



**SAN FRANCISCO
HUMAN SERVICES AGENCY**

MEMORANDUM

Department of Benefits
and Family Support

Department of Disability
and Aging Services

Office of Early Care
and Education

P.O. Box 7988
San Francisco, CA
94120-7988
www.SFHSA.org



London Breed
Mayor

Trent Rhorer
Executive Director

TO:	DISABILITY AND AGING SERVICES COMMISSION										
THROUGH:	SHIREEN MCSPADDEN, EXECUTIVE DIRECTOR										
FROM:	CINDY KAUFFMAN, DEPUTY DIRECTOR ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS DS EE										
DATE:	APRIL 7, 2021										
SUBJECT:	GRANT MODIFICATIONS: EPISCOPAL COMMUNITY SERVICES (NON-PROFIT) FOR NUTRITION SERVICES FOR OLDER ADULTS AND ADULTS WITH DISABILITIES										
GRANT TERM:	<table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Current</u></th> <th style="text-align: left;"><u>Modification</u></th> <th style="text-align: left;"><u>Revised</u></th> <th style="text-align: left;"><u>Contingency</u></th> <th style="text-align: left;"><u>Total</u></th> </tr> </thead> <tbody> <tr> <td>11/1/20-6/30/21</td> <td>11/1/20-6/30/21</td> <td>11/1/20-6/30/21</td> <td></td> <td></td> </tr> </tbody> </table>	<u>Current</u>	<u>Modification</u>	<u>Revised</u>	<u>Contingency</u>	<u>Total</u>	11/1/20-6/30/21	11/1/20-6/30/21	11/1/20-6/30/21		
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The Department of Disability and Aging Services (DAS) requests authorization to modify the grant agreements with Episcopal Community Services for the provision of nutrition services to older adults and adults with disabilities for the period of November 1, 2020 to June 30, 2021, in the amount of \$100,873 plus a 10% contingency for a total amount not to exceed \$307,151.

Program	Current Grant Amount 11/01/20 – 06/30/21	Modification Amount 11/01/20 – 06/30/21	Revised Amount 11/01/20 – 06/30/21	10% contingency	Not-To-Exceed
Congregate Meal Program for Older Adults	\$155,651	\$64,099	\$219,750	\$21,975	\$241,725
Congregate Meal Program for Adults with Disabilities	\$22,704	\$36,774	\$59,478	\$5,948	\$65,426
Total	\$178,355	\$100,873	\$279,228	\$27,923	\$307,151

Background

Adequate nutrition is critical to the health, functioning, and increased quality of life for older adults and adults with disabilities in San Francisco. The Elderly Nutrition Program (ENP), authorized through Title III, under the Older Americans Act, includes the congregate nutrition program for older adults age 60 and over, and other individuals eligible for the program. In addition to ENP services, DAS provides congregate nutrition programs for adults with disabilities 18-59 years of age. All programs are intended to improve the dietary intake of participants and aim to help participants remain independent and in their communities by promoting better health through nutrition. Additionally, congregate nutrition programs offer opportunities to create informal support networks.

Services to be Provided

Episcopal Community Services provides a congregate nutrition program for older adults and adults with disabilities. The program offers nutritious meals to participants Monday through Friday. In addition to serving healthy meals, the program provides opportunities for social engagement and nutrition education, both of which contribute to an individual's overall health and well-being. Initial and annual health screenings are also conducted, and include a nutrition risk screening, food security screening, and a well-being and social isolation screening.

The meals are nutritious and appealing to program participants. The meals adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), and meet state and local food safety and sanitation requirements.

DAS OCP with guidance from federal, state, and local agencies established a modified congregate meal program due to the current Coronavirus pandemic (COVID-19). The modified congregate meal program reduces the risk of community spread of COVID-19 and minimizes older adults and adults with disabilities' exposure to the virus by providing meals to go. During the COVID-19 pandemic, Episcopal Community Services provides a modified congregate program that offers meals to go instead of in a group setting.

Grant Modification

The purpose of this modification is to provide funding in the amount of \$100,873 to Episcopal Community Services' congregate nutrition program to support a new meal site. This funding will allow Episcopal Community Services to establish a new congregate meal site for older adults and adults with disabilities at the Granada Hotel, located in District 3, and will serve an additional 114 consumers daily.

Please refer to the attached Appendix A for more detailed information about the services and program requirements.

Selection

Grantee was selected through RFP #715 issued in January 2017.

Due to the COVID-19 emergency, these grants were initially extended through October 2020 through an emergency process. New grants were put into place from 11/1/20 to 6/30/21 to allow for a new procurement to be issued as the current procurement expires on 6/30/21.

Funding

These grants will be funded through County General funds.

Attachments

Congregate Meal Program for Older Adults

Appendix A – Services to be Provided

Appendix B – Budget

Congregate Meal Program for Adults with Disabilities

Appendix A – Services to be Provided

Appendix B – Budget

Appendix A - Services to be Provided
Episcopal Community Services
 Congregate Nutrition Program for Older Adults
 Elderly Nutrition Program (ENP)

November 1, 2020 – June 30, 2021

I. Purpose

The purpose of this grant is to provide a congregate and/or modified congregate nutrition program for older adults living in the City and County of San Francisco. Congregate nutrition programs include the provision of nutritious meals, nutrition education, and nutrition risk screening. The program supports independent community living by promoting better health through nutrition and serves as an access point for other home and community-based services. It also aims to encourage socialization when the grantee provides services in a group or congregate setting.

