



London Breed, Mayor

Department of Human Services
Department of Aging and Adult Services

Trent Rhorer, Executive Director

MEMORANDUM

TO: AGING & ADULT SERVICES COMMISSION

THROUGH: SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

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

DATE: FEBRUARY 15, 2019

SUBJECT: GRANT MODIFICATION: **UNIVERSITY OF CALIFORNIA, SAN FRANCISCO (UCSF)** (NON-PROFIT) TO CONDUCT PROGRAM EVALUATION FOR SUPPORT AT HOME

GRANT TERM:	<u>Current</u>	<u>Modification</u>	<u>Revised</u>	<u>Contingency</u>	<u>Total</u>
	9/1/17- 6/30/19	7/1/18- 6/30/20	9/1/17- 6/30/20		9/1/17- 6/30/20
TOTAL AMOUNT:	\$200,000	\$200,000	\$400,000	\$40,000	\$440,000
ANNUAL AMOUNT	<u>FY 17/18</u>	<u>FY 18/19</u>	<u>FY 19/20</u>		
	\$100,000	\$150,000	\$150,000		
Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
MODIFICATION FUNDING:	\$200,000	\$0	\$0	\$20,000	\$220,000
PERCENTAGE:	100%	0%	0%		100%

The Department of Aging and Adult Services requests authorization to modify the existing grant agreement with University of California San Francisco (UCSF) for the time period of July 1, 2018 through June 30, 2020, in the additional amount of \$200,000 plus a 10% contingency for a total amount not to exceed of \$440,000. The purpose of this modification is to extend and enhance the program evaluation for Support at Home (S@H), which is a home care voucher pilot program administered by Institute on Aging (IOA) and funded by DAAS.

Background

The Support at Home (S@H) program targets individuals who are typically described as individuals with “upper poor income,” up to 100% of the area median income (AMI), who need financial support for home care services in order to remain safely living in the community. This population often forgoes needed home care services or sacrifices quality of life due to the lack of informal support systems and/or inability to afford private pay options. Supporting home care costs for this group could result in measurable quality of life benefits.

Grant Modification

This grant modification extends the pilot program’s evaluation for an additional 12 months, providing additional reporting time period. The extended program evaluation period provides a reporting cycle of FY17/18, FY18/19, and an additional report for FY19/20. In collaboration with the IOA’s \$4,550,000 budget modified program, UCSF conducts program evaluation for the S@H Program. Additionally, funding in FY18/19 and FY19/20, will be used to provide incentives for the comparison group. Unlike program participants, those recruited for the comparison group do not benefit from program services and are not required to participate with the program evaluation. The incentives and staff time for survey follow up will create a more robust comparison group with outcomes that can be better compared between program participants and the comparison group.

Services to be Provided

The program evaluation will use S@H data obtained during the revised three (3) year contract period with Institute on Aging (IOA) from May 2017 to April 2020 as well as data from a comparison group. Evaluation approach will measure S@H goals based on established research methodologies. Grantee will identify indicators to measure program success, such as improvements to quality of life, economic security, consumer empowerment, adherence to health care, health outcomes, and the prevention or delay of institutionalization. Research questions will evaluate program impact, including quality of life and implementation measures. Annual reports are due at the end of each fiscal year (June 2018 and June 2019) to review preliminary trends and cost benefit analysis, and the final report is due at the end of the extended pilot term (June 2020). The final report will include a cost-benefit analysis that evaluates the strengths and challenges of the program model.

Performance

Program monitoring activities for FY 1718 were complete and grantee is compliant.

Selection

Grantee was selected through RFP (Request for Proposals) #741, which was issued in May 2017.

Funding

The grant will funded through City and County funds.

ATTACHMENTS

Appendix A1 – Services to be Provided

Appendix B1 – Budget

Appendix A1 – Services to be Provided

Effective September 1, 2017 to June 30, 2020

Modified: January 7, 2019

University of California, San Francisco
Philip R. Lee Institute for Health Policy Studies

Program Evaluation for Support at Home

I. Purpose of Grant

The San Francisco Department of Aging and Adult Services (DAAS), under Human Services Agency, is modifying the contract with the Philip R. Lee Institute for Health Policy Studies, under University of California in San Francisco, to conduct program evaluation for Support at Home (S@H), which is a home care voucher pilot program administered by Institute on Aging (IOA) and also funded by DAAS. The goal of the evaluation is to analyze the program impact on quality of life outcomes for the target population. The target population consists of older adults and adults with disabilities who are typically described as individuals with “upper poor income,” up to 100% of the area median income (AMI), who cannot afford home care services. This population often foregoes needed home care services or sacrifices quality of life due to the lack of informal support systems and/or inability to afford private pay options.

