department of Disability and Aging Services (DAS) requests authorization to enter into a grant with San Francisco In-Home Supportive Services Public Authority (SF IHSS PA) for the time period of July 1, 2023 to June 30, 2027, in an amount of \$1,302,316, plus a 10% contingency for a total amount not to exceed \$1,432,548. The purpose of the grant is In-Home Supportive Services (IHSS) Back-up Provider Services.



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Background

The In-Home Supportive Services (IHSS) Program assists eligible low-income older adults and persons with disabilities to remain safely in their own homes by matching them with care providers who assist them with activities of daily living. IHSS pays for a wide variety of services including household chores and personal care services, which enables the individual to live safely in his/her own home, while encouraging independence. IHSS is an alternative to out-of-home care/institutional placement. IHSS is provided through either (a) an independent provider (IP), or (b) a contracted agency provider for clients who are unable to find and/or supervise their own IPs. Currently, there are approximately 26,000 IHSS clients, 95% who utilize IPs.

Services to be provided

The SF IHSS PA currently provides a back-up provider service for IHSS consumers in urgent need of assistance in the event that a regular IP cancels on short notice, or when the consumer is being discharged from a hospital or facility without a regular IP in place. A pool of back-up providers assists consumers with urgent care needs; which are intended to provide temporary urgent assistance. In the first 8 months of Fiscal Year 2022-2023, the SF IHSS PA served an average of 590 on-call hours to 76 unduplicated clients a month.

Selection

Grantee was selected through Request for Proposals 1066, which was competitively bid in March 2023.

Funding

Funding for this grant is provided through a combination of Federal, State, and County General Funds.

ATTACHMENTS

Appendix A
Appendix B

Appendix A – Services to be Provided

San Francisco IHSS Public Authority IHSS Back-up Provider Services (BUPS)

July 1, 2023 – June 30, 2027

I. Purpose of Grant

The purpose of this grant will be to improve consumer access to the Independent Provider mode of In-Home Supportive Services (IHSS) in temporary urgent situations. To accomplish this, an IHSS Back-up Provider Service will be provided.

II. Definitions

Audits

Audits shall be conducted in accordance with OMB Circular A-87 et seq., OMB Circular A-110 et seq., OMB Circular A-128, Public Law 98-502 et seq., OMB Circular A-133 et seq., and MPP section 10-150 through 10-153, MPP section 23-640, as appropriate; A financial and/or compliance audit may be conducted in any area of this contract that the City, State or Federal Agencies deem necessary.

California Department of Social Services (CDSS)

The State agency.

City

City and County of San Francisco, a municipal corporation.

Compliance Audit

An audit that covers all fiscal and programmatic terms and conditions of the contract, which includes, but is not limited to:

1. Any adjustment that is made to the authorized hours of services being provided by the Grantee; i.e., compare authorized hours to hours actually served;
2. The Grantee has served all requested hours seven days a week including nights, weekends and holidays;
3. All City required contract reports are sent in a timely manner;
4. All provider information and documentation is maintained by the Grantee according to contract specifications;
5. The Grantee has complied with the minimum wage and benefit requirements as specified in the grant;
6. The consumer has received written notification of the grievance/appeal rights regarding contractor's' delivery of service as specified in the grant;
7. The Grantee has maintained a personnel file for each provider

which includes, but is not limited to: provider name, address, telephone number, health insurance, and any other pertinent employee information, as well as documentation of provider training as described in Section VI. L., i.e., the documentation of provider orientation, skill development training for consumer care, and the completion/submission of timesheets.

8. The Grantee has supporting documentation of payments made to providers; i.e., who has signed and dated the timesheets; and the consumer has approved the hours worked;
9. The Grantee has submitted a current copy of the insurance policy to show actual cost for insurance premiums, and a copy of the insurance premium to show actual cost for workers compensation including the ex-mod rate;
10. The Grantee is in compliance with the Welfare and Institutions Code, the CDSS Manual of Policies and Procedures, Title XIX and Title XX provisions as applicable to the IHSS Program;
11. The Grantee is in compliance with the Equal Employment Opportunity rules and regulations as applicable to the IHSS Program.

