

Department of Benefits and Family Support

MEMORANDUM

Department of Disability and Aging Services

TO: DISABILITY AND AGING SERVICES COMMISSION

Office of Early Care and Education

CINDY KAUFFMAN, DEPUTY DIRECTOR

ESPERANZA ZAPIEN, DIRECTOR OF CONTRACT

KELLY DEARMAN, EXECUTIVE DIRECTOR

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

DATE: JULY 7, 2021

SUBJECT: NEW GRANT: SHANTI PROJECT (NON-PROFIT)

TO PROVIDE SOCIAL ISOLATION PREVENTION

SERVICES FOR LESBIAN, GAY, BISEXUAL,

TRANSGENDER, AND QUEER (LGBTQ+) SENIORS

AND ADULTS WITH DISABILITIES

GRANT TERM: 7/1/2021-6/30/2023

GRANT AMOUNT:

THROUGH:

FROM:

<u>New</u> \$954,282

Contingency S54.282 Total \$1.00

\$1,008,564

ANNUAL AMOUNT

<u>FY21/22</u> \$477,141 FY22/23 \$477,141

London Breed Mayor

Trent RhorerExecutive Director

Funding Source

<u>County</u> <u>State</u> <u>Federal</u> <u>Contingency</u> <u>Total</u>

runding Source

FUNDING: \$954,282 \$54,282 \$1,008,564

PERCENTAGE: 100% 100%

The Department of Disability and Aging Services (DAS) requests authorization to enter into a grant with Shanti Project for the time period beginning July 1, 2021 and ending June 30, 2023, in an amount of \$954,282 plus a 10% contingency for a total amount not to exceed \$1,008,564. The purpose of the grant is to provide social isolation prevention services to lesbian, gay, bisexual, transgender, and queer (LGBTQ+) older adults and adults with disabilities.



Background

The San Francisco LGBTQ+ Aging Policy Task Force was convened in 2012 by the Board of Supervisors to evaluate the needs of LGBTQ+ seniors, to assess the capacity of the current support system to meet those needs, and to make recommendations to address any unmet needs. Findings from the Task Force report indicate that LGBTQ+ older adults, when compared to those who identify with the heterosexual population, live with higher rates of physical disabilities, are more likely to live alone, and have lower levels of social support and companionship. These factors lead to significantly higher rates of social isolation, depression, anxiety, and suicidal ideation.

The Task Force reviewed services available in San Francisco which address these issues and found such services to be lacking. The Task Force specifically recommended a program design which utilizes care navigation and peer volunteer support models of service delivery which have had a history of success.

In response to the Task Force recommendations, new programming designed to address social isolation in the LGBTQ+ senior and adult with disability community was introduced in fiscal years 2016-2018.

Services to be Provided

Grantee has developed and implemented a social isolation prevention program in order to address the emotional, behavioral, health, and social isolation challenges faced by lesbian, gay, bisexual, and transgender older adults and adults with disabilities. Program services include the following components: care navigation, peer support, and support programming. (See Appendix A for specific information on each of these service components.)

Selection

Contractor was selected through Request for Proposals #937, which was competitively bid in June 2021.

Funding

Funding for this contract is provided through City and County General Funds, through the Dignity Fund.

ATTACHMENTS

Appendix A Appendix B

APPENDIX A: SERVICES TO BE PROVIDED

Shanti Project

Social Isolation Prevention Services for LGBTQ+ Older Adults and Adults with Disabilities July 1, 2021 to June 30, 2023

I. Purpose

Limited supportive services are available to address the emotional, behavioral, health, and social isolation challenges faced by lesbian, gay, bisexual, and transgender older adults and adults with disabilities. This grant seeks to address these issues through the implementation of a program utilizing 1) care navigation, 2) peer support, and 3) supportive programming.