The program evaluation focuses on both program and client outcomes as well as the efficacy and value of this home care voucher model. The final evaluation report includes policy implications and provides recommendations to inform future programming, specifically for individuals for whom financial assistance for home care costs would make a significant impact. Conducted in partnership with DAAS and IOA, this evaluation will inform the possibility of future replication, expansion, and derivatives of this home care voucher model.

II. Definitions

ADL	Activities of Daily Living include mobility, hygiene, dressing, toileting, eating, and grooming
AMI	Area Median Income
DAAS	San Francisco Department of Aging and Adult Services
Grantee	University of California, San Francisco (UCSF), Institute for Health Policy Studies
HSA	San Francisco Human Services Agency
IADL	Instrumental Activities of Daily Living include managing medicines, shopping, meal preparation, using a telephone, transportation, housework, managing money, and laundry
S@H	Support at Home program, a home care voucher pilot funded by DAAS
S@H Grantee	Institute on Aging (IOA), the Grantee for the S@H Program
S@H Project Team	The S@H Project Team includes DAAS, IOA, and Grantee

III. S@H Target Population:

- A resident of San Francisco; and
- An older adult aged 60 and above or adult with a disability aged 18 to 59; who
- Requires assistance with a minimum of two Activities of Daily Living (ADL) and/or Instrumental Activities of Daily Living (IADL);
- Has income up to 100% of Area Median Income (AMI);
- Has an asset limit of \$40,000 (excluding house and one car);
- Is able to demonstrate both financial and functional need for subsidized home care;
- Is willing to contribute, on a sliding scale, to supplement home care cost;
- Is willing to participate with program requirements and pre/mid/post evaluations; and
- Is ineligible for other subsidized home care through programs such as Medi-Cal In-Home Support Services, Community Living Fund, In-Home Operations and/or other state waiver programs.

IV. Description of Services

Grantee conducts program evaluation for the Support at Home program which administers home care vouchers for the target population. The goal is to demonstrate the program impact on quality of life outcomes for the target population and the overall efficacy and effectiveness of a home care voucher program for select individuals. Grantee focuses on a population perspective and conducts value-added activities for a robust program evaluation analysis. This includes identifying and using comparison group(s), collecting data from caregivers and other stakeholders, and using administrative datasets when possible and appropriate. Grantee also works in close partnership with the IOA to analyze S@H program and client outcomes related to clients' success in achieving personal health, mental health, and quality of life goals. The evaluation includes a continuous quality improvement component allowing IOA to respond to any issues that arise during the pilot.

Grantee works with DAAS to finalize program evaluation based on final S@H program model. The evaluation plan expands beyond, and not merely replicates, the contract objectives within S@H program pilot. The evaluation plan includes the following:

- A. Approach** – Evaluation approach measures S@H goals based on established research methodologies. Evaluation approach considers diversity issues, financial status, functional status, and other possible impacts on an effective evaluation. Grantee draws upon existing evaluations of other sliding scale, voucher, and/or home care models. This approach includes:
1. Research questions that evaluate program impact, including quality of life and implementation measures. Grantee uses standardized quality of life measures as appropriate and includes indicators.
 2. Grantee identifies indicators to measure program success, such as improvements to quality of life, economic security, consumer empowerment, adherence to health care, health outcomes, and the prevention or delay of institutionalization. Quality

assurance plan ensures data integrity and a consistent understanding of indicators and assumptions for S@H Project Team.

3. The identification of comparison group(s) is based on comparable qualities or indicators for the target population. Grantee describes data collection approach, roles, and activities in the work plan. This includes telephone calls, focus groups, in-person visits, online surveys, or use of incentives to bolster response rate.
4. Grantee obtains representative stakeholder input from a variety of perspectives including community advocates, and both agency and non-agency caregivers.

B. Methodology and Tools – Grantee utilizes standardized or evidence-based tools or methods for both qualitative and quantitative data needed for this evaluation. While this is not a rigorous research project, Grantee guides and informs the evaluation while adhering to standard research practices and data integrity. Grantee uses structured, standardized models and approaches whenever appropriate. This includes pre/mid/exit surveys, focus groups, and administrative data sets of comparable populations. Grantee designs processes that support rapid cycle testing and be able to manage “real time feedback”. Tools and methods are accessible, language, and culturally appropriate.

C. Work Plan – Grantee provides a 3-year program evaluation work plan and activities related to each evaluation phase, including but not limited to planning, implementation, completion, and reporting. This includes a detailed timeline proposal for the first two months of the pilot, and is updated, at minimum, annually and as appropriate.