Consumers

Persons determined eligible by the City for IHSS. To be eligible, consumers must be living in their own homes within the boundaries of the City and must meet one of the following conditions:

- a. Be sixty-five years or older or a person with a disability
- b. Currently receive Full-Scope Medi-Cal
- c. Receive approval from a Licensed Health Care Professional to receive IHSS through IHSS Health Certification Form SOC 873, per Welfare and Institutions Code section 12309.1

CMIPS

Case Management Information and Payrolling System, a statewide computer system that maintains case and payroll data for the IHSS Program

DAS

Department of Disability and Aging Services

Urgent

An instance in which an IHSS consumer has immediate personal care needs and no available IHSS provider to serve them in a timely manner.

Evaluation

The use of reviews to:

1. Determine the efficiency and effectiveness of social services delivery system's management, optimal utilization of resources and elimination of deficiencies in management information systems, administrative procedures or

organizational structure.

2. Determine whether desired results or benefits are being achieved, whether the objectives established by the regulations are being met and whether the agency has evaluated alternatives which might yield desired results at lower costs.

Financial Audit

An audit to determine compliance with all financial provisions in this contract which includes, but is not limited to, all the financial records, accounts and documents, the provider wages, benefits, as well as the budget line items and the budget narrative pertaining to this contract.

Grantee

San Francisco IHSS Public Authority

Homemaker Mode

This is the mode of service designated in CMIPS for back-up hours a consumer uses. All authorized back-up hours will be designated in this mode by an IHSS Social Worker for billing purposes.

HSA (SFHSA)

San Francisco Human Services Agency

Monitoring

The activity necessary to assure compliance with regulations and contractual requirements.

Order

Order of the City and County of San Francisco properly executed by the "Executive Director" and certified by the "Controller."

Provider

The eligible and approved individual who delivers the IHSS tasks authorized by the referring DAS Social Worker to the consumer.

Purchaser

Director of the Office of Contract Administration, City and County of San Francisco, or designated agent.

Service Hour

The basic unit of time authorized for each consumer. Grantee will track the service hours worked for all providers by consumer and report to the City for each billing cycle. Grantee will participate in billing Service Hours in CMIPS. A Service Hour is the actual time spent providing the services listed in Section IV - Description of Services, sick time coverage and travel expense. The Service Hour does not include training time, travel time, break time or time spent by Providers when consumers are not at home or refuse services.

Tier 2 Crime Expanded crimes for which a conviction, or incarceration following a conviction, within the last ten years would exclude an individual from being enrolled as a Provider per Welfare and Institutions Code section 12305.87, unless they have obtained a general exemption.

Work The work to be done in providing the consumer with IHSS.

III. Target Population

The target population consists of IHSS Consumers who are authorized by DAS to receive personal care, domestic, and related services from the IHSS Providers. The services are intended to benefit Consumers so that they are able to remain independent and live with dignity in their community.

This program is designed to serve all ethnicities and populations, with focused expertise to promote the unique cultural needs which have been identified as demonstrating the greatest economic and social need:

- Persons with low income
- Persons who are socially isolated
- Persons with limited English-speaking proficiency
- Persons from communities of color
- Persons who identify as LGBTQ+
- Persons at risk of institutionalization

IV. Eligibility for Services

To be eligible for services, clients must be:

1. An older adult aged 60 years or older or
2. An adult with a disability, aged 18-59 and
3. A resident of San Francisco, and
4. Has Medi-Cal (FFP or part of the Medi-Cal Expansion) and
5. Have a signed Health Care Certification Form (SOC 873) on file or equivalent alternative documentation.

V. Description of Services

A. Grantee shall provide, as authorized from DAS, a Back-up Provider Service for Consumers in urgent need of assistance due to (a) a need for personal care that cannot be met by an existing provider, or (b) the urgent need cannot be met because the recipient is transitioning to home-based care and does not yet have an identified provider.

