



Mark Farrell, Mayor

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

Trent Rhorer, Executive Director

MEMORANDUM

TO: AGING & ADULT SERVICES COMMISSION

THROUGH: SHIREEN MCSPADDEN, EXECUTIVE DIRECTOR

FROM: JILL NIELSEN, DEPUTY DIRECTOR
 JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS *JKJ*

DATE: MAY 2, 2018

SUBJECT: CONTRACT RENEWAL: **MERCED RESIDENTIAL CARE (FOR PROFIT)** TO PROVIDE EMERGENCY BED PLACEMENT SERVICES

CONTRACT TERM:	<u>Current</u> 7/1/16-6/30/18	<u>Renewal</u> 7/1/18-6/30/19	<u>Contingency</u>	<u>Total</u>
CONTRACT AMOUNT:	\$192,000	\$96,000	\$9,600	\$105,600
ANNUAL AMOUNT:	<u>FY 18-19</u> \$96,000			
FUNDING:	<u>County</u> \$96,000	<u>State</u>	<u>Federal</u>	<u>Contingency</u> \$9,600
PERCENTAGE:	100%			100%

The Department of Aging and Adult Services (DAAS) requests authorization to renew the existing contract with Merced Residential Care for the period of July 1, 2018 to June 30, 2019 in the amount of \$96,000 plus a 10% contingency for a total amount not to exceed \$105,600. The purpose of the contract is to promote the safety and well-being of APS clients through the provision of emergency placement services and supportive personal care services.

Background

The DAAS division of Adult Protective Services (APS) identified a need for a care facility that is able to provide individual’s needs and emergency placement services to APS clients: elders aged 65 or older and adults with disabilities over the age of 18 who are experiencing abuse, neglect, exploitation, or self-neglect. The emergency placement services will provide access to a safe respite bed, meals, and supportive personal care services on a 24-hour basis. The care facility is required to be experienced in providing services for people with cognitive impairment, developmental disabilities, and behavioral health needs.

The contractor has provided personalized care for the elderly and disabled for over 16 years. Their program is designed to meet the long-term care needs of the elderly and disabled who need assistance in their daily lives. Licensed by California's Department of Community Care Licensing, the contractor's staff is experienced with a variety of client needs including, dementia, Alzheimer's disease, and hospice care.

Services to be Provided

The contractor will provide the following services during the term of this grant:

- 24-hour individualized care and supervision to APS referred clients
- Round-the-clock-access to facilitate emergency placements from APS and accept same day placement requests within 4 hours
- Transportation for clients to medical appointments and provide wellness updates coordinated with physicians and the clients' families
- Personal care assistance, including bathing, toileting, feeding, dressing, grooming, and medication management and assistance as needed by the APS client
- Three meals daily to clients, daily housekeeping, and regular laundry and linen service
- Access to a common area for socialization, exercise, and other activities (such as games, movies, music, etc.)

Site Locations and Hours

Services are provided on a 24/7 basis at the following locations:

Merced Broad 257-259 Broad Street San Francisco, CA 94112 (415) 585-61112	Merced Hampshire 1420 Hampshire Street San Francisco, CA 94110 (415) 285-7660	Merced Girard 129 Girard Street San Francisco, CA 94134 (415) 467-8900
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Performance

The Contractor has submitted invoices and reports in a timely manner. All reports submitted are accurate and supporting invoice documentation has been verified. Ongoing program and fiscal monitoring has shown that the contractor continues to meet their contract goals and objectives.

Selection

Request for Proposals #666 was issued in October 2015. There were no responsive bidders to the solicitation. Therefore, the contractor was selected under Section 21.6 of the San Francisco Administrative Code, titled "When No Valid Offers are Received; Multiple Low Offers."

Funding

Funding for these services will be provided through County General Funds.

ATTACHMENTS

Appendix A – Services to be Provided

Appendix B – Calculation of Charges

Appendix A - Services to be Provided

Merced Residential Care

Emergency Bed Placement Effective July 1, 2018 to June 30, 2019

I. Purpose of Contract

The purpose of the contract is to promote the safety and well-being of APS clients through the provision of emergency placement services and supportive personal care services available on a 24-hour basis.

II. Definitions

ADL	Activities of Daily Living – Term used to refer to self-care activities such as grooming and bathing.
APS	Adult Protective Services
CARBON	Contracts Administration, Reporting and Billing On Line System
City	City and County of San Francisco
Dementia	An umbrella term to describe a decline in a mental condition.
Department of Community Care Licensing	State regulatory agency that licenses both day and residential care facilities for children and adults.
DAAS	Department of Aging and Adult Services
Disability	A condition attributable to mental or physical impairment, or a combination of mental and physical impairments including hearing and visual impairments, that results in substantial functional limitations in one or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment.
Frail	An older individual is determined to be functionally impaired because the individual either: (a) Is unable to perform at least two activities of daily living, including bathing, toileting, dressing, feeding, breathing, transferring and mobility and associated tasks, 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 older individual behaves in a manner that poses a serious health or safety hazard to the individual or to others.
HSA	Human Services Agency of the City and County of San Francisco

Low Income	Having income at or below 300% of the federal poverty line defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services.
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.
RCFE	Residential Care Facility for the Elderly
Senior	Person who is 65 years of age or older
Unit of Service	For the purposes of the contract, this is defined as one 24 hour period for each referred APS client.
Younger Adult with Disability	Person aged 18 to 64 living with a disability

III. Target Population

This contract will serve elders 65 years of age or older and adults with physical and/or mental disabilities between 18 and 64 years of age.