D. Data Collection and Management

1. Grantee has access to S@H data and other evaluation data generated from this contract. The City and County of San Francisco maintains all rights for the data generated from this contract. However, Grantee may have the license to use data with prior approval. Grantee is responsible for the Institutional Review Board approval process and related activities for research and publication.
2. While IOA is responsible for managing S@H referral and enrollment records, Grantee proposes structure and technology for collecting and managing additional datasets generated from evaluation tools. Grantee includes this structure in the work plan.
3. Grantee describes and manages data integrity and quality assurance for this program evaluation. This includes knowledge of data assumptions and assurances to reduce bias, reliability issues, and other common evaluation errors.

E. Evaluation Reports

1. The program evaluation uses S@H data obtained during the 3-year contract period with IOA between May 2017 – June 2020, and other additional datasets as defined or generated from this contract.
2. Grantee includes a target population analysis, including an evaluation of clients served by S@H program, comparison group(s), and overall target population.
3. Final report includes a cost-benefit analysis that evaluates the strengths and challenges of the program model, discusses sustainability, and makes

recommendations to inform possible future replication, expansion, or derivation of the model.

4. This program evaluation is ultimately an analysis of the utility of a home care voucher program for the target population, not solely an analysis of the S@H contract alone.

V. Grantee Responsibilities

Grantee works collaboratively with DAAS on an ongoing basis including the program evaluation plan, implementation approach, project timeline, and evaluation tools to communicate and troubleshoot projected issues and barriers. This includes ongoing quality assurance and improvement efforts, including monthly and ad hoc reports and regular DAAS meetings.

Grantee is a member of and works collaboratively in the S@H Project Team which includes DAAS and the IOA. Grantee is flexible, collaborative, and responsive to the team at all stages of the evaluation process as well as with community stakeholders. Grantee guides and supports the S@H Project Team to adhere to standard research practices and data integrity.

The evaluation plan describes a continuous quality improvement plan and utilizes standardized tools, including population data, data analysis, quality of life measures, and surveys. When appropriate, Grantee additionally conducts trainings or data analysis to ensure data integrity. At defined intervals, Grantee collects, reviews, and analyzes data to ensure data quality and integrity as well as provides guidance, insight, and recommendations towards the overall program evaluation.

Grantee is responsible for presentations, trainings, and similar activities as appropriate for administering program evaluation. For example, S@H Program Evaluation Grantee may provide trainings to ensure data integrity or survey tool implementation, participate in community meetings, and present reports or findings at various milestones throughout the pilot and at contract conclusion.

Grantee works with DAAS and IOA on deliverables in Section VI. As the deliverables under this contract are shared with the public, Grantee shares draft versions for feedback prior to finalization.

Grantee is mindful of the client experience throughout the project to minimize duplication of surveys and similar activities. Whenever possible, Grantee and IOA should aim for complimentary approaches to maximize opportunities and the timing of data collection and similar activities.

Grantee serves as consultants throughout project. Grantee employs qualified and competent staff for this contract, and identifies project leads to have a consistent presence at meetings or as the project defines. Roles and responsibilities are clear and defined.

Grantee includes input from diverse perspectives as part of the evaluation plan including the S@H Advisory Committee, community advocates, and other stakeholders.

Grantee complies with privacy and compliance regulations, including the Health Insurance Portability and Accountability Act (HIPAA) (Appendix E) and the utilization of Business Associate Addendum (Appendix F).

VI. Deliverables and Reporting Requirements

This grant modification extends the program pilot for an additional 12 months, extending the program evaluation component duration to fully evaluate the outcomes of FY17/18, FY18/19, and FY19/20. Additional funds were added for FY18/19 and FY19/20 to provide incentives to bolster a robust comparison group

S@H Program Evaluation Grantee submits the following deliverables during the term of the grant agreement:

- A. An updated 3-year program evaluation work plan due within the first quarter of each fiscal year and revised as needed;
- B. A logic model for S@H program due within the first quarter of the contract;
- C. Formal evaluations and tools created, adopted, or used under this contract when finalized or as defined on evaluation work plan;
- D. At minimum (or quarterly, with DAAS approval), monthly progress reports are completed to support the continuous quality improvement process;
- E. Annual reports due on June 30, 2018 and June 30, 2019 with the evaluation progress, preliminary data analysis, highlights, projected outcomes, and barriers/issues to address; for the 2019 Year Two Report, a preliminary cost benefit analysis will also be included;
- F. Comprehensive final program evaluation is due on or before June 21, 2020 and a final presentation with findings, conclusions, and recommendations to DAAS before the end of the contract end date, June 30, 2020. Respondent works collaboratively with DAAS and IOA to finalize program report; and
- G. Ad hoc reports as requested by DAAS.
- H. The Program Evaluation Workplan, Monthly, Annual and Final Reports are entered into the Contracts Administration, Billing and Reporting Online (CARBON) system.
- I. Other deliverables and reports are sent via e-mail to the Program Manager and/or Contract Manager to the following addresses:

