

City and County of San Francisco

Human Services Agency



London Breed, Mayor


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

Trent Rhorer, Executive Director

MEMORANDUM

TO: DISABILITY AND AGING SERVICES COMMISSION

THROUGH: SHIREEN MCSPADDEN, EXECUTIVE DIRECTOR

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

DATE: NOVEMBER 4, 2020

SUBJECT: **NEW GRANTS:** MULTIPLE GRANTEES FOR NUTRITION SERVICES FOR OLDER ADULTS AND ADULTS WITH DISABILITIES (see table below)

GRANT TERM: 11/01/2020 – 06/30/2021

GRANT AMOUNT: See table below

<u>Funding source:</u>	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
Funding:	\$6,256,879	\$1,102,574	\$5,479,405	\$1,283,873	\$14,122,731
Percentage:	49%	8%	43%		100%

The Department of Disability and Aging Services (DAS) requests authorization to enter into new grant agreements with multiple providers for the provision of nutrition services to older adults and adults with disabilities in a combined amount of \$12,838,858. The term of the grants/contracts will be from November 1, 2020 to June 30, 2021. The total of the new grant amounts plus a 10% contingency will not exceed \$14,122,731. The funding amounts are detailed in the tables below (pages 3-7).

Background

Nutrition is one of the major determinants of successful aging. Food is not only critical to one's physiological well-being but also contributes to social, cultural, and psychological quality of life. Title III of the Older Americans Act authorizes the provision of Elderly Nutrition Programs (ENP). ENP assists older adults in gaining access to nutrition, and other disease prevention and health promotion services. DAS Office of Community Partnerships (OCP), through multiple community affiliations, provides Elderly Nutrition Programs throughout the City and through many of the same community partnerships offers nutrition programming to adults with

disabilities. Nutrition programming for older adults and adults with disabilities promote general health and well-being by reducing hunger, food insecurity, and malnutrition. Nutrition programs provide access to coordinated food and nutrition services that are essential in maintaining independence, functional ability, disease management, and quality of life. They also aim to foster socialization and offer participants the opportunity to create informal support networks. Nutrition services for older adults and adults with disabilities include congregate and home delivered meal programs.

Services to be provided

Grantees will provide congregate, modified congregate, and/or a home delivered meal program. Each of the programs will offer nutritious meals, nutrition education, and nutrition risk screening. The meals provided by the grantees will meet nutritional standards by incorporating the Dietary Guidelines for Americans and provide a minimum of one-third of the Dietary Reference Intakes (DRIs). The meals will be prepared in accordance with nutrition and food service standards set forth by California Retail Food Code (CRFC), Title 22 Regulations, California Department of Aging, and DAS OCP. Grantees may also provide nutrition compliance, nutrition counseling, and home delivered meal assessments.

- **Congregate Meal Program and Modified Congregate Meal Program:** Congregate and modified congregate meal programs provide meals meeting nutritional standards and may include breakfast, lunch, or dinner meals. Both types of congregate programs include nutrition education and nutrition risk screening and give participants the opportunity to contribute to the meal cost.

A congregate meal program delivers nutrition services in a group setting providing opportunities for participants to socialize with one another. A modified congregate meal program offers meals to go instead of in a group setting.

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.

- **Home-Delivered Meal Program:** A nutrition program that delivers meals meeting nutritional standards to eligible individuals living in the City and County of San Francisco. The program requires an initial home delivered meal assessment, an annual comprehensive assessment, and quarterly re-assessment of the participant. The quantity of meals delivered to each individual per week depends on their unique needs as determined by the assessments. The program also includes nutrition education and nutrition risk screening and gives participants the opportunity to contribute to the meal cost.
- **Nutrition Compliance and Quality Assurance (NCQA):** NCQA is a requirement of congregate, congregate modified and home delivered meal programs. NCQA includes quarterly monitoring of a grantee's food service production and meal service to ensure state

and local food safety and sanitation requirements. NCQA also includes nutrition education, in-service training, home delivered meal assessments, and nutrition counseling.

A grantee may meet the NCQA requirements by providing them and identifying them in a NCQA budget, through an independent nutritionist contractor, and/or through another DAS OCP nutrition partner with a grant agreement to provide NCQA services.

- **Citywide Nutrition Counseling and Education:** The provision of nutrition counseling services and nutrition education by a registered dietitian (RD) to consumers enrolled in a congregate, congregate modified and/or home delivered meal program who are determined to be at nutritional risk.
- **Emergency Home-Delivered Meal Program:** A nutrition program that delivers meals to eligible consumers living in the City and County of San Francisco who have an urgent or temporary need for nutrition support in the community. The emergency home-delivered meal program provides meals meeting nutritional standards to consumers within two to five days of a request and the provision of meals does not exceed sixty days.

Grant amount

- **Congregate Meal Program and Modified Congregate Meal Program for Older Adults**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Centro Latino de San Francisco Inc.	\$599,379	\$59,937	\$659,316
Episcopal Community Services of San Francisco Inc.	\$155,651	\$15,565	\$171,216
Glide Foundation	\$141,203	\$14,120	\$155,323
Kimochi Inc.	\$530,073	\$53,007	\$583,080
On Lok Day Services	\$295,590	\$29,559	\$325,149
Self Help for the Elderly	\$1,433,764	\$143,376	\$1,577,140
Self Help for the Elderly-Champs	\$181,200	\$18,120	\$199,320
Total	\$3,336,860	\$333,684	\$3,670,544

- **Nutrition Compliance and Quality Assurance (NCQA) for Congregate Meal Program and Modified Congregate Meal Program for Older Adults**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Candice Tang	\$13,000	\$1,300	\$14,300
Glide Foundation	\$5,785	\$578	\$6,363
Kimochi Inc.	\$4,522	\$452	\$4,974
On Lok Day Services	\$11,873	\$1,187	\$13,060
Self Help for the Elderly	\$35,780	\$3,578	\$39,358
Total	\$70,960	\$7,095	\$78,055

- **Congregate Meal Program and Modified Congregate Meal Program for Adults with Disabilities**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Centro Latino de San Francisco Inc.	\$183,352	\$18,335	\$201,687
Episcopal Community Services of San Francisco Inc.	\$22,704	\$2,270	\$24,974
Glide Foundation	\$38,670	\$3,867	\$42,537
Self Help for the Elderly	\$10,488	\$1,048	\$11,536
Total	\$255,214	\$25,520	\$280,734

- **Home-Delivered Meal Program for Older Adults**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Centro Latino de San Francisco Inc.	\$200,146	\$20,014	\$220,160
Jewish Family and Children's Services	\$53,723	\$5,372	\$59,095
Kimochi Inc.	\$221,720	\$22,172	\$243,892

Meals on Wheels	\$4,681,299	\$468,129	\$5,149,428
On Lok Day Services	\$759,662	\$75,966	\$835,628
Self Help for the Elderly	\$714,400	\$71,440	\$785,840
Total	\$6,630,950	\$663,093	\$7,294,043

- **Nutrition Compliance and Quality Assurance (NCQA) for Home-Delivered Meal Program for Older Adults**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Candice Tang	\$13,100	\$1,310	\$14,410
Centro Latino de San Francisco Inc.	\$19,584	\$1,958	\$21,542
Jewish Family And Children's Services	\$9,003	\$900	\$9,903
Kimochi Inc.	\$39,799	\$3,979	\$43,778
Meals on Wheels	\$628,155	\$62,815	\$690,971
On Lok Day Services	\$106,398	\$10,639	\$117,037
Self Help for the Elderly	\$104,089	\$10,408	\$114,497
Total	\$920,129	\$92,009	\$1,012,138

- **Home-Delivered Meal Program for Adults with Disabilities**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Meals on Wheels	\$918,084	\$91,808	\$1,009,892
Self Help for the Elderly	\$234,670	\$23,467	\$258,137
Total	\$1,152,754	\$115,275	\$1,268,029

- **Citywide Nutrition Counseling and Education**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Leah's Pantry- Congregate	\$65,414	\$6,541	\$71,955
Leah's Pantry- Home Delivered Meal	\$13,030	\$1,303	\$14,333
Total	\$78,444	\$7,844	\$86,288

- **Emergency Home-Delivered Meal Program**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Meals on Wheels	\$154,379	\$15,437	\$169,816
Total	\$154,379	\$15,437	\$169,816

- **Home-Delivered Meals for Adults with Disabilities Assessment**

Agency	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Institute on Aging	\$239,168	\$23,916	\$263,084
Total	\$239,168	\$23,916	\$263,084

Grand Total

Program	11/01/20 – 06/30/21 grant amount	10% contingency	Not-To-Exceed
Citywide Nutrition Counseling and Education	\$78,444	\$7,844	\$86,288
Congregate Meal Program and Modified Congregate Meal Program for Adults with Disabilities	\$255,214	\$25,520	\$280,734
Congregate Meal Program and Modified Congregate Meal Program for Older Adults	\$3,336,860	\$333,684	\$3,670,544
Emergency Home-Delivered Meal Program	\$154,379	\$15,437	\$169,816
Home-Delivered Meal Program for Adults with Disabilities	\$1,152,754	\$115,275	\$1,268,029

Home-Delivered Meal Program for Older Adults	\$6,630,950	\$663,093	\$7,294,043
Home-Delivered Meals for Adults with Disabilities Assessment	\$239,168	\$23,916	\$263,084
Nutrition Compliance and Quality Assurance (NCQA) for Congregate Meal Program and Modified Congregate Meal Program for Older Adults	\$70,960	\$7,095	\$78,055
Nutrition Compliance and Quality Assurance (NCQA) for Home-Delivered Meal Program for Older Adults	\$920,129	\$92,009	\$1,012,138
Total	\$12,838,858	\$1,283,873	\$14,122,731

Selection

Grantees were selected through RFP #715 issued in January 2017.

Funding

These grants will be funded through a combination of Federal, State, and County funds.

ATTACHMENTS

- **Congregate Meal Program and Modified Congregate Meal Program**

Centro Latino de San Francisco Inc.

Appendix A – Services to be Provided

Appendix B – Budget

Episcopal Community Services of San Francisco Inc.

Appendix A – Services to be Provided

Appendix B – Budget

Glide Foundation

Appendix A – Services to be Provided

Appendix B – Budget

Kimochi Inc.

Appendix A – Services to be Provided

Appendix B – Budget

On Lok Day Services

Appendix A – Services to be Provided

Appendix B – Budget

Self Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

Appendix B1 – Champs Budget

- **Nutrition Compliance and Quality Assurance (NCQA) for Congregate Meal Program and Modified Congregate Meal Program for Older Adults**

Candice Tang

Appendix B – Budget

Glide Foundation

Appendix B – Budget

Kimochi Inc.

Appendix B – Budget

On Lok Day Services

Appendix B – Budget

Self Help for the Elderly

Appendix B – Budget

- **Congregate Meal Program and Modified Congregate Meal Program for Adults with Disabilities**

Centro Latino de San Francisco Inc.

Appendix A – Services to be Provided

Appendix B – Budget

Episcopal Community Services of San Francisco Inc.

Appendix A – Services to be Provided

Appendix B – Budget

Glide Foundation

Appendix A – Services to be Provided

Appendix B – Budget

Self Help for the Elderly

Appendix A – Services to be Provided

Appendix B – Budget

- **Home-Delivered Meal Program for Older Adults**

Centro Latino de San Francisco Inc.

Appendix A – Services to be Provided

Appendix B – Budget

Jewish Family and Children's Services
Appendix A – Services to be Provided
Appendix B – Budget

Kimochi Inc.
Appendix A – Services to be Provided
Appendix B – Budget

Meals on Wheels
Appendix A – Services to be Provided
Appendix B – Budget

On Lok Day Services
Appendix A – Services to be Provided
Appendix B – Budget

Self Help for the Elderly
Appendix A – Services to be Provided
Appendix B – Budget

- **Nutrition Compliance and Quality Assurance (NCQA) for Home-Delivered Meal Program for Older Adults**

Candice Tang
Appendix B – Budget

Centro Latino de San Francisco Inc.
Appendix B – Budget

Jewish Family And Children's Services
Appendix B – Budget

Kimochi Inc.
Appendix B – Budget

Meals on Wheels
Appendix B – Budget

On Lok Day Services
Appendix B – Budget

Self Help for the Elderly
Appendix B – Budget

- **Home-Delivered Meal Program for Adults with Disabilities**

Meals on Wheels
Appendix A – Services to be Provided
Appendix B – Budget

Self Help for the Elderly
Appendix A – Services to be Provided
Appendix B – Budget

- **Citywide Nutrition Counseling and Education**

- Leah's Pantry

- Appendix A – Services to be Provided

- Appendix B – Budget, Congregate

- Appendix B1 – Budget, Home Delivered Meal

- **Emergency Home-Delivered Meal Program**

- Meals on Wheels

- Appendix A – Services to be Provided

- Appendix B – Budget

- **Home-Delivered Meal for Older Adults Assessment**

- Institute on Aging

- Appendix A – Services to be Provided

- Appendix B – Budget

Appendix A - Services to be Provided

Candice Tang, RD

Nutrition Compliance and Quality Assurance Services for Congregate and Home-Delivered Nutrition Programs

November 1, 2020– June 30, 2021

I. Purpose

The purpose of this contract is to secure the services of a Registered Dietitian (RD) to provide nutrition compliance and quality assurance (NCQA) services for DAS assigned community-based nutrition partners who provide congregate, modified congregate and/or home-delivered nutrition programs. Nutrition compliance ensures that the provision of services meet nutrition and food service standards set forth by federal, state, and local requirements. Quality assurance activities support community-based nutrition partners to meet the needs of older adults and adults with disabilities who participate in congregate, modified congregate and home-delivered nutrition programs.

II. Definitions

Contractor	Candice Tang, RD.
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
CDA	California Department of Aging
City	City and County of San Francisco, a municipal corporation.
Congregate Nutrition Program	A program that provides nutrition services in a group setting with an opportunity to socialize with other participants. Nutrition services include, but are not limited to, the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program gives all participants the opportunity to contribute to the meal cost.

Congregate Meals	Meals that meet nutritional standards by incorporating the Dietary Guidelines for Americans (DGA) and providing a minimum of one-third of the Dietary Reference Intakes (DRIs). The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the Contractor and must meet state and local food safety and sanitation requirements.
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 establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.
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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes
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.

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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Nutrition Program	A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over and/or adults with disabilities who are unable to leave their home because of an illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals. Program participants live in the City and County of San Francisco. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.
Menu Requirements	Meals provided through congregate and home delivered meal programs shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the contractor provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the contractor provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the contractor will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 contractor will provide meals to go and the meals offered may be hot, chilled, or frozen. The contractor 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

Nutrition Education	Informing consumers about current nutrition facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. Dietetic students, interns, or technicians may provide nutrition education when an RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
OCP	Office of Community Partnerships.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through the contractor.
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>).
Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.

III. Description of Services and Program Requirements

1. Contractor will provide nutrition compliance and quality assurance (NCQA) services for DAS OCP funded community-based organizations who offer congregate, modified congregate and/or home-delivered nutrition programs. DAS

- OCP will advise the contractor on which community-based nutrition partners require NCQA services during the contract term.
2. Contractor will have a signed agreement, prior to service delivery, with each of the nutrition partners who receive NCQA services from the contractor. The agreements will clarify the expectations and responsibilities between the contractor and the nutrition partner. The contractor will share a copy with DAS OCP.
 3. Contractor will support the assigned nutrition partners to ensure their policies and procedures related to congregate, modified congregate and home-delivered nutrition programs 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.
 4. Contractor will provide NCQA service units, which include, but are not limited to menu planning and development, nutrient analysis, HACCP central kitchen and food service monitoring, congregate site monitoring, home-delivered route monitoring, nutrition education, and in-service training for nutrition program staff. DAS OCP will communicate the minimum NCQA service unit allocation for each of the nutrition partner(s).
 5. Contractor will work with the assigned nutrition partners and submit to DAS OCP on behalf of the nutrition partners for review and approval a cycle menu with a corresponding analysis of nutrients. The submitted menu should be at minimum, a five-week cycle menu. The contractor must submit the menu at least one month in advance of its use.
 6. Contractor will work with assigned nutrition partners to review, approve, and document menu substitutions in advance of their use.
 7. Contractor will provide technical assistance and in-service training in addition to the quarterly scheduled in-service training for staff and volunteers to address any findings that result from a central kitchen and food service monitoring, congregate site monitoring, and/or home-delivered route monitoring. Contractor will document, schedule, and conduct in-service trainings in a timely manner when there are monitoring findings.
 8. Contractor will review and approve the assigned nutrition partners' quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) and volunteers to ensure they meet applicable standards set forth by California Retail Food Code (CRFC), Title 22 Regulations, CDA, and DAS OCP.
 9. Contractor will provide and/or review and approve the assigned nutrition partners' quarterly nutrition education curriculum and schedule. If the contractor is providing nutrition education for a modified congregate meal program, the nutrition education may be in the form of written communication, over the phone, through virtual platforms, or other methods approved by DAS OCP.
 10. Contractor will meet with DAS OCP on a quarterly basis. DAS OCP and the contractor shall mutually agree upon the date and time of the meetings.