II. Definitions

Adult with a Disability	Person 18 years of age or older living with a disability.
Care Navigation	Includes the following: intake, follow up, on-going assessment, information and referral, on-going care coordination, matching and support of client-volunteer peer support matches, facilitation of peer support volunteer trainings, facilitation of drop-in services, support group facilitation, peer-based psychosocial support (including practical assistance and emotional support).
DAS	Department of Disability and Aging Services (previously Department of Aging and Adult Services/DAAS)
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 individual or to others.
Grantee	Shanti Project
HSA	Human Services Agency

1

Isolation	For the purpose of this program, isolation is defined as combination of 2 or more of the following factors: self-reported feelings of isolation, mild to moderate depression, lack of natural or reliable supports, chronic illness or conditions, need for emotional and practical support, lack of engagement with available community-based, or other personal support networks, and other additional factors that indicate 1:1 in home and wraparound support would be beneficial	
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 300% of the federal poverty line defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. This is only to be used by consumers to self-identify their income status, not to be used as a means test to qualify for the program.	
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	
OCP	Office of Community Partnerships (previously Office on the Aging/OOA)	
Older Adult	Person who is 60 years or older (used interchangeably with senior)	
Peer Support	Includes the use of paid staff, student-interns, and peer support volunteers. Peer support services include emotional and practical support via regular interactions with clients such as social visits, accompaniment to appointments or events, and other assistance.	
Senior	Person who is 60 years of age or older (used interchangeably with older adult)	

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 10 Sections 104.1 through 104.9.)	
Sub-Grantees	Curry Senior Center, Openhouse	
Supportive Programming	Includes individual emotional and behavioral support, peer support groups (including abstinence-based and substance-use management groups), social activities, wellness and health education, outreach, and early intervention programs.	

III. Target Population

Isolated LGBTQ+ older adults and adults with disabilities who are residents of San Francisco.

Services must also target clients who are members of one or more of the following target groups identified as demonstrating the greatest economic and social need. In particular:

- Low-income
- Non or limited English speaking
- Minority
- Frail

IV. Description of Services / Units of Service

In response to the limited support services for LGBTQ+ older adults and following the LGBTQ+ Aging Task Force recommendations, Shanti's program "Social Isolation Prevention Services for LGBTQ+ Older Adults and Adults with Disabilities" seeks to blend the following three models of service to address the emotional, practical and behavioral health needs of LGBTQ+ older adults and adults with disabilities.

A. <u>Care Navigation</u>: Care navigators serve as the main point of contact for clients, and provide services including but not limited to intake, follow up, ongoing assessment and care coordination, information and referral, and drop-in facilitation. Care navigators will also help with the development and utilization of peer support volunteers who, in turn, help support clients participating in the program. Care navigators will match peer support volunteers with clients and assist with facilitation of peer support volunteer trainings, support group facilitation, and peer-based psychosocial support (including practical assistance and emotional support).

Care navigator qualifications are based on expertise in providing harm reduction-based coordination, advocacy, and/or psychosocial support to at-risk communities, and therefore these positions are not required to have specific licensure or graduate-level training. Care navigators are evaluated for experience and competence in serving severe need populations and targeted communities.

- B. <u>Peer Support</u>: Peer support volunteers provide outreach and supportive services for isolated, underserved LGBTQ+ older adults and adults with disabilities living with emotional and behavioral health challenges. Use of a peer support network provides an innovative service delivery framework for a target population that may be reluctant to seek traditional health and social services due to a history of discrimination and marginalization.
 - Grantee will implement an assessment and training program for peer volunteers prior to matching them to clients. Assessment should include evaluation of a volunteer's physical and mental health status and ability to provide support as intended by this program element. Training should be comprehensive and cover cultural competency, boundaries, Aging 101, the grieving process, suicide ideation, clinical issues (including cognitive impairment), psychosocial issues, harm reduction models, and the peer counseling/support model.
- C. <u>Support Programming</u>: This program also seeks to create and increase the number of programs and wellbeing programs that support and enhance the emotional and behavioral wellbeing of underserved LGBTQ+ older adults. These connective programs shall consist of:
 - 1) individual emotional and behavioral support,
 - 2) peer support groups, including abstinence-based and substance-use management groups, social activities,
 - 3) wellbeing and health related education and activities, and
 - 4) outreach and early intervention programs

