



London Breed, Mayor

Department of Human Services  
 Department of Aging and Adult Services  
 Office of Early Care and Education

Trent Rhorer, Executive Director

**MEMORANDUM**

TO: AGING AND ADULT SERVICES COMMISSION

THROUGH: SHIREEN MCSPADDEN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR  
 JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS *JA*

DATE: OCTOBER 2, 2019

SUBJECT: GRANT MODIFICATION: **CATHOLIC CHARITIES (NON-PROFIT)**  
 CASE MANAGEMENT SERVICES FOR OLDER ADULTS AND ADULTS  
 WITH DISABILITIES

GRANT TERM:	<u>Current</u> 7/1/18-6/30/21	<u>Modification</u> 7/1/19-6/30/21	<u>Revised</u>	<u>Contingency</u>	<u>Total</u>
GRANT AMOUNT:	\$624,709	\$80,000	\$704,709	\$70,471	\$775,180
ANNUAL AMOUNT:	<u>FY18-19</u> \$224,903	<u>FY19-20</u> \$239,903	<u>FY20-21</u> \$239,903		
Mod. Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
FUNDING:	\$80,000			\$8,000	\$88,000
PERCENTAGE:	100%			10%	

The Department of Aging and Adult Services (DAAS) requests authorization to modify the existing grant agreement with Catholic Charities for the time period starting July 1, 2019 and ending on June 30, 2021, in the amount of \$80,000 plus a 10% contingency for a total amount not to exceed \$775,180. The modification will provide for additional case management services for older adults and adults with disabilities.

**Background**

Case Management facilitates service connections for older adults and adults with disabilities. These services promote and maintain the optimum level of functioning in the most independent setting possible. Examples of service connections that a Case Manager might assist with include: connection to health services, establishing money management services, or stabilization of a living situation through provision of caregiver services.

**Services to be Provided**

The Office of Community Partnerships' (OCP) Case Management program contains core elements to ensure standardized and effective delivery of services. These core elements include a centralized waitlist, introduced in May of 2017, and an on-line module that allows case managers to document and track client progress. Upon completion of service plan goals, clients can be re-assessed, and if it is determined that case management services are no longer required, clients are disenrolled and referred to other community-based services as appropriate. Case managers connect with clients at least monthly to ensure consistent delivery of services. Services provided under OCP's Case Management program include:

1. Intake/Enrollment
2. Comprehensive Assessment
3. Service Planning
4. Service Plan Implementation
5. Monitoring
6. Progress Notes
7. Reassessment
8. Discharge/Disenrollment

This modification will provide for continuation of a .5 FTE Case Manager position within Grantee's Case Management program. The half-time Case Manager will provide additional case management services to at least 27 unduplicated consumers on an annual basis.

### **Grantee Performance**

Fiscal Monitoring: Catholic Charities has had no fiscal findings in the last two years and is in full fiscal compliance.

Program Monitoring: Catholic Charities was monitored on April 11, 2019 and was found to be underserving contractual levels due to staff turnover. A corrective action plan was developed and action by Grantee resulted in significant improvement. Progress will continue to be monitored and assessed throughout the grant period. Catholic Charities is now in program compliance with findings resolved for FY18/19.

### **Selection**

Grantee was selected through RFP #780 issued in March 2018.

### **Funding**

Funding for this grant is provided by the City and County General Funds.

### **ATTACHMENTS**

Appendix A-1 – Services to be Provided

Appendix B-1 – Program Budget

**APPENDIX A-1: SERVICES TO BE PROVIDED BY GRANTEE**

***CATHOLIC CHARITIES***

**Effective July 1, 2018 to June 30, 2021**

***Updated October 2019***

**CASE MANAGEMENT**

**I. Purpose:**

Office of Community Partnerships funds Case Management in order to facilitate connections for older adults and adults with disabilities to services that promote and maintain the optimum level of functioning in the most independent setting. Activities of Case Management include Intake/Enrollment, Assessment, Service Planning and Implementation, Monitoring, Reassessment, and ultimately Discharge/Disenrollment from services.

