

MEMORANDUM

July 31, 2008

TO: Angela Calvillo, Clerk of the San Francisco Board of Supervisors

THROUGH: Aging and Adult Services Commission

FROM: Anne Hinton, Executive Director,
Department of Aging and Adult Services
Linda Edelstein, CLF Program Manager

SUBJECT: **Community Living Fund (CLF): Program for Case Management, and Purchase of Resources and Services.**

6-month Report, January through June, 2008

The San Francisco Administrative Code, Section 10.100-12, created the Community Living Fund (CLF) to support aging in place and community placement alternatives for individuals who may otherwise require care within an institution. The Administrative Code requires that the Department of Aging and Adult Services (DAAS) report to the Board of Supervisors every six months detailing the level of service provided and costs incurred in connection with the duties and services associated with this fund.

The CLF provides for home and community-based services, or a combination of equipment and services, that will help individuals who are currently, or at risk of being, institutionalized to continue living independently in their homes, or to return to community