Support programming will be provided by Shanti as well as by sub-grants with Curry Senior Center and Openhouse, both currently offering LGBTQ+-specific community services. Shanti, Curry, and Openhouse will develop, coordinate, and implement social connective programs, activities, and wellbeing and health programs. Enhanced outreach will include efforts in the wider Tenderloin and South of Market communities, to the transgender community and to communities of color.

In delivery of the above program model, the following units of service will be used to measure program performance:

- 1) <u>Unduplicated Consumers</u>. Grantee will provide services to consumers consisting of the target population.
 - UNIT: One unduplicated consumer.
- 2) <u>Care Navigation</u>. Grantee will provide care navigation services, consisting of: intake, follow up, on-going assessment, information and referral, on-going care coordination, matching and support of client-volunteer peer support matches, facilitation of peer support volunteer trainings, facilitation of drop-in services, support group facilitation, peer-based psychosocial support (including practical assistance and emotional support).
 - UNIT: One hour of care navigation services.
- 3) <u>Volunteer Recruitment and Development</u>. The service model includes volunteers trained and assigned to work with consumers. Grantee will conduct outreach to draw volunteers

who will then undergo formal training and will make a specified minimum time commitment to the program.

UNIT: One volunteer.

4) <u>Peer Support</u>. Grantee will train and coordinate paid staff, student-interns, and peer support volunteers who will provide peer support. Peer support services include emotional and practical support via regular interactions with clients such as social visits, accompaniment to appointments or events, and other assistance.

UNIT: One hour of peer support to consumers.

5) <u>Support Programming</u>. Includes individual emotional and behavioral support, peer support groups (including abstinence-based and substance-use management groups), social activities, wellness and health education and training sessions, peer health activities, and early intervention programs.

UNIT: One hour of support programming.

V. Location and Time of Services

Details of the sites and operation hours are as attached in the Site Chart (Appendix F.)

VI. Service Objectives

For the period January 1, 2021 – June 30, 2021 the Grantee will:

- Provide program services for at least <u>50</u> unduplicated consumers.
- Provide at least <u>1050</u> hours of care navigation to consumers.
- Provide volunteer recruitment and development services to at least 8 volunteers.
- Provide at least <u>1000</u> peer support hours to consumers, delivered by trained peer support volunteers.
- Provide at least <u>170</u> hours of support programming to consumers, in collaboration with Curry Senior Center, Openhouse, and other community partners including Project Open Hand, AIDS Housing Alliance, SFAF 5-Plus, and Lyon Martin Health Services.
- At least **thirty-five percent** (35%) of consumers will respond to an annual consumer satisfaction survey.
- At least <u>fifty percent</u> (50%) of peer support volunteers will respond to an annual consumer satisfaction survey.

VII. Outcome Objectives

For the period January 1, 2021 – June 30, 2021:

• At least <u>seventy percent</u> (70%) of consumers responding to an annual consumer satisfaction survey will be satisfied (or better) with services and find it beneficial to them.

- At least <u>seventy percent</u> (70%) of peer support volunteers responding to an annual consumer satisfaction survey report that their training was comprehensive and helpful to their program role.
- At least <u>seventy percent</u> (70%) of consumers will demonstrate reduced isolation by their engagement in care navigation, volunteer peer support activities, or supportive programming.