IV. Service Objectives

1. Contractor will provide the nutrition compliance and quality assurance units of services as indicated in Appendix B.

V. Outcome Objectives

1. Nutrition partners rate the quality of the NCQA services provided as excellent or good. Target: 100%.
2. Nutrition partners report that the NCQA services provided support the provision of quality programming. Target: 75%
3. Nutrition partners report that the nutrition education provided meets the needs of program participants. Target: 75%

Based on survey of all of the assigned nutrition partners.

VI. Reporting Requirements

1. Contractor will enter monthly reports and metrics into the CARBON database system by the 15th of the following month that includes the following information:
 - Number and description of the NCQA units provided
2. Contractor will submit HACCP monitoring reports of the production kitchen, congregate sites and/or HDM routes to DAS OCP once per quarter. Quarterly Reports due Oct. 15; Jan. 15; April 15; and June 15.
3. Contractor shall develop and deliver ad hoc reports as requested by SF-HSA, DAS, and OCP.
4. Contractor will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis. The contractor will maintain evidence of staff completion of this training.
5. Contractor shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
6. Contractor will assure that services delivered are consistent with professional standards for this service.
7. 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.
8. 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 Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

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

Sarah Chan
 Nutritionist
 DAS OCP
 email: Sarah.Chan@sfgov.org

and

Steve Kim
 Contract Manager
 HSA OCM
 email: Steve.Kim@sfgov.org

	A	B	C	D	E
1	Appendix B, Page 1				
2	Document Date: 10/8/20				
3	HUMAN SERVICES AGENCY BUDGET SUMMARY				
4	BY PROGRAM				
5	Contractor Name:			Term	
6	Candice Tang, RD			October 1, 2020 to June 30, 2021	
7	(Check One) New <input type="checkbox"/> Renew <input checked="" type="checkbox"/>				
8	If modification, Effective Date of Mod.		No. of Mod.		
9	Program: Nutrition Compliance for ENP- Indicate HDM or Congregate		REVENUE Cost Allocation:		
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
11	Program Term	11/1/2020-06/30/2021			11/1/2020-06/30/2021
12	Expenditures				
13	Nutrition Education				
14	Salaries & Benefits	\$1,350	\$1,350		\$1,350
15	Operating Expense	\$300	\$300		\$300
16	Subtotal Direct	\$1,650	\$1,650		\$1,650
17	Indirect Percentage				
18	Indirect Expense				
19	Total Nutrition Education	\$1,650	\$1,650		\$1,650
20	Nutrition Counseling				
21	Salaries & Benefits				
22	Operating Expense				
23	Subtotal Direct				
24	Indirect Percentage				
25	Indirect Expense				
26	Total Nutrition Counseling				
27	HACCP Kitchen Monitoring				
28	Salaries & Benefits	\$3,240	\$3,240		\$3,240
29	Operating Expense	\$360	\$360		\$360
30	Subtotal Direct	\$3,600	\$3,600		\$3,600
31	Indirect Percentage				
32	Indirect Expense				
33	Total HACCP Kitchen Monitoring	\$3,600	\$3,600		\$3,600
34	Site/Route Monitoring				
35	Salaries & Benefits				
36	Operating Expense				
37	Subtotal Direct				
38	Indirect Percentage				
39	Indirect Expense				
40	Total Site/Route Monitoring				
41	Menu Planning				
42	Salaries & Benefits	\$1,080	\$1,080		\$1,080
43	Operating Expense	\$320	\$320		\$320
44	Subtotal Direct	\$1,400	\$1,400		\$1,400
45	Indirect Percentage				
46	Indirect Expense				
47	Total Menu Planning	\$1,400	\$1,400		\$1,400
48	HDM Assessments				
49	Salaries & Benefits	\$5,400	\$5,400		\$5,400
50	Operating Expense	\$300	\$300		\$300
51	Subtotal Direct	\$5,700	\$5,700		\$5,700
52	Indirect Percentage				
53	Indirect Expense				
54	Total HDM Assessments	\$5,700	\$5,700		\$5,700
55	Other Nutrition Compliance				
56	Salaries & Benefits	\$630	\$630		\$630
57	Operating Expense	\$120	\$120		\$120
58	Subtotal Direct	\$750	\$750		\$750
59	Indirect Percentage				
60	Indirect Expense				
61	Total Other Nutrition Compliance	\$750	\$750		\$750
62	GRAND Total Expenditures	\$13,100	\$13,100		\$13,100
63	HSA Revenues				
64					
65					
66	TOTAL HSA REVENUES				
67	Other Non-H.S.A.-DAS Revenues				
68					
69					
70					
71	TOTAL OTHER REVENUES				
72	Full Time Equivalent (FTE)				
74	Prepared by: Candice Tang, RD		Telephone Nc 415-812-512; Date 10/8/2020		
75	HSA-CO Review Signature: _____				
76	HSA #1				Document Date: 10/8/20

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 2									
2	Document Date: 10/8/20									
3										
4	Program: Nutrition Compliance for ENP- Ir HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Nutrition Education Salaries & Benefits Detail									
8	TERM:									
9	October 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			
11	Agency Totals		For HSA Program			For HSA Program	REVENUE Cost Allocation:		11/1/2020-06/30/2021	Total Revenue
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Candice Tang, RD	\$90,000	30%	5%	2%	\$1,350	\$1,350		\$1,350	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$90,000	30%	5%	2%	\$1,350	\$1,350		\$1,350	
31										
32	FRINGE BENEFIT RATE									
33	EMPLOYEE FRINGE BENEFITS									
34										
35										
36	TOTAL SALARIES & BENEFITS	\$90,000				\$1,350	\$1,350		\$1,350	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	#REF!								
38	HSA #2									Document Date: 10/8/20

	A	B	C	D	E	F	G	H	I
1									Appendix B, Page 3
2									Document Date: 10/8/2
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Nutrition Education Operating Expense Detail								
8	TERM:								
9	October 1, 2020 to June 30, 2021								
10									
11		Year 1	REVENUE Cost Allocation:				TOTAL REVENUE		
		11/1/2020-					11/1/2020-		
		06/30/2021	H.S.A.-DAS	Non-HSA-			06/30/2021		
12	<u>Expenditure Category</u>			DAS					
13	Rental of Property	\$100	\$100				\$100		
14	Utilities(Elec, Water, Gas, Phone, Scavenger)	\$25	\$25				\$25		
15	Office Supplies, Postage	\$20	\$20				\$20		
16	Building Maintenance Supplies and Repair	\$36	\$36				\$36		
17	Printing and Reproduction	\$15	\$15				\$15		
18	Insurance	\$18	\$18				\$18		
19	Staff Training								
20	Staff Travel	\$47	\$47				\$47		
21	Small Equipment (under \$5,000/item)	\$39	\$39				\$39		
22	Rental of Equipment								
23									
24	SUBCONTRACTORS Descriptive Title								
25	a								
26	b								
27	c								
28	d								
29	e								
30	OTHER								
31	z								
32	y								
33	x								
34	w								
35	v								
36									
37	TOTAL OPERATING EXPENSE	\$300	\$300				\$300		
38	TOTAL OPERATING EXPENSE	\$300							
39	HSA #3								Document Date: 10/8/2

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 6									
2	Document Date: 10/8/20									
3										
4	Program: Nutrition Compliance for HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	HACCP Kitchen Monitoring Salaries & Benefits Detail									
8	TERM:									
9	October 1, 2020 to June 30, 2021									
10						11/1/2020-06/30/2021		11/1/2020-06/30/2021		
11	Agency Totals		Program			Program		REVENUE Cost Allocation:		Revenue
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Candice Tang, RD	\$90,000	20%	18%	4%	\$3,240	\$3,240		\$3,240	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$90,000	0.20	18%	4%	\$3,240	\$3,240		\$3,240	
31										
32	FRINGE BENEFIT RATE									
33	EMPLOYEE FRINGE BENEFITS									
34										
35										
36	TOTAL SALARIES & BENEFITS	\$90,000				\$3,240	\$3,240		\$3,240	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$3,240								
38	HSA #6									

Document Date: 10/8/20

	A	B	C	D	E	F	G	H	I
1									Appendix B, Page
2									Document Date: 10/
3									
4	Program: Nutrition Compliance for ENP- IHDM								
5	(Same as Line 9 on HSA #1)								
6									
7	HACCP Kitchen Monitoring Operating Expense Detail								
8									
9	TERM:								
10	October 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:				TOTAL REVENUE		
13	<u>Expenditure Category</u>	11/1/2020-06/30/2021	H.S.A.-DAS	Non-HSA-DAS			11/1/2020-06/30/2021		
14	Rental of Property	\$110	\$110				\$110		
15	Utilities(Elec, Water, Gas, Phone, Scavenger)	\$35	\$35				\$35		
16	Office Supplies, Postage	\$20	\$20				\$20		
17	Building Maintenance Supplies and Repair	\$66	\$66				\$66		
18	Printing and Reproduction	\$30	\$30				\$30		
19	Insurance	\$23	\$23				\$23		
20	Staff Training								
21	Staff Travel	\$47	\$47				\$47		
22	Small Equipment (under \$5,000/item)	\$29	\$29				\$29		
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	a								
27	b								
28	c								
29	d								
30	e								
31	OTHER								
32	z								
33	y								
34	x								
35	w								
36	v								
37									
38	TOTAL OPERATING EXPENSE	\$360	\$360				\$360		
39	TOTAL OPERATING EXPENSE	\$360							
40									
41	HSA #7								Document Date: 10/

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Pa									
2	Document Date									
3										
4	Program: Nutrition Compliance for ENP-HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Menu Planning Salaries & Benefits Detail									
8	TERM:									
9	October 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		or HSA Program	REVENUE Cost Allocation:		Total Revenue		
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Candice Tang, RD	\$90,000	15%	8%	1%	\$1,080	\$1,080		\$1,080	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$90,000	15%	8%	1%	\$1,080	\$1,080		\$1,080	
31										
32	FRINGE BENEFIT RATE									
33	EMPLOYEE FRINGE BENEFITS									
34										
35										
36	TOTAL SALARIES & BENEFITS	\$90,000				\$1,080	\$1,080		\$1,080	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$1,080								
38	HSA #10								Document Date:	

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 11								
2	Document Date: 10/8/20								
3									
4	Program: Nutrition Compliance for ENP- I HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Menu Planning Operating Expense Detail								
8									
9	TERM:								
10	October 1, 2020 to June 30, 2021								
11									
12		Year 1			REVENUE Cost Allocation:			TOTAL	
13	Expenditure Category	11/1/2020-06/30/2021			H.S.A.-DAS	Non-HSA-DAS		REVENUE	
14	Rental of Property	\$120 #			\$120			\$120	
15	Utilities(Elec, Water, Gas, Phone, Scavenger)	\$35			\$35			\$35	
16	Office Supplies, Postage	\$40			\$40			\$40	
17	Building Maintenance Supplies and Repair	\$20			\$20			\$20	
18	Printing and Reproduction	\$36			\$36			\$36	
19	Insurance	\$10			\$10			\$10	
20	Staff Training								
21	Staff Travel	\$20			\$20			\$20	
22	Small Equipment (under \$5,000/item)	\$39			\$39			\$39	
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	a								
27	b								
28	c								
29	d								
30	e								
31	OTHER								
32	z								
33	y								
34	x								
35	w								
36	v								
37									
38	TOTAL OPERATING EXPENSE	\$320			\$320			\$320	
39	TOTAL OPERATING EXPENSE	\$320							
40									
41	HSA #11								Document Date: 10/8/20

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 12									
2	Document Date: 10/8/20									
3										
4	Program: Nutrition Compliance for ENP- HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Annual & Quarterly HDM Intake and Assessment Salaries & Benefits Detail									
8	TERM:									
9	October 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			11/1/2020-06/30/2021
11			Agency Totals	For HSA Program		or HSA Program	REVENUE Cost Allocation:		Total Revenue	
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Candice Tang, RD	\$90,000	30%	20%	6%	\$5,400	\$5,400		\$5,400	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$90,000	30%	20%	6%	\$5,400	\$5,400		\$5,400	
31										
32	FRINGE BENEFIT RATE									
33	EMPLOYEE FRINGE BENEFITS									
34										
35										
36	TOTAL SALARIES & BENEFITS	\$90,000				\$5,400	\$5,400		\$5,400	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$5,400								
38	HSA #12	Document Date: 10/8/20								

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 13								
2	Document Date: 10/8/20								
3									
4	Program: Nutrition Compliance for ENP- Ir HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	HDM Assessment Operating Expense Detail								
8									
9	TERM:								
10	October 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:		TOTAL REVENUE				
13	Expenditure Category	11/1/2020- 06/30/2021	H.S.A.-DAS	Non-HSA- DAS	11/1/2020- 06/30/2021				
14	Rental of Property								
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage	\$70	\$70		\$70				
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction	\$30	\$30		\$30				
19	Insurance	\$100	\$100		\$100				
20	Staff Training								
21	Staff Travel	\$100	\$100		\$100				
22	Small Equipment (under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	a								
27	b								
28	c								
29	d								
30	e								
31	OTHER								
32	z								
33	y								
34	x								
35	w								
36	v								
37									
38	TOTAL OPERATING EXPENSE	\$300	\$300		\$300				
39	TOTAL OPERATING EXPENSE	\$300							
40									
41	HSA #13				Document Date: 10/8/20				

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 14								
2	Document Date: 10/8/20								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Other Nutrition Compliance Salaries & Benefits Detail								
8	TERM:								
9	October 1, 2020 to June 30, 2021								
10						11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		Total Revenue	
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	
13	Candice Tang, RD	\$90,000	20%	4%	1%	\$630	\$630		\$630
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30	TOTALS	\$90,000	20%	4%	1%	\$630	\$630		\$630
31									
32	FRINGE BENEFIT RATE								
33	EMPLOYEE FRINGE BENEFITS								
34									
35									
36	TOTAL SALARIES & BENEFITS	\$90,000				\$630	\$630		\$630
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$630							
38	HSA #14	Document Date: 10/8/20							

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 15								
2	Document Date: 10/8/20								
3									
4	Program: Nutrition Compliance for ENP- Indicate HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Other Nutrition Compliance Operating Expense Detail								
8									
9	TERM:								
10	October 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:		TOTAL REVENUE				
13	<u>Expenditure Category</u>	11/1/2020-06/30/2021	H.S.A.-DAS	Non-HSA-DAS	11/1/2020-06/30/2021				
14	Rental of Property								
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage	\$30	\$30		\$30				
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction	\$10	\$10		\$10				
19	Insurance								
20	Staff Training								
21	Staff Travel	\$80	\$80		\$80				
22	Small Equipment (over \$500 but under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	a								
27	b								
28	c								
29	d								
30	e								
31	OTHER								
32	z								
33	y								
34	x								
35	w								
36	v								
37									
38	TOTAL OPERATING EXPENSE	\$120	\$120		\$120				
39	TOTAL OPERATING EXPENSE	\$120							
40									
41	HSA #15				Document Date: 10/8/20				

Appendix A– Services to be Provided
Centro Latino de San Francisco
Home-Delivered Nutrition Program for Older Adults
Elderly Nutrition Program (ENP)

Effective November 1, 2020-June 30, 2021

I. Purpose

The purpose of this grant is to provide a home-delivered nutrition program for older adults in the City and County of San Francisco. A home-delivered nutrition program includes the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program also aims to reduce social isolation and help older adults remain independent and in their communities by promoting better health through nutrition and serving as an access point for other home and community-based services.

II. Definitions

Grantee	Centro Latino de San Francisco
Adult with a Disability	A person 18-59 years of age living with a disability.
Annual Comprehensive Assessment	An assessment completed by the grantee at least once per year that evaluates the need for continued service. The grantee conducts the annual assessment in the home of the consumer and documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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.
CDA	California Department of Aging.
CRFC	California Retail Food Code establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.

DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A nutrition risk 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.
Dietary Guidelines for Americans (DGA)	Evidence-based food and beverage recommendations for Americans ages two (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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes
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.
ENP	Elderly Nutrition Program. A program, which provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and in accordance with Title 22 regulations.
ENP - Home-Delivered Nutrition Program	A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over, and in some cases, their caregivers, spouses, and/or persons with disabilities. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.

ENP Menu Requirements	Meals provided through ENP shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the grantee provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the grantee provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Meals (HDM)	Meals that are delivered to consumers and adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), meet state and local food safety and sanitation requirements, and are appealing to older adults. The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the grantee.
Initial Assessment	A comprehensive assessment conducted by the grantee in a consumer's home to determine their eligibility for program enrollment within two (2) weeks of starting meal service. The grantee documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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 participation is not means tested. Consumers self-report income status.
Menu Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the grantee will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 Diet	A menu approved by a Registered Dietitian (RD) that meets the current DGA and adjusts the typical home delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
Nutrition Counseling	Provision of individualized advice and guidance to consumers who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses. A registered dietitian provides the advice and guidance in accordance with Sections 2585 and 2586, Business and Professions Code and offers options and methods for improving nutritional status.

Nutrition Education	Informing consumers about current facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. The grantee may use printed material as the sole nutrition education component for home-delivered meal participants. Dietetic students, interns, or technicians may provide nutrition education when a RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
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.
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years or older, used interchangeably with “senior”.
Quarterly Reassessment	A reassessment that may be conducted by trained HDM program drivers or volunteers in person or by phone to determine a consumer’s eligibility for continued services. The grantee must conduct quarterly reassessments in the home of a consumer at least every six (6) months.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through grantee.
Senior	Person who is 60 years or older, used interchangeably with “older adult”.
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>).

Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.
Unduplicated Consumer (UDC)	An individual who receives home-delivered meals provided by the grantee, and the grantee reflects their 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 who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals.

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

1. Low income
2. Limited or No English Speaking Proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in the ENP-home delivered meal program, an individual must meet one of the following criteria:

1. An older adult who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide an ENP home-delivered nutrition program in the City and County of San Francisco. The grantee determines the service and delivery times for the home-delivered 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.

Policies and procedures shall also include initial, annual, and quarterly reassessment guidelines.

2. Grantee will provide an ENP home-delivered nutrition program for older adults and individuals who are determined eligible by the grantee. The provision of the program will include the following:
 - a. Enrollment of the number of consumers and delivery of the number of meals as indicated in Table A below.
 - b. Provision of home-delivered meals that comply with current Dietary Guidelines for Americans (DGA), offer 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. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - c. Initial in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the initial assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed.
 - d. Annual in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for continued program enrollment. The annual assessment will document the need for service and evaluate function and ability as described in DAS OCP policy memoranda.
 - e. Quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
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.
4. Grantee will provide nutrition education materials to consumers participating in the home-delivered nutrition program on a quarterly basis. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report the nutrition service units in CA-GetCare in the month that the grantee provides the nutrition education. One unit of nutrition education is one set of nutrition education material given to each consumer.

5. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all HDM delivery routes meet state and local food, sanitation, health and safety requirements.
6. 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 possesses a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
7. 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
8. 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 route monitoring documentation and end-of-route HDM temperature logs.
9. Grantee will conduct a route monitoring at least twice per year per route and/or in accordance with DAS OCP policy memorandum. A staff member trained by a food safety manager or a RD may monitor the routes.
10. Grantee will take, document, and keep on file an end-of-route meal temperature every other week for each route, or in accordance with DAS OCP policy memorandum. For end-of-route meal temperatures not meeting temperature requirements, temperatures shall be taken and documented once a week until corrected
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in DAS OCP policy memoranda. The grantee will also provide 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 RD on 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 ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
15. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS-OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

16. Grantee will ensure there is a sufficient number of qualified staff, paid and/or 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.
17. 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:

	FY 20/21
Number of Unduplicated Consumers (UDC)	158
Number of Meals	24,096

2. Grantee will provide nutrition compliance units as indicated in Appendix B.

VIII. Outcome Objectives

1. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
2. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
3. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

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 HDM 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 delivered
 - 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 HSA no later than July 31 each grant year. 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 Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

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

Sarah Chan
Nutritionist
DAS OCP
email: Sarah.Chan@sfgov.org

and

David Kashani
Contract Manager
HSA OCM
email: David.Kashani@sfgov.org

X. 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	Appendix B, Page 1				
2	Document Date: 10/15/2020				
3	HUMAN SERVICES AGENCY BUDGET SUMMARY				
4	BY PROGRAM				
5	Centro Latino de San Francisco, Inc.		Term		
6			November 1, 2020 to June 30, 2021		
7	(Check One) New <input type="checkbox"/> Renew: <input checked="" type="checkbox"/>				
8	If modification, Effective Date of Mod.		No. of Mod.		
9	Program: Nutrition Compliance for ENP- Indicate HDM or Congregate	REVENUE Cost Allocation:			
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
11	Program Term	11/1/2020-06/30/2021			11/1/2020-06/30/2021
12	Expenditures				
13	Nutrition Education				
14	Salaries & Benefits	\$1,587	\$1,587		\$1,587
15	Operating Expense				
16	Subtotal Direct	\$1,587	\$1,587		\$1,587
17	Indirect Percentage				
18	Indirect Expense				
19	Total Nutrition Education	\$1,587	\$1,587		\$1,587
20	Nutrition Counseling				
21	Salaries & Benefits				
22	Operating Expense				
23	Subtotal Direct				
24	Indirect Percentage				
25	Indirect Expense				
26	Total Nutrition Counseling				
27	HACCP Kitchen Monitoring				
28	Salaries & Benefits				
29	Operating Expense				
30	Subtotal Direct				
31	Indirect Percentage				
32	Indirect Expense				
33	Total HACCP Kitchen Monitoring				
34	Site/Route Monitoring				
35	Salaries & Benefits				
36	Operating Expense				
37	Subtotal Direct				
38	Indirect Percentage				
39	Indirect Expense				
40	Total Site/Route Monitoring				
41	Menu Planning				
42	Salaries & Benefits				
43	Operating Expense				
44	Subtotal Direct				
45	Indirect Percentage				
46	Indirect Expense				
47	Total Menu Planning				
48	HDM Assessments				
49	Salaries & Benefits	\$17,397	\$17,400		\$17,397
50	Operating Expense				
51	Subtotal Direct	\$17,397	\$17,397		\$17,397
52	Indirect Percentage				
53	Indirect Expense				
54	Total HDM Assessments	\$17,397	\$17,397		\$17,397
55	Other Nutrition Compliance				
56	Salaries & Benefits				
57	Operating Expense	\$600	\$600		\$600
58	Subtotal Direct	\$600	\$600		\$600
59	Indirect Percentage				
60	Indirect Expense				
61	Total Other Nutrition Compliance	\$600	\$600		\$600
62	GRAND Total Expenditures	\$19,584	\$19,584		\$19,584
63	HSA Revenues				
64					
65					
66	TOTAL HSA REVENUES				
67	Other Non-H.S.A.-DAS Revenues				
68					
69					
70					
71	TOTAL OTHER REVENUES				
72	Full Time Equivalent (FTE)				
74	Prepared by: Gloria Bonilla	Telephone No.: 415-286-08 Date 10-15-2020			
75	HSA-CO Review Signature: _____				
76	HSA #1				Document Date:

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 2									
2	Document Date:									
3										
4	Program: Nutrition Compliance for ENP- Indicate HDM or Congregate									
5	(Same as Line 9 on HSA #1)									
6										
7	Nutrition Education Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			
11	Agency Totals		For HSA Program			For HSA Program	REVENUE Cost Allocation:		Total Revenue	
12	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS			
13	Walter fuentes	\$49,920	62%	5%	3%	\$1,398	\$1,398		\$1,398	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$49,920	62%	5%	3%	\$1,398	\$1,398		\$1,398	
31										
32	FRINGE BENEFIT RATE	14%								
33	EMPLOYEE FRINGE BENEFITS	\$6,739				\$189	\$189		\$189	
34										
35										
36	TOTAL SALARIES & BENEFITS	\$56,659				\$1,587	\$1,587		\$1,587	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	#REF!								
38	HSA #2								Document Date:	

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 12								
2	Document Date:								
3									
4	Program: Nutrition Compliance for ENP- Indicate HDM or Congregate								
5	(Same as Line 9 on HSA #1)								
6									
7	Annual & Quarterly HDM Intake and Assessment Salaries & Benefits Detail								
8	TERM:								
9	November 1, 2020 to June 30, 2021								
10						11/1/2020-06/30/2021			11/1/2020-06/30/2021
11		Agency Totals		For HSA Program		for HSA Progra	REVENUE Cost Allocation:		Total Revenue
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	
13	Executive Director	\$79,040	95%	1%	1%	\$573			
14	Nutritionist/Activities Fac. Walter Fuentes	\$49,920	75%	5%	4%	\$0			
15	Social Worker - Rivera, Sylvia	\$47,840	88%	30%	27%	\$8,428			
16	Driver II - Javier Michel	\$39,520	56%	9%	5%	\$733			
17	Driver II - Joaquin Olivar	\$39,520	63%	3%	2%	\$856			
18	Social Services Asst - Ilse Perez	\$39,520	38%	39%	15%	\$4,760			
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30	TOTALS	\$295,360	414%	88%	54%	\$15,351			
31									
32	FRINGE BENEFIT RATE	13%							
33	EMPLOYEE FRINGE BENEFITS	\$39,431				\$2,049			
34									
35									
36	TOTAL SALARIES & BENEFITS	\$334,791				\$17,397			
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$17,397							
38	HSA #12 Document Date:								

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 15								
2	Document Date:								
3									
4	Program: Nutrition Compliance for ENP- Indicate HDM or Congregate								
5	(Same as Line 9 on HSA #1)								
6									
7	Other Nutrition Compliance Operating Expense Detail								
8									
9	TERM:								
10	November 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:		TOTAL REVENU				
		11/1/2020-							11/1/2020-
		06/30/2021	H.S.A.-DAS	Non-HSA-					06/30/2021
			DAS	DAS					
13	<u>Expenditure Category</u>								
14	Rental of Property								
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage								
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction								
19	Insurance								
20	Staff Training								
21	Staff Travel								
22	Small Equipment (over \$500 but under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	a								
27	b								
28	c								
29	d								
30	e								
31	OTHER								
32	z								
33	y								
34	x								
35	w								
36	v								
37									
38	TOTAL OPERATING EXPENSE								
39	TOTAL OPERATING EXPENSE								
40									
41	HSA #15								Document Date:

Appendix A– Services to be Provided
Jewish Family and Children’s Services
Home-Delivered Nutrition Program for Older Adults
Elderly Nutrition Program (ENP)

Effective November 1, 2020-June 30, 2021

I. Purpose

The purpose of this grant is to provide a home-delivered nutrition program for older adults in the City and County of San Francisco. A home-delivered nutrition program includes the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program also aims to reduce social isolation and help older adults remain independent and in their communities by promoting better health through nutrition and serving as an access point for other home and community-based services.

II. Definitions

Grantee	Jewish Family and Children’s Services
Adult with a Disability	A person 18-59 years of age living with a disability.
Annual Comprehensive Assessment	An assessment completed by the grantee at least once per year that evaluates the need for continued service. The grantee conducts the annual assessment in the home of the consumer and documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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.
CDA	California Department of Aging.
CRFC	California Retail Food Code establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A nutrition risk 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.</p>
<p>Dietary Guidelines for Americans (DGA)</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/</p>
<p>Dietary Reference Intakes (DRI)</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes</p>
<p>Disability</p>	<p>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.</p>
<p>ENP</p>	<p>Elderly Nutrition Program. A program, which provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and in accordance with Title 22 regulations.</p>
<p>ENP - Home-Delivered Nutrition Program</p>	<p>A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over, and in some cases, their caregivers, spouses, and/or persons with disabilities. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.</p>

ENP Menu Requirements	Meals provided through ENP shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the grantee provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the grantee provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Meals (HDM)	Meals that are delivered to consumers and adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), meet state and local food safety and sanitation requirements, and are appealing to older adults. The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the grantee.
Initial Assessment	A comprehensive assessment conducted by the grantee in a consumer's home to determine their eligibility for program enrollment within two (2) weeks of starting meal service. The grantee documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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 participation is not means tested. Consumers self-report income status.
Menu Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the grantee will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 Diet	A menu approved by a Registered Dietitian (RD) that meets the current DGA and adjusts the typical home delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
Nutrition Counseling	Provision of individualized advice and guidance to consumers who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses. A registered dietitian provides the advice and guidance in accordance with Sections 2585 and 2586, Business and Professions Code and offers options and methods for improving nutritional status.

Nutrition Education	Informing consumers about current facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. The grantee may use printed material as the sole nutrition education component for home-delivered meal participants. Dietetic students, interns, or technicians may provide nutrition education when a RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
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.
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years or older, used interchangeably with “senior”.
Quarterly Reassessment	A reassessment that may be conducted by trained HDM program drivers or volunteers in person or by phone to determine a consumer’s eligibility for continued services. The grantee must conduct quarterly reassessments in the home of a consumer at least every six (6) months.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through grantee.
Senior	Person who is 60 years or older, used interchangeably with “older adult”.
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>).

Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.
Unduplicated Consumer (UDC)	An individual who receives home-delivered meals provided by the grantee, and the grantee reflects their 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 who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals.

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

1. Low income
2. Limited or No English Speaking Proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in the ENP-home delivered meal program, an individual must meet one of the following criteria:

1. An older adult who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide an ENP home-delivered nutrition program in the City and County of San Francisco. The grantee determines the service and delivery times for the home-delivered 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.

Policies and procedures shall also include initial, annual, and quarterly reassessment guidelines.

2. Grantee will provide an ENP home-delivered nutrition program for older adults and individuals who are determined eligible by the grantee. The provision of the program will include the following:
 - a. Enrollment of the number of consumers and delivery of the number of meals as indicated in Table A below.
 - b. Provision of home-delivered meals that comply with current Dietary Guidelines for Americans (DGA), offer 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. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - c. Initial in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the initial assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed.
 - d. Annual in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for continued program enrollment. The annual assessment will document the need for service and evaluate function and ability as described in DAS OCP policy memoranda.
 - e. Quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
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.
4. Grantee will provide nutrition education materials to consumers participating in the home-delivered nutrition program on a quarterly basis. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report the nutrition service units in CA-GetCare in the month that the grantee provides the nutrition education. One unit of nutrition education is one set of nutrition education material given to each consumer.

5. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all HDM delivery routes meet state and local food, sanitation, health and safety requirements.
6. 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 possesses a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
7. 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
8. 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 route monitoring documentation and end-of-route HDM temperature logs.
9. Grantee will conduct a route monitoring at least twice per year per route and/or in accordance with DAS OCP policy memorandum. A staff member trained by a food safety manager or a RD may monitor the routes.
10. Grantee will take, document, and keep on file an end-of-route meal temperature every other week for each route, or in accordance with DAS OCP policy memorandum. For end-of-route meal temperatures not meeting temperature requirements, temperatures shall be taken and documented once a week until corrected
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in DAS OCP policy memoranda. The grantee will also provide 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 RD on 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 ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
15. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS-OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

16. Grantee will ensure there is a sufficient number of qualified staff, paid and/or 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.
17. 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:

	FY 20/21
Number of Unduplicated Consumers (UDC)	62
Number of Meals	7,410

2. Grantee will provide nutrition compliance units as indicated in Appendix B.

VIII. Outcome Objectives

1. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
2. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
3. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

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 HDM 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 delivered
 - 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 HSA no later than July 31 each grant year. 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 Services 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

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

X. 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	Appendix B, Page 1				
2	Document Date: November 2020				
3	HUMAN SERVICES AGENCY BUDGET SUMMARY				
4	BY PROGRAM				
5	Contractor Name:		Term		
6	Jewish Family and Children's Services		11/1/20 - 6/30/21		
7	(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>				
8	If modification, Effective Date of Mod.		No. of Mod.		
9	Program: Nutr Compliance for ENP-HDM		REVENUE Cost Allocation:		
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total
11	Program Term	11/1/20 - 6/30/21			11/1/20 - 6/30/21
12	Expenditures				
19	Total Nutrition Education	\$0	\$0	\$0	\$0
26	Total Nutrition Counseling	\$0	\$0	\$0	\$0
33	Total HACCP Kitchen Monitoring	\$0	\$0	\$0	\$0
34	Temperature Check				
35	Salaries & Benefits	\$0	\$0	\$0	\$0
36	Operating Expense	\$348	\$348	\$0	\$348
37	Subtotal Direct	\$348	\$348	\$0	\$348
38	Indirect Percentage	0%			0%
39	Indirect Expense	\$0			\$0
40	Total Temperature Check	\$348	\$348	\$0	\$348
47	Total Menu Planning	\$0	\$0	\$0	\$0
48	HDM Assessments				
49	Salaries & Benefits	\$8,385	\$8,385	\$0	\$8,385
50	Operating Expense	\$0	\$0	\$0	\$0
51	Subtotal Direct	\$8,385	\$8,385	\$0	\$8,385
52	Indirect Percentage	0%			0%
53	Indirect Expense	\$0			\$0
54	Total HDM Assessments	\$8,385	\$8,385	\$0	\$8,385
55	Other Nutrition Compliance				
56	Salaries & Benefits	\$270	\$270	\$0	\$270
57	Operating Expense	\$0	\$0	\$0	\$0
58	Subtotal Direct	\$270	\$270	\$0	\$270
59	Indirect Percentage	0%			0%
60	Indirect Expense	\$0			\$0
61	Total Other Nutrition Compliance	\$270	\$270	\$0	\$270
62	GRAND Total Expenditures	\$9,003	\$9,003	\$0	\$9,003
63	HSA Revenues				
64	General Funds		\$9,003		\$9,003
65					\$0
66	TOTAL HSA REVENUES		\$9,003		\$9,003
67	Other Non-H.S.A.-DAS Revenues				
68					\$0
69					\$0

	A	B	C	D	E	F	G	H	I
1	Jewish Family and Children's Services							Appendix B, Page 3	
2	Program: Nutr Compliance for ENP-HDM							Document Date: November 2020	
3									
4									
5	Temperature Check Operating Expense Detail								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9		Year 1	REVENUE Cost Allocation:				Total Revenue		
10	<u>Expenditure Category</u>	<u>11/1/20 - 6/30/21</u>	H.S.A.-DAS	Non-HSA-DAS		<u>11/1/20 - 6/30/21</u>			
11	Rental of Property	\$0				\$0			
12	Utilities(Elec, Water, Gas, Phone, Scavenger)	\$0				\$0			
13	Office Supplies, Postage	\$0				\$0			
14	Building Maintenance Supplies and Repair	\$0				\$0			
15	Printing and Reproduction	\$0				\$0			
16	Insurance	\$0				\$0			
17	Staff Training	\$0				\$0			
18	Staff Travel	\$0				\$0			
19	Small Equipment (under \$5,000/item)	\$0				\$0			
20	Rental of Equipment	\$0				\$0			
21									
22	<u>SUBCONTRACTORS Descriptive Title</u>								
23		\$0				\$0			
24		\$0				\$0			
25		\$0				\$0			
26		\$0				\$0			
27		\$0				\$0			
28									
29	<u>OTHER</u>								
30	Test meals	\$348	\$348			\$348			
31		\$0				\$0			
32		\$0				\$0			
33		\$0				\$0			
34		\$0				\$0			
35									
36	TOTAL OPERATING EXPENSE	\$348	\$348	\$0	\$348				
37	TOTAL OPERATING EXPENSE x3yrs	\$348							
38									
39	HSA #3							Document Date: November 2020	

	A	B	C	D	E	F	G	H	I
1	Jewish Family and Children's Services								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: November 2020
3									
4									
5	Assessment Salaries & Benefits Detail								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	HDM Assessments/ HDM manager	\$69,635	80.000%	11.150%	0.09	\$6,211	\$6,211		\$6,211
13					0.00	\$0			\$0
14					0.00	\$0			\$0
15					0.00	\$0			\$0
16					0.00	\$0			\$0
17					0.00	\$0			\$0
18					0.00	\$0			\$0
19					0.00	\$0			\$0
20					0.00	\$0			\$0
21					0.00	\$0			\$0
22	TOTALS	\$69,635	80%	11%	0.09	\$6,211	\$6,211	\$0	\$6,211
23									
24	FRINGE BENEFIT RATE	35%							
25	EMPLOYEE FRINGE BENEFITS	\$24,372				\$2,174	\$2,174	\$0	\$2,174
26									
27									
28	TOTAL SALARIES & BENEFITS	\$94,007				\$8,385	\$8,385	\$0	\$8,385
29	TOTAL SALARIES & BENEFITS x3yrs	\$8,385							
30									
31	HSA #8								Document Date: November 2020

	A	B	C	D	E	F	G	H	I
1	Jewish Family and Children's Services								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: November 2020
3									
4									
5	Other Salaries & Benefits Detail								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	HDM Assessments/ HDM manager	\$69,635	80.000%	0.36%	0.00	\$200	\$200		\$200
13					0.00	\$0			\$0
14					0.00	\$0			\$0
15					0.00	\$0			\$0
16					0.00	\$0			\$0
17					0.00	\$0			\$0
18					0.00	\$0			\$0
19					0.00	\$0			\$0
20					0.00	\$0			\$0
21					0.00	\$0			\$0
22	TOTALS	\$69,635	80%	0%	0.00	\$200	\$200	\$0	\$200
23									
24	FRINGE BENEFIT RATE	35%							
25	EMPLOYEE FRINGE BENEFITS	\$24,372				\$70	\$70	\$0	\$70
26									
27									
28	TOTAL SALARIES & BENEFITS	\$94,007				\$270	\$270	\$0	\$270
29	TOTAL SALARIES & BENEFITS x3yrs	\$270							
30									
31	HSA #8								Document Date: November 2020

**Appendix A– Services to be Provided
Kimochi Inc.**

Home-Delivered Nutrition Program for Older Adults
Elderly Nutrition Program (ENP)

Effective November 1, 2020-June 30, 2021

I. Purpose

The purpose of this grant is to provide a home-delivered nutrition program for older adults in the City and County of San Francisco. A home-delivered nutrition program includes the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program also aims to reduce social isolation and help older adults remain independent and in their communities by promoting better health through nutrition and serving as an access point for other home and community-based services.

II. Definitions

Grantee	Kimochi Inc.
Adult with a Disability	A person 18-59 years of age living with a disability.
Annual Comprehensive Assessment	An assessment completed by the grantee at least once per year that evaluates the need for continued service. The grantee conducts the annual assessment in the home of the consumer and documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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.
CDA	California Department of Aging.
CRFC	California Retail Food Code establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.

DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A nutrition risk 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.
Dietary Guidelines for Americans (DGA)	Evidence-based food and beverage recommendations for Americans ages two (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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes
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.
ENP	Elderly Nutrition Program. A program, which provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and in accordance with Title 22 regulations.
ENP - Home-Delivered Nutrition Program	A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over, and in some cases, their caregivers, spouses, and/or persons with disabilities. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.

ENP Menu Requirements	Meals provided through ENP shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the grantee provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the grantee provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Meals (HDM)	Meals that are delivered to consumers and adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), meet state and local food safety and sanitation requirements, and are appealing to older adults. The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the grantee.
Initial Assessment	A comprehensive assessment conducted by the grantee in a consumer's home to determine their eligibility for program enrollment within two (2) weeks of starting meal service. The grantee documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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 participation is not means tested. Consumers self-report income status.
Menu Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the grantee will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 Diet	A menu approved by a Registered Dietitian (RD) that meets the current DGA and adjusts the typical home delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
Nutrition Counseling	Provision of individualized advice and guidance to consumers who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses. A registered dietitian provides the advice and guidance in accordance with Sections 2585 and 2586, Business and Professions Code and offers options and methods for improving nutritional status.

Nutrition Education	Informing consumers about current facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. The grantee may use printed material as the sole nutrition education component for home-delivered meal participants. Dietetic students, interns, or technicians may provide nutrition education when a RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
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.
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years or older, used interchangeably with “senior”.
Quarterly Reassessment	A reassessment that may be conducted by trained HDM program drivers or volunteers in person or by phone to determine a consumer’s eligibility for continued services. The grantee must conduct quarterly reassessments in the home of a consumer at least every six (6) months.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through grantee.
Senior	Person who is 60 years or older, used interchangeably with “older adult”.
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>).

Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.
Unduplicated Consumer (UDC)	An individual who receives home-delivered meals provided by the grantee, and the grantee reflects their 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 who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals.

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

1. Low income
2. Limited or No English Speaking Proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in the ENP-home delivered meal program, an individual must meet one of the following criteria:

1. An older adult who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide an ENP home-delivered nutrition program in the City and County of San Francisco. The grantee determines the service and delivery times for the home-delivered 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.

Policies and procedures shall also include initial, annual, and quarterly reassessment guidelines.

2. Grantee will provide an ENP home-delivered nutrition program for older adults and individuals who are determined eligible by the grantee. The provision of the program will include the following:
 - a. Enrollment of the number of consumers and delivery of the number of meals as indicated in Table A below.
 - b. Provision of home-delivered meals that comply with current Dietary Guidelines for Americans (DGA), offer 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. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - c. Initial in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the initial assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed.
 - d. Annual in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for continued program enrollment. The annual assessment will document the need for service and evaluate function and ability as described in DAS OCP policy memoranda.
 - e. Quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
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.
4. Grantee will provide nutrition education materials to consumers participating in the home-delivered nutrition program on a quarterly basis. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report the nutrition service units in CA-GetCare in the month that the grantee provides the nutrition education. One unit of nutrition education is one set of nutrition education material given to each consumer.

5. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all HDM delivery routes meet state and local food, sanitation, health and safety requirements.
6. 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 possesses a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
7. 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
8. 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 route monitoring documentation and end-of-route HDM temperature logs.
9. Grantee will conduct a route monitoring at least twice per year per route and/or in accordance with DAS OCP policy memorandum. A staff member trained by a food safety manager or a RD may monitor the routes.
10. Grantee will take, document, and keep on file an end-of-route meal temperature every other week for each route, or in accordance with DAS OCP policy memorandum. For end-of-route meal temperatures not meeting temperature requirements, temperatures shall be taken and documented once a week until corrected
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in DAS OCP policy memoranda. The grantee will also provide 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 RD on 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 ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
15. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS-OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

16. Grantee will ensure there is a sufficient number of qualified staff, paid and/or 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.
17. 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:

	FY 20/21
Number of Unduplicated Consumers (UDC)	158
Number of Meals	28,000

2. Grantee will provide nutrition compliance units as indicated in Appendix B.

VIII. Outcome Objectives

1. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
2. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
3. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

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 HDM 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 delivered
 - 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 HSA no later than July 31 each grant year. 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 Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

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

Sarah Chan
Nutritionist
DAS OCP
email: Sarah.Chan@sfgov.org

and

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

X. 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	M
9	Program: Nutrition Compliance for ENP-Home Delivery	REVENUE Cost Allocation:			
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
11	Program Term	11/1/2020 - 6/30/21			
12	Expenditures				
13	Nutrition Education				
14	Salaries & Benefits	\$452	\$452		\$452
15	Operating Expense				
16	Subtotal Direct	\$452	\$452		\$452
17	Indirect Percentage				
18	Indirect Expense				
19	Total Nutrition Education	\$452	\$452		\$452
26	Total Nutrition Counseling				
27	HACCP Kitchen Monitoring				
28	Salaries & Benefits	\$1,315	\$1,315		\$1,315
29	Operating Expense				
30	Subtotal Direct	\$1,315	\$1,315		\$1,315
31	Indirect Percentage				
32	Indirect Expense				
33	Total HACCP Kitchen Monitoring	\$1,315	\$1,315		\$1,315
34	Site/Route Monitoring				
35	Salaries & Benefits	\$3,153	\$3,153		\$3,153
36	Operating Expense				
37	Subtotal Direct	\$3,153	\$3,153		\$3,153
38	Indirect Percentage				
39	Indirect Expense				
40	Total Site/Route Monitoring	\$3,153	\$3,153		\$3,153
41	Menu Planning				
42	Salaries & Benefits	\$400	\$400		\$400
43	Operating Expense				
44	Subtotal Direct	\$400	\$400		\$400
45	Indirect Percentage				
46	Indirect Expense				
47	Total Menu Planning	\$400	\$400		\$400
48	HDM Assessments				
49	Salaries & Benefits	\$34,479	\$34,479		\$34,479
50	Operating Expense				
51	Subtotal Direct	\$34,479	\$34,479		\$34,479
52	Indirect Percentage				
53	Indirect Expense				
54	Total HDM Assessments	\$34,479	\$34,479		\$34,479
61	Total Other Nutrition Compliance				
62	GRAND Total Expenditures	\$39,799	\$39,799		\$39,799
63	HSA Revenues	\$39,799			\$39,799
64					
65					
66	TOTAL HSA REVENUES	\$39,799			\$39,799
67	Other Non-H.S.A.-DAS Revenues				
68					
69					
70					
71	TOTAL OTHER REVENUES				
72	Full Time Equivalent (FTE)				
74	Prepared by: Rod Valdepenas	Telephone No.: (415) 931-2294		Date: 10/14/20	
75	HSA-CO Review Signature:	_____			
76	HSA #1				

Kimochi, Inc.
 Program: Nutrition Compliance for ENP- Home Delivery

HDM Intake and Assessment Salaries & Benefits Detail

TERM:
 Nov. 1, 2020 to June 30, 2021

POSITION TITLE	Agency Totals	For HSA Program			11/1/2020 - 6/30/21	ENUE Cost Allocation:		Total Revenue
		Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	For HSA Program	H.S.A.-DAS	
Nutritionist	\$ 62,400.00	0.63	66%	41.43%	\$25,854	\$25,854		\$25,854
Nutrition Asst. Coordinator	\$ 41,600.00	1.00	21%	20.73%	\$8,626	\$8,626		\$8,626
TOTALS	\$104,000	163%	87%	62%	\$34,479	\$34,479		\$34,479
FRINGE BENEFIT RATE								
EMPLOYEE FRINGE BENEFITS								
TOTAL SALARIES & BENEFITS	\$104,000				\$34,479	\$34,479		\$34,479
TOTAL SALARIES & BENEFITS for H.S.A Program x3yrs	\$34,479							

HSA #12

Kimochi, Inc.
 Program: Nutrition Compliance for ENP- Home Delivery

Menu Planning Salaries & Benefits Detail

TERM:
 Nov. 1, 2020 to June 30, 2021

POSITION TITLE	Agency Totals	For HSA Program			11/1/2020 - 6/30/21 For HSA Program	REVENUE Cost Allocation:		Total Revenue
	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	
Nutritionist	\$ 62,400.00	0.63	1%	1%	\$400	\$400		\$400
TOTALS	\$62,400	63%	1%	1%	\$400	\$400		\$400
FRINGE BENEFIT RATE								
EMPLOYEE FRINGE BENEFITS								
TOTAL SALARIES & BENEFITS	\$62,400				\$400	\$400		\$400
TOTAL SALARIES & BENEFITS for H.S.A Program x3yrs	\$400							

HSA #10

Kimochi, Inc.
 Program: Nutrition Compliance for ENP- Home Delivery

Kitchen Monitoring Salaries & Benefits Detail

TERM:
 Nov. 1, 2020 to June 30, 2021

POSITION TITLE	Agency Totals	For HSA Program			11/1/2020 - 6/30/21 For HSA Program	ENUE Cost Allocation:		Total Revenue
	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	
Nutritionist	\$ 62,400.00	0.63	3%	2%	\$1,315	\$1,315		\$1,315
TOTALS	\$62,400	0.63	0.03	0.02	\$1,315	\$1,315		\$1,315
FRINGE BENEFIT RATE								
EMPLOYEE FRINGE BENEFITS								
TOTAL SALARIES & BENEFITS	\$62,400				\$1,315	\$1,315		\$1,315
TOTAL SALARIES & BENEFITS for H.S.A Program x3yrs	\$1,315							

HSA #6

Appendix A– Services to be Provided
Meals on Wheels of San Francisco
Home-Delivered Nutrition Program for Older Adults
Elderly Nutrition Program (ENP)

Effective November 1, 2020-June 30, 2021

I. Purpose

The purpose of this grant is to provide a home-delivered nutrition program for older adults in the City and County of San Francisco. A home-delivered nutrition program includes the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program also aims to reduce social isolation and help older adults remain independent and in their communities by promoting better health through nutrition and serving as an access point for other home and community-based services.