IV. Description of Services

The Contractor shall provide a safe and secure placement for Adult Protective Services (APS) clients. The placement will be consistent with licensing requirements set by California’s Community Care Licensing Division and will include shelter, food, and assistance with personal care and Activities of Daily Living, as needed, for up to 60 days. The Contractor shall ensure the following services and conditions during the term of this grant:

- Ensure that the APS program will have access to placement and care to at least two clients, during any given month
- For each referred client, provide a private bed within a licensed care facility
- Provide accessible facilities for bathing and toileting (private and shared)
- Provide the following enhanced services:
 - o Three meals daily
 - o Regular housekeeping
 - o Laundry service at least weekly
- Caregiving services: Assistance with bathing dressing, grooming, toileting, and medication reminders as needed by the APS client.
- Provide round-the-clock access to facilitate emergency placements from APS

- Accept same day placement requests within 4 hours
- Meet licensing requirements for managing the care of adults and elders with dementia as specified in the California Code of Regulations, Title 22, Section 87705
- Provide each referred APS client a private space to store a reasonable amount of personal items.
- Provide tailored services to meet the needs of referred APS clients with special health or dementia needs.
- Required staffing shall include 24-hour stay-awake staff to monitor referred clients with special health or dementia needs and to ensure round the clock safety.
- The Contractor will maintain a connection with an established medical provider to facilitate medical reviews and medication orders, as needed.

V. Location and Time of Services

Merced Residential Care operates out of three care facilities at the following locations: (1) 257-259 Broad Street, San Francisco, CA 94112; (2) 1420 Hampshire Street, San Francisco, CA 94110; and (3) 129 Girard Street, San Francisco, CA 94134. The care facilities are open on a 24-hour basis.

VI. Service Objectives

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

1. 90% of referred clients will be accepted by the Contractor.
2. 90% of referred clients will receive a functional assessment within 48 hours of placement.
3. 90% of face-to-face meetings with the designated APS Worker will occur within 10 calendar days of the initial placement.
4. 100% of clients that are assessed to have cognitive impairment will receive specialized dementia care in accordance with state licensing regulations.
5. 90% of care plan updates will be reported to the designated APS Worker within 2 calendar days by either phone or email.
6. 90% of client Grievances and Critical Incidents will be reported to the designated APS Worker and the APS Program Director within 2 calendar days with attached Quality Improvement and Response Plan.

VII. Outcome Objectives

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

1. Through the emergency placement process, at least 12 APS clients will be diverted from unnecessary hospitalization or homelessness.

2. 80% of APS Workers surveyed about their experience working with the Contractor in regards to the care of referred APS clients, will report that they feel that the placement provided by the Contractor helped to promote the safety and well-being of these same clients.
3. 80% of referred clients will receive effective discharge planning from the placement into a safe long-term care situation, either in the community or in a residential facility.

VIII. Reporting Requirements

A. Contractor will provide a **monthly** report of activities, referencing the tasks as described in Section VI & VII - Service and Outcome Objectives. Grantee will enter the monthly metrics in the CARBON database by the 15th of the following month.

1. Track the units of service that are utilized each month.
2. Track the number of placement beds that were provided through the above mentioned units of service.
3. Report the total number of all clients that were referred by APS.
4. Report the number of all clients that were referred by APS and refused by the contractor.
5. Report the number of all clients that were referred by APS and accepted by the contractor.
6. Report the number of clients that were diverted from homelessness through the acceptance.
7. Report the number of clients that were diverted from an unnecessary hospitalization as a result of the acceptance.
8. Report the reasons for denial for each referred APS client.
9. Report the number of client Grievances that were filed during the reporting period.
10. Report the number of Critical Incidents that were filed during the reporting period.
11. Report the contractor response and quality improvement plan to the above mentioned Grievances and Critical Incidents.
12. Report the number of clients that were referred by APS and presented with signs of cognitive impairment or dementia.
13. Report the number of clients that were discharged from the contractor's site.
14. Of the clients reported in number 13, how many were discharged to a safe, long-term care situation?

15. Of the clients reported in number 13, how many left the facility against the advice of the Contractor and/or the designated APS Worker?
- B. Contractor will provide a quarterly report of activities, referencing the tasks as described in Section VI & VII - Service and Outcome Objectives. Contractor will enter the quarterly metrics in the CARBON database by the 15th of the month following the end of the quarter.
 - C. Contractor will provide an **annual** report summarizing the contract activities, referencing the tasks as described in Section VI & VII- Service and Outcome Objectives. This report will also include accomplishments and challenges encountered by the Contractor. Contractor will enter the annual metrics in the CARBON database by the 15th of the month following the end of the program year.
 - D. Contractor will provide Ad Hoc reports as required by the Department.
 - E. For assistance with reporting requirements or submission of reports, contact:

Akiles Ceron, Program Director
akiles.ceron@sfgov.org
DAAS, APS
1650 Mission Street, 5/F
San Francisco, CA 94103

Rocio Duenas, Contract Manager
Rocio.Duenas@sfgov.org
Human Services Agency
PO Box 7988
San Francisco, CA 94120

IX. Monitoring Activities

- A. Program Monitoring: Program monitoring will include review of client eligibility, and back-up documentation for reporting progress towards meeting service and outcome objectives.
- B. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, the general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and MOUs, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

Appendix B - Calculation of Charges

I. Contractor will bill for each bed according to the following rate schedule:

\$131.50 per day for an occupied bed

\$98.63 per day for a bed that is “held,” but not occupied

Contractor shall have a total of two (2) beds available at all times per month.

On an emergency basis, contractor will provide a private room for an occupant up to seven (7) days.

II. Invoices submitted for payment will include status reports detailing the executed work, location, number of hours and the service(s) provided. Program Manager verification and approval of the work detailed in the status reports and the invoices is required for payment.

III. Total contract amount is not to exceed \$96,000 for the term 7/1/18-6/30/19.