

City and County of San Francisco*London Breed, Mayor***Human Services Agency**
 Department of Benefits and Family Support
 Department of Disability and Aging Services
 Office of Early Care and Education
*Trent Rhorer, Executive Director***MEMORANDUM**

TO: DISABILITY AND AGING SERVICES COMMISSION

THROUGH: SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
ESPERANZA ZAPIEN, ACTING DIRECTOR OF CONTRACTS

DATE: DECEMBER 2, 2020

SUBJECT: NEW GRANT: **CURRY SENIOR CENTER (NON-PROFIT)** TO PROVIDE TECHNOLOGY AND CONNECTIONS AT HOME

GRANT TERM: 01/01/2021 – 06/30/2022

GRANT AMOUNT:	Current 01/01/2018 – 12/31/2020 \$935,652	Renewal 01/01/2021 – 06/30/2022 \$568,437	Contingency \$56,844	Total \$625,281
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ANNUAL AMOUNT	01/01/2021 – 06/30/2021 \$189,479	FY 21/22 \$378,958		
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Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
Annual amount:	\$568,437			\$56,844	\$625,281

PERCENTAGE: 100% 100%

 DS
 EE

The Department of Disability and Aging Services (DAS) requests authorization to enter into new grant agreement with Curry Senior Center during the period of January 1, 2021 to June 30, 2022, in the amount of \$568,437 plus a 10% contingency for a total amount not to exceed \$625,281. The purpose of this grant is to deliver a community-based program for older adults and adults with disabilities living in the City and County of San Francisco that provides long-term access to technology devices, technology instruction, and health coaching. The program enables consumers to acquire skills and information that are beneficial to their health and well-being.

Background

The voters of the City and County of San Francisco passed Proposition I in 2016 which amended the City Charter to establish the Dignity Fund. The Dignity Fund is a guaranteed funding stream

to provide needed services and supports for older adults and adults with disabilities. DAS administers the fund with the goal of maximizing self-sufficiency, safety, and health so older adults and adults with disabilities can remain living in the community for as long as possible and maintain the highest quality of life.

Proposition I also outlines a planning process that began in FY 2017-18 and includes an annual allocation plan. The allocation plan in FY 2017-18 contained funding for a program that blends technology, health, and socialization to meet the needs of older adults and adults with disabilities with limited or no access to technology and who are socially isolated or at heightened risk of social isolation. By providing the target population of older adults and adults with disabilities with technology devices, instruction, and supportive services, the program supports their well-being and independence and helps to mitigate the digital divide.

Curry Senior Center competitively bid to provide the Technology and Connection at Home program and launched it in FY 2017-18. Since its inception, the Technology and Connections at Home Program has effectively engaged older adults and adults with disabilities who are socially isolated or at heightened risk of isolation. Program participants report a decrease in feelings of loneliness, improved technology skills coupled with increased technology use, better self-efficacy with respect to health management, and an increase in daily walking.

Services to be Provided

The grantee will provide older adults and adults with disabilities living in the City and County of San Francisco who are isolated or at heightened risk of isolation with technology devices on a long-term basis, ongoing technical support and training on the devices issued. The technology devices provided by the grantee include an iPad, Fitbit, and wireless scale. The training program consists of a fifty week defined curriculum with classes offered twice a week. Programming also includes one to one health coaching, supplemental training and technical support.

Curry Senior Center has been effective at providing modified programming since the City declared a health emergency on March 6, 2020 due to the Coronavirus pandemic and subsequently enacted Coronavirus (COVID-19) Health Orders to protect public health.

For more specific information regarding the service objectives, including the type and number of service units, outcome objectives, and budget, please refer to attached Appendices A & B.

Performance

Program Monitoring: A program monitoring for FY 2019-20 took place on January 17, 2019. There were no findings identified in the program monitoring.

Fiscal Monitoring: Curry Senior Center meets all of the eligibility requirement to receive a waiver of fiscal and compliance monitoring for FY18-19.

Selection

Contractor was selected through Request for Proposals #773, which was competitively bid in September 2017.

Funding

Funding for this grant is provided by local funds, specifically the Dignity Fund.

ATTACHMENTS

Appendix A – Services to be Provided

Appendix B – Program Budget

**Appendix A – Services to be Provided
Curry Senior Center
Technology and Connections at Home**

January 1, 2021 – June 30, 2022

I. Purpose of Grant

The purpose of this grant is to deliver a community-based program for older adults and adults with disabilities living in the City and County of San Francisco that provides long-term access to technology devices, technology instruction, and health coaching. The program enables consumers to acquire skills and information that are beneficial in supporting their health and well-being.