VIII. Reporting Requirements

- A. Grantee will enter into CA-GetCare the consumer data including the Intake Form by the 5th working day of the month for the preceding month's services.
- B. Grantee will enter into CA-GetCare all the units of service in the Service Recording Tool by the 5th working day of the month for the preceding month.
- C. Monthly reports must be entered into the Contracts Administration, Billing and Reporting Online (CARBON) system for each unit of service delivered during the reporting period for each service listed in Section VI.
- D. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 of the following fiscal year. This report must be submitted to the CARBON system.
- E. Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules. For specific compliance requirements, please refer to Appendices within the Grant Agreement.
- F. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis; Grantee will maintain evidence of staff completion of this training.
- G. Grantee will provide an annual consumer satisfaction survey report to OCP by March 15 each grant year.
- H. Grantee shall develop and deliver bi-annual summary reports of SOGI data as requested by DAS/HSA. The due dates for submitting the bi-annual summary reports is January 10 and July 10 each fiscal year.
- I. Grantee shall develop and deliver ad hoc reports as requested by DAS/HSA.
- J. Grantee will develop and maintain with OCP's approval, an updated Site Chart (using OCP's format) with details about the program.
- K. For assistance with reporting requirements or submission of reports, please contact:

Tara Alvarez, Contract Manager Human Services Agency P.O. Box 7988

San Francisco, CA 94120-7988

E-mail: tara.alvarez@sfgov.org

Melissa McGee, Program Manager Office of Community Partnerships 1650 Mission Street, 5th Floor San Francisco, CA 94103

Email: melissa.mcgee@sfgov.org

IX. Monitoring Activities

- A. Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on 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; program operation, which includes a review of a written policies and procedures manual of all OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; board of director list; and whether services are provided appropriately according to Sections IV, VI and VII.
- B. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, the general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and MOUs, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

			Appendix B, Page 1
HUMAN SER	VICES AGENCY BUD	GET SUMMARY	
	BY PROGRAM		
			Term
Shanti Project			7/1/21 - 6/30/23
(Check One) NewX_ Renewal	Modification		
If modification, Effective Date of Mod.	No. of Mod.		
Program: Social Isolation Prevention Se	rvices for LGBTQ+ Old	ler Adults and Adults v	vith Disabilities
Budget Reference Page No.(s)			
Program Term	7/1/21 - 6/30/22	7/1/22 - 6/30/23	Total
Expenditures			
Salaries & Benefits	\$269,946	\$269,946	\$539,892
Operating Expense	\$51,708	\$51,708	\$103,416
Subtotal	\$321,654	\$321,654	\$643,308
Indirect Percentage (%)	15%	15%	15%
Indirect Cost (Line 16 X Line 15)	\$48,263	\$48,263	\$96,526
Subcontractor/Capital Expenditure	\$107,224	\$107,224	\$214,448
Total Expenditures	\$477,141	\$477,141	\$954,282
HSA Revenues			
General Fund	\$477,141	\$477,141	\$954,282
TOTAL HSA REVENUES	\$477,141	\$477,141	\$954,282
Other Revenues			
Total Revenues	\$477,141	\$477,141	\$954,282
Full Time Equivalent (FTE)	3.31	3.31	
Prepared by: Melissa Bryant	Telephone No:	415-674-4716	Date: 5.16.21
HSA-CO Review Signature:	•		
HSA #1			10/25/2016

Program: Social Isolation Prevention Services for LGBTQ+ Older Adults and Adults with Disabilities (Same as Line 9 on HSA #1)