1. Back-up services will include non-medical personal services limited to:
 - a) Bowel and bladder care such as assistance with enemas, emptying of catheter or ostomy bags, assistance with bed pans, application of diapers,

changing rubber sheets, assistance with getting on and off commode or toilet;

- b) Respiration limited to nonmedical services such as assistance with self-administration of oxygen and cleaning of intermittent positive pressure breathing (IPPB) machines.
- c) Consumption of food consisting of feeding or related assistance to consumers who cannot feed themselves or who require assistance with special devices in order to feed themselves;
- d) Routine bed baths;
- e) Bathing, oral hygiene, grooming;
- f) Dressing;
- g) Rubbing of skin to promote circulation, turning in bed and other types of repositioning, assistance on and off the seats and wheelchairs, or into or out of vehicles, and range of motion exercises, which shall be limited to the following:
 - 1) General supervision of exercises, which have been taught to the consumer by a licensed therapist or other health care professional to restore mobility restricted because of injury, disuse or disease.
 - 2) Maintenance therapy when the specialized knowledge and judgment of a qualified therapist is not required and the exercises are consistent with the patient's capacity and tolerance. Such exercises shall include the carrying out of maintenance programs; i.e., the performance of the repetitive exercises required to maintain function, improve gait, maintain strength, or endurance; passive exercises to maintain range of motion in paralyzed extremities; and assistive walking.
- h) Moving into and out of bed
- i) Care of and assistance with prosthetic devices and assistance with self-administration of medications.
- j) Assistance with self-administration of medications consists of reminding the consumer to take prescribed and/or over-the-counter medications when they are to be taken and setting up medi-sets.
- k) Routine menstrual care limited to application of sanitary napkins and external cleaning.
- l) Ambulation consisting of assisting the consumer with walking or moving the consumer from place to place.

B. Grantee shall provide urgent non-personal care services such as housecleaning, shopping for food, errands, laundry, meal preparation and meal clean up as authorized by DAS.

- 1. Domestic services are limited to the following: Sweeping, vacuuming, washing and waxing the floor surfaces; Washing kitchen counters and sinks; Cleaning the bathroom; Storing food and supplies; Taking out garbage; Dusting and picking up; Cleaning oven and stove; Cleaning and defrosting refrigerator; Bringing in fuel for heating or cooking purposes from a fuel bin in the yard; Changing bed linen; and Miscellaneous domestic services such as changing light

bulbs.

2. Related services limited to: Planning of meals; Preparation of meals includes such tasks as washing vegetables, trimming meat, cooking, setting the table, servicing the meal, cutting the food into bite-size pieces; Meal cleanup including washing drying, and putting away dishes, pots, utensils and culinary appliances; Routing mending, laundry, ironing, folding, and storing clothes on shelves or in drawers; Reasonable food shopping and other shopping/errands limited to the nearest available stores or other facilities consistent with the consumer's economy and needs.

C. Quality Assurance Requirements

1. Grantee must develop and implement a Policy and Procedures manual that includes selection protocol and oversight of Providers to ensure that the Providers selected are competent in performing IHSS tasks according to the State mandates and SFHSA standards.
2. Development (for new Grantee) or revisions (for incumbent Grantee) of the Policy and Procedures manual must be completed by the end of the first quarter of the first fiscal year of this contract.
3. Implementation of the Policy and Procedures manual must begin at the beginning of the second quarter of the first fiscal year of this contract.
4. Grantee must develop and implement an on-going recruitment program that ensures recruitment of qualified Providers to meet the needs of a diverse and at-risk population.
 - a) Development (for new Grantee) or revisions (for incumbent Grantee) of the recruitment program must be completed by the end of the first quarter of the first fiscal year of this contract.
 - b) Implementation of the recruitment plan must begin at the beginning of the second quarter of the first fiscal year of this contract.
5. Grantee must develop and implement Grievance Policy and Procedures that align with HSA's policies and that list required steps for timely communication to HSA of all grievances filed, actions taken to resolve the grievances, the results, and the follow up plans, within a maximum of 30 days of grievances filed by consumers.
 - a) Development (for new Grantee) or revisions (for incumbent Grantee) of the Grievance Policy and Procedures must be completed by the end of the first quarter of the first fiscal year of this contract.
 - b) Implementation of the Grievance Policy and Procedures must begin at the beginning of the second quarter of the first fiscal year of this contract.