II. Definitions

Grantee	Episcopal Community Services
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 units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Services	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also includes nutrition education, health promotion, and nutrition risk screening.

COVID-19	A disease caused by the coronavirus SARS-CoV-2. The symptoms of COVID-19 include cough, fever, and shortness of breath. Doctors and researchers continue to learn more about the disease, so information about symptoms, prevention, and treatment may change as more data becomes available.
CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.
DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. A consumer with a score of six or higher on the DETERMINE Checklist is considered at high nutritional risk. http://www.dhs.gov/vi/home/documents/DetermineNutritionChecklist.pdf
Dietary Guidelines for Americans (DGA)	Evidence-based food and beverage recommendations for Americans ages 2 and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services and the U.S. Department of Agriculture.
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine that represent the most current scientific knowledge on nutrient needs of healthy populations.
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. (CCR Title 22 Sec. 7630)
ENP	Elderly Nutrition Program - Title III C1 and C2. A program that provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and is provided in accordance with the provision of CCR Title 22, Chapter 4, Article 5, Sec. 7630.

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. (CCR Title 22 Sec. 7119)
HACCP	Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)
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.
Low-Income	Having income at or below 100% 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.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A RD conducts the nutrient analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals.
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.

Modified Congregate Nutrition Program	A program that provides nutrition services that include, but are not limited to, the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. Due to the COVID-19 pandemic, the provision of meal nutrition services will not be in a congregate setting. The grantee will provide meals to go and the meals offered may be hot, chilled, or frozen. The grantee may provide nutrition risk screening and nutrition education over the phone, through virtual platforms, through written communications, or other methods approved by DAS. The program gives all participants the opportunity to contribute to the meal cost.
NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered meal programs shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	A screening used to evaluate the nutritional risk status of individuals enrolled in congregate or home-delivered meal programs. The screening utilizes the DETERMINE Checklist and identifies individuals at moderate nutritional risk, at high nutritional risk, and those not at nutritional risk.

Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships, a unit within the Department of Disability and Aging Services
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years of age or older; used interchangeably with the term “senior”
Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
Senior	Person who is 60 years of age or older; used interchangeably with the “older adult”
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> 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 (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in the congregate nutrition program and the grantee reflects consumer participation in CA-GetCare through program enrollment.

III. Target Population

The target population is older adults living in the City and County of San Francisco with the greatest economic and social need. Grantee shall additionally target services to members of one or more of the following groups:

1. Low income
2. Limited or no English speaking proficiency
3. Minority populations

4. Frail
5. LGBTQ+

IV. Eligibility for Services

1. An older adult, defined as an individual age sixty, (60) or older.
2. Spouse or domestic partner of an older adult enrolled in the program.
3. An individual under the age of sixty (60) or older, with a disability who resides in housing facilities occupied primarily by older adults at which the congregate nutrition program is located.
4. An individual with a disability who resides at home with and accompanies an older adult who participates in the program.
5. A volunteer under the age of sixty, (60) who helps in the congregate nutrition program if doing so will not deprive an older adult of a meal.

V. Location and Time of Services

The grantee will provide a congregate and/or modified congregate nutrition program in the City and County of San Francisco. The grantee determines the location(s) and service time(s) for the congregate nutrition program with prior approval from DAS OCP.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), Title 22 Regulations, CDA, and DAS OCP.
2. Grantee will provide a congregate nutrition program for older adults. The provision of the congregate nutrition program will include the following:
 - a. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - b. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
3. Grantee will conduct a nutrition screening using the DETERMINE Checklist, a food security screening, and a well-being and social isolation screening annually for each consumer and document individual responses in CA-GetCare within one month of obtaining the responses. The grantee will refer clients screened at high nutritional risk to DAS OCP funded nutrition counseling services through CA-GetCare.
4. Grantee will provide nutrition education to consumers participating in the congregate nutrition program at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in

CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation. If the grantee is providing a modified congregate meal program, the nutrition education may be over the phone, through virtual platforms, through written communications, or other methods approved by DAS OCP.

5. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in the congregate meal program. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
6. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all congregate meal sites meet state and local food, sanitation, health and safety requirements.
7. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
8. Grantee will comply with the City's food service waste reduction ordinance (File #06094), and use reusable, biodegradable, compostable and/or recyclable food service supplies.
9. Grantee will ensure that a registered dietitian (RD) conducts and documents an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and a minimum of four times during the fiscal year. HACCP monitoring will include, but is not limited to the review of quarterly congregate site monitoring reports.
10. Grantee will ensure that a registered dietitian (RD) or qualified staff conducts and documents on-site HACCP safety and sanitation monitoring of each congregate site at least once per quarter and at minimum of four times per fiscal year for each congregate site.
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in Title 22 Regulations and DAS OCP policy memoranda. Grantee will also provide the in service trainings as part of a new employee and/or volunteer orientation process and additional in-service trainings as needed to address any HACCP monitoring findings and/or to reinforce best food safety and sanitation practices as needed. Grantee will document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
12. Grantee will submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding nutrient analysis completed by their staff or consultant RD. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
13. Grantee will ensure that the RD on staff or consultant RD reviews and approves menu substitutions in advance of their use and that staff documents the substitutions made.
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 meal site shall be a sample size of at the average number of meals served daily.

15. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
16. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers

VII. Service Objectives

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

Table A	Original FY 20/21	Modification	Revised FY20/21
Number of Unduplicated Consumers (UDC)	533	71	604
Number of Meals	20,432	8,662	29,094

VIII. Outcome Objectives

1. Clients report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Clients feel less worried about getting enough food to meet their needs. Target: 85%.
3. Clients rate the quality of meals they received as excellent or good. Target: 85%.
4. Clients feel a greater sense of connection to their community. Target: 85%.
5. Clients feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to greater than the average number of daily meals served by the grantee.

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 the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, the well-being and social isolation screening, and the food security screening 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 served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly Reports due Oct. 15; Jan. 15; April 15; and June 15.
 5. 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.
 6. 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.
 7. 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.
 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. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resource Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Rocio Duenas
 Contract Manager
 HSA OCM
 email: rocio.duenas@sfgov.org

I. Monitoring Activities

1. Nutrition 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 VI and VII, 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 such as cards or pool; translation and social services are based on staff hours.

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.

	A	B	C	D	E
1	BUDGET FORMS			Appendix B, pg. 1	
2				2/26/2021	
3	HUMAN SERVICES AGENCY - DEPARTMENT OF DISABILITY AND AGING				
4	BUDGET PROPOSAL FORMS				
5	EPISCOPAL COMMUNITY SERVICES OF SF			Grant Term	
6	(Check One) New <input type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/> _XXX_				
7	Effective Date of Mod: 3/1/21		No. of Mod: 1	11/1/20 to 6/30/21	
9	CONGREGATE MEALS/ENP (87%)		Modification	TOTAL	Average cost/meal
10	Annual # Meals Contracted	20,432	8,662	29,094	
11	Program Term	11/1/20 to 6/30/21	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
12	DAS Expenditures				
13	Salaries & Benefits	\$103,003	\$35,692	\$138,695	\$4.77
14	Operating Expense	\$34,452	\$22,580	\$57,032	\$1.96
15	Subtotal	\$137,455	\$58,272	\$195,727	\$6.73
16	Indirect Percentage (max 10%)	10%	10%	10%	
17	Indirect Cost (Line 15 X Line 14, check Gen.Guidance regarding indirect exclusion)	\$13,745	\$5,827	\$19,573	\$0.67
18	Capital Expenditure				
19	COVID OTO	\$4,451		\$4,451	\$0.15
20	TOTAL DAS EXPENDITURES	\$155,651	\$64,099	\$219,750	\$7.40
21					
22	Non-DAS Expenditures				
23	Salaries & Benefits	\$18,791		\$18,791	\$0.65
24	Operating Expense	\$16,037	\$11,320	\$27,357	\$0.94
25	Capital Expenditure				
26	TOTAL Non-DAS EXPENDITURES	\$34,828	\$11,320	\$46,148	\$1.59
27					
28	TOTAL DAS & Non-DAS EXPENDITURES	\$190,479	\$75,419	\$265,898	\$8.99
29					
30	HSA-DAS Revenues				
31	Meals	\$155,651	\$64,099	\$219,750	
32					
33					
34					
35	TOTAL HSA-DAS REVENUES	\$155,651	\$64,099	\$219,750	
36	PER MEAL COST, HSA-DAS	\$7.40	\$7.40	\$7.40	
37	PER MEAL COST with COVID OTO, HSA-DAS	\$7.62	\$7.62	\$7.55	
38	Non-DAS Revenues				
39	Project Income	1,248		\$1,248	\$0.04
40	Agency Cash - Fundraising	\$33,580	\$11,320	\$44,900	\$1.54
41	Agency In-Kind Volunteer				
42	Nutrition Compliance Revenues				
43					
44	TOTAL NON HSA-DAS REVENUES	\$34,828	\$11,320	\$46,148	
45	PER MEAL COST, NON HSA-DAS	\$1.70	\$1.31	\$1.59	
46	TOTAL REVENUES	\$190,479	\$75,419	\$265,898	
47	PER BAG COST, TOTAL	\$9.32	\$8.71	\$9.14	
48	Full Time Equivalent (FTE)				
50	Prepared by: Evelyn L. Lam			2/26/21	
51	HSA-CO Review Signature: _____				
52	HSA #1 _____				

	A	B	C	D	E	F	G	H	I
1	EPISCOPAL COMMUNITY SERVICES OF SF					Appendix B, page 2			
2	Program Name:					Date:		2/26/21	
3	CONGREGATE MEALS/ENP (87%)								
4									
5									
6	Salaries & Benefits Detail								
7	ENP-62% TOTAL								
8	Modification TOTAL								
9	H.S.A-DAS	Agency Totals		For DAS Nutrition		11/1/20 to 6/30/21	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary		Budgeted Salary	
10	Assistant Chef	\$52,344	100%	44%	44%	\$15,180		\$15,180	
11	Database /Compliance Specialist	\$61,375	100%	17%	17%	\$7,120		\$7,120	
12	Chef Instructor	\$63,103	100%	70%	70%	\$29,280		\$29,280	
13	Culinary Training Manager	\$74,034	100%	44%	44%	\$21,470		\$21,470	
14	Assistant Chef	\$56,718	100%	17%	17%		\$5,978	\$5,978	
15	Part-Time Cook	\$40,256	100%	27%	27%		\$6,639	\$6,639	
16	Delivery Driver	\$40,256	100%	17%	17%		\$4,243	\$4,243	
17	Culinary Training Manager	\$80,200	100%	17%	17%		\$8,453	\$8,453	
18	TOTALS	\$ 468,286	800%	208%	208%	\$73,049	\$25,313	\$98,362	
19									
20	FRINGE BENEFIT RATE	41.0%							
21	EMPLOYEE FRINGE BENEFITS	\$ 191,997				\$29,954	\$10,378	\$40,332	
22									
23									
24	TOTAL DAS SALARIES & BENEFITS	\$ 660,283				\$103,003	\$35,692	\$138,695	
25									
26									
27	Non - DAS	Agency Totals		For DAS Meal				TOTAL	
28	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE (a)	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary		Budgeted Salary	
29	Meal site & kitchen volunteers								
30	Manager - Social Enterprise	\$81,620	100%	22%	22%	\$11,835		\$11,835	
31	Director of Impact & Analytics	\$118,525	100%	2%	2%	\$1,492		\$1,492	
32									
33									
34									
35									
36									
37									
38									
39									
40									
41									
42									
43									
44									
45									
46	TOTAL NON-DAS	\$ 200,145	200%	24%	24%	\$13,327		\$13,327	
47									
48	FRINGE BENEFIT RATE	41.0%							
49	EMPLOYEE FRINGE BENEFITS	\$ 82,059				\$5,464		\$5,464	
50									
51									
52	TOTAL Non-DAS SALARIES & BENEFITS	\$ 282,204				\$18,791		\$18,791	
53									