**II. Definitions**

Adult with Disability	Person 18 years of age or older living with a disability.
Case Management	Case Management is a process to plan, seek, advocate for, and monitor services from different social service or health care organizations and staff on behalf of a client. The process enables social workers in an organization, or in different organizations, to coordinate their efforts to serve a given client through professional teamwork, thus expanding the range of needed services offered. Case Management limits problems arising from fragmentation of services, staff turnover, and inadequate coordination among providers. Case Management can occur within a single, large organization or within a community program that coordinates services among settings. (National Association of Social Workers Standards for Social Work Case Management, 2013.)
City	City and County of San Francisco, a municipal corporation.
Controller	Controller of the City and County of San Francisco or designated agent.
CARBON	Contracts Administration, Reporting, and Billing On Line System
DAAS	Department of Aging and Adult Services.

Disability	A condition or combination of conditions that is attributable to a mental, cognitive or physical impairment, including hearing and visual impairments, that results in substantial functional limitations in one (1) or more of the following areas of major life activity: a) Self-care: activities of daily living (ADL), and instrumental activities of daily living (IADL); b) Capacity for independent living and self-direction; c) Cognitive functioning, and emotional adjustment
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	Catholic Charities
HSA	Human Services Agency of the City and County of San Francisco.
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.
LGBT	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
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.

Older Adult	Person who is 60 years or older, used interchangeably with Senior
Senior	Person who is 60 years 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 104, Sections 104.1 through 104.9.).

### **III. Target Population**

Services must target those older adults and adults with disabilities who are members of one or more of the following target groups that have been identified as demonstrating the greatest economic and social need. In particular:

- Low Income
- Non or limited English speaking
- Minority
- Frail
- Member of LGBT Community

#### **Eligibility for Services**

- A resident of San Francisco
- Aged 60 and above, or
- Aged 18 and above with a disability
- At an income level of 400% of Federal Poverty or less
- Not currently receiving duplicative Case Management services
- Has a demonstrable need for Case Management and is willing to participate in the program.
  - Demonstrable need includes: inability to coordinate needed services, identifiable multiple service needs such as connection to health services, money management, or stabilization of living situation
  - Needs limited to only ‘case monitoring’ (i.e., no active service plan needs) or ‘finding housing’ are not a demonstrable need for OCP Case Management services

### **IV. Location and Time of Services:**

Catholic Charities’ Case Management services are housed at 65 Beverly St. and available from 9:00 a.m. to 5:00 p.m. Monday through Friday.

### **V. Description of Services**

Grantee shall provide Case Management services to eligible clients consistent with Office on the Aging (OOA) Policy Memorandum #39 "OOA Case Management Program Standards" (as revised March 5, 2018). The OOA Case Management Program Standards include core elements described below. Performance of core elements are recorded in the CA GetCare database which all OCP funded Case Management providers are required to utilize.

**1) The Case Management process includes at a minimum the following:**

a. Intake/Enrollment

Starting May 2017, DAAS established a Centralized Intake and Waitlist (CIW) system which serves as the starting point for clients needing OCP funded Case Management services. All clients seeking to newly enroll in Case Management services must now go through the CIW process. Referrals for OCP funded Case Management can come from City agencies, hospitals, community based organizations, friends and family of potential clients, and self-referrals from clients themselves. The CIW process helps determine presumptive eligibility of the potential client, track unmet need, and streamline the referral process. OCP funded Case Management providers will select clients from the CIW for enrollment in services.

b. Comprehensive Assessment

Comprehensive assessment is the process of collecting in-depth information about a client's situation and level of functioning. The comprehensive assessment identifies specific problems to be addressed in a service plan to coordinate services.

c. Service Planning

The information collected through the comprehensive assessment will allow a Case Manager to identify the client's needs and goals. The service plan is a systematic means of addressing each of the problems identified in the assessment.