6. Grantee must develop and maintain a defined Utilization Management (UM) structure and processes that include data collection, analysis and process improvement mechanisms.

- a) Development (for new Grantee) or revisions (for incumbent Grantee) of a UM structure and processes must be completed by the end of the first quarter of the first fiscal year of this contract.
- b) Implementation of a UM structure and processes must begin at the beginning of the second quarter of the first fiscal year of this contract.

7. Grantee must develop and implement a Confidentiality Program that complies with HIPAA, SF City and HSA confidentiality requirements and describe in detail how confidentially of consumer information and records are maintained.

- a) Development (for new Grantee) or revisions (for incumbent Grantee) of the Confidentiality program must be completed by the end of the first quarter of the first fiscal year of this contract.
- b) Implementation of the Confidentiality plan must begin at the beginning of the second quarter of the first fiscal year of this contract.

V. Location and Time of Services

A. Grantee will dispatch a Back-Up Provider who is willing to be available for immediate personal assistance to Consumers living in San Francisco in their homes.

B. Grantee shall make IHSS Back-up Provider Services available:

1. Business Hours Monday-Friday 8:30am – 5:00pm,
2. After hours on Monday – Friday 5:00pm – 8:00pm, and
3. After hours on weekends and holidays 8:30am – 8:00pm.

This includes having a call-in number, an answering service and staff available to answer phones and call consumers back to discuss their requests for Back-up Providers. During non-business hours, Back-up staff will check the answering service and return phones calls at least once every hour.

VI. Grantee Responsibilities

A. Grantee will hire, train, and manage IHSS Back-up Providers to deliver home care activities as defined in Sections IV A and B above to Consumers in urgent situations.

B. Grantee will ensure that all IHSS Back-up Providers meet the same requirements for employment as IHSS Providers as indicated by California Department of Social Services (CDSS).

1. Grantee shall not apply a waiver for a Tier 2 criminal conviction, but may apply a general exemption.

C. Grantee will inform Consumers that IHSS hours served through the IHSS Back-up Provider Service will be deducted from the Consumers' total number of monthly hours authorized by the DAS IHSS program.

D. Grantee will refer all requests for IHSS Back-up Provider Services received during regular business hours to the DAS IHSS program, or if the Consumer is exiting from a hospital, to the DAS IHSS Community Transitions program (CTP) for approval prior to providing services.

E. Grantee will notify the DAS IHSS or CTP program by email the next business day regarding IHSS Back-up Provider Services provided during non-business hours.

F. Grantee shall notify DAS IHSS or CTP program, within one working day, of each instance of non-receipt of scheduled services with an explanation and effective dates. However, if the non-receipt of services indicates a possible danger to the safety of the Consumer, Grantee shall notify DAS IHSS or CTP program immediately, and, if necessary, will contact Adult Protective Services and other emergency services as needed.

G. Grantee shall provide a mandatory orientation, to include topics addressed in CDSS MPP Division 19 (confidentiality) and Division 21 (Non-Discrimination) to each new and existing service provider within one month of hiring or initiation of contract.

H. Grantee shall assess the skill level of each employee in relation to the personal care services he/she will be required to perform and provide training that relates to job competencies. These assessments must be performed annually. Grantee shall maintain records of all trainings and assessments provided to Providers to meet minimum standards of competency. These records shall be made available to City upon request.

I. Grantee shall provide City by the tenth (10th) working day of each month, a monthly "activity report". This report will include all information listed in Section X. A. and any other items City deems necessary. This report is to be e-mailed to the DAS IHSS Program and entered into the City's CARBON system on a monthly basis. Reports uploaded into CARBON shall not contain any client identifying data, i.e. social security number or name. Such information must be redacted.