	A	B	C	D	E	F	G	H	I
54	TOTAL DAS & Non-DAS SALARIES & BENEFITS	\$ 942,488					\$121,794	\$35,692	\$157,485
55	HSA #2	Form Rev. 12/22/16							

	A	B	C	D	E	F	G	
1	EPISCOPAL COMMUNITY SERVIC						Appendix B, page 3	
2	Program Name:						2/26/21	
3								
4	Operating Expense Detail						TOTAL	
5								
7	H.S.A-DAS	Annual #Meals Contracted:	20,432	8,662	29,094			
8	<u>Expenditure Category</u>	Term:	11/1/20 to 6/30/21	11/1/20 to 6/30/21	11/1/20 to 6/30/21			
9	Rental of Property							
10	Utilities(Elec, Water, Gas, Phone, Scavenger)							
11	Office Supplies, Postage							
12	Building Maintenance Supplies and Repair							
13	FOOD COSTS							
14	Raw Food	<i>per meal</i> \$ 1.8324	\$34,452	\$18,860	\$53,312			
15	Cong Food Svc Supplies	<i>per meal</i> \$ 0.2863		\$2,480	\$2,480			
16	HDM Food Svc Supplies	<i>per meal</i> \$ -						
17	Catered Meals	<i>per meal</i> \$ -						
18	CONSULTANT/SUBCONTRACTOR Descriptive Title							
19	Registered Dietitian							
20								
21	OTHER COSTS:							
22	Insurance							
23	Staff Training & Travel			\$1,240	\$1,240			
24	Rental of Equipment							
25	Small equipment & Supplies							
26	Auto - Fuel & Insurance							
27	Repair/Maintenance							
28								
29								
30	TOTAL DAS OPERATING EXPENSE		\$34,452	\$22,580	\$57,032			
32	Non-DAS						TOTAL	
33	<u>Expenditure Category</u>							
34	Rental of Property							
35	Utilities(Elec, Water, Gas, Phone, Scavenger)							
36	Office Supplies, Postage		\$522		\$522			
37	Building Maintenance Supplies and Repair		\$4,060		\$4,060			
38	FOOD COSTS							
39	Raw Food	<i>per meal</i> \$ 0.6104	\$6,438	\$11,320	\$17,758			
40	Cong Food Svc Supplies	<i>per meal</i> \$ -						
41	HDM Food Svc Supplies	<i>per meal</i> \$ -						
42	Catered Meals	<i>per meal</i> \$ -						
43	CONSULTANT/SUBCONTRACTOR Descriptive Title							
44	Registered Dietitian							
45								
46	OTHER COSTS:							
47	Insurance		\$3,828		\$3,828			
48	Staff Recruitment, Training & Travel		\$116		\$116			
49	Program Supplies		\$580		\$580			
50	Printing & Reproduction		\$319		\$319			
51	Small equipment & Supplies							
52	Auto - Fuel & Insurance							
53	Equipment Repair/Maintenance		\$174		\$174			
54								
56	TOTAL Non-DAS OPERATING EXPENSE		\$16,037	\$11,320	\$27,357			
58	TOTAL DAS & Non-DAS OPERATING EXPENSE		\$50,489	\$33,900	\$84,389			
63	HSA #3		Form Rev. 12/22/16					

	A	B	C	D
1	EPISCOPAL COMMUNITY SERVICES OF SF		Appendix B, Page 4	
2	Program Name:		Document Date:	2/26/21
3				
4				
5	COVID OTO Expenditure Detail			
6			TOTAL	
7	H.S.A-DAS		11/1/20 to 6/30/21	11/1/20 to 6/30/21
8	No.	ITEM/DESCRIPTION		
9		3 compartment containers - 200 ct/case		
10		- 83 pcs X \$20.50 (80%)	\$1,361	\$1,361
11		Salad/deli containers/souffle cups and lids - 100 ct/case		
12		- 135 pcs X \$18.50 (80%)	\$1,998	\$1,998
13		Cutlery packets - 400 ct/case		
14		- 42 pcs X \$32.50 (80%)	\$1,092	\$1,092
15				
16				
17	TOTAL DAS-COVID OTO COST		\$4,451	\$4,451
18				
19	HSA #4 Form Rev. 12/22/16			
20				
21				
22				
23				
24				
25				
26				
27				
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Appendix A - Services to be Provided
Episcopal Community Services
 Congregate Nutrition Program for Adults with Disabilities

November 1, 2020 – June 30, 2021

I. Purpose

The purpose of this grant is to provide a congregate and/or modified congregate nutrition program for adults with disabilities living in the City and County of San Francisco. Congregate nutrition programs include the provision of nutritious meals, nutrition education, and nutrition risk screening. The program supports independent community living by promoting better health through nutrition and serves as an access point for other home and community-based services. It also aims to encourage socialization when the grantee provides services in a group or congregate setting.