d. Service Plan Implementation

The implementation of the service plan is the process of putting the plan into action. The Case Manager acts as a link between the client and the needed services, helping to assure the most appropriate, timely, and cost effective delivery of service to the client.

e. Monitoring

Regular monitoring activities are conducted by the Case Manager to determine whether the goals and objectives of the care plan are being achieved and to assess ongoing need for Case Management services. Monitoring is necessary as the client's health or personal situation may change, which would require an alteration to the care plan. At a minimum, a quarterly face-to-face contact with each client is required. Phone calls will be made to the client during the months that no face-to-face contact occurs.

f. Progress Notes

Progress notes are the ongoing chronology of the client's record and Case Management activities. They should address the provision of services as planned; whether services

continue to be necessary and appropriate and are being delivered as anticipated. Progress notes also indicate changes in client situation such as health, living situation, and functional ability.

g. Reassessment

Case Management requires a comprehensive reassessment of each client on an annual basis and upon significant changes.

h. Discharge/Disenrollment

Discharge (also called termination of services or case closure) is the process whereby the Case Manager ends Case Management services to the client. Case Management services will be ended when the client: (1) moves out of San Francisco, (2) no longer wishes to use Case Management, (3) improves or stabilizes to the point that services are no longer necessary, (4) dies, (5) exhibits threatening or dangerous behavior toward Case Management staff, or (6) is receiving duplicative services.

## **2) Client Caseload**

The Grantee shall ensure that one full time equivalent Case Manager should handle a monthly caseload of 40 clients. For Case Managers serving a caseload that requires frequent or urgent service needs, the monthly caseload requirement may be reduced to 32 active cases but this requires notification of the assigned OCP Program Analyst at the time of caseload reduction. This notification must include documentation to justify the reduction. Reduced caseloads will also be checked for supporting documentation during the annual program monitoring process.

## **3) Additional Requirements**

- Grantee will participate in the DAAS funded Case Management City Wide Clinical Collaborative program.
- OOA Case Management Program Standards provide the framework for Case Management services, however the Grantee must establish its own policies and procedures to operationalize the standards within their own agency to best meet client needs.
- Case Managers and Case Management Supervisors will attend quarterly Case Management Provider's meeting.
- Case Managers will be provided with adequate Case Management training as-needed. DAAS/OCP funded Case Management training purchased or provided by Grantee must be approved by DAAS/OCP staff.

## **VI. Objectives:**

### *Service Objectives*

Grantee will be required to follow specific service objectives that measure the quantity, quality, and other aspects of services provided. For FY 19/20 and 20/21, Grantee will meet the following Service Objectives annually:

- Grantee will provide Case Management services to a minimum of 137 unduplicated consumers.

(Note: Unduplicated consumers to be served on an annual basis shall be at a minimum 55 unduplicated consumers per 1.0 FTE Case Manager staff. Grantee employs 2.5 FTE Case Managers of which 2.02 are funded by OCP. )

- Grantee will complete 90 % of Comprehensive Assessments due each contract year.\*
- Grantee will complete 90 % of Service Plans due each contact year.\*
- Grantee will complete 100 % of monthly contacts during each contract year.\*
- Grantee will complete 100 % of face-to-face contacts each contract year.\*

\* Tracked via documentation in the CA GetCare database

#### *Outcome Objectives*

Grantee will be required to follow specific outcome objectives that demonstrate and measure the impact, outcomes, or results of services. The outcome objectives specified below will be required for each contract.