J. Grantee will participate in billing all hours served for eligible Consumers monthly, including obligating and collecting Share of Cost when appropriate. Grantee will email a monthly report to DAS staff that includes all billable hours by client served for the previous month. DAS staff will reconcile this report with CMIPS and provide information to Grantee to directly bill into CMIPS.

K. Grantee will work with DAS staff as needed to identify and assist frequent users. Grantee will alert consumer of 80 hour maximum and develop emergency plans, in conjunction with IHSS Social Workers, for 100% of consumers who are deemed frequent

users, those who reach 80% usage of their maximum 80 hours or 160 hours for severely impaired consumers as described in CDSS All County Letter 22-65.

L. Grantee shall maintain a personnel file for every provider. The personnel file shall include, but is not limited to:

1. Name and address of provider;
2. Telephone number;
3. Social Security number;
4. Driver's license number;
5. All training given to provider
6. Provider's hire date and termination date;
7. Provider's emergency contact person;
8. Any adverse action as well as any record of complaints; and
9. Any other information City deems necessary.

M. Grantee shall provide to the City upon request: budget, fiscal, statistical, program and other data as may be required by the City.

N. Grantee shall provide to the City upon request

1. Names of all employees working under this contract;
2. Their addresses and telephone numbers; and
3. Their training records.

O. Items I, K, and M shall be used for the purpose of an ongoing evaluation and assessment of the services provided by the Grantee.

P. The Grantee liaison shall provide any information, as requested by the City, which documents activity and accomplishments of the program.

Q. Grantee shall comply and require its officers and employees to comply with the provisions of Section 10850 of the Welfare and Institutions Code and Division 19 of the CDSS Manual of Policies and Procedures to assure that:

1. All individuals' applications and records made or kept by a public officer or agency in connection with the administration of the provision of the Welfare and Institutions Code relating to any form of public social services for which grants in aid are received by this State or by the Federal Government will be confidential and will not be open to examination for any purpose not directly connected with the administration of public social services; and
2. No person will publish or disclose, or use or permit, or cause to be published, disclosed or used, any confidential information pertaining to an applicant or consumer.

Grantee shall inform all of its employees, agents, subcontractors and partners of the above provision and that any person knowingly and intentionally violating the provisions of said State law is guilty of a misdemeanor. Grantee shall inform all of its employees, agents, subcontractors and partners of the above provision and that any person knowingly and intentionally violating the provisions of said State law is guilty of a misdemeanor.

R. Grantee shall comply with the Electronic Visit Verification (EVV) federal statutory requirements pursuant to Subsection I of Section 1903 of the Social Security Act (42 U.S.C. 1396b) by ensuring the EVV system verifies for all providers: type of service performed; individual receiving the services; date of service; location of service delivery; individual providing services; and times the service begins and ends.

S. Grantee shall maintain a local office in San Francisco, California, which will remain open for business Mondays through Fridays between the hours of 8:30am and 5:00pm except for designated holidays. It shall be staffed at all times with appropriate supervisory personnel during business hours.

T. Grantee shall not make any charges to IHSS consumers for services, with the exception of owed Medi-Cal Share of Cost.

U. Grantee shall obtain prior written approval from the City before subcontracting any of the services delivered under this contract. Any subcontracting shall be subject to all applicable provisions of this Grant, and all applicable State and Federal regulations. The Grantee shall be held responsible by the City for the performance of any subgrantee.

V. Grantee shall submit reports or other data in the format as required for the automated Case Management, Information and Payrolling System (CMIPS II), the management information system in use in the CDSS for IHSS. This includes participating in monthly billing to CMIPS for Homemaker Mode Service Hours.

W. Grantee shall abide by the provisions of Title VI and Title VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, as amended, the Age Discrimination Act of 1975, the Welfare and Institutions Code, Section 10000, CDSS MPP Division 21, and all other applicable federal and state laws to ensure that employment practices and the delivery of social services are non-discriminatory.