II. Definitions

Adult with a Disability	A person 18-59 years of age living with a disability.
CA-GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service objectives, run reports, etc.
CARBON	Contracts Administration, Reporting and Billing On Line System.
City	City and County of San Francisco, a municipal corporation.
Consumer Training	Includes weekly group instruction that follows a yearlong weekly curriculum on technology literacy and one-to-one tutoring that will enhance and support the curriculum.
COVID-19	A contagious respiratory illness caused by infection with a coronavirus, called SARS-CoV-2.
DAS	Department of Disability and Aging Services of the San Francisco Human Services Agency.
Disability	Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment.
Enrollment Term	One year of enrollment in the Technology and Connection at Home program.
Frail	An individual determined to be functionally impaired in

	one or both of the following areas: (a) unable to perform two or more activities of daily living (such as bathing, toileting, dressing, eating, and transferring) without substantial human assistance, including verbal reminding, physical cueing or supervision; (b) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individuals or others.
Grantee	Curry Senior Center
Health Coaching	One to one support and education provided by a Health Educator about behaviors that promote wellness and may include, but is not limited to, how to use technology devices to help manage their health, how to use the internet to access reliable source of health information, developing and implementing strategies to improve health, etc.
Health Educator	An individual with a Certified Health Education Specialist (CHES) credential and/or college degree in a health related field.
Low Income	Having income at or below 300% of the federal poverty line as defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. Eligibility for program enrollment and/or participation is not means tested. Consumers self-report income status.
Maintenance Program	Monthly group gatherings hosted by the grantee that are available to consumers who have successfully completed the program.
Minority	An ethnic person of color who is any of the following: a) Black – a person having origins in any of the Black racial groups of Africa, b) Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin regardless of race, c) Asian/Pacific Islander – a person whose origins are from India, Pakistan or Bangladesh, Japan, China, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Samoa, Guam, or the United States Territories of the Pacific including the Northern Marianas, d) American Indian/Alaskan Native – an American Indian, Eskimo, Aleut, or Native Hawaiian. Source: California Code of Regulation Sec. 7130.
OCM	Office of Contract Management, San Francisco Human Services Agency

OCP	Office of Community Partnerships
Older Adult	Person who is 60 years of age or older; used interchangeably with the term “senior.”
Peer Mentor	A person enrolled in the maintenance program and trained by the grantee to provide supplemental technical support to individuals actively enrolled in the program.
Senior	Person who is 60 years of age or older; used interchangeably with the “older adult.”
SF-HSA	Human Services Agency of the City and County of San Francisco.
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).
Technical Support	Assistance provided to consumers to troubleshoot and/or resolve a technical issue related to the program, tablet computer, technology device, and/or software applications.
Unduplicated Consumer (UDC)	An individual who participates in the Technology and Connection at Home program and the grantee reflects consumer participation in CA-GetCare through program enrollment.

III. Target Population

The target population is older adults and adults with disabilities living in the City and County of San Francisco who are socially isolated, at heightened risk of social isolation, and/or homebound.

Grantee shall additionally target services to members of one or more of the following groups identified as demonstrating the greatest economic and social need:

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

IV. Eligibility for Services

1. A resident of San Francisco, and
2. A person who is an older adult or an adult with a disability

V. Location and Time of Services

Grantee will provide programming and services in the City and County of San Francisco. The grantee determines the location(s) and service time(s) for the program with prior approval from DAS OCP.