II. Definitions

Grantee	Meals on Wheels of San Francisco
Adult with a Disability	A person 18-59 years of age living with a disability.
Annual Comprehensive Assessment	An assessment completed by the grantee at least once per year that evaluates the need for continued service. The grantee conducts the annual assessment in the home of the consumer and documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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.
CDA	California Department of Aging.
CRFC	California Retail Food Code establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.

DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A nutrition risk 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.
Dietary Guidelines for Americans (DGA)	Evidence-based food and beverage recommendations for Americans ages two (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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes
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.
ENP	Elderly Nutrition Program. A program, which provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and in accordance with Title 22 regulations.
ENP - Home-Delivered Nutrition Program	A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over, and in some cases, their caregivers, spouses, and/or persons with disabilities. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.

ENP Menu Requirements	Meals provided through ENP shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the grantee provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the grantee provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Meals (HDM)	Meals that are delivered to consumers and adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), meet state and local food safety and sanitation requirements, and are appealing to older adults. The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the grantee.
Initial Assessment	A comprehensive assessment conducted by the grantee in a consumer's home to determine their eligibility for program enrollment within two (2) weeks of starting meal service. The grantee documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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 participation is not means tested. Consumers self-report income status.
Menu Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the grantee will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 Diet	A menu approved by a Registered Dietitian (RD) that meets the current DGA and adjusts the typical home delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
Nutrition Counseling	Provision of individualized advice and guidance to consumers who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses. A registered dietitian provides the advice and guidance in accordance with Sections 2585 and 2586, Business and Professions Code and offers options and methods for improving nutritional status.

Nutrition Education	Informing consumers about current facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. The grantee may use printed material as the sole nutrition education component for home-delivered meal participants. Dietetic students, interns, or technicians may provide nutrition education when a RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
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.
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years or older, used interchangeably with “senior”.
Quarterly Reassessment	A reassessment that may be conducted by trained HDM program drivers or volunteers in person or by phone to determine a consumer’s eligibility for continued services. The grantee must conduct quarterly reassessments in the home of a consumer at least every six (6) months.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through grantee.
Senior	Person who is 60 years or older, used interchangeably with “older adult”.
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>).

Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.
Unduplicated Consumer (UDC)	An individual who receives home-delivered meals provided by the grantee, and the grantee reflects their 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 who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals.

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

1. Low income
2. Limited or No English Speaking Proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in the ENP-home delivered meal program, an individual must meet one of the following criteria:

1. An older adult who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide an ENP home-delivered nutrition program in the City and County of San Francisco. The grantee determines the service and delivery times for the home-delivered 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.

Policies and procedures shall also include initial, annual, and quarterly reassessment guidelines.

2. Grantee will provide an ENP home-delivered nutrition program for older adults and individuals who are determined eligible by the grantee. The provision of the program will include the following:
 - a. Enrollment of the number of consumers and delivery of the number of meals as indicated in Table A below.
 - b. Provision of home-delivered meals that comply with current Dietary Guidelines for Americans (DGA), offer 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. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - c. Initial in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the initial assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed.
 - d. Annual in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for continued program enrollment. The annual assessment will document the need for service and evaluate function and ability as described in DAS OCP policy memoranda.
 - e. Quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
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.
4. Grantee will provide nutrition education materials to consumers participating in the home-delivered nutrition program on a quarterly basis. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report the nutrition service units in CA-GetCare in the month that the grantee provides the nutrition education. One unit of nutrition education is one set of nutrition education material given to each consumer.

5. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all HDM delivery routes meet state and local food, sanitation, health and safety requirements.
6. 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 possesses a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
7. 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
8. 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 route monitoring documentation and end-of-route HDM temperature logs.
9. Grantee will conduct a route monitoring at least twice per year per route and/or in accordance with DAS OCP policy memorandum. A staff member trained by a food safety manager or a RD may monitor the routes.
10. Grantee will take, document, and keep on file an end-of-route meal temperature every other week for each route, or in accordance with DAS OCP policy memorandum. For end-of-route meal temperatures not meeting temperature requirements, temperatures shall be taken and documented once a week until corrected
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in DAS OCP policy memoranda. The grantee will also provide 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 RD on 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 ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
15. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS-OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

16. Grantee will ensure there is a sufficient number of qualified staff, paid and/or 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.
17. 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:

	FY 20/21
Number of Unduplicated Consumers (UDC)	3600
Number of Meals	1,133,128

2. Grantee will provide nutrition compliance units as indicated in Appendix B1.

VIII. Outcome Objectives

1. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
2. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
3. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

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 HDM 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 delivered
 - 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 HSA no later than July 31 each grant year. 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 Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

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

Sarah Chan
Nutritionist
DAS OCP
email: Sarah.Chan@sfgov.org

and

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

X. 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	Appendix B, Page 1				
2	Document Date: October 2020				
3	HUMAN SERVICES AGENCY BUDGET SUMMARY				
4	BY PROGRAM				
5	Contractor Name:		Term		
6	Meals on Wheels of San Francisco		11/1/20 - 6/30/21		
7	(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>				
8	If modification, Effective Date of Mod.		No. of Mod.		
9	Program: Nutr Compliance for ENP-HDM		REVENUE Cost Allocation:		
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total
11	Program Term	11/1/20 - 6/30/21			11/1/20 - 6/30/21
12	Expenditures				
13	Nutrition Education				
14	Salaries & Benefits	\$1,511	\$490	\$1,021	\$1,511
15	Operating Expense				\$0
16	Subtotal Direct	\$1,511	\$490	\$1,021	\$1,511
17	Indirect Percentage	0%			0%
18	Indirect Expense	\$0			\$0
19	Total Nutrition Education	\$1,511	\$490	\$1,021	\$1,511
20	Nutrition Counseling				
21	Salaries & Benefits	\$295,032	\$103,714	\$191,318	\$295,032
22	Operating Expense	\$18,018	\$709	\$17,309	\$18,018
23	Subtotal Direct	\$313,050	\$104,423	\$208,627	\$313,050
24	Indirect Percentage	0.0%			0%
25	Indirect Expense	\$0			\$0
26	Total Nutrition Counseling	\$313,050	\$104,423	\$208,627	\$313,050
27	HACCP Kitchen Monitoring				
28	Salaries & Benefits	\$4,956	\$1,800	\$3,156	\$4,956
29	Operating Expense				\$0
30	Subtotal Direct	\$4,956	\$1,800	\$3,156	\$4,956
31	Indirect Percentage	0%			0%
32	Indirect Expense	\$0			\$0
33	Total HACCP Kitchen Monitoring	\$4,956	\$1,800	\$3,156	\$4,956
34	Site/Route Monitoring				
35	Salaries & Benefits	\$28,540	\$10,545	\$17,994	\$28,540
36	Operating Expense				\$0
37	Subtotal Direct	\$28,540	\$10,545	\$17,994	\$28,540
38	Indirect Percentage	0%			0%
39	Indirect Expense	\$0			\$0
40	Total Site/Route Monitoring	\$28,540	\$10,545	\$17,994	\$28,540
41	Menu Planning				
42	Salaries & Benefits	\$1,466	\$540	\$926	\$1,466
43	Operating Expense				\$0
44	Subtotal Direct	\$1,466	\$540	\$926	\$1,466
45	Indirect Percentage	0%			0%
46	Indirect Expense	\$0			\$0
47	Total Menu Planning	\$1,466	\$540	\$926	\$1,466
48	HDM Assessments				
49	Salaries & Benefits	\$781,762	\$510,341	\$271,421	\$781,762
50	Operating Expense	\$62,725	\$16	\$62,709	\$62,725
51	Subtotal Direct	\$844,487	\$510,357	\$334,130	\$844,487
52	Indirect Percentage	0%			0%
53	Indirect Expense	\$0			\$0
54	Total HDM Assessments	\$844,487	\$510,357	\$334,130	\$844,487
61	Total Other Nutrition Compliance	\$0	\$0	\$0	\$0
62	GRAND Total Expenditures	\$1,194,010	\$628,155	\$565,854	\$1,194,010
63	HSA Revenues				
64	General Funds		\$628,155		\$628,155
65					\$0
66					\$0
67					\$0
68	TOTAL HSA REVENUES		\$628,155		\$628,155
69	Other Non-H.S.A.-DAS Revenues				
70					\$0
71					\$0
72					\$0
73	TOTAL OTHER REVENUES			\$0	\$0
74	Full Time Equivalent (FTE)				
76	Prepared by:				Date: 10/26/20
77	HSA-CO Review Signature:				
78	HSA #1				Document Date: October 2020

	A	B	C	D	E	F	G	H	I
1	Meals on Wheels of San Francisco								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	Nutrition Education Salaries & Benefits								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	Director of Nutrition	\$97,460	100%	0%	0.00	\$409	\$68	\$341	\$409
13	Registered Dietician	\$67,000	100%	0%	0.00	\$281	\$80	\$201	\$281
14	Registered Dietician	\$70,000	100%	0%	0.00	\$294	\$84	\$210	\$294
15	Chief Food & Operations Officer	\$162,673	100%	0%	0.00	\$16	\$16		\$16
16	SalesForce Administrator	\$100,000	100%	0%	0.00	\$13	\$13		\$13
17	Chief Gov Off	\$144,427	100%	0%	0.00	\$19	\$19		\$19
18	CEO	\$205,000	100%	0%	0.00	\$0	\$0		\$0
19	Fleet & Facilities Dir	\$110,880	100%	0%	0.00	\$15	\$15		\$15
20	Maintenance	\$55,000	100%	0%	0.00	\$7	\$7		\$7
21	Maintenance	\$39,520	100%	0%	0.00	\$5	\$5		\$5
22	Maintenance	\$39,520	100%	0%	0.00	\$5	\$5		\$5
23	HR Manager	\$80,500	100%	0%	0.00	\$11	\$11		\$11
24	HR Manager	\$81,120	100%	0%	0.00	\$11	\$11		\$11
25	HR Director	\$108,832	100%	0%	0.00	\$14	\$14		\$14
26	Communications Director	\$105,000	100%	0%	0.00	\$11	\$11		\$11
27	Digital Marketing Manager	\$72,000	100%	0%	0.00	\$0			\$0
28					0.00	\$0			\$0
29					0.00	\$0			\$0
30					0.00	\$0			\$0
31					0.00	\$0			\$0
32	TOTALS	\$1,538,933	1600%	1%	0.01	\$1,111	\$359	\$752	\$1,111
33									
34	FRINGE BENEFIT RATE	36%							
35	EMPLOYEE FRINGE BENEFITS	\$554,016				\$400	\$131	\$269	\$400
36									
37									
38	TOTAL SALARIES & BENEFITS	\$2,092,949				\$1,511	\$490	\$1,021	\$1,511
39	TOTAL SALARIES & BENEFITS x3yrs	\$1,511							
40									
41	HSA #8								Document Date: October 2020

	A	B	C	D	E	F	G	H	I
1	Meals on Wheels of San Francisco								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	Nutrition Counseling Salaries & Benefits								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	Director of Nutrition	\$97,460	100%	89%	0.89	\$86,398	\$27,922	\$58,476	\$86,398
13	Registered Dietician	\$67,000	100%	89%	0.89	\$59,396	\$19,196	\$40,200	\$59,396
14	Registered Dietician	\$70,000	100%	89%	0.89	\$62,055	\$20,055	\$42,000	\$62,055
15	Chief Food & Operations Officer	\$162,673	100%	1%	0.01	\$2,326	\$2,326		\$2,326
16	SalesForce Administrator	\$100,000	100%	2%	0.02	\$1,949	\$1,949		\$1,949
17	Chief Gov Off	\$144,427	100%	0%	0.00	\$0			\$0
18	CEO	\$205,000	100%	0%	0.00	\$0			\$0
19	Fleet & Facilities Dir	\$110,880	100%	2%	0.02	\$2,162	\$2,162		\$2,162
20	Maintenance	\$55,000	100%	2%	0.02	\$1,072	\$1,072		\$1,072
21	Maintenance	\$39,520	100%	0%	0.00	\$0			\$0
22	Maintenance	\$39,520	100%	0%	0.00	\$0			\$0
23	HR Manager	\$80,500	100%	0%	0.00	\$0			\$0
24	HR Manager	\$81,120	100%	0%	0.00	\$0			\$0
25	HR Director	\$108,832	100%	1%	0.01	\$1,577	\$1,577		\$1,577
26	Communications Director	\$105,000	100%	0%	0.00	\$0			\$0
27	Digital Marketing Manager	\$72,000	100%	0%	0.00	\$0			\$0
28					0.00	\$0			\$0
29					0.00	\$0			\$0
30					0.00	\$0			\$0
31					0.00	\$0			\$0
32	TOTALS	\$1,538,933	1600%	275%	2.75	\$216,935	\$76,259	\$140,676	\$216,935
33									
34	FRINGE BENEFIT RATE	36%							
35	EMPLOYEE FRINGE BENEFITS	\$554,016				\$78,097	\$27,455	\$50,642	\$78,097
36									
37									
38	TOTAL SALARIES & BENEFITS	\$2,092,949				\$295,032	\$103,714	\$191,318	\$295,032
39	TOTAL SALARIES & BENEFITS x3yrs	\$295,032							
40									
41	HSA #8								Document Date: October 2020

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1	Meals on Wheels of San Francisco								Appendix B, Page 3	
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020	
3										
4										
5	Nutrition Counseling Operating Expense Detail									
6	TERM:									
7	11/1/20 - 6/30/21									
8										
9		Year 1	REVENUE Cost Allocation:				Total Revenue			
10	<u>Expenditure Category</u>	<u>11/1/20 - 6/30/21</u>	<u>H.S.A.-DAS</u>	<u>Non-HSA-DAS</u>						<u>11/1/20 - 6/30/21</u>
11	Rental of Property	\$0								\$0
12	Utilities(Elec, Water, Gas, Phone, Scavenger)	\$3,676	\$699	\$2,977						\$3,676
13	Office Supplies, Postage	\$2,010		\$2,010						\$2,010
14	Building Maintenance Supplies and Repair	\$1,595		\$1,595						\$1,595
15	Printing and Reproduction	\$0								\$0
16	Insurance	\$797		\$797						\$797
17	Staff Training	\$567		\$567						\$567
18	Staff Travel	\$306		\$306						\$306
19	Small Equipment (under \$5,000/item)	\$0								\$0
20	Rental of Equipment	\$0								\$0
21										
22	<u>SUBCONTRACTORS Descriptive Title</u>									
23	Outside services	\$3,655	\$10	\$3,645						\$3,655
24		\$0								\$0
25		\$0								\$0
26		\$0								\$0
27		\$0								\$0
28										
29	<u>OTHER</u>									
30	Grant, Volunteer and Client Costs	\$2,959		\$2,959						\$2,959
31	Office Expenses Including Telephone	\$1,755		\$1,755						\$1,755
32	Fees, Dues, Advertising	\$349		\$349						\$349
33	Other Operating Costs	\$349		\$349						\$349
34		\$0								\$0
35										
36	TOTAL OPERATING EXPENSE	\$18,018	\$709	\$17,309						\$18,018
37	TOTAL OPERATING EXPENSE x3yrs	\$18,018								
38										
39	HSA #3								Document Date: October 2020	