X. Grantee shall comply with U.S. Executive Order 11246, entitled "Equal Employment Opportunity". This is amended by U.S. Executive Order 11375 and supplemented in 45 CFR, Part 60. Contractor shall not discriminate against any employee, or applicant for employment on the basis of race, national origin or ancestry, religion, sex, marital status, political affiliation, age or handicap. Practices in hiring, compensation, benefits, and firing are among the employment practices subject to this requirement.

Y. Grantee shall orient all staff to reporting of any suspected elder and dependent adult abuse pursuant to Welfare & Institutions Code (WIC) Sections 15600 et seq. Suspected

incidents of abuse should be immediately reported to the City, followed by a written report within two working days.

Z. Grantee shall provide a system by which consumers of service shall have the opportunity to express and have their grievances and complaints considered regarding Grantee's delivery of services. The grievances and complaints of the consumers shall be included in the required monthly report submitted to the City.

AA. Grantee shall provide informational presentations at community meetings as designated by the City about the system for consumers to express their views, grievances and complaints.

VII. City Responsibilities

- A.** City shall purchase IHSS from Grantee for appropriate cases, where such services are not otherwise available.
- B.** City shall have sole authority for determination of need for IHSS, the level and quality of services required, and the eligibility of individuals to be served.
- C.** City shall assess the continuing need for services and evaluate the effectiveness and quality of services performed by the Grantee pursuant to this contract. This evaluation may include, but is not limited to, inquiries concerning individual employees of the Grantee.
- D.** Assessment and authorization of IHSS shall be accomplished by City staff at least every twelve to eighteen months.
- E.** City shall have the exclusive right to terminate the consumer's participation in the IHSS Program at any time based on regulatory requirements.
- F.** City shall have the exclusive right to terminate provision of service under this contract to any consumer.
- G.** City shall have the exclusive right to authorize services for a consumer. The City shall not be liable for the cost of such services furnished to any consumer unless the City designates authorization in writing.
- H.** City shall maintain records, which will include, but not be limited to, the assessment of need, case opening and closing dates, and a description of actual services to be provided.
- I.** City shall assure that in the event a consumer's hours are changed for any reason, or City takes any other action, the consumer shall maintain the right to a State hearing. A State hearing shall be available to a claimant who is dissatisfied with a City action (regardless of mode) and a request for hearing may be either written or oral.

Claimants are encouraged to use the reverse side of the Notice of Action (NA 690) to request a hearing.

- J.** City shall establish a procedure, in compliance with Section D of the proposal, by which each consumer shall have the opportunity to initiate and participate in a City review in order to present grievances concerning services under this grant.
- K.** City shall assist the Grantee in obtaining complete and current information with respect to pertinent statutes, regulations, policies, procedures and guidelines, which apply to the delivery of IHSS.
- L.** City shall coordinate services with other community resources and activities.
- M.** City shall provide orientation to all appropriate social services staff regarding Grantee's proposal, role, and responsibilities and contracting agreements.
- N.** City shall administer liquidated damages for non-performance.
- O.** City shall ensure that during the effective dates of the contract, the contract agency shall keep all records, which are necessary to fully disclose the extent of services to the consumer.
- P.** At the expiration of the contract the City shall keep IHSS records for a minimum of three years from the date the State submits the last expenditure report to the U.S. Department of Health and Human Services (HHS).
- Q.** CDSS MPP Sections 23-353 through 23-356 set forth the requirements for certain records, which have retention periods that vary from the general rule. Some records require retention periods of more than three years; i.e., records and their supporting documents must be retained when there is an open Federal or State audit; case records in which criminal or civil litigation was involved are to be retained for three years after the final claim is submitted for Federal reimbursement.
- R.** On request, the City shall furnish records for audit to the State of California or the U.S. Department of Health and Human Services or their duly appointed representatives.
- S.** City staff or an independent auditor shall conduct monitoring and prepare evaluations of this grant in accordance with CDSS MPP sections 10-150 through 10-153 and MPP section 23-640. The City monitoring and evaluations are to determine a fiscal and program appraisal of the successes and/or deficiencies of the IHSS grant; and to determine the extent to which the program is achieving its purposes.
- T.** The City shall ensure on-going monitoring and prepare quarterly evaluation of grants for the purchase of social services and send the completed monitoring and evaluation reports to CDSS within 30 calendar days following each quarter.