VI. Description of Services and Program Requirements

1. Grantee will develop and implement a community-based program that provides older adults and adults with disabilities with tablet computers or another technology device coupled with technology instruction, health coaching, and access to technology support.
2. Grantee will secure tablet computers and/or other technology devices needed for program participation and provide them to consumers on an ongoing loan basis while enrolled in the program. The assigned tablet computer and/or other technology device will be equipped with necessary software and applications that align with the consumer-training curriculum.
3. Grantee will keep record of all tablet computers and/or other technology devices purchased and assigned to consumers through this grant agreement. The record shall include the make and model of device, the unique identification number of the device, date of purchase, purchase price, date of issuance, and if applicable, the return date. Replacement of lost, stolen, or damaged equipment in excess of the capital expenditure amount in Appendix B of this grant agreement shall be the sole responsibility of the grantee.
4. Grantee will ensure consumers have access to reliable and affordable internet connectivity during their enrollment term by arranging and paying home internet access for consumers who do not have home internet access at their time of enrollment and for consumers who lose it anytime during their enrollment term. If a consumer has home internet access at the time of enrollment, the grantee will subsidize the cost of the consumer's home internet service up to the amount that matches the cost of the low-income internet access programs utilized for the other newly enrolled consumers. The provision of home internet access by the grantee is only during the consumer's enrollment term and is contingent upon them remaining active in the program.
5. Grantee will dis-enroll consumers who do not actively participate in the program. DAS defines active participation as follows: (1) attending a consumer training session at least once per month (2) engaging with a health educator at least once per month. Additionally, the grantee will immediately dis-enroll any consumer who has violated, or attempted to violate Local, State or Federal law through the use of the loaned equipment or the internet connectivity paid for through the program.
6. Grantee will provide weekly consumer training classes in person or through an online platform as needed with prior approval from DAS OCP. The classes will follow a yearlong curriculum on technology literacy. The grantee will provide DAS with a copy of the yearlong curriculum for review and approval no later than 7/31 each fiscal year. The grantee will notify DAS of significant changes in the curriculum. Changes in curriculum are subject to DAS approval.

7. Grantee will allocate on average at least two hours each week to consumer training through one-to-one tutoring appointments. Grantee may schedule appointments in 30-minute increments and the appointments may take place in person, over the phone, or through an online platform.
8. Grantee will offer technical support for consumers to troubleshoot and/or resolve a technical issue related to the program, tablet computer, technology device, and/or software application. Grantee may schedule appointments in 30-minute increments. Grantee may provide technical support in person, over the phone, or through an online platform. Technical support must be easily accessible and accommodate the enrolled consumers' needs.
9. Grantee will offer monthly health coaching sessions by a health educator to consumers enrolled in the program. Consumers may be required to make an appointment ahead of time. Grantee may schedule health-coaching appointments in 30-minute increments and the appointments may take place in person, over the phone, or through an online platform.
10. Grantee will offer consumers who have completed their enrollment term, the option to enroll in a one-year maintenance program. The maintenance program will also include training to become a peer mentor. Consumers who are interested in becoming a peer mentor for the program will be approved by the grantee.
11. Grantee will conduct program outreach to the target population. Program outreach may include activities such as disseminating promotional materials about the program at community meetings and other group settings or special events/fairs, announcements, electronic bulletins, and other mass media. Grantee will document and have on file outreach activities conducted.
12. Grantee shall ensure adequate and culturally competent staffing (paid and/or volunteer) to administer the program, deliver quality services to meet the needs of the enrolled consumer, and adhere to all the program standards.
13. Grantee will administer at least one quantitative assessment tool to each enrolled consumer at the start of their enrollment (baseline), six (6) months, and twelve (12) months and share the results with DAS at the end of each fiscal or a mutually agreed upon date between DAS and the grantee. The grantee will communicate their choice of assessment tool to DAS in writing. The tool is subject to DAS approval. The assessment tool used by the grantee may capture the necessary data to report on one or more of the outcome objectives for this grant. The assessment tool used may include, but is not limited to, the UCLA Loneliness Scale questionnaire, the Adult Social Care Outcomes Toolkit, and the Assessment of Quality of Life. The assessment tool used at baseline, six months, and twelve months must be the same for each of the consumers within their respective cohorts.
14. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share with DAS OCP by March 15 each grant year or on a mutually agreed upon date between DAS OCP and the grantee. At minimum, the completed number of surveys per consumer cohort shall be a sample size of at least 75%.

15. Grantee shall have policy and procedures that align with city, state, and local regulatory agencies, including the DAS OCP policy memoranda.
16. Grantee shall continue to follow guidance in or instructions from health care providers, the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments relating to COVID-19. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. The grantee shall follow the requirements with the intent to maximize the health and safety of their staff and the consumers receiving services.

VII. Service Objectives

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

Table A	January 1, 2021 – June 30, 2021	FY 2021-2022
Number of Unduplicated Consumers* (UDC)	95	95
Consumer Training^	492	984
Technology Support	720	1440
Health Coaching	126	252
Outreach	240	480
*At least 75% of the UDC will remain active in the program for enrollment term of one year and at least 65% of the UDC who completed the one-year enrollment term will continue in the maintenance program.		
^ At least 40% of the units of service will be one to one sessions		
One (1) Unit = One (1) hour of service provision		

VIII. Outcome Objectives

On an annual basis, the Contractor will meet the following Outcome Objectives:

1. Clients feel a greater sense of connection to their friends/family and/or community. Target: 85%.
2. Consumers report an increase in daily walking and/or movement. Target 65%
3. Consumers report an increase in self-sufficient technology use. Target 65%
4. Consumers report increased self-efficacy in managing their health. Target 55%

Based on a consumer satisfaction survey with a sample size of greater than or equal to 75% of each consumer cohort.