II. Definitions

Grantee	Episcopal Community Services
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 units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing On-line System.
CCR-Title 22	California Code of Regulations, Title 22, Social Security, Division 1.8. California Department of Aging
CDA	California Department of Aging.
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Program	The procurement, preparation, transporting and serving of meals that meet nutrition requirements to eligible consumers in a group setting. Congregate nutrition services also include nutrition education, health promotion, and nutrition risk screening.
COVID-19	A disease caused by the coronavirus SARS-CoV-2. The symptoms of COVID-19 include cough, fever, and shortness of breath. Doctors and researchers continue to learn more about the disease, so information about symptoms, prevention, and treatment may change as more data becomes available.

CRFC	California Retail Food Code, which is a uniform statewide health and sanitation standard for food facilities. (Sec. 113700 et seq., California Health and Safety Code)
DAS	Department of Disability and Aging Services.
DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A screening tool published by the Nutrition Screening Initiative used to identify individuals at nutritional risk. All grantees must use the DETERMINE Checklist to evaluate the nutrition risk status of congregate and home-delivered meal nutrition services participants http://www.dhs.gov.vi/home/documents/DetermineNutritionChecklist.pdf
Dietary Guidelines for Americans (DGA)	Evidence-based food and beverage recommendations for Americans ages 2 and older that aim to promote health, prevent chronic disease, and help people reach and maintain a healthy weight. Published jointly every 5 years by the U.S. Department of Health and Human Services and the U.S. Department of Agriculture.
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine that represent the most current scientific knowledge on nutrient needs of healthy populations.
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. (CCR Title 22 Sec. 7630)
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.
HACCP	Hazard Analysis of Critical Control Point. A systematic approach to the identification, evaluation, and control of food safety hazards. (CCR Title 22 Sec. 7630)

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.
Low-Income	Having income at or below 100% 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.
Menu Planning and Nutrient Analysis	The development of a menu cycle that adheres to DAS OCP and CDA menu standards and the nutrition requirements of meals. A RD conducts the nutrient analysis, and the analysis will demonstrate adherence to the menu standards and nutrition requirements of the meals.
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.
Modified Congregate Nutrition Program-	A program that provides nutrition services that include, but are not limited to, the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. Due to the COVID-19 pandemic, the provision of meal nutrition services will not be in a congregate setting. The grantee will provide meals to go and the meals offered may be hot, chilled, or frozen. The grantee may provide nutrition risk screening and nutrition education over the phone, through virtual platforms, through written communications, or other methods approved by DAS. The program gives all participants the opportunity to contribute to the meal cost.

NCQA	Nutrition Compliance and Quality Assurance are components of congregate and home-delivered nutrition services that are programmatically required and include, but are not limited to, actions that ensure food safety, certify menu compliance, provide nutrition education, confirm consumer eligibility, and assess consumers' physiological, socioeconomic, and psychological well-being as well as need for nutrition and other supportive services. NCQA also includes nutrition counseling performed by a registered dietitian, when feasible and appropriate.
Nutrition Counseling	Provision of individualized advice and guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses about options and methods for improving their nutritional status, performed by a registered dietitian in accordance with Sections 2585 and 2586, Business and Professions Code. (CCR Title 22 Sec. 7630)
Nutrition Education	Informing recipients of congregate and home-delivered meals about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. (CCR Title 22 Sec. 7630 & 7638.11)
Nutrition Requirements of Meals	Each meal provided through congregate and home-delivered meal programs shall adhere to the current Dietary Guidelines for Americans (DGA) and provide a minimum of one-third of the Dietary Reference Intakes (DRI). (CCR Title 22 Sec. 7638.5)
Nutrition Screening	Completion of a nutrition screening checklist by eligible individuals to determine if they are at nutrition risk. A nutrition screening checklist is a federal public information collection requirement in the National Aging Program Information System (NAPIS), found in the Federal Register, Volume 59, No. 188, September 29, 1994. (CCR Title 22 Sec. 7630)
Nutrition Services	The procurement, preparation, transport, and service of meals, nutrition education, nutrition screening, and nutrition counseling, to eligible individuals at congregate sites or in their homes. (CCR Title 22 Sec. 7630)
OCP	Office of Community Partnerships, a unit within the Department of Disability and Aging Services
OCM	Office of Contract Management, San Francisco Human Services Agency.

Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)	Registered Dietitian or Registered Dietitian Nutritionist: An individual who shall be both: 1) Qualified as specified in Sections 2585 and 2586, Business and Professions Code, and 2) Registered by the Commission on Dietetic Registration.
SF-HSA	Human Services Agency of the City and County of San Francisco.
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> 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 (<i>Chapter 104, Sections 104.1 through 104.9</i>).
Unduplicated Consumer (UDC)	An individual who participates in the congregate nutrition program and the grantee reflects consumer participation in CA-GetCare through program enrollment.