U. The City shall notify the Grantee in writing within 30 calendar days of the discovery of any potential problems during any monitoring and evaluation examination.

V. The City may monitor the Grantee by field reviews, audit claims, monthly review of all records, and any other means the City deems necessary.

VIII. Service Objectives

On a quarterly basis, Grantee will meet the following service objectives:

A. Grantee will fulfill 95% of all service hours requested when Consumer accepts them and is available.

B. Grantee will alert consumer of 80 hour maximum and develop emergency plans, in conjunction with IHSS Social Workers, for 100% of consumers who are deemed frequent users, those who reach 80% usage of their maximum 80 hours or 160 hours for severely impaired consumers as described in CDSS All County Letter 22-65.

IX. Outcome Objectives

On a quarterly basis, Grantee will meet the following outcome objectives:

A. At least 70% of frequent users of IHSS Back-up Provider services who have developed emergency plans will show a reduction in the frequency of their use of IHSS Back-up Provider services as shown by Back-Up Provider utilization reports.

On an annual basis, Grantee will meet the following outcome objective:

B. In a written survey approved by DAS and conducted by the Grantee, a minimum of 85% of the consumers will indicate:

1. General satisfaction with the emergency care services provided (4 or 5 on a five point scale).
2. Consumers state they feel safe in the care of the Providers (4 or 5 on a five point scale).

X. Reporting Requirements

A. Grantee will report monthly the following defined summary of data points and the year-to-date total:

1. Number of requests for back-up service;
2. Number of service dates;
3. Number of clients (unduplicated);
4. Number of hours authorized;
5. Number of hours served;
6. Reasons for use (categorized upon agreement);

7. Number of hours cancelled within control (no provider available, could not meet specific request within contract scope, etc); and
8. Number of hours cancelled outside of control (Consumer did not want, Consumer cancelled after scheduled, Consumer not home (lock-out) for shift).
9. Referral Source - IHSS, APS, DAS Integrated Intake, or Self.

B. Grantee will provide a quarterly report of activities. This report will include at minimum:

1. Total number of hours authorized and served as described in Section IV - Description of Services;
2. A UM report that includes an analysis of use of back-up services in regard to referral frequency/duration, Consumer and staffing trends.
3. Progress toward the quarterly objectives described in Section VIII - Service Objectives and Section IX. – Outcomes Objectives.

Reports are due 15 days after the close of the reporting period.

C. Grantee will provide an annual report summarizing the contract activities, referencing the tasks as described in Section IV - Description of Services, VIII - Service Objectives, and IV - Outcome Objectives. This report will also include accomplishments and challenges encountered by the Grantee. This report is due 15 days after the completion of the program year.

D. The reports are to be submitted electronically to the following staff:

Michael Powell, Program Support Analyst
Michael.Powell@sfgov.org

Additionally, reports must be loaded into HSA's Contracts Administration, Reporting, and Billing Online (CARBON) system.

XI. Monitoring Activities

A. Program Monitoring: Program monitoring will include review of client eligibility, documentation of service delivery, client files and progress toward service and outcome objectives.