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1	Meals on Wheels of San Francisco								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	Kitchen Monitoring Salaries & Benefits								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	Director of Nutrition	\$97,460	100%	2%	0.02	\$1,491	\$526	\$965	\$1,491
13	Registered Dietician	\$67,000	100%	2%	0.02	\$1,025	\$362	\$663	\$1,025
14	Registered Dietician	\$70,000	100%	2%	0.02	\$1,071	\$378	\$693	\$1,071
15	Chief Food & Operations Officer	\$162,673	100%	0%	0.00	\$57	\$57		\$57
16	SalesForce Administrator	\$100,000	100%		0.00	\$0			\$0
17	Chief Gov Off	\$144,427	100%		0.00	\$0			\$0
18	CEO	\$205,000	100%		0.00	\$0			\$0
19	Fleet & Facilities Dir	\$110,880	100%		0.00	\$0			\$0
20	Maintenance	\$55,000	100%		0.00	\$0			\$0
21	Maintenance	\$39,520	100%		0.00	\$0			\$0
22	Maintenance	\$39,520	100%		0.00	\$0			\$0
23	HR Manager	\$80,500	100%		0.00	\$0			\$0
24	HR Manager	\$81,120	100%		0.00	\$0			\$0
25	HR Director	\$108,832	100%		0.00	\$0			\$0
26	Communications Director	\$105,000	100%		0.00	\$0			\$0
27	Digital Marketing Manager	\$72,000	100%		0.00	\$0			\$0
28					0.00	\$0			\$0
29					0.00	\$0			\$0
30					0.00	\$0			\$0
31					0.00	\$0			\$0
32	TOTALS	\$1,538,933	1600%	5%	0.05	\$3,644	\$1,323	\$2,321	\$3,644
33									
34	FRINGE BENEFIT RATE	36%							
35	EMPLOYEE FRINGE BENEFITS	\$554,016				\$1,312	\$477	\$835	\$1,312
36									
37									
38	TOTAL SALARIES & BENEFITS	\$2,092,949				\$4,956	\$1,800	\$3,156	\$4,956
39	TOTAL SALARIES & BENEFITS x3yrs	\$4,956							
40									
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1	Meals on Wheels of San Francisco								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	Site or Route Monitoring Salaries & Benefits								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	Director of Nutrition	\$97,460	100%	9%	0.09	\$8,723	\$3,219	\$5,504	\$8,723
13	Registered Dietician	\$67,000	100%	9%	0.09	\$5,997	\$2,218	\$3,779	\$5,997
14	Registered Dietician	\$70,000	100%	9%	0.09	\$6,265	\$2,317	\$3,948	\$6,265
15	Chief Food & Operations Officer	\$162,673	100%		0.00	\$0			\$0
16	SalesForce Administrator	\$100,000	100%		0.00	\$0			\$0
17	Chief Gov Off	\$144,427	100%		0.00	\$0			\$0
18	CEO	\$205,000	100%		0.00	\$0			\$0
19	Fleet & Facilities Dir	\$110,880	100%		0.00	\$0			\$0
20	Maintenance	\$55,000	100%		0.00	\$0			\$0
21	Maintenance	\$39,520	100%		0.00	\$0			\$0
22	Maintenance	\$39,520	100%		0.00	\$0			\$0
23	HR Manager	\$80,500	100%		0.00	\$0			\$0
24	HR Manager	\$81,120	100%		0.00	\$0			\$0
25	HR Director	\$108,832	100%		0.00	\$0			\$0
26	Communications Director	\$105,000	100%		0.00	\$0			\$0
27	Digital Marketing Manager	\$72,000	100%		0.00	\$0			\$0
28					0.00	\$0			\$0
29					0.00	\$0			\$0
30					0.00	\$0			\$0
31					0.00	\$0			\$0
32	TOTALS	\$1,538,933	1600%	27%	0.27	\$20,985	\$7,754	\$13,231	\$20,985
33									
34	FRINGE BENEFIT RATE	36%							
35	EMPLOYEE FRINGE BENEFITS	\$554,016				\$7,555	\$2,791	\$4,763	\$7,555
36									
37									
38	TOTAL SALARIES & BENEFITS	\$2,092,949				\$28,540	\$10,545	\$17,994	\$28,540
39	TOTAL SALARIES & BENEFITS x3yrs	\$28,540							
40									
41	HSA #8								Document Date: October 2020

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1	Meals on Wheels of San Francisco								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	Menu Planning Salaries & Benefits								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10						11/1/20 - 6/30/21			11/1/20 - 6/30/21
11		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	Director of Nutrition	\$97,460	100%	0%	0.00	\$448	\$166	\$282	\$448
13	Registered Dietician	\$67,000	100%	0%	0.00	\$308	\$113	\$195	\$308
14	Registered Dietician	\$70,000	100%	0%	0.00	\$322	\$118	\$204	\$322
15	Chief Food & Operations Officer	\$162,673	100%		0.00	\$0			\$0
16	SalesForce Administrator	\$100,000	100%		0.00	\$0			\$0
17	Chief Gov Off	\$144,427	100%		0.00	\$0			\$0
18	CEO	\$205,000	100%		0.00	\$0			\$0
19	Fleet & Facilities Dir	\$110,880	100%		0.00	\$0			\$0
20	Maintenance	\$55,000	100%		0.00	\$0			\$0
21	Maintenance	\$39,520	100%		0.00	\$0			\$0
22	Maintenance	\$39,520	100%		0.00	\$0			\$0
23	HR Manager	\$80,500	100%		0.00	\$0			\$0
24	HR Manager	\$81,120	100%		0.00	\$0			\$0
25	HR Director	\$108,832	100%		0.00	\$0			\$0
26	Communications Director	\$105,000	100%		0.00	\$0			\$0
27	Digital Marketing Manager	\$72,000	100%		0.00	\$0			\$0
28					0.00	\$0			\$0
29					0.00	\$0			\$0
30					0.00	\$0			\$0
31					0.00	\$0			\$0
32	TOTALS	\$1,538,933	1600%	1%	0.01	\$1,078	\$397	\$681	\$1,078
33									
34	FRINGE BENEFIT RATE	36%							
35	EMPLOYEE FRINGE BENEFITS	\$554,016				\$388	\$143	\$245	\$388
36									
37									
38	TOTAL SALARIES & BENEFITS	\$2,092,949				\$1,466	\$540	\$926	\$1,466
39	TOTAL SALARIES & BENEFITS x3yrs	\$1,466							
40									
41	HSA #8								Document Date: October 2020

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1	Meals on Wheels of San Francisco								Appendix B, Page 2
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	HDM Intake & Assessment Salaries & Benefits								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9									
10					11/1/20 - 6/30/21		11/1/20 - 6/30/21		
11	POSITION TITLE	Agency Totals	For HSA Program		For HSA Program	REVENUE Cost Allocation:			
		Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
12	Assistant Director Social Work	\$100,955	100%	67%	0.67	\$67,303	\$27,153	\$40,150	\$67,303
13	Social Worker	\$51,079	100%	67%	0.67	\$34,053	\$13,738	\$20,315	\$34,053
14	Social Worker	\$67,178	100%	67%	0.67	\$44,785	\$18,068	\$26,717	\$44,785
15	Social Worker	\$65,000	100%	67%	0.67	\$43,333	\$17,483	\$25,850	\$43,333
16	Social Worker	\$56,964	100%	67%	0.67	\$37,976	\$15,321	\$22,655	\$37,976
17	Social Worker	\$75,212	100%	67%	0.67	\$50,141	\$20,229	\$29,912	\$50,141
18	Social Worker	\$66,449	100%	67%	0.67	\$44,299	\$17,872	\$26,427	\$44,299
19	Social Worker	\$43,680	100%	67%	0.67	\$29,120	\$24,752	\$4,368	\$29,120
20	Social Worker	\$53,000	100%	67%	0.67	\$35,333	\$32,683	\$2,650	\$35,333
21	Social Worker	\$52,998	100%	67%	0.67	\$35,332	\$34,802	\$530	\$35,332
22	Social Worker	\$65,000	100%	67%	0.67	\$43,333	\$43,333		\$43,333
23	Chief Prog Off	\$140,400	100%	17%	0.17	\$23,868	\$23,868		\$23,868
24	SalesForce Administrator	\$100,000	100%	24%	0.24	\$24,190	\$24,190		\$24,190
25	Chief Gov Off	\$144,427	100%	24%	0.24	\$34,937	\$34,937		\$34,937
26	Fleet & Facilities Dir	\$110,880	100%	24%	0.24	\$26,822	\$26,822		\$26,822
27					0.00	\$0			\$0
28					0.00	\$0			\$0
29					0.00	\$0			\$0
30					0.00	\$0			\$0
31					0.00	\$0			\$0
32	TOTALS	\$1,193,222	1500%	823%	8.23	\$574,825	\$375,251	\$199,574	\$574,825
33									
34	FRINGE BENEFIT RATE	36%							
35	EMPLOYEE FRINGE BENEFITS	\$429,560				\$206,937	\$135,090	\$71,847	\$206,937
36									
37									
38	TOTAL SALARIES & BENEFITS	\$1,622,782				\$781,762	\$510,341	\$271,421	\$781,762
39	TOTAL SALARIES & BENEFITS x3yrs	\$781,762							
40									
41	HSA #8								Document Date: October 2020

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1	Meals on Wheels of San Francisco								Appendix B, Page 3
2	Program: Nutr Compliance for ENP-HDM								Document Date: October 2020
3									
4									
5	HDM Intake & Assessment Operating Expense Detail								
6	TERM:								
7	11/1/20 - 6/30/21								
8									
9		Year 1	REVENUE Cost Allocation:		Total Revenue				
10	Expenditure Category	11/1/20 - 6/30/21	H.S.A.-DAS	Non-HSA-DAS	11/1/20 - 6/30/21				
11	Rental of Property	\$0			\$0				
12	Utilities(Elec, Water, Gas, Phone, Scavenger)	\$12,798	\$16	\$12,782	\$12,798				
13	Office Supplies, Postage	\$6,998		\$6,998	\$6,998				
14	Building Maintenance Supplies and Repair	\$5,553		\$5,553	\$5,553				
15	Printing and Reproduction	\$0			\$0				
16	Insurance	\$2,776		\$2,776	\$2,776				
17	Staff Training	\$1,975		\$1,975	\$1,975				
18	Staff Travel	\$1,063		\$1,063	\$1,063				
19	Small Equipment (under \$5,000/item)	\$0			\$0				
20	Rental of Equipment	\$0			\$0				
21									
22	<u>SUBCONTRACTORS Descriptive Title</u>								
23	Outside services	\$12,724		\$12,724	\$12,724				
24		\$0			\$0				
25		\$0			\$0				
26		\$0			\$0				
27		\$0			\$0				
28									
29	<u>OTHER</u>								
30	Grant, Volunteer and Client Costs	\$10,300		\$10,300	\$10,300				
31	Office Expenses Including Telephone	\$6,110		\$6,110	\$6,110				
32	Fees, Dues, Advertising	\$1,213		\$1,213	\$1,213				
33	Other Operating Costs	\$1,215		\$1,215	\$1,215				
34		\$0			\$0				
35									
36	TOTAL OPERATING EXPENSE	\$62,725	\$16	\$62,709	\$62,725				
37	TOTAL OPERATING EXPENSE x3yrs	\$62,725							
38									
39	HSA #3								Document Date: October 2020

Appendix A– Services to be Provided
On Lok Day Services
Home-Delivered Nutrition Program for Older Adults
Elderly Nutrition Program (ENP)

Effective November 1, 2020-June 30, 2021

I. Purpose

The purpose of this grant is to provide a home-delivered nutrition program for older adults in the City and County of San Francisco. A home-delivered nutrition program includes the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program also aims to reduce social isolation and help older adults remain independent and in their communities by promoting better health through nutrition and serving as an access point for other home and community-based services.

II. Definitions

Grantee	On Lok Day Services
Adult with a Disability	A person 18-59 years of age living with a disability.
Annual Comprehensive Assessment	An assessment completed by the grantee at least once per year that evaluates the need for continued service. The grantee conducts the annual assessment in the home of the consumer and documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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.
CDA	California Department of Aging.
CRFC	California Retail Food Code establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.

DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist	A nutrition risk 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.
Dietary Guidelines for Americans (DGA)	Evidence-based food and beverage recommendations for Americans ages two (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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/
Dietary Reference Intakes (DRI)	Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes
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.
ENP	Elderly Nutrition Program. A program, which provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and in accordance with Title 22 regulations.
ENP - Home-Delivered Nutrition Program	A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over, and in some cases, their caregivers, spouses, and/or persons with disabilities. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.

ENP Menu Requirements	Meals provided through ENP shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the grantee provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the grantee provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Meals (HDM)	Meals that are delivered to consumers and adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), meet state and local food safety and sanitation requirements, and are appealing to older adults. The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the grantee.
Initial Assessment	A comprehensive assessment conducted by the grantee in a consumer's home to determine their eligibility for program enrollment within two (2) weeks of starting meal service. The grantee documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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 participation is not means tested. Consumers self-report income status.
Menu Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the grantee will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 Diet	A menu approved by a Registered Dietitian (RD) that meets the current DGA and adjusts the typical home delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
Nutrition Counseling	Provision of individualized advice and guidance to consumers who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses. A registered dietitian provides the advice and guidance in accordance with Sections 2585 and 2586, Business and Professions Code and offers options and methods for improving nutritional status.

Nutrition Education	Informing consumers about current facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. The grantee may use printed material as the sole nutrition education component for home-delivered meal participants. Dietetic students, interns, or technicians may provide nutrition education when a RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
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.
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years or older, used interchangeably with “senior”.
Quarterly Reassessment	A reassessment that may be conducted by trained HDM program drivers or volunteers in person or by phone to determine a consumer’s eligibility for continued services. The grantee must conduct quarterly reassessments in the home of a consumer at least every six (6) months.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through grantee.
Senior	Person who is 60 years or older, used interchangeably with “older adult”.
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>).

Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.
Unduplicated Consumer (UDC)	An individual who receives home-delivered meals provided by the grantee, and the grantee reflects their 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 who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals.

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

1. Low income
2. Limited or No English Speaking Proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in the ENP-home delivered meal program, an individual must meet one of the following criteria:

1. An older adult who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide an ENP home-delivered nutrition program in the City and County of San Francisco. The grantee determines the service and delivery times for the home-delivered 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.

Policies and procedures shall also include initial, annual, and quarterly reassessment guidelines.

2. Grantee will provide an ENP home-delivered nutrition program for older adults and individuals who are determined eligible by the grantee. The provision of the program will include the following:
 - a. Enrollment of the number of consumers and delivery of the number of meals as indicated in Table A below.
 - b. Provision of home-delivered meals that comply with current Dietary Guidelines for Americans (DGA), offer 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. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - c. Initial in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the initial assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed.
 - d. Annual in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for continued program enrollment. The annual assessment will document the need for service and evaluate function and ability as described in DAS OCP policy memoranda.
 - e. Quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
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.
4. Grantee will provide nutrition education materials to consumers participating in the home-delivered nutrition program on a quarterly basis. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report the nutrition service units in CA-GetCare in the month that the grantee provides the nutrition education. One unit of nutrition education is one set of nutrition education material given to each consumer.

5. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all HDM delivery routes meet state and local food, sanitation, health and safety requirements.
6. 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 possesses a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
7. 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
8. 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 route monitoring documentation and end-of-route HDM temperature logs.
9. Grantee will conduct a route monitoring at least twice per year per route and/or in accordance with DAS OCP policy memorandum. A staff member trained by a food safety manager or a RD may monitor the routes.
10. Grantee will take, document, and keep on file an end-of-route meal temperature every other week for each route, or in accordance with DAS OCP policy memorandum. For end-of-route meal temperatures not meeting temperature requirements, temperatures shall be taken and documented once a week until corrected
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in DAS OCP policy memoranda. The grantee will also provide 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 RD on 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 ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
15. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS-OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

16. Grantee will ensure there is a sufficient number of qualified staff, paid and/or 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.
17. 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:

	FY 20/21
Number of Unduplicated Consumers (UDC)	450
Number of Meals	154,902

2. Grantee will provide nutrition compliance units as indicated in Appendix B.

VIII. Outcome Objectives

1. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
2. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
3. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

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 HDM 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 delivered
 - 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 HSA no later than July 31 each grant year. 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 Services 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

Patrick Garcia
Contract Manager
HSA OCM
email: patrick.garcia@sfgov.org

X. 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	Appendix B, Page 1				
2	Document Date: 10/12/20				
3	HUMAN SERVICES AGENCY BUDGET SUMMARY				
4	BY PROGRAM				
5	Contractor Name:			Term	
6	On Lok Day Services			November 1, 2020 to June 30, 2021	
7	(Check One) New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification <input type="checkbox"/>				
8	If modification, Effective Date of Mod.		No. of Mod.		
9	Program: Nutrition Compliance for ENP- HDM	REVENUE Cost Allocation:			
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
11	Program Term	11/1/2020-06/30/2021			11/1/2020-06/30/2021
12	Expenditures				
13	Nutrition Education				
14	Salaries & Benefits				
15	Operating Expense	\$675	\$449	\$226	\$675
16	Subtotal Direct	\$675	\$449	\$226	\$675
17	Indirect Percentage	5.9%	9.0%		
18	Indirect Expense	\$40	\$40		\$40
19	Total Nutrition Education	\$715	\$489	\$226	\$715
20	Nutrition Counseling				
21	Salaries & Benefits				
22	Operating Expense	\$33,750	\$30,379	\$3,371	\$33,750
23	Subtotal Direct	\$33,750	\$30,379	\$3,371	\$33,750
24	Indirect Percentage	8.1%	9.0%		
25	Indirect Expense	\$2,734	\$2,734		\$2,734
26	Total Nutrition Counseling	\$36,484	\$33,113	\$3,371	\$36,484
27	HACCP Kitchen Monitoring				
28	Salaries & Benefits				
29	Operating Expense	\$2,700	\$2,338	\$362	\$2,700
30	Subtotal Direct	\$2,700	\$2,338	\$362	\$2,700
31	Indirect Percentage	7.8%	9.0%		
32	Indirect Expense	\$210	\$210		\$210
33	Total HACCP Kitchen Monitoring	\$2,910	\$2,548	\$362	\$2,910
34	Site/Route Monitoring				
35	Salaries & Benefits	\$788	\$788		\$788
36	Operating Expense	\$3,713	\$2,099	\$1,614	\$3,713
37	Subtotal Direct	\$4,500	\$2,886	\$1,614	\$4,500
38	Indirect Percentage	5.8%	9.0%		
39	Indirect Expense	\$260	\$260		\$260
40	Total Site/Route Monitoring	\$4,760	\$3,146	\$1,614	\$4,760
41	Menu Planning				
42	Salaries & Benefits				
43	Operating Expense	\$1,500	\$945	\$555	\$1,500
44	Subtotal Direct	\$1,500	\$945	\$555	\$1,500
45	Indirect Percentage	5.7%	9.0%		
46	Indirect Expense	\$85	\$85		\$85
47	Total Menu Planning	\$1,585	\$1,030	\$555	\$1,585
48	HDM Assessments				
49	Salaries & Benefits	\$61,840	\$60,204	\$1,637	\$61,840
50	Operating Expense				
51	Subtotal Direct	\$61,840	\$60,204	\$1,637	\$61,840
52	Indirect Percentage	8.8%	9.0%		
53	Indirect Expense	\$5,418	\$5,418		\$5,418
54	Total HDM Assessments	\$67,259	\$65,622	\$1,637	\$67,259
55	Other Nutrition Compliance				
56	Salaries & Benefits				
57	Operating Expense	\$1,575	\$412	\$1,163	\$1,575
58	Subtotal Direct	\$1,575	\$412	\$1,163	\$1,575
59	Indirect Percentage	2.4%	9.0%		
60	Indirect Expense	\$38	\$38		\$38
61	Total Other Nutrition Compliance	\$1,613	\$450	\$1,163	\$1,613
62	GRAND Total Expenditures	\$115,326	\$106,398	\$8,928	\$115,326
63	HSA Revenues	\$106,398	\$106,398		\$106,398
64					
65					
66	TOTAL HSA REVENUES	\$106,398			\$106,398
67	Other Non-H.S.A.-DAS Revenues	\$8,928			\$8,928
68					
69					
70					
71	TOTAL OTHER REVENUES	\$8,928			\$8,928
72	Full Time Equivalent (FTE)	1.22			
74	Prepared by: Meko Ma	Telephone No.: (628) 208-8546	Date 10/12/20		
75	HSA-CO Review Signature:				
76	HSA #1				Document Date: 10/12/20

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 3								
2	Document Date: 10/12/20								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Nutrition Education Operating Expense Detail								
8	TERM:								
9	November 1, 2020 to June 30, 2021								
10									
11		Year 1	REVENUE Cost Allocation:		TOTAL REVENUE				
		11/1/2020-		Non-HSA-	11/1/2020-				
		06/30/2021	H.S.A.-DAS	DAS	06/30/2021				
12	<u>Expenditure Category</u>								
13	Rental of Property								
14	Utilities(Elec, Water, Gas, Phone, Scavenger)								
15	Office Supplies, Postage								
16	Building Maintenance Supplies and Repair								
17	Printing and Reproduction								
18	Insurance								
19	Staff Training								
20	Staff Travel								
21	Small Equipment (under \$5,000/item)								
22	Rental of Equipment								
23									
24	SUBCONTRACTORS Descriptive Title								
25	Registered Dietician	\$675	\$449	\$226	\$675				
26									
27									
28									
29									
30	OTHER								
31									
32									
33									
34									
35									
36									
37	TOTAL OPERATING EXPENSE	\$675	\$449	\$226	\$675				
38	TOTAL OPERATING EXPENSE	\$675							
39	HSA #3								Document Date: 10/12/20

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 5								
2	Document Date: 10/12								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Nutrition Counseling Operating Expense Detail								
8	TERM:								
9	November 1, 2020 to June 30, 2021								
10									
11		Year 1	REVENUE Cost Allocation:		TOTAL REVENUE				
12	<u>Expenditure Category</u>	<u>11/1/2020-06/30/2021</u>	<u>H.S.A.-DAS</u>	<u>Non-HSA-DAS</u>	<u>11/1/2020-06/30/2021</u>				
13	Rental of Property								
14	Utilities(Elec, Water, Gas, Phone, Scavenger)								
15	Office Supplies, Postage								
16	Building Maintenance Supplies and Repair								
17	Printing and Reproduction								
18	Insurance								
19	Staff Training								
20	Staff Travel								
21	Small Equipment (under \$5,000/item)								
22	Rental of Equipment								
23									
24	SUBCONTRACTORS Descriptive Title								
25	Registered Dietician	\$33,750	\$30,379	\$3,371	\$33,750				
26									
27									
28									
29									
30	OTHER								
31									
32									
33									
34									
35									
36									
37	TOTAL OPERATING EXPENSE	\$33,750	\$30,379	\$3,371	\$33,750				
38	TOTAL OPERATING EXPENSE	\$33,750							
39	HSA #5								Document Date: 10/12

	A	B	C	D	E	F	G	H	I
1									Appendix B, Page
2									Document Date: 10/1
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	HACCP Kitchen Monitoring Operating Expense Detail								
8									
9	TERM:								
10	November 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:		TOTAL REVENUE				
13	<u>Expenditure Category</u>	11/1/2020-06/30/2021	H.S.A.-DAS	Non-HSA-DAS	11/1/2020-06/30/2021				
14	Rental of Property								
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage								
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction								
19	Insurance								
20	Staff Training								
21	Staff Travel								
22	Small Equipment (under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	Registered Dietician	\$2,700	\$2,338	\$362	\$2,700				
27									
28									
29									
30									
31	OTHER								
32									
33									
34									
35									
36									
37									
38	TOTAL OPERATING EXPENSE	\$2,700	\$2,338	\$362	\$2,700				
39	TOTAL OPERATING EXPENSE	\$2,700							
40									
41	HSA #7						Document Date: 10/1		

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 8								
2	Document Date: 10/12/20								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Site or Route Monitoring Salaries & Benefits Detail								
8	TERM:								
9	November 1, 2020 to June 30, 2021								
10						11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		Total Revenue	
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	
13	Nutrition Operations Manager	\$76,190	50%	2%	0.01	\$615	\$615		\$615
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30	TOTALS	\$76,190	50%	2%	1%	\$615	\$615		\$615
31									
32	FRINGE BENEFIT RATE	28%							
33	EMPLOYEE FRINGE BENEFITS	\$21,333				\$172	\$172		\$172
34									
35									
36	TOTAL SALARIES & BENEFITS	\$97,524				\$788	\$788		\$788
37	TOTAL SALARIES & BENEFITS for HAS Program	\$788							
38	HSA #8	Document Date: 10/12/20							

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 9								
2	Document Date: 10/12/20								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Site or Route Monitoring Operating Expense Detail								
8									
9	TERM:								
10	November 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:				TOTAL		
13	<u>Expenditure Category</u>	11/1/2020- 06/30/2021	H.S.A.-DAS	Non-HSA- DAS			REVENUE		
14	Rental of Property						11/1/2020- 06/30/2021		
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage								
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction								
19	Insurance								
20	Staff Training								
21	Staff Travel								
22	Small Equipment (under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	Registered Dietician	\$3,713	\$2,099	\$1,614			\$3,713		
27									
28									
29									
30									
31	OTHER								
32									
33									
34									
35									
36									
37									
38	TOTAL OPERATING EXPENSE	\$3,713	\$2,099	\$1,614			\$3,713		
39	TOTAL OPERATING EXPENSE	\$3,713							
40									
41	HSA #9								Document Date: 10/12/20

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 11								
2	Document Date: 10/12/20								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Menu Planning Operating Expense Detail								
8									
9	TERM:								
10	November 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:				TOTAL		
		11/1/2020- 06/30/2021	H.S.A.-DAS	Non-HSA- DAS			REVENUE		
13	<u>Expenditure Category</u>						11/1/2020- 06/30/2021		
14	Rental of Property								
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage								
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction								
19	Insurance								
20	Staff Training								
21	Staff Travel								
22	Small Equipment (under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	Registered Dietician	\$1,500	\$945	\$555			\$1,500		
27									
28									
29									
30									
31	OTHER								
32									
33									
34									
35									
36									
37									
38	TOTAL OPERATING EXPENSE	\$1,500	\$945	\$555			\$1,500		
39	TOTAL OPERATING EXPENSE	\$1,500							
40									
41	HSA #11								Document Date: 10/12/20

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 12									
2	Document Date: 10/12/20									
3										
4	Program: Nutrition Compliance for ENP- HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Annual & Quarterly HDM Intake and Assessment Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		or HSA Progra	REVENUE Cost Allocation:		Total Revenue		
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Nutrition Program Specialist	\$52,624	100%	83%	83%	\$29,119	\$29,119		\$29,119	
14	Nutrition Operations Manager	\$76,190	100%	38%	38%	\$19,194	\$17,916	\$1,279	\$19,194	
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$128,814	200%	121%	121%	\$48,313	\$47,034	\$1,279	\$48,313	
31										
32	FRINGE BENEFIT RATE	28%								
33	EMPLOYEE FRINGE BENEFITS	\$36,068				\$13,528	\$13,170	\$358	\$13,528	
34										
35										
36	TOTAL SALARIES & BENEFITS	\$164,882				\$61,840	\$60,204	\$1,637	\$61,840	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$61,840								
38	HSA #12	Document Date: 10/12/20								

	A	B	C	D	E	F	G	H	I
1	Appendix B, Page 15								
2	Document Date: 10/12/20								
3									
4	Program: Nutrition Compliance for ENP- HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Other Nutrition Compliance Operating Expense Detail								
8									
9	TERM:								
10	November 1, 2020 to June 30, 2021								
11									
12		Year 1	REVENUE Cost Allocation:		TOTAL REVENUE				
		11/1/2020-		H.S.A.-DAS	Non-HSA-	11/1/2020-			
		06/30/2021		DAS	DAS	06/30/2021			
13	<u>Expenditure Category</u>								
14	Rental of Property								
15	Utilities(Elec, Water, Gas, Phone, Scavenger)								
16	Office Supplies, Postage								
17	Building Maintenance Supplies and Repair								
18	Printing and Reproduction								
19	Insurance								
20	Staff Training								
21	Staff Travel								
22	Small Equipment (over \$500 but under \$5,000/item)								
23	Rental of Equipment								
24									
25	SUBCONTRACTORS Descriptive Title								
26	Registered Dietician	\$1,575		\$412		\$1,163		\$1,575	
27									
28									
29									
30									
31	OTHER								
32									
33									
34									
35									
36									
37									
38	TOTAL OPERATING EXPENSE	\$1,575		\$412		\$1,163		\$1,575	
39	TOTAL OPERATING EXPENSE	\$1,575							
40									
41	HSA #15								Document Date: 10/12/20

Appendix A– Services to be Provided
Self Help for the Elderly
Home-Delivered 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 home-delivered nutrition program for older adults in the City and County of San Francisco. A home-delivered nutrition program includes the provision of meals meeting nutritional standards, nutrition education, and nutrition risk screening. The program also aims to reduce social isolation and help older adults remain independent and in their communities by promoting better health through nutrition and serving as an access point for other home and community-based services.

II. Definitions

Grantee	Self Help for the Elderly
Adult with a Disability	A person 18-59 years of age living with a disability.
Annual Comprehensive Assessment	An assessment completed by the grantee at least once per year that evaluates the need for continued service. The grantee conducts the annual assessment in the home of the consumer and documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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.
CDA	California Department of Aging.
CRFC	California Retail Food Code establishes uniform health and sanitation standards for retail food facilities for regulation by the State Department of Public Health, and requires local health agencies to enforce these provisions.
DAS	Department of Disability and Aging Services.

<p>DETERMINE Your Nutritional Health Checklist / DETERMINE Checklist</p>	<p>A nutrition risk 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.</p>
<p>Dietary Guidelines for Americans (DGA)</p>	<p>Evidence-based food and beverage recommendations for Americans ages two (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 (HHS) and the U.S. Department of Agriculture (USDA). https://health.gov/dietaryguidelines/</p>
<p>Dietary Reference Intakes (DRI)</p>	<p>Nutrient reference values published by the Institute of Medicine (IOM) that represent the most current scientific knowledge on nutrient needs of healthy populations. https://www.nal.usda.gov/fnic/dietary-reference-intakes</p>
<p>Disability</p>	<p>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.</p>
<p>ENP</p>	<p>Elderly Nutrition Program. A program, which provides nutrition services, as authorized by the Older Americans Act of 1965, as amended, and in accordance with Title 22 regulations.</p>
<p>ENP - Home-Delivered Nutrition Program</p>	<p>A program that provides nutrition services to frail, homebound, or isolated individuals who are age 60 and over, and in some cases, their caregivers, spouses, and/or persons with disabilities. Services include, but are not limited to, nutrition education and nutrition risk screening, and healthy meals delivered to the consumers' home. The program requires an initial assessment, an annual comprehensive assessment, and quarterly re-assessment of the consumer. The program gives all participants the opportunity to contribute to the meal cost.</p>

ENP Menu Requirements	Meals provided through ENP shall comply with the current Dietary Guidelines for Americans (DGA) and provide to each participant following: (a) A minimum of one-third of the Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board, Institute of Medicine, National Academy of Sciences, if the grantee provides one meal per day; (b) At least two-thirds of the DRIs for the provision of 2 meals per day; (c) At least 100% of the DRIs if the grantee provides 3 meals per day; and (d) Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one-third of the DRIs.
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 Points. A prevention-based food safety system focusing on time and temperature control at different crucial food service system points, monitoring and documenting practices, and taking corrective actions when failure to meet critical limits is detected.
Home-Delivered Meals (HDM)	Meals that are delivered to consumers and adhere to the current Dietary Guidelines for Americans (DGA), provide a minimum of one-third of the Dietary Reference Intakes (DRIs), meet state and local food safety and sanitation requirements, and are appealing to older adults. The procurement, preparation, service, and delivery of meals are included as part of the meal provision by the grantee.
Initial Assessment	A comprehensive assessment conducted by the grantee in a consumer's home to determine their eligibility for program enrollment within two (2) weeks of starting meal service. The grantee documents the information obtained through the assessment in CA-GetCare. The assessment includes functional ability questions, a nutrition risk screening, food security screening, and a well-being and social isolation screening.
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 participation is not means tested. Consumers self-report income status.
Menu Analysis	An evaluation conducted by a registered dietitian (RD) that includes a nutrient analysis of the meals offered through the nutrition program. The purpose of the nutrient analysis is to determine if daily meals and weekly menus comply with the regulatory nutritional standards. At a minimum, the analysis will include calories, protein, fat, saturated fat, fiber, calcium, magnesium, sodium, vitamin A, vitamin C, vitamin D, and vitamin B12. When utilizing a computerized menu analysis, the grantee will analyze meals on a weekly basis for a minimum of two (2) weeks. Meals shall meet no less than one-third of the DRI for all calculated nutrients daily, or as specified in the DAS OCP policy memorandum.
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 Diet	A menu approved by a Registered Dietitian (RD) that meets the current DGA and adjusts the typical home delivered meal components to control the intake of certain foods, food textures, and/or nutrients to meet the dietary needs of individuals. Examples include, but are not limited to, low sodium diet, diabetic diet, and mechanical soft diets.
Nutrition Counseling	Provision of individualized advice and guidance to consumers who are at nutritional risk because of their health or nutritional history, dietary intake, medications use, or chronic illnesses. A registered dietitian provides the advice and guidance in accordance with Sections 2585 and 2586, Business and Professions Code and offers options and methods for improving nutritional status.