IX. Reporting and Other Requirements

1. Grantee will enroll eligible consumers into the program funded through this grant agreement by entering the consumer data obtained from consumers using a DAS OCP

approved intake form into the CA-GetCare database in accordance to DAS OCP policy memorandum.

2. Grantee will enter into the CA-GetCare Service Unit section all Service Objectives by the 5th working day of the month for the preceding month.
3. Grantee will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number of unduplicated consumers enrolled
 - Number of consumer training hours provided
 - Number of technical support hours provided
 - Number of health coaching hours provided
 - Number of outreach hours conducted
4. Grantee will enter the annual outcome objective metrics identified in Section VIII of the Appendix A in the CARBON database by the 15th of the month following the end of the program year.
5. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to SF-HSA no later than July 31 each grant year. The grantee must submit the report in the CARBON system.
6. Grantee shall develop and deliver bi-annual summary reports of SOGI data collected in the year as requested by SF-HSA, DAS, and OCP. The due dates for submitting the bi-annual summary reports are July 10 and January 10.
7. Grantee will provide an annual consumer satisfaction survey report to DAS by March 15 each grant year or a mutually agreed upon date between DAS and the grantee.
8. Grantee shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
9. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The grantee will maintain evidence of staff completion of this training.
10. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
11. Grantee will develop a grievance policy consistent with DAS OCP policy memorandum.
12. Grantee will assure that services delivered are consistent with professional standards for this service.
13. Pursuant to California Department of Aging Requirement, grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.

14. For assistance with reporting requirements or submission of reports, contact:

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

and

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

X. Monitoring Activities

1. **Program Monitoring:** Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on CA-GetCare, maintenance of service unit logs; agency and organization standards, which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; evidence of provision of the California Department of Aging (CDA) Security Awareness training to staff; program operation, which includes a review of a written policies and procedures manual of all DAS OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections IV-V, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility.
2. **Fiscal Compliance and Contract Monitoring:** Fiscal monitoring will include review of the Grantee's organizational budget, general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of the Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

HUMAN SERVICES AGENCY BUDGET SUMMARY BY PROGRAM

Name Curry Senior Center	Term Jan 2021 - Jun 2022
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>	
If modification, Effective Date of Mod. _____ No. of Mod. _____	
Program: Technology and Connection at Home	
Budget Reference Page No.(s) _____	
Program Term	1/1/21 - 6/30/21 7/1/21 - 6/30/22 Total
DAS Expenditures	
Salaries & Benefits	\$107,124 \$213,450 \$320,574
Operating Expenses	\$20,780 \$43,580 \$64,360
Sub-Contractor Expenditure	\$30,773 \$66,540 \$97,313
Capital Expenditure	\$7,000 \$10,500 \$17,500
Subtotal	\$165,677 \$334,070 \$499,747
Salary and Operating Expenditure eligible for indirect	\$127,904 \$257,030 \$384,934
Subcontractor Expenditure eligible for indirect: First \$25,000 of each subcontract for the life of the contract	\$30,773 \$42,227 \$73,000
Indirect Percentage (%)	15.00% 15.00% 15.00%
Indirect Cost	\$23,802 \$44,888 \$68,690
Total DAS Expenditures	\$189,479 \$378,958 \$568,437
DAS Revenues	
General Fund	\$189,479 \$378,958 \$568,437
Total DAS Revenue	\$189,479 \$378,958 \$568,437
Non DAS Revenues	
Total Non DAS Revenue	
TOTAL DAS AND NON DAS REVENUE	\$189,479 \$378,958 \$568,437
Full Time Equivalent (FTE)	
Prepared by: _____	Telephone No.: _____ Date: _____
HSA-CO Review Signature: _____	
HSA #1	11/18/2020

Program: Technology and Connection at Home
 (Same as Line 11 on HSA #1)