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	E	F
1	Appendix B, Page 1					
2						
3	HUMAN SERVICES AGENCY BUDGET SUMMARY					
4	BY PROGRAM					
5	Name				Term	
6	San Francisco In Home Supportive Services Public Authority				7/1/23-6/30/27	
7	(Check One) X New Renewal ____ Modification ____					
8	If modification, Effective Date of Mod.			No. of Mod.		
9	Program: In Home Supportive Services Back-up Provider Services					
10	Budget Reference Page No.(s)					
11	Program Term	7/1/23-6/30/24	7/1/24-6/30/25	7/1/25-6/30/26	7/1/26-6/30/27	7/1/23-6/30/27
12	Expenditures					
13	Salaries & Benefits	\$271,643	\$271,643	\$271,643	\$271,643	\$1,086,572
14	Operating Expense	\$53,936	\$53,936	\$53,936	\$53,936	\$215,744
15	Subtotal	\$325,579	\$325,579	\$325,579	\$325,579	\$1,302,316
16	Indirect Percentage (%)					\$0
17	Indirect Cost (Line 16 X Line 15)	\$0	\$0	\$0	\$0	\$0
19	Total Expenditures	\$325,579	\$325,579	\$325,579	\$325,579	\$1,302,316
20	HSA Revenues					
21	General Fund					\$0
22						
23						
24						
25						
26						
27						
28						
29	TOTAL HSA REVENUES	\$0				\$0
30	Other Revenues					
31						
32						
33						
34						
35						
36	Total Revenues	\$0				\$0
37	Full Time Equivalent (FTE)					
39	Prepared by:		Telephone No.:		Date	
40	HSA-CO Review Signature: _____					
41	HSA #1					10/25/2016

	A	B	C	D	E	F	G	H	I	J
1	Appendix B, Page 2									
2										
3										
4	Program Name:									
5	In Home Supportive Services Back-up Provider Services									
6										
7	Salaries & Benefits Detail									
8										
9										
10										
11						7/1/23-6/30/24	7/1/24-6/30/25	7/1/25-6/30/26	7/1/26-6/30/27	
		Agency Totals		HSA Program		DHS Program	DHS Program	DHS Program	DHS Program	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	7/1/23-6/30/27
12	POSITION TITLE									
13	On Call Providers	\$201,217	1.00	100%	1.00	\$201,217	\$201,217	\$201,217	\$201,217	\$804,868
14					-	\$0				\$0
15					-	\$0				\$0
16					-					\$0
17					-					\$0
18					-					\$0
19					-					\$0
20					-					\$0
21					-					\$0
22					-					\$0
23					-					\$0
24					-					\$0
25					-					\$0
26					-					\$0
27					-					\$0
28					-					\$0
29					-					\$0
30	TOTALS	\$201,217	1.00	100%	1.00	\$201,217	\$201,217	\$201,217	\$201,217	\$804,868
31										
32	FRINGE BENEFIT RATE	35%								
33	EMPLOYEE FRINGE BENEFITS	\$70,426				\$70,426	\$70,426	\$70,426	\$70,426	\$281,704
34										
35										
36	TOTAL SALARIES & BENEFITS	\$271,643				\$271,643	\$271,643	\$271,643	\$271,643	\$1,086,572
37	HSA #2									10/25/2016

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Appendix B, Page 3												
2													
3													
4	Program Name:												
5	In Home Supportive Services Back-up Provider Services												
6													
7	Operating Expense Detail												
8													
9													
10													
11	TOTAL												
12	<u>Expenditure Category</u>		TERM	<u>7/1/23-6/30/24</u>	<u>7/1/24-6/30/25</u>	<u>7/1/25-6/30/26</u>	<u>7/1/26-6/30/27</u>					\$	-
13	Rental of Property												\$0
14	Utilities(Elec, Water, Gas, Phone, Garbage)												\$0
15	Office Supplies, Postage												\$0
16	Building Maintenance Supplies and Repair												\$0
17	Printing and Reproduction												\$0
18	Insurance												\$0
19	Staff Training												\$0
20	Staff Travel-(Local & Out of Town)			\$35,568	\$35,568	\$35,568	\$35,568						\$142,272
21	Rental of Equipment												\$0
22	CONSULTANT/SUBCONTRACTOR DESCRIPTIVE TITLE												\$0
23													\$0
24													\$0
25													\$0
26													\$0
27													\$0
28	OTHER												\$0
29	Cell Phone Stipends			\$10,368	\$10,368	\$10,368	\$10,368						\$41,472
30	Infectious Control Kits			\$8,000	\$8,000	\$8,000	\$8,000						\$32,000
31													\$0
32													\$0
33													\$0
34													\$0
35	TOTAL OPERATING EXPENSE			\$53,936	\$53,936	\$53,936	\$53,936						\$215,744
36													
37	HSA #3												10/25/2016