III. Target Population

The target population is adults with disabilities living in the City and County of San Francisco with the greatest economic and social need. Grantee shall additionally target services to members of one or more of the following groups:

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

IV. Eligibility for Services

1. A person who is an adult with a disability.
2. A spouse or domestic partner accompanying an eligible adult with a disability at the meal program regardless of age. A spouse or domestic partner is as defined by law and/or as in chapter 12B of the San Francisco Administrative Code.

V. Location and Time of Services

The grantee will provide a congregate and/or modified congregate nutrition program in the City and County of San Francisco. The grantee determines the location(s) and service time(s) for the congregate nutrition program with prior approval from DAS OCP.

VI. Description of Services and Program Requirements

1. Grantee will develop and maintain nutrition policies and procedures that are in compliance with and meet the nutrition and food service standards set forth by California Retail Food Code (CRFC), Title 22 Regulations, CDA, and DAS OCP.
2. Grantee will provide a congregate and/or modified congregate nutrition program for adults with disabilities. The provision of the program will include the following:
 - a. Enrollment of consumers in the program and the provision of congregate meals to those consumers as indicated in Table A below and in the various neighborhoods and/or districts as indicated in the DAS OCP approved site chart.
 - b. Provision of congregate meals that meet nutritional standards by adhering to the current DGA and offering a minimum of one-third of the DRIs if the grantee provides one meal per day. If the grantee provides two meals per day, the meals must contain at least two-thirds of the DRIs. If the grantee provides three meals per day, the meals must contain 100% of the DRIs. The grantee may not count fractions of meals or snacks cumulatively. Each meal must individually meet one-third of the DRIs.
3. Grantee will conduct a nutrition screening using the DETERMINE Checklist, a food security screening, and a well-being and social isolation screening annually for each consumer and document individual responses in CA-GetCare within one month of obtaining the responses. The grantee will refer clients screened at high nutritional risk to DAS OCP funded nutrition counseling services through CA-GetCare.
4. Grantee will provide nutrition education to consumers participating in the congregate nutrition program at least quarterly. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report in CA-GetCare the number of nutrition education units provided in the applicable month. One unit of nutrition education is one consumer observing the nutrition education presentation. If the grantee is providing a modified congregate meal program, the nutrition education may be over the phone, through virtual platforms, through written communications, or other methods approved by DAS OCP.
5. Grantee will post at each meal site a notice that informs consumers about the suggested voluntary contribution for a meal and a guest fee for individuals who are not eligible to enroll as a consumer in the congregate nutrition program. The grantee's board of directors must approve the suggested contribution and guest fee per meal. The grantee will ensure its policy and procedures for the suggested meal contribution and guest fee comply with DAS OCP policy memoranda.
6. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all congregate meal sites meet state and local food, sanitation, health and safety requirements.
7. Grantee will have a qualified manager on staff who conducts the day-to-day management and administrative functions of the nutrition program. The grantee will ensure the manager on staff possess a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.

8. Grantee will comply with the City's food service waste reduction ordinance (File #06094), and use reusable, biodegradable, compostable and/or recyclable food service supplies
9. Grantee will ensure that a registered dietitian (RD) conducts and documents an on-site HACCP safety and sanitation monitoring of the production kitchen at least once per quarter and at minimum of four times during the fiscal year. HACCP monitoring will include, but is not limited to the review of quarterly congregate site monitoring reports.
10. Grantee will ensure that a registered dietitian (RD) or qualified staff conducts and documents on-site HACCP safety and sanitation monitoring of each congregate site at least once per quarter and a minimum of four times per fiscal year for each congregate site.
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in Title 22 Regulations and DAS OCP policy memoranda. Grantee will also provide the in service trainings as part of a new employee and/or volunteer orientation process and additional in-service trainings as needed to address any HACCP monitoring findings and/or to reinforce best food safety and sanitation practices as needed. The grantee will document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings. A registered dietitian (RD) must review and approve an annual in-service training plan and the training curriculum for nutrition program staff.
12. Grantee will submit for review and approval by DAS OCP, at least one month in advance of use, a minimum of a five-week cycle menu with the required corresponding nutrient analysis completed by their staff or consultant RD. The grantee may seek approval to submit a cycle menu with fewer weeks. DAS OCP will review requests for exceptions and approve if appropriate.
13. Grantee will ensure that the RD on staff or consultant RD reviews and approves menu substitutions in advance of their use and that staff documents the substitutions made.
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 meal site shall be a sample size of at the average number of meals served daily.
15. Grantee will ensure there is a sufficient number of qualified staff, paid and volunteer, with the appropriate education, experience, and cultural competency to carry out the requirements of the program and deliver quality services to meet the needs of the consumers.
16. Grantee will attend in-service trainings and nutrition meetings coordinated and provided by DAS OCP, and share the information with their staff and volunteers.

VII. Service Objectives

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

Table A	Original FY 20/21	Modification	Revised FY20/21
Number of Unduplicated Consumers (UDC)	92	43	135
Number of Meals	3,080	5,246	8,326

VIII. Outcome Objectives

1. Clients report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.
2. Clients feel less worried about getting enough food to meet their needs. Target: 85%.
3. Clients rate the quality of meals they received as excellent or good. Target: 85%.
4. Clients feel a greater sense of connection to their community. Target: 85%.
5. Clients feel safe and welcomed by program staff. Target: 85%.

Based on a consumer survey and a sample size equal to greater than the average number of daily meals served by the grantee.