Appendix B, Page 2

Salaries & Benefits Detail

					7/1/21 - 6/30/22	7/1/22 - 6/30/23	Total
	Agency T	otals	HSA P	rogram	DHS Program	DHS Program	DHS Program
	Annual Full Time		% FTE funded by HSA (Max			5	
POSITION TITLE	Salary for FTE	Total FTE	100%)	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary
LAASN Program Director	\$84,660	1.00	91%	0.91	\$77,040	\$77,040	\$154,080
Program Manager	\$61,750	1.00	70%	0.70	\$43,224	\$43,224	\$86,448
Volunteer Services Coordinator	\$53,206	1.00	14%	0.135	\$7,188	\$7,188	\$14,376
Care Navigators	\$53,623	2.00	61%	1.225	\$65,688	\$65,688	\$131,376
Volunteer Services Manager	\$66,300	1.00	27%	0.27	\$17,904	\$17,904	\$35,808
Volunteer Services Director	\$104,535	1.00	5%	0.05	\$5,232	\$5,232	\$10,464
Deputy Director	\$142,800	1.00	2%	0.02	\$2,856	\$2,856	\$5,712
TOTALS	\$566,874	8.00	41%	3.31	\$219,132	\$219,132	\$438,264
FRINGE BENEFIT RATE	23.2%						
EMPLOYEE FRINGE BENEFITS	\$131,451				\$50,814	\$50,814	\$101,628
TOTAL SALARIES & BENEFITS	\$698,325				\$269,946	\$269,946	\$539,892
HSA #2							10/25/2016

TOTAL OPERATING EXPENSE

HSA #3

Program: Social Isolation Prevention Services for LGBTQ+ Older	Adults and Adults	with Disabilities Appe	endix B. Page 3
(Same as Line 9 on HSA #1)			
Operating Expen	se Detail		
EXPENDITURE CATEGORY TERM	7/1/21 - 6/30/22	7/1/22 - 6/30/23	Total
Rental of Property	\$10,384	\$10,384	\$20,768
Utilities(Elec, Water, Gas, Phone, Garbage)	\$3,600	\$3,600	\$7,200
Office Supplies, Postage	\$3,200	\$3,200	\$6,400
Building Maintenance Supplies and Repair	\$0	\$0	\$0
Printing/Graphic Design	\$3,067	\$3,067	\$6,134
Insurance	\$1,440	\$1,440	\$2,880
Staff Training	\$1,900	\$1,900	\$3,800
Staff Travel-(Local & Out of Town)	\$754	\$754	\$1,508
IT Support	\$2,700	\$2,700	\$5,400
CONSULTANT/SUBCONTRACTOR DESCRIPTIVE TITLE			
<u>OTHER</u>	_	_	_
Client Workshops and Supplies	\$9,500	\$9,500	\$19,000
Client-Related Travel	\$6,195	\$6,195	\$12,390
Wellness Workshop Supplies	\$2,500	\$2,500	\$5,000
Electronic Client Management	\$3,468	\$3,468	\$6,936
Volunteer and Client Outreach	\$3,000	\$3,000	\$6,000
TOTAL OTHER	\$24,663	\$24,663	\$49,326

\$51,708

\$51,708

\$103,416

10/25/2016

Program: Socia	al Isolation Prevention Services for LGBTQ+	Older Adults and A	dults with Disabi	Appendix B, Page 4
(Same as Line	9 on HSA #1)			
	Drawrom Eve	anditura Datail		
	Program Exp	penditure Detail		
<u>EQUIPMENT</u>		7/1/21 - 6/30/22	7/1/22 - 6/30/23	Total
No.	ITEM/DESCRIPTION			
n/a				\$0
				\$0
				\$0
				\$0
				\$0
TOTAL EQUIP	MENT COST	\$0	\$0	\$0
	CT / PASS THRU	¢40.704	¢40.704	P00 440
	Senior Center	\$49,724	\$49,724	\$99,448
Openh	ouse DNTRACT / PASS THRU	\$57,500 \$107,224	\$57,500 \$107,334	\$115,000 \$214,448
TOTAL SUBCC	DNIRACI/ FASS IRRU	\$107,224	\$107,224	\$214,448
REMODELING				
Description	-			
n/a				\$0
				\$0
				\$0
				\$0
				\$0
TOTAL REMOI	DELING COST	\$0	\$0	\$0
TOTAL CAPITA	AL/SUBCONTRACTOR EXPENDITURE	\$107,224	\$107,224	\$214,448
(Equipment and	d Remodeling Cost)			
HSA #4				10/25/2016