- 70 % of Service Plan items completed within one year.\*
- 25 % of cases closed with status of “Improved” or “No Longer Needed Services.”\*

\* Tracked via documentation in the CA GetCare database

## **VII. Reporting Requirements**

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

- A. The grantee will enroll the clients into the CA GetCare database: (<https://ca.getcare.com/caprovider/>), and enter all the required data in the Case Management Module, including medication list, assessment, progress notes, service plan etc.
- B. The grantee will enter into the CA GetCare Service Unit section all the units of service by the 5th working day of the month for the preceding month.
- C. Monthly, quarterly, and annual reports must be entered into the Contracts Administration, Reporting, and Billing Online (CARBON) system as required by DAAS and Contracts Department staff.
- D. Grantee shall submit Community Services Block Grant (CSBG) time study to HSA/DAAS for the months of February, May, August and November. The time study is due on the 10<sup>th</sup> day following the time study month and shall be entered on line to this website link: <https://calmaa.hfa3.org/signin>



- E. Grantee will participate in annual Consumer Satisfaction Survey in cooperation with Office of Community Partnerships (OCP) with a minimum return rate of 35% of contracted annual unduplicated consumers to be served.
- F. Grantee shall develop and deliver an annual summary report of SOGI data collected in the year as requested by DAAS/HSA. The due date for submitting the annual summary report is July 10<sup>th</sup>.
- G. Grantee shall develop and deliver ad hoc reports as requested by DAAS/HSA.
- H. Grantee is required to attend all mandatory Case Management trainings, Quarterly Provider's Meetings, or other meetings as scheduled by DAAS.
- I. The Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules.
- J. Apart from reports with specific instructions above, all other reports and communications should be sent to the following addresses:

Michael Zaugg  
 Program Director  
 DAAS, Office of Community Partnerships  
 PO Box 7988  
 San Francisco, CA 94120  
 michael.zaugg@sfgov.org

Esperanza Zapien  
 Contract Manager  
 Human Services Agency  
 PO Box 7988  
 San Francisco, CA 94120  
 esperanza.zapien@sfgov.org

**VIII. MONITORING ACTIVITIES:**

- A. Program Monitoring: Program monitoring will include review of the participants' record entered into the Case Management module, compliance with specific program standards or requirements as stated in the OOA Policy Memorandum #39, Case Management Standards; 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 that program staff have completed the California Department of Aging (CDA) Security Awareness Training program operation, which includes a review of a written policies and procedures manual of all OCP-funded programs, written project income policies if applicable,

grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current according to the site chart; a board of directors list and whether services are provided appropriately according to Sections 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, the current board roster and selected board minutes for compliance with the Sunshine Ordinance, and HIPAA compliance.

A	B	C	D	E	F	G	H	I	J	K	L				
Appendix B-1, Page 1 9/13/2019															
<b>HUMAN SERVICES AGENCY BUDGET SUMMARY</b>															
5	Name										Term				
6	Catholic Charities										7/1/18 - 6/30/21				
7	(Check One)	New	<input type="checkbox"/>	Renewal	_____	Modification	<input checked="" type="checkbox"/>								
8	If modification, Effective Date of Mod. No. of Mod. _____														
9	Program: Case Management Services														
10	Budget Reference Page No.(s)										Total				
11	Program Term	7/1/18-6/30/19	Original	7/1/19-6/30/20	Modification	7/1/19-6/30/20	Revised	7/1/19-6/30/20	Original	7/1/20-6/30/21	Modification	7/1/20-6/30/21	Revised	7/1/20-6/30/21	Total
12	Expenditures														
13	Salaries & Benefits	\$175,842	\$154,713	\$36,026	\$190,739	\$154,713	\$36,026	\$190,739	\$154,713	\$36,026	\$190,739	\$154,713	\$36,026	\$190,739	\$557,320
14	Operating Expense	\$19,726	\$19,116	(\$1,243)	\$17,873	\$19,116	(\$1,243)	\$17,873	\$19,116	(\$1,243)	\$17,873	\$19,116	(\$1,243)	\$17,873	\$55,472
15	Subtotal	\$195,568	\$173,829	\$34,783	\$208,612	\$173,829	\$34,783	\$208,612	\$173,829	\$34,783	\$208,612	\$173,829	\$34,783	\$208,612	\$612,792
16	Indirect Percentage (%)	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	
17	Indirect Cost (Line 16 X Line 15)	\$29,335	\$26,074	\$5,216	\$31,291	\$26,074	\$5,216	\$31,291	\$26,074	\$5,216	\$31,291	\$26,074	\$5,216	\$31,291	\$91,917
18	Capital Expenditure	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
19	Total Expenditures	\$224,904	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$704,709
20	HSA Revenues														
21	General Fund	\$224,904	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$704,709
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29	TOTAL HSA REVENUES	\$224,904	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$199,903	\$40,000	\$239,903	\$704,709
30	Other Revenues														
31															
32															
33	Foundation / Grants	\$27,500	\$27,500	\$0	\$27,500	\$27,500	\$0	\$27,500	\$27,500	\$0	\$27,500	\$27,500	\$0	\$27,500	\$82,500
34	In-Kind / Donations	\$44,000	\$44,000	\$0	\$44,000	\$44,000	\$0	\$44,000	\$44,000	\$0	\$44,000	\$44,000	\$0	\$44,000	\$132,000
35															
36	Total Revenues	\$296,404	\$271,403	\$40,000	\$311,403	\$271,403	\$40,000	\$311,403	\$271,403	\$40,000	\$311,403	\$271,403	\$40,000	\$311,403	\$919,209
37	Full Time Equivalent (FTE)														
39	Prepared by: Patty Clement/Rosa Mendez											Telephone No.: 415-452-3504	Date 4/12/18		
40	HSA-CO Review Signature:														
41	HSA #1												10/25/2016		