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 the DAS OCP approved congregate intake form, which includes the annual nutrition risk screening, the well-being and social isolation screening, and the food security screening 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 served
 - Number of meals prepared and served
 - Number nutrition compliance units provided
4. Grantee will submit HACCP monitoring reports of the production kitchen and congregate sites to DAS OCP once per quarter. Quarterly Reports due Oct. 15; Jan. 15; April 15; and June 15.
5. 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.

6. 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.
7. 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.
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. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies “Focal Points” which are designed to help older adults and adults with disabilities connect to services throughout the City. These Focal Points are:

Designated Community Focal Points		
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O’Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAS Benefits and Resource Hub	2 Gough St, San Francisco, 94103	415-355-6700

15. For assistance with reporting and contract requirements, please contact:

Lauren McCasland
 Nutritionist
 DAS OCP
 email: lauren.mccasland@sfgov.org

and

Rocio Duenas
Contract Manager
HSA OCM
email: rocio.duenas@sfgov.org

I. Monitoring Activities

1. Nutrition 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 VI and VII, 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 such as cards or pool; translation and social services are based on staff hours.

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.

	A	B	C	D	E
1	BUDGET FORMS			Appendix B, pg. 1	
2				2/26/2021	
3	HUMAN SERVICES AGENCY - DEPARTMENT OF DISABILITY AND AGING				
4	BUDGET PROPOSAL FORMS				
5	EPISCOPAL COMMUNITY SERVICES OF SF			Grant Term	
6	(Check One) New <input type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/> _XXX_				
7	Effective Date of Mod: 3/1/21		No. of Mod: 1	11/1/20 to 6/30/21	
9	CONGREGATE MEALS/AWD (13%)		Modification	TOTAL	Average cost/meal
10	Annual # Meals Contracted	3,080	5,246	8,326	
11	Program Term	11/1/20 to 6/30/21	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
12	DAS Expenditures				
13	Salaries & Benefits	\$15,391	\$21,891	\$37,281	\$4.48
14	Operating Expense	\$4,238	\$11,541	\$15,779	\$1.90
15	Subtotal	\$19,629	\$33,432	\$53,060	\$6.37
16	Indirect Percentage (max 10%)	10%	10%	10%	
17	Indirect Cost (Line 15 X Line 14, check Gen.Guidance regarding indirect exclusion)	\$1,962	\$3,342	\$5,304	\$0.64
18	Capital Expenditure				
19	COVID OTO	\$1,113		\$1,113	\$0.13
20	TOTAL DAS EXPENDITURES	\$22,704	\$36,774	\$59,478	\$7.01
21					
22	Non-DAS Expenditures				
23	Salaries & Benefits	\$2,808		\$2,808	\$0.34
24	Operating Expense	\$3,307	\$9,237	\$12,544	\$1.51
25	Capital Expenditure				
26	TOTAL Non-DAS EXPENDITURES	\$6,114	\$9,237	\$15,351	\$1.84
27					
28	TOTAL DAS & Non-DAS EXPENDITURES	\$28,818	\$46,011	\$74,830	\$8.85
29					
30	HSA-DAS Revenues				
31	Meals	\$22,704	\$36,774	\$59,478	
32					
33					
34					
35	TOTAL HSA-DAS REVENUES	\$22,704	\$36,774	\$59,478	
36	PER MEAL COST, HSA-DAS	\$7.01	\$7.01	\$7.01	
37	PER MEAL COST with COVID OTO, HSA-DAS	\$7.37	\$7.37	\$7.14	
38	Non-DAS Revenues				
39	Project Income				
40	Agency Cash - Fundraising	\$6,114	\$9,237	\$15,351	\$1.84
41	Agency In-Kind Volunteer				
42	Nutrition Compliance Revenues				
43					
44	TOTAL NON HSA-DAS REVENUES	\$6,114	\$9,237	\$15,351	
45	PER MEAL COST, NON HSA-DAS	\$1.99	\$1.76	\$1.84	
46	TOTAL REVENUES	\$28,818	\$46,011	\$74,830	
47	PER BAG COST, TOTAL	\$9.36	\$8.77	\$8.99	
48	Full Time Equivalent (FTE)				
50	Prepared by: Evelyn L. Lam			02/26/21	
51	HSA-CO Review Signature: _____				
52	HSA #1		Form Rev. 12/22/16		

