



**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: CINDY KAUFFMAN, DEPUTY DIRECTOR
ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS

DATE: MAY 8, 2024

SUBJECT: NEW GRANT: **MENTAL HEALTH ASSOCIATION OF SAN FRANCISCO (NON-PROFIT)** TO PROVIDE SOCIAL SUPPORT SERVICES TO COLLECTING BEHAVIORS

DS
EE

GRANT TERM: 7/1/2024-6/30/2028

GRANT AMOUNT:	<u>New</u>	<u>Contingency</u>	<u>Total</u>
	\$1,462,791	\$146,279	\$1,609,070



London Breed
Mayor

Trent Rhorer
Executive Director

ANNUAL AMOUNT	<u>FY 24/25</u>	<u>FY 25/26</u>	<u>FY 26/27</u>	<u>FY 27/28</u>
	\$352,292	\$362,861	\$370,118	\$377,520

Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
FUNDING:	\$1,462,791			\$146,279	\$1,609,070
PERCENTAGE:	100%			100%	

The Department of Disability and Aging Services (DAS) requests authorization to enter into a grant with Mental Health Association of San Francisco for the period of July 1, 2024, to June 30, 2028, in an amount of \$1,462,791, plus a 10% contingency for a total amount not to exceed \$1,609,070. The purpose of the grant is to provide social support services to improve quality of life and to prevent eviction and homelessness for individuals with hoarding and cluttering challenges, and to improve the skills of family members and professionals working with individuals with hoarding and cluttering challenges.

Background

Compulsive hoarding and cluttering is a serious and treatable disorder. Hoarding Disorder causes people who suffer from it to feel isolated. These behaviors impede the development of relationships, lead to safety concerns, and can result in eviction. Hoarding Disorder and Collecting Behavior terminology is used interchangeably.

With over 20 years of experience, the Grantee has established various service delivery models including drop-in support groups, family support group, and cognitive behavioral therapy (CBT) treatment group among others. The Grantee provides support and resources to individuals with hoarding and cluttering challenges and their family members. They have also created an online resource tool that links consumers not only to hoarding and cluttering resources, but to other community resources and services, as well.

For over a decade, the program has experienced a high demand for services from clients and community partners. The services offered through the program are highly valued by its participants, which has enabled the program to thrive since its inception.

Services to be Provided

Services will be provided in the Grantee's main location at 870 Market Street and throughout San Francisco. Services include but are not limited to provide trainings in the community to service providers, landlords, attorneys, and family members. In addition, community outreach, support groups, treatment groups, family support groups, expansion of the resource database, expanded community collaborations, and one-to-one information and referrals will also be provided.

For more specific information regarding the services to be provided, please refer to the attached Appendix A.

Selection

Grantee was selected through Request for Proposals 1115, which was competitively bid in March 2024.

Funding

Funding for this grant is provided through County General Funds.

ATTACHMENTS

Appendix A

Appendix B

Appendix F

APPENDIX A – SERVICES TO BE PROVIDED BY GRANTEE**Mental Health Association of San Francisco****Social Support Services for Collecting Behaviors****July 1, 2024 to June 30, 2028****I. Purpose**

The purpose of this grant is to provide social support services to improve the quality of life and to prevent eviction and homelessness for individuals with hoarding and cluttering challenges, and to improve the skills of family members and professionals working with individuals with hoarding and cluttering challenges.

II. Definitions

Adult with a Disability	Person 18-59 years of age living with a disability.
At Risk of Institutionalization	To be considered at risk of institutionalization, a person must have, at a minimum, one of the following: 1) functional impairment in a minimum of two Activities of Daily Living (ADL): eating, dressing, transferring, bathing, toileting, and grooming; or 2) a medical condition to the extent requiring the level of care that would be provided in a nursing facility; or 3) be unable to manage his/her own affairs due to emotional and/or cognitive impairment, evidenced by functional impairment in a minimum of three Instrumental Activities of Daily Living (IADLs): preparing meals, managing money, shopping for groceries or personal items, performing housework, using a telephone.
SF DAS 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 Online System
City	City and County of San Francisco, a municipal corporation