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 Document Date: 11/18/2020

Salaries & Benefits Detail

	Agency Totals		HSA Program		1/1/21 - 6/30/21	HSA Program		7/1/21 - 6/30/22	Total
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budget	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budget	Budget
DAS Salary									
Project Coordinator	\$66,300	1.00	50.00%	0.50	\$33,150	100.00%	1.00	\$66,300	\$99,450
Health Educator - Spanish	\$55,575	1.00	10.00%	0.10	\$5,558	20.00%	0.20	\$11,115	\$16,673
Health Educator -Russian	\$54,113	1.00	24.00%	0.24	\$12,987	52.80%	0.53	\$28,572	\$41,559
Health Educator - Chinese	\$40,950	1.00	24.82%	0.25	\$10,164	53.10%	0.53	\$21,744	\$31,908
Data Manager	\$53,625	1.00	0.93%	0.01	\$500	1.86%	0.02	\$1,000	\$1,500
Wellness Program Manager	\$88,725	1.00	23.00%	0.23	\$20,407	41.00%	0.41	\$36,377	\$56,784
Translator- Russian	\$40,112	0.67	1.12%	0.01	\$300	1.87%	0.01	\$500	\$800
Translator- Chinese	\$56,500	1.00	0.53%	0.01	\$300	0.88%	0.01	\$500	\$800
Totals	\$455,900	7.67	134.40%	1.34	\$83,366	271.52%	2.71	\$166,108	\$249,474
Fringe Benefits Rate	28.50%								
Employee Fringe Benefits	\$129,932				\$23,758			\$47,342	\$71,100
Total DAS Salaries and Benefits	\$585,832				\$107,124			\$213,450	\$320,574

HSA #2

11/18/2020

Program: Technology and Connection at Home
 (Same as Line 11 on HSA #1)

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Operating Expense Detail

	<u>1/1/21 - 6/30/21</u>	<u>7/1/21 - 6/30/22</u>	<u>Total</u>
DAS Operating Expenses			
<u>Expenditure Category</u>			
Rental of Property	\$4,000	\$8,200	\$12,200
Utilities (Elec, Water, Gas, Phone, Garbage)	\$2,000	\$4,000	\$6,000
Office Supplies, Postage	\$1,500	\$3,000	\$4,500
Building Maintenance Supplies and Repair	\$3,000	\$6,000	\$9,000
Cyber Insurance	\$1,200	\$2,500	\$3,700
Insurance	\$700	\$1,500	\$2,200
Staff Training	\$250	\$500	\$750
Staff Travel-(Local & Out of Town)	\$500	\$800	\$1,300
Rental of Equipment			
Program Supplies	\$1,000	\$2,000	\$3,000
Payroll fees	\$150	\$400	\$550
Recruitment	\$100	\$300	\$400
WIFI charges	\$500	\$1,500	\$2,000
WIFI charges -Training Location	\$1,800	\$4,000	\$5,800
<u>Consultant</u>			
Program Evaluator	\$3,240	\$7,200	\$10,440
Computer Support	\$840	\$1,680	\$2,520
Total DAS Operating Expenses	\$20,780	\$43,580	\$64,360
HSA #3			11/18/2020

Program: Technology and Connection at Home
 (Same as Line 11 on HSA #1)

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Sub-contractor Expenditure Detail

	1/1/21 - 6/30/21	7/1/21 - 6/30/22	Total
DAS Sub-Contractor Expenditure			
Community Technology Network	\$6,000	\$12,000	\$18,000
Professional Computer Support	\$9,500	\$19,000	\$28,500
SF. Community Clinic Consortium - (NHC Member)	\$15,273	\$30,540	\$45,813
Video COVID-19		\$5,000	\$5,000
Total DAS Sub-Contractor Expenditure	\$30,773	\$66,540	\$97,313
HSA #4			11/18/2020

Program: Technology and Connection at Home
 (Same as Line 11 on HSA #1)

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 Document Date: 11/18/2020

Capital Expenditure Detail

	1/1/21 - 6/30/21	7/1/21 - 6/30/22	Total
DAS Capital Expenditure			
<u>Equipment (Qty)</u>			
Client Equipment (Replacement iPads, Updated Fitbits, Wireless Scales, New model anti-theft case, cross shoulder bag, AAA bateries, accessibility supplies)	\$5,500	\$8,500	\$14,000
Staff Equipment: iPads for Health Educators, updated Fitbits	\$1,500	\$2,000	\$3,500
Total Equipment Cost	\$7,000	\$10,500	\$17,500
<u>Remodeling</u>			
Total Remodeling Cost			
Total DAS Capital Expenditure	\$7,000	\$10,500	\$17,500
HSA #4			11/18/2020