		A	B	C	D	E	I	J	K	L	M	N	O	P		
		Salaries & Benefits Detail														
1	Program Name:															
2	Case Management Services															
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		<b>Agency Totals</b>		<b>HSA Program</b>												
		Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	Modification	Revised	Original	Modification	Revised	Original	Modification	Revised	7/1/18-6/30/21 TOTAL	
12	POSITION TITLE					7/1/18-6/30/19	7/1/19-6/30/20	7/1/19-6/30/20	7/1/20-6/30/21	7/1/20-6/30/21	7/1/20-6/30/21	7/1/20-6/30/21	7/1/20-6/30/21	7/1/20-6/30/21		
13	Division Director -	\$122,454	1.00	6%	0.06	\$7,203	\$7,203	\$7,203	\$7,203	\$0	\$7,203	\$7,203	\$0	\$7,203	\$21,609	
14	Program Director -	\$74,652	1.00	37%	0.37	\$27,420	\$27,420	\$27,420	\$27,420	\$0	\$27,420	\$27,420	\$0	\$27,420	\$82,260	
15	Case Manager - Ear	\$55,191	1.00	74%	0.74	\$41,015	\$41,015	\$41,015	\$41,015	\$0	\$41,015	\$41,015	\$0	\$41,015	\$123,045	
16	Case Manager - Charig	\$55,191	1.00	78%	0.78	\$42,874	\$42,874	\$42,874	\$42,874	\$0	\$42,874	\$42,874	\$0	\$42,874	\$128,622	
17	Case Manager - Way	\$55,191	1.00	50%	0.50	\$16,185	\$0	\$27,596	\$0	\$27,596	\$27,596	\$0	-\$27,596	\$27,596	\$71,377	
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30	TOTALS	\$362,679	5.00	245%	2.45	\$134,697	\$118,512	\$146,108	\$118,512	\$27,596	\$146,108	\$118,512	\$27,596	\$146,108	\$426,913	
31	FRINGE BENEFIT RATE	30.547%														
32	EMPLOYEE FRINGE BENEFITS	\$110,788				\$41,145	\$36,201	\$44,631	\$36,201	\$8,430	\$44,631	\$36,201	\$8,430	\$44,631	\$130,407	
33																
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36	TOTAL SALARIES & BENEFITS	\$473,467				\$175,842	\$154,713	\$190,739	\$154,713	\$36,026	\$190,739	\$154,713	\$36,026	\$190,739	\$557,920	
37	HSA #2															

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Operating Expense Detail

Program Name:  
Case Management Services

TOTAL OPERATING EXPENSE

HSA #3

10/25/2016