Cognitive Behavioral Therapy (CBT)	CBT is a common type of psychotherapy (also known as talk therapy) that combines the theories and treatment techniques from cognitive therapy and behavior therapy to deal with many mental health conditions and emotional challenges such as anxiety, depression, hoarding disorder, and phobias. CBT recognizes that our thoughts, feelings, and behaviors are all connected. CBT-based treatments focus on identifying and changing negative thinking and problematic behaviors by applying cognitive and behavioral techniques to achieve desired outcomes. (Defined in APA Dictionary of Psychology, American Psychological Association)
Communities of Color	An inclusive term and unifying term for persons who do not identify as White, who have been historically and systemically disadvantaged by institutionalized and interpersonal racism.
DAS	Department of Disability and Aging Services
Disability	A condition or combination of conditions that is attributable to a mental, cognitive or physical impairment, including hearing and visual impairments, that results in substantial functional limitations in one (1) or more of the following areas of major life activity: a) Self-care: activities of daily living (ADL), and instrumental activities of daily living (IADL); b) Capacity for independent living and self-direction; c) Cognitive functioning, and emotional adjustment
Grantee	Mental Health Association of San Francisco (MHASF)
Hoarding Disorder (HD)/Collecting Behaviors	HD is the persistent difficulty discarding or parting with possessions, regardless of their actual value. This difficulty is due to a perceived need to save the items and to the distress associated with discarding them. The difficulty discarding possessions results in the accumulation of possessions that congest and clutter active living areas compromising the usability of the space. If living areas are uncluttered, it is only because of the interventions of third parties (e.g., family members, cleaners, or the authorities). The resulting hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (including maintaining a safe environment for oneself or others). The hoarding is not attributable to another medical condition (e.g., brain injury, cerebrovascular disease, Prader-Willi syndrome). (Defined in the Diagnostic and Statistical Manual-5, American Psychiatric Association); Hoarding Disorder and Collecting Behavior terminology is used interchangeably.

HSA	Human Services Agency of the City and County of San Francisco
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.
Limited English-Speaking Proficiency	Any person who does not speak English well or is otherwise unable to communicate effectively in English because English is not the person's primary language.
Low Income	Having income at or below 300% of the federal poverty line defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. This is only to be used by consumers to self-identify their income status, not to be used as a means test to qualify for the program.
Older Adults	Person who is 60 years or older. Used interchangeably with senior.
OCP	Office of Community Partnerships
Senior	Person who is 60 years or older. Used interchangeably with older adult.
Socially Isolated	Having few social relationships and few people to interact with regularly.
SOGI	Sexual Orientation and Gender Identity; Ordinance No. 159-16 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 (Chapter 104, Sections 104.1 through 104.9).

III. Target Population

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:

- 1) Persons with low income
- 2) Persons who are socially isolated
- 3) Persons with limited English-speaking proficiency
- 4) Persons from communities of color
- 5) Persons who identify as LGBTQ+
- 6) Persons at risk of institutionalization

IV. Client Eligibility

To be eligible for services, clients must be:

- An older adult aged 60 years or older or
- An adult with a disability, aged 18-59 and
- A resident of the City and County of San Francisco and
- Have a demonstrated behavior related to hoarding disorder.

V. Location and Time of Services

The details of the sites and operational hours are attached in the Site Chart (Appendix F).

VI. Description of Services

Training and Education

MHASF will continue to provide trainings and presentations facilitated by peer support specialists with lived experience with collecting behaviors through MHASF's Training Institute. Information on various trainings are available on the MHASF website, at informational fairs and community events, at the annual conference, and through targeted emails to an extensive database of previous attendees and other contacts who have expressed interest in trainings. There will also be trainings provided specifically tailored to meet requests. There is a sign-in sheet and evaluation form for all trainings.

Peer Support Group

MHASF will offer free drop-in support groups for hoarding and cluttering behaviors. Drop-in groups will meet four times a month either on-site or via telehealth format such as Zoom. Drop-in groups will be facilitated by peers who have lived experience with hoarding and cluttering and will provide community support for residents of San Francisco.

Advanced Drop-in Group

A trained peer support specialist specializing in hoarding and cluttering as their own lived experience facilitates advanced drop-in groups. This action-oriented, person-centered recovery support group is for participants who have completed the "Buried in Treasures" group and/or the cognitive behavioral therapy (CBT) treatment group. Buried in Treasures (BIT) offers evidence-based cognitive behavioral therapy for hoarding behaviors. An MHASF clinician and peer support specialist provide concrete and specific techniques on how to release belongings and reduce the acquisition of additional possessions. The class is a safe and non-judgmental space in which to broaden one's understanding of hoarding behaviors, while participants develop a personal plan to increase motivation and create change. This advanced drop-in group utilizes bibliotherapy, coupled with an "action hour" in which participants engage in goal setting and bookending, a short-term goal setting exercise with a peer support specialist to achieve personal goals. For example, the peer support specialist will set the timer for 15 minutes and set a goal with the participant and they check in on how the goal was met or perceived barriers during goal tasking. These groups meet twice a month with an average attendance rate of 15 participants per session.

Treatment Group

The treatment group will be 16 weeks of intensive group therapy sessions starting with psychoeducation about hoarding and cluttering, cognitive behavioral therapy (CBT) and how participants can use CBT in their own situations. The recruitment process will involve a screening interview that attempts to determine if the individual is ready and fit to take part in an intensive group therapy environment. The total number of individuals selected will be a minimum of 8 unduplicated San Francisco residents. Participants will be given a workbook titled “Buried in Treasures.” In the early stages of the group, participants will be given a pre-test along with an initial home visit. The CBT treatment will involve homework that includes identifying triggers, basic CBT tools and techniques, and flooding and exposure exercises (a form of behavior therapy and desensitization). Along with the CBT techniques and tools, the treatment group will focus on relapse prevention work, and finally as the group nears its end, participants will be given a post-test and provided in-person or telehealth-based home visit.

Family and Friends Support Group

MHASF initiated the first family and friends support group in spring 2015. Through its course, MHASF has found that the most effective method is the combination of a peer and a clinician led approach. The family group is structured in a way to both provide support to family members and friends and to help build their skills to offer effective support to their loved ones. The structure of topics is as follows: 1) Providing Decluttering Skills 2) Learn Effective Communication Strategies, 3) Problem Solving, and 4) Self-Care and Boundaries. Groups meet monthly during the fiscal year.

Information and Referral Services

MHASF will provide information and referral services by phone, letter, walk-ins, and e-mail to persons seeking mental health services, hoarding and cluttering support, and other social services in the San Francisco Bay Area. MHASF staff will work with individuals to connect them to the most appropriate resources. Referrals will be made through a call center and referral management system. In the summer of 2016, MHASF launched a public and free online directory to connect people with resources, incorporating the continuously growing database, which currently includes over 1,000 records.

Community Outreach and Events

MHASF will continue to host numerous community events and outreach efforts to ensure as many individuals as possible are being reached. In 2019, MHASF hosted the Redefining Crazy Conference, which brings together peers, advocates, providers, and community-based stakeholders, government leaders, and technology developers in a collaborative and action-oriented learning environment to discuss what is “crazy” about the mental health system. After much success with this conference, an additional mini conference on hoarding and cluttering will be added. The Mini Conference on Hoarding and Cluttering will be hosted annually in San Francisco, beginning April 2021. The goal of this conference is to convene experts, stakeholders, scientists, and peers to discuss matters and new information on hoarding and cluttering.

Online Resource Tool

MHASF will continue to maintain a free and searchable public online resource clearinghouse called San Francisco Resource Connect. This resource database has nearly 1,000 records of programs, services, and organizations from San Francisco Bay Area and

throughout California. MHASF's database has resources to support the issues around the social determinants of health (e.g., education, access to care, housing, legal aid, environment, etc.). MHASF will continue to update this database.

VII. Contractor Responsibilities/Units Of Service and Definitions

During the term of the grant, the Grantee will be responsible for the following activities:

Community Training

Grantee shall conduct training for professionals and other groups to provide better interventions for the target population. The program manager or a training consultant selected by the Grantee will facilitate trainings. Community training hours include time for pre/post trainings and content development. Grantee shall provide **60 hours** of community trainings and presentations annually. Total number of participants in trainings and presentations is **500 unduplicated consumers** annually.

Support Group

Grantee shall provide peer-led support groups for individuals with challenges related to hoarding disorder to work on issues they face in their lives related to compulsive hoarding. The peer facilitator will also assist support group members with creating goals for their recovery. The Grantee shall provide **90 hours** of support group services and serve **50 unduplicated participants** annually.

Treatment Group

A clinician led treatment group, utilizing Cognitive Behavioral Therapy (CBT), to work with individuals with hoarding and cluttering challenges who want to set clear goals and work through them utilizing treatment. The Grantee shall provide **32 hours of treatment groups** and serve **8 unduplicated participants** annually.

Information and Referral

To provide written and on-line resources related to individuals with hoarding and cluttering challenges by phone and/or in person. The Grantee shall provide **1500 information and referral contacts** annually. A contact is one interaction with an individual either in person or through the agency hotline.

Community Outreach

Community outreach will occur at **30 community events** in San Francisco and the Grantee will facilitate **30 community presentations** annually.

Family Support Group

Peer member led group for family and friends of individuals with hoarding challenges. The group provides emotional support, promotes service utilization and creates a safe, confidential space to discuss experiences. The Grantee will provide **24 hours** of family support groups and serve **12 unduplicated participants** annually.

Online Resource Tool Development

Provide and maintain an online resource guide and database that functions as an interactive, accessible resource tool. During annual monitoring visit, Grantee shall provide a written **summary on web-site traffic** for that fiscal year.

VIII. Service Objectives

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

1. Grantee will provide a total of **60 hours of community training** to professionals and other groups.
2. Grantee will provide community trainings to a total of **500 unduplicated participants**.
3. Grantee will provide a total of **90 hours of peer-led support groups** in addition to **36 hours of advanced peer-led support groups**.
4. Grantee will provide **support group education** to a total of **50 unduplicated participants** of which **14** will attend the advanced peer-led support group.
5. Grantee will provide a total of **32 hours of clinician-led treatment groups**.
6. Grantee will provide **treatment group education** to a total of **8 unduplicated participants**.
7. Grantee will provide a total of **1500 information and referral contacts**.
8. Grantee will provide a total of **30 community outreach events**
9. Grantee will provide a total of **30 community presentations**.
10. Grantee will provide a total of **24 hours of family and friends support group** meetings.
11. Grantee will provide **family and friends support** to **12 unduplicated participants**.
12. Grantee will maintain and update an online resource guide and database throughout the term of the grant.

IX. Outcome Objectives

On an annual basis the Grantee will be required to meet specific outcome objectives that demonstrate and measure the impact, outcomes, and/or results of the services:

1. Training and Education

Participants trained rate the training as good or excellent. Target: 80%

Participants trained or have received a presentation report improved understanding of compulsive hoarding and systems linkages. Target: 80%

2. Support Group and Treatment Group

Consumers served by the support group and treatment group indicate that they have reduced their compulsive hoarding and cluttering. Target: 80%

3. Family Support Group

Family and friends attending support groups report feeling better able to manage and support themselves and the individual with hoarding and cluttering challenges. Target: 80%

4. Information and Referral Services

Consumers that received or accessed in-person and telephone information and referral services indicate that the information received was appropriate and useful. Target: 80%

Based on an annual satisfaction survey created by grantee and approved by DAS/OCP and with a sample size of at least 65% of the annual unduplicated consumers.

X. Reporting Requirements

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

- A. The Grantee will enter into SF DAS GetCare the consumer data including the Intake Form by the 5th working day of the month for the preceding month's services.
- B. Grantee will enter into the SF DAS GetCare Service Unit section all the units of service by the 5th working day of the month for the preceding month.
- C. The Monthly, quarterly, and annual reports must be entered into the Contracts Administration, Reporting, and Billing Online (CARBON) system as required by DAS and Contracts Department staff.
- D. Grantee program staff will complete an Elder Abuse Mandated Reporter Training and the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of these trainings.
- E. Grantee shall submit Community Services Block Grant (CSBG) time study to HSA/DAS for the months of February, May, August and November. The time study is due on the 10th day following the time study month.
- F. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31st each grant year. This report must be submitted into the CARBON system.
- G. Grantee shall develop and deliver a bi-annual summary report of SOGI data collected in the year as requested by DAS/HSA. The due dates for submitting the summary report are January 10th (for July 1 – December 31 data) and July 10th (for January 1 – June 30 data).
- H. Grantee will provide an annual consumer satisfaction survey report to DAS by March 15 or a date agreed upon by DAS and grantee each grant year.
- I. Grantee will develop and maintain with OCP's approval, an updated Site Chart (using OCP's format) with details about the program.
- J. The Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable and to take all reasonable efforts to implement HIPAA requirements.
- K. Grantee shall develop and deliver ad hoc reports as requested by HSA/DAS/OCP.
- L. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
- M. For assistance with reporting and contract requirements, please contact:

Dong Liu
Program Analyst
DAS Office of Community Partnerships
dong.c.liu@sfgov.org

Tara Alvarez
Contract Manager
HSA Office of Contract Management
tara.alvarez@sfgov.org

XI. 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 on SF DAS 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 that program staff have completed the California Department of Aging (CDA) Security Awareness Training; review of program operation, which includes a review of a written policies and procedures manual of all 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 director list and whether services are provided appropriately according to Sections VI, VII, VIII, and IX.

- 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.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name						Term
Mental Health Association of San Francisco						7/1/24 - 6/30/28
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>						
Program: Support for Collecting Behaviors						
Budget Reference Page No.(s)						(Total)
Program Term	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/24 - 6/30/28	
DAS Expenditures						
Salaries & Benefits	\$267,569	\$276,944	\$283,562	\$289,541	\$1,117,617	
Operating Expenses	\$16,281	\$16,097	\$15,789	\$16,247	\$64,414	
Subtotal	\$283,850	\$293,041	\$299,351	\$305,788	\$1,182,031	
Indirect Percentage (%)	15.00%	15.00%	15.00%	15.00%	15.00%	
Indirect Cost	\$42,578	\$43,956	\$44,903	\$45,868	\$177,305	
Capital/Subcontractor Expenditures	\$25,864	\$25,864	\$25,864	\$25,864	\$103,456	
Total DAS Expenditures	\$352,292	\$362,861	\$370,118	\$377,520	\$1,462,791	
Total DAS Revenue	\$352,292	\$362,861	\$370,118	\$377,520	\$1,462,791	
Non DAS Revenues						
Total Non DAS Revenue						
TOTAL DAS AND NON DAS REVENUE	\$352,292	\$362,861	\$370,118	\$377,520	\$1,462,791	
Full Time Equivalent (FTE)	7.00	7.00	7.00	7.00	28.00	
Prepared by:						Date:
HSA-CO Review Signature:						
HSA #1						

Salaries & Benefits Detail

(Total)

DAS Salaries & Benefits	Agency Totals		HSA Program		7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/24 - 6/30/28
	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
Director of Peer Services	\$140,000	100%	8%	0.08	\$11,200	\$11,536	\$11,767	\$12,120	\$46,622
Assoc Director of Peer Services	\$97,000	100%	13%	0.13	\$12,610	\$12,988	\$13,248	\$13,646	\$52,492
Hoarding Behaviors Manager	\$80,000	100%	100%	1.00	\$80,000	\$82,400	\$84,872	\$86,569	\$333,841
DAS Peer Support Specialist	\$63,000	100%	37%	0.37	\$23,310	\$24,242	\$24,730	\$25,224	\$97,506
DAS Peer Support Specialist	\$64,000	100%	100%	1.00	\$64,000	\$66,560	\$67,898	\$69,256	\$267,713
DAS Peer Support Specialist	\$44,720	100%	50%	0.50	\$22,360	\$23,254	\$23,722	\$24,196	\$93,532
Outreach Manager	\$81,113	100%	5%	0.05	\$4,056	\$4,177	\$4,303	\$4,389	\$16,924
Totals	\$569,833	7.00	313.00%	3.13	\$217,536	\$225,158	\$230,538	\$235,399	\$908,632
Fringe Benefits Rate	23.00%								
Employee Fringe Benefits	\$131,061				\$50,033	\$51,786	\$53,024	\$54,142	\$208,985
Total DAS Salaries and Benefits	\$700,894				\$267,569	\$276,944	\$283,562	\$289,541	\$1,117,617

HSA #2

Operating Expense Detail

(Total)

	<u>7/1/24 - 6/30/25</u>	<u>7/1/25 - 6/30/26</u>	<u>7/1/26 - 6/30/27</u>	<u>7/1/27 - 6/30/28</u>	<u>7/1/24 - 6/30/28</u>
DAS Operating Expenses					
<u>Expenditure Category</u>					
Rental of Property	\$4,328	\$4,328	\$4,328	\$4,328	\$17,312
Utilities(Elec, Water, Gas, Phone, Scavenger)	\$1,336	\$1,336	\$1,336	\$1,336	\$5,344
Office Supplies, Postage	\$3,649	\$3,649	\$3,649	\$3,649	\$14,596
Building Maintenance Supplies and Repair					
Printing and Reproduction	\$171	\$171	\$171	\$171	\$684
Insurance	\$884	\$884	\$884	\$884	\$3,536
Licenses and Fees					
Staff Training	\$2,113	\$1,929	\$1,621	\$2,079	\$7,742
Staff Travel	\$300	\$300	\$300	\$300	\$1,200
Rental of Equipment					
<u>Consultants/Subcontractors</u>					
<u>Other</u>					
Community Events	\$3,000	\$3,000	\$3,000	\$3,000	\$12,000
Stipends for Volunteers	\$500	\$500	\$500	\$500	\$2,000
Total DAS Operating Expenses	\$16,281	\$16,097	\$15,789	\$16,247	\$64,414
HSA #3					

Capital & Subcontractor Expenditure Detail

DAS Capital Expenditure					(Total)
<u>Equipment (Qty)</u>	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/24 - 6/30/28
Total Equipment Cost					
<u>Remodeling</u>	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/24 - 6/30/28
Total Remodeling Cost					
<u>Subcontractors/Consultants</u>	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/24 - 6/30/28
Susie DuBois, MFT	\$25,864	\$25,864	\$25,864	\$25,864	\$103,456
Total Subcontractor Cost	\$25,864	\$25,864	\$25,864	\$25,864	\$103,456
Total DAS Capital & Subcontractor Expenditure	\$25,864	\$25,864	\$25,864	\$25,864	\$103,456
HSA #4					

APPENDIX F - SITE CHART

AGENCY: Mental Health Association of San Francisco
FY

HSA/DAS/OFFICE ON THE AGING

CONTRACT MAILING ADDRESS: 870 Market Street, Suite 928, San Francisco, CA 94102

DIRECTOR: Mark Salazar

PHONE NO.: (415) 421-2926

<p>SITES: (includes congregate nutrition, community/social services, home-delivered meal, food distribution, etc.)</p> <p>Name of Site</p>	<p>Main Office Program Suite</p>	<p>Other Site applicable to this program:</p>			
<p>Address and Zip</p> <p>Phone Number</p> <p>Fax Number</p> <p>Neighborhood</p> <p>Person in Charge</p> <p>Site Manager</p>	<p>870 Market Street, Admin Office: Suite 928; Program/Services: Suites 781/785 94102</p> <p>415-421-2926 415-421-2928</p> <p>Union Square</p> <p>Erik Henriques</p>				
<p>Programs Offered</p>	<p>Social Support Services for Hoarders and Clutterers</p>				
<p>Days Open</p>	<p><input checked="" type="checkbox"/> Mon <input checked="" type="checkbox"/> Tues <input checked="" type="checkbox"/> Wed <input checked="" type="checkbox"/> Thurs <input checked="" type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p>	<p><input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p>	<p><input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p>	<p><input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p>	<p><input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p>
<p>Hours Open</p>	<p>9:00AM – 5:00PM</p>				
<p>Hours of <u>scheduled</u> programming</p>	<p>Support Group: Alternating Monday or Wednesday Monday: 5:30PM – 7:00PM Wednesday: 3:00PM – 4:30PM</p> <p>Treatment Group: Tuesday: 1:00PM – 3:00PM</p> <p>Family Support Group: 3rd Thursday of each Month: 2:00PM – 3:00PM</p> <p>Online Resource Database: 24/7</p> <p>On-Site and Telephone Based Information and Referral</p>				

	Services: Monday – Friday: 9:00AM – 5:00PM				
Hours of meal service					
Annual number of meals at site					
Annual # nutrition education units					
Average number of meals per day					
Total number of service days in FY					
Days closed	Saturday, Sunday, and Holidays See Attached Holiday Sheet				
Handicapped Accessible	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No