Carrie Wong
Program Manager
Department of Aging and Adult Services
PO Box 7988
San Francisco, CA 94120
carrie.wong@sfgov.org

Steve Kim
Contract Manager
Human Services Agency
PO Box 7988
San Francisco, CA 94120
steve.kim@sfgov.org

VII. Monitoring Activities

- A. **Program Monitoring:** Program monitoring includes review of compliance to contract terms and monthly/periodic deliverables as well as a supporting documentation; adherence to quality assurance plan; reporting performance including monthly reports; maintenance of electronic data and data integrity; agency and organization standards which include current organizational chart, evidence of provision of training to staff regarding the Elder Abuse Reporting; program evaluation operations which includes a review of the work plan, staffing assigned to roles, written project income policies, if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound; a board of director list; and whether services are provided appropriately according to Sections V and VI.

- B. **Fiscal Compliance and Contract Monitoring:** Fiscal monitoring includes 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 includes review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and Memorandum of Understandings, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

A	B	C	D	E	F	G
HUMAN SERVICES AGENCY BUDGET SUMMARY						
BY PROGRAM						
Name						
UC San Francisco						
Term 9/1/17-6/30/20						
1	(Check One) New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification <input type="checkbox"/>					
2	7 (Check One) New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification <input type="checkbox"/>					
3	8 If modification, Effective Date of Mod. 7/1/2018	No. of Mod. 1				
4	9 Program: Support@Home Evaluation					
5	10 Budget Reference Page No.(s)					
6	11 Program Term	9/1/17-6/30/18	7/1/18-6/30/19	7/1/18-6/30/19	7/1/19-6/30/20	9/1/17-6/30/20
7	12 Expenditures					Total
8	13 Salaries & Benefits	\$82,344	\$82,497	\$30,423	\$114,392	\$309,656
9	14 Operating Expenses	\$4,612	\$4,459	\$13,056	\$17,515	\$38,170
10	15 Subtotal	\$86,956	\$86,956	\$43,479	\$130,435	\$347,826
11	16 Indirect Percentage (%)	15%	15%	15%	15%	15%
12	17 Indirect Cost (Line 16 X Line 15)	\$13,044	\$13,044	\$6,521	\$19,565	\$52,174
13	18 Subcontractor/Capital Expenditures					
14	19 Total Expenditures	\$100,000	\$100,000	\$50,000	\$150,000	\$400,000
15	20 HSA Revenues					
16	21 General Fund	\$100,000	\$100,000	\$50,000	\$150,000	\$400,000
17	22					
18	23					
19	24					
20	25					
21	26					
22	27					
23	28					
24	29 TOTAL HSA REVENUES	\$100,000	\$100,000	\$50,000	\$150,000	\$400,000
25	30 Other Revenues					
26	31					
27	32					
28	33					
29	34					
30	35					
31	36 Total Revenues	\$100,000	\$100,000	\$50,000	\$150,000	\$400,000
32	37 Full Time Equivalent (FTE)					
33	39 Prepared by:	Telephone No.:				
34	40 HSA-CO Review Signature:					
35	41 HSA #1	2/15/2019				

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UC San Francisco
 Program: Support@Home Evaluation

Operating Expense Detail

Expenditure Category	TERM	9/1/17-6/30/18	7/1/18-6/30/19	Modification 7/1/18-6/30/19	Revised 7/1/18-6/30/19	Added 7/1/19-6/30/20	TOTAL 9/1/17-6/30/20
Rental of Property							
Utilities(Elec, Water, Gas, Phone, Garbage)		\$1,507	\$1,461	\$984	\$2,445	\$2,429	\$ 6,381
Office Supplies, Postage		\$1,094	\$937	\$893	\$1,830	\$1,547	\$ 4,471
Building Maintenance Supplies and Repair							
Printing and Reproduction							
Insurance		\$651	\$701	\$179	\$880	\$957	\$ 2,488
Staff Training							
Staff Travel-(Local & Out of Town)							
Rental of Equipment							
CONSULTANTS							
OTHER							
Incentives for focus groups		\$1,360	\$1,360	\$0	\$1,360	\$1,360	\$ 4,080
Incentives for surveys		\$0	\$0	\$11,000	\$11,000	\$9,750	\$ 20,750
TOTAL OPERATING EXPENSE		\$ 4,612	\$ 4,459	\$ 13,056	\$ 17,515	\$ 16,043	\$ 38,170

HSA #3

2/15/2019