	A	B	C	D	E	F	G	H	I
1	EPISCOPAL COMMUNITY SERVICES OF SF					Appendix B, page 2			
2	Program Name:					Date:		2/26/21	
3	CONGREGATE MEALS/AWD (13%)								
4						ENP-62%			
5	Salaries & Benefits Detail					Modification		TOTAL	
8	H.S.A-DAS	Agency Totals		For DAS Nutrition		11/1/20 to 6/30/21	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
9	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary		Budgeted Salary	
10	Assistant Chef	\$52,344	100%	7%	7%	\$2,268		\$2,268	
11	Database /Compliance Specialist	\$61,375	100%	3%	3%	\$1,064		\$1,064	
12	Chef Instructor	\$63,103	100%	10%	10%	\$4,375		\$4,375	
13	Culinary Training Manager	\$74,034	100%	7%	7%	\$3,208		\$3,208	
14	Assistant Chef	\$56,718	100%	17%	17%		\$3,664	\$3,664	
15	Part-Time Cook	\$40,256	100%	27%	27%		\$4,080	\$4,080	
16	Delivery Driver	\$40,256	100%	17%	17%		\$2,601	\$2,601	
17	Culinary Training Manager	\$80,200	100%	17%	17%		\$5,181	\$5,181	
18	TOTALS	\$ 468,286	800%	97%	97%	\$10,915	\$15,525	\$26,441	
19									
20	FRINGE BENEFIT RATE	41.0%							
21	EMPLOYEE FRINGE BENEFITS	\$ 191,997				\$4,475	\$6,365	\$10,841	
22									
23									
24	TOTAL DAS SALARIES & BENEFITS	\$ 660,283				\$15,391	\$21,891	\$37,281	
25									
26									
27	Non - DAS	Agency Totals		For DAS Meal				TOTAL	
28	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE (a)	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary		Budgeted Salary	
29	Meal site & kitchen volunteers								
30	Manager - Social Enterprise	\$81,620	100%	3%	3%	\$1,768		\$1,768	
31	Director of Impact & Analytics	\$118,525	100%	0%	0%	\$223		\$223	
32									
33									
34									
35									
36									
37									
38									
39									
40									
41									
42									
43									
44									
45									
46	TOTAL NON-DAS	\$ 200,145	200%	4%	4%	\$1,991		\$1,991	
47									
48	FRINGE BENEFIT RATE	41.0%							
49	EMPLOYEE FRINGE BENEFITS	\$ 82,059				\$816		\$816	
50									
51									
52	TOTAL Non-DAS SALARIES & BENEFITS	\$ 282,204				\$2,808		\$2,808	
53									

	A	B	C	D	E	F	G	H	I
54	TOTAL DAS & Non-DAS SALARIES & BENEFITS	\$ 942,488					\$18,198	\$21,891	\$40,089
55	HSA #2	Form Rev. 12/22/16							

	A	B	C	D	E	F	G
1	EPISCOPAL COMMUNITY SERVIC						Appendix B, page 3
2	Program Name:						2/26/21
3							
4	Operating Expense Detail						TOTAL
5							
7	H.S.A-DAS	Annual #Meals Contracted:	3,080	5,246			8,326
8	<u>Expenditure Category</u>	Term:	11/1/20 to 6/30/21	11/1/20 to 6/30/21			11/1/20 to 6/30/21
9	Rental of Property						
10	Utilities(Elec, Water, Gas, Phone, Scavenger)						
11	Office Supplies, Postage						
12	Building Maintenance Supplies and Repair						
13	FOOD COSTS						
14	Raw Food	<i>per meal</i> \$ 1.8951	\$4,238	\$11,541			\$15,779
15	Cong Food Svc Supplies	<i>per meal</i> \$ -					
16	HDM Food Svc Supplies	<i>per meal</i> \$ -					
17	Catered Meals	<i>per meal</i> \$ -					
18	CONSULTANT/SUBCONTRACTOR Descriptive Title						
19	Registered Dietitian						
20							
21	OTHER COSTS:						
22	Insurance						
23	Staff Training & Travel						
24	Rental of Equipment						
25	Small equipment & Supplies						
26	Auto - Fuel & Insurance	###					
27	Repair/Maintenance						
28							
29							
30	TOTAL DAS OPERATING EXPENSE		\$4,238	\$11,541			\$15,779
32	Non-DAS						TOTAL
33	<u>Expenditure Category</u>						
34	Rental of Property						
35	Utilities(Elec, Water, Gas, Phone, Scavenger)						
36	Office Supplies, Postage		\$78				\$78
37	Building Maintenance Supplies and Repair		\$607				\$607
38	FOOD COSTS						
39	Raw Food	<i>per meal</i> \$ 0.2248	\$1,872	\$6,957			\$1,872
40	Cong Food Svc Supplies	<i>per meal</i> \$ 0.2897		\$1,520			\$1,520
41	HDM Food Svc Supplies	<i>per meal</i> \$ -					
42	Catered Meals	<i>per meal</i> \$ -					
43	CONSULTANT/SUBCONTRACTOR Descriptive Title						
44	Registered Dietitian						
45							
46	OTHER COSTS:						
47	Insurance		\$572				\$572
48	Staff Recruitment, Training & Travel		\$17	\$760			\$777
49	Program Supplies		\$87				\$87
50	Printing & Reproduction		\$48				\$48
51	Small equipment & Supplies						
52	Auto - Fuel & Insurance						
53	Equipment Repair/Maintenance		\$26				\$26
54							
56	TOTAL Non-DAS OPERATING EXPENSE		\$3,307	\$9,237			\$5,587
58	TOTAL DAS & Non-DAS OPERATING EXPENSE		\$7,545	\$20,778			\$21,366
63	HSA #3						

Form Rev. 12/22/16

	A	B	C	D
1	EPISCOPAL COMMUNITY SERVICES OF SF		Appendix B, Page 4	
2	Program Name:		Document Date:	2/26/21
3				
4				
5	COVID OTO Expenditure Detail			
6				TOTAL
7	H.S.A-DAS		11/1/20 to 6/30/21	11/1/20 to 6/30/21
8	No.	ITEM/DESCRIPTION		
9		3 compartment containers - 200 ct/case		
10		- 83 pcs X \$20.50 (20%)	\$340	\$340
11		Salad/deli containers/souffle cups and lids - 100 ct/case		
12		- 135 pcs X \$18.50 (20%)	\$500	\$500
13		Cutlery packets - 400 ct/case		
14		- 42 pcs X \$32.50 (20%)	\$273	\$273
15				
16				
17	TOTAL DAS-COVID OTO COST		\$1,113	\$1,113
18				
19	HSA #4 Form Rev. 12/22/16			
20				
21				
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24				
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28				