Nutrition Education	Informing consumers about current facts and information, which will promote improved food selection, eating habits, nutrition, health promotion, and disease prevention practices. The grantee may use printed material as the sole nutrition education component for home-delivered meal participants. Dietetic students, interns, or technicians may provide nutrition education when a RD has provided input, reviewed, and approved the content of nutrition education. (Title 22 CCR, s 7638.11)
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.
OCP	Office of Community Partnerships.
OCM	Office of Contract Management, San Francisco Human Services Agency.
Older Adult	Person who is 60 years or older, used interchangeably with “senior”.
Quarterly Reassessment	A reassessment that may be conducted by trained HDM program drivers or volunteers in person or by phone to determine a consumer’s eligibility for continued services. The grantee must conduct quarterly reassessments in the home of a consumer at least every six (6) months.
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. A Registered Dietitian shall be covered by professional liability insurance either individually (if a consultant) or through grantee.
Senior	Person who is 60 years or older, used interchangeably with “older adult”.
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>).

Title 22 Regulations	Refers to Barclay’s official California Code of Regulations. Title 22 Social Security, Division 1.8. California Department of Aging. Chapter 4 (1) Title III Programs – program and service provider requirements. Article 5. Title III C- Elderly Nutrition Program.
Unduplicated Consumer (UDC)	An individual who receives home-delivered meals provided by the grantee, and the grantee reflects their 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 who are frail and homebound due to illness or disability, or are otherwise isolated, lack a support network, and have no safe, healthy alternative for meals.

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

1. Low income
2. Limited or No English Speaking Proficiency
3. Minority populations
4. Frail
5. LGBTQ+

IV. Eligibility for Services

To participate in the ENP-home delivered meal program, an individual must meet one of the following criteria:

1. An older adult who is homebound due to illness or disability, or is otherwise isolated.
2. A spouse or domestic partner of an older adult enrolled in the program if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.
3. An individual with a disability who resides at home with an enrolled older adult, if an assessment by the grantee’s social worker or assessment staff concludes that it is in the best interest of the enrolled older adult.

Grantee shall give priority to an eligible older adult.

V. Location and Time of Services

The grantee will provide an ENP home-delivered nutrition program in the City and County of San Francisco. The grantee determines the service and delivery times for the home-delivered 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.

Policies and procedures shall also include initial, annual, and quarterly reassessment guidelines.

2. Grantee will provide an ENP home-delivered nutrition program for older adults and individuals who are determined eligible by the grantee. The provision of the program will include the following:
 - a. Enrollment of the number of consumers and delivery of the number of meals as indicated in Table A below.
 - b. Provision of home-delivered meals that comply with current Dietary Guidelines for Americans (DGA), offer 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. Meals offered may be hot, chilled, or frozen, and be regular or modified meals as approved by DAS OCP.
 - c. Initial in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for program enrollment within two weeks of starting meal service. During the initial assessment, the grantee will provide participants with a welcome packet and program information as described in DAS OCP policy memoranda. The welcome packet will include at minimum, the following information: a meal delivery schedule, sample menu, written instructions for handling and reheating meals, voluntary contribution policy and collection procedures, directions on how to request a change in meal delivery, grievance policy, and information on how to request assistance, if needed.
 - d. Annual in-home comprehensive assessments by qualified staff to evaluate a consumer's eligibility for continued program enrollment. The annual assessment will document the need for service and evaluate function and ability as described in DAS OCP policy memoranda.
 - e. Quarterly reassessments to determine a consumer's eligibility for continued program enrollment. The grantee shall conduct quarterly reassessments as described in DAS OCP policy memoranda. The grantee must conduct at least one quarterly assessment in the home of the consumer. A trained HDM program driver or volunteer may complete a quarterly reassessment in person or by phone.
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.
4. Grantee will provide nutrition education materials to consumers participating in the home-delivered nutrition program on a quarterly basis. The total units of nutrition education will be, at minimum, as shown on the DAS OCP approved site chart. The grantee will report the nutrition service units in CA-GetCare in the month that the grantee provides the nutrition education. One unit of nutrition education is one set of nutrition education material given to each consumer.

5. Grantee will ensure that the procurement, preparation, service, and delivery of meals at the central kitchen and/or caterer kitchen and all HDM delivery routes meet state and local food, sanitation, health and safety requirements.
6. 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 possesses a food safety manager certification and has the required qualifications as described in Title 22 Regulations and DAS OCP policy memoranda.
7. 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
8. 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 route monitoring documentation and end-of-route HDM temperature logs.
9. Grantee will conduct a route monitoring at least twice per year per route and/or in accordance with DAS OCP policy memorandum. A staff member trained by a food safety manager or a RD may monitor the routes.
10. Grantee will take, document, and keep on file an end-of-route meal temperature every other week for each route, or in accordance with DAS OCP policy memorandum. For end-of-route meal temperatures not meeting temperature requirements, temperatures shall be taken and documented once a week until corrected
11. Grantee will provide quarterly in-service trainings for nutrition program staff (e.g. food service and delivery workers) as described in DAS OCP policy memoranda. The grantee will also provide 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 RD on 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 ensure the suggested voluntary contribution per meal complies with DAS OCP policy memoranda including an approval by the grantee's board of directors.
15. Grantee will administer an annual consumer satisfaction survey using a survey tool approved by DAS OCP. The grantee will share the survey results with DAS OCP by March 15 each grant year or on a mutually agreed upon date between OCP and the grantee. At minimum, the completed number of surveys shall be a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

16. Grantee will ensure there is a sufficient number of qualified staff, paid and/or 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.
17. 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:

	FY 20/21
Number of Unduplicated Consumers (UDC)	573
Number of Meals	84,000

2. Grantee will provide nutrition compliance units as indicated in Appendix B.

VIII. Outcome Objectives

1. Consumers feel less worried about getting enough food to meet their needs. Target: 85%.
2. Consumers rate the quality of meals they received as excellent or good. Target: 85%.
3. Consumers report increased consumption of fruits, vegetables, and/or whole grains. Target: 75%.

Based on a consumer survey and a sample size of at least forty percent (40%) of the enrolled unduplicated consumer.

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 HDM 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 delivered
 - 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 HSA no later than July 31 each grant year. 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 Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

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

Tiffany Kearney
Lead Nutritionist
DAS OCP
email: Tiffany.Kearney@SFgov.org

and

Tahir Shaikh
Contract Manager
HSA OCM
email: Tahir.Shaikh@SFgov.org

X. 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	Appendix B, Page 1				
2	Document Date: 10/19/2020				
3	HUMAN SERVICES AGENCY BUDGET SUMMARY				
4	BY PROGRAM				
5	Contractor Name:			Term	
6	Self-Help for the Elderly			November 1, 2020 to June 30, 2021	
7	(Check One) New <input type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>				
8	If modification, Effective Date of Mod.		No. of Mod.		
9	Program: Nutrition Compliance for ENP- Indicate HDM	REVENUE Cost Allocation:			
10	Budget Reference Page No.(s)	Year 1	H.S.A.-DAS	Non-HSA-DAS	Total Revenue
11	Program Term	11/1/2020-06/30/2021			11/1/2020-06/30/2021
12	Expenditures				
13	Nutrition Education				
14	Salaries & Benefits	\$350	\$141	\$209	\$350
15	Operating Expense				
16	Subtotal Direct	\$350	\$141	\$209	\$350
17	Indirect Percentage	10.0%	10.0%	10.0%	
18	Indirect Expense	\$35	\$14	\$21	
19	Total Nutrition Education	\$385	\$154.61	\$230	\$350
20	Nutrition Counseling				
21	Salaries & Benefits				
22	Operating Expense				
23	Subtotal Direct				
24	Indirect Percentage				
25	Indirect Expense				
26	Total Nutrition Counseling				
27	HACCP Kitchen Monitoring				
28	Salaries & Benefits	\$2,188	\$1,669	\$519	\$2,188
29	Operating Expense				
30	Subtotal Direct	\$2,188	\$1,669	\$519	\$2,188
31	Indirect Percentage	10.0%	10.0%	10.0%	
32	Indirect Expense	\$219	\$167	\$52	\$219
33	Total HACCP Kitchen Monitoring	\$2,406	\$1,835	\$571	\$2,406
34	Site/Route Monitoring				
35	Salaries & Benefits	\$10,676	\$10,314	\$362	\$10,676
36	Operating Expense				
37	Subtotal Direct	\$10,676	\$10,314	\$362	\$10,676
38	Indirect Percentage	10.0%	10.0%	10.0%	
39	Indirect Expense	\$1,068	\$1,031	\$36	\$1,068
40	Total Site/Route Monitoring	\$11,743	\$11,345	\$398	\$11,743
41	Menu Planning				
42	Salaries & Benefits	\$875	\$595	\$280	\$875
43	Operating Expense				
44	Subtotal Direct	\$875	\$595	\$280	\$875
45	Indirect Percentage	10.0%	10.0%	10.0%	
46	Indirect Expense	\$88	\$59	\$28	\$88
47	Total Menu Planning	\$963	\$654	\$308	\$963
48	HDM Assessments				
49	Salaries & Benefits	\$83,239	\$81,698	\$1,541	\$83,239
50	Operating Expense				
51	Subtotal Direct	\$83,239	\$81,698	\$1,541	\$83,239
52	Indirect Percentage	10.0%	10.0%	10.0%	
53	Indirect Expense	\$8,324	\$8,170	\$154	\$8,324
54	Total HDM Assessments	\$91,562	\$89,867	\$1,695	\$91,562
55	Other Nutrition Compliance				
56	Salaries & Benefits	\$453	\$211	\$241	\$453
57	Operating Expense				
58	Subtotal Direct	\$453	\$211	\$241	\$453
59	Indirect Percentage	10.0%	10.0%	10.0%	
60	Indirect Expense	\$45	\$21	\$24	\$45
61	Total Other Nutrition Compliance	\$498	\$232.50	\$265	\$498
62	GRAND Total Expenditures	\$107,557	\$104,089	\$3,468	\$107,522
63	HSA Revenues				
64					
65					
66	TOTAL HSA REVENUES				
67	Other Non-H.S.A.-DAS Revenues				
68					
69					
70					
71	TOTAL OTHER REVENUES				
72	Full Time Equivalent (FTE)				
74	Prepared by:	Telephone No.:		Date	
75	HSA-CO Review Signature: _____				
76	HSA #1				Document Date: 10/19/2021

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1	Appendix B, Page 2									
2	Document Date: 10/19/2020									
3										
4	Program: Nutrition Compliance for ENP- Indicate HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Nutrition Education Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			
11							11/1/2020-06/30/2021			
12		Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation:		Total Revenue	
	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	RD	\$70,000	100%	100%	0%	\$280	\$112	\$168	\$280	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$70,000	100%	100%	0%	\$280	\$112	\$168	\$280	
31										
32	FRINGE BENEFIT RATE	25%								
33	EMPLOYEE FRINGE BENEFITS	\$17,500				\$70	\$28	\$42	\$70	
34										
35										
36	TOTAL SALARIES & BENEFITS	\$87,500				\$350	\$141	\$209	\$350	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	#REF!								
38	HSA #2									

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	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 6									
2	Document Date: 10/19/2020									
3										
4	Program: Nutrition Compliance for ENP- Indicate HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	HACCP Kitchen Monitoring Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10						11/1/2020-06/30/2021				11/1/2020-06/30/2021
11			Agency Totals		Program		Program	REVENUE Cost Allocation:		Revenue
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	RD-Tiffany	\$70,000	100%	100%	3%	\$1,750	\$1,335	\$415		\$1,750
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$70,000	1.00	100%	3%	\$1,750	\$1,335	\$415		\$1,750
31										
32	FRINGE BENEFIT RATE	25%								
33	EMPLOYEE FRINGE BENEFITS	\$17,500				\$438	\$334	\$104		\$438
34										
35										
36	TOTAL SALARIES & BENEFITS	\$87,500				\$2,188	\$1,669	\$519		\$2,188
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$2,188								
38	HSA #6									

Document Date: 10/19/2020

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 8									
2	Document Date: 10/19/2020									
3										
4	Program: Nutrition Compliance for ENP- Indicate HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Site or Route Monitoring Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		For HSA Program		REVENUE Cost Allocation:		Total Revenue	
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Contracts Manager-Fred	\$55,100	100%	100%	16%	\$8,541	\$8,251	\$289	\$8,541	
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$55,100	100%	100%	16%	\$8,541	\$8,251	\$289	\$8,541	
31										
32	FRINGE BENEFIT RATE	25%								
33	EMPLOYEE FRINGE BENEFITS	\$13,775				\$2,135	\$2,063	\$72	\$2,135	
34										
35										
36	TOTAL SALARIES & BENEFITS	\$68,875				\$10,676	\$10,314	\$362	\$10,676	
37	TOTAL SALARIES & BENEFITS for HAS Program	\$10,676								
38	HSA #8	Document Date: 10/19/2020								

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Pa									
2	Document Date									
3										
4	Program: Nutrition Compliance for ENP- Indicate HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Menu Planning Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		For HSA Program	REVENUE Cost Allocation		Total Revenue		
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	RD-Tiffany	\$70,000	100%	100%	1%	\$700	\$476	\$224	\$700	
14	Employee B									
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$70,000	100%	100%	1%	\$700	\$476	\$224	\$700	
31										
32	FRINGE BENEFIT RATE	25%								
33	EMPLOYEE FRINGE BENEFITS	\$17,500				\$175	\$119	\$56	\$175	
34										
35										
36	TOTAL SALARIES & BENEFITS	\$87,500				\$875	\$595	\$280	\$875	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$875								

	A	B	C	D	E	F	G	H	I	
1	Appendix B, Page 12									
2	Document Date: 10/19/2020									
3										
4	Program: Nutrition Compliance for ENP- Indicate HDM									
5	(Same as Line 9 on HSA #1)									
6										
7	Annual & Quarterly HDM Intake and Assessment Salaries & Benefits Detail									
8	TERM:									
9	November 1, 2020 to June 30, 2021									
10							11/1/2020-06/30/2021			11/1/2020-06/30/2021
11	Agency Totals		For HSA Program		or HSA Progra	REVENUE Cost Allocation:		Total Revenue		
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS		
13	Comm Outreach Worker-Thomas	\$44,824	100%	100%	51%	\$22,860	\$22,412	\$448	\$22,860	
14	HDM Coordinator-Stephen	\$47,216	100%	100%	51%	\$24,080	\$23,608	\$472	\$24,080	
15	Contracts Mgr-Fred	\$55,100	100%	100%	26%	\$14,051	\$13,775	\$276	\$14,051	
16	RD-Tiffany	\$70,000	100%	100%	8%	\$5,600	\$5,563	\$37	\$5,600	
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30	TOTALS	\$217,140	400%	400%	136%	\$66,591	\$65,358	\$1,233	\$66,591	
31										
32	FRINGE BENEFIT RATE	25%								
33	EMPLOYEE FRINGE BENEFITS	\$54,285				\$16,648	\$16,340	\$308	\$16,648	
34										
35										
36	TOTAL SALARIES & BENEFITS	\$271,425				\$83,239	\$81,698	\$1,541	\$83,239	
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$83,239								
38	HSA #12 Document Date: 10/19/2020									

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1	Appendix B, Page 14								
2	Document Date: 10/19/2020								
3									
4	Program: Nutrition Compliance for ENP- Indicate HDM								
5	(Same as Line 9 on HSA #1)								
6									
7	Other Nutrition Compliance Salaries & Benefits Detail								
8	TERM:								
9	November 1, 2020 to June 30, 2021								
10						11/1/2020-06/30/2021			11/1/2020-06/30/2021
11			Agency Totals		For HSA Program	For HSA Program	REVENUE Cost Allocation:		Total Revenue
12	POSITION TITLE	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	H.S.A.-DAS	Non-HSA-DAS	
13	Contracts Mgr-Fred	\$55,100	100%	100%	0%	\$220	\$112	\$108	\$220
14	HDM Coordinator-Stephen	\$47,216	100%	100%	0%	\$142	\$57	\$85	\$142
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30	TOTALS	\$102,316	200%	200%	1%	\$362	\$169	\$193	\$362
31									
32	FRINGE BENEFIT RATE	25%							
33	EMPLOYEE FRINGE BENEFITS	\$25,579				\$91	\$42	\$48	\$91
34									
35									
36	TOTAL SALARIES & BENEFITS	\$127,895				\$453	\$211	\$241	\$453
37	TOTAL SALARIES & BENEFITS for H.S.A Program	\$453							
38	HSA #14	Document Date: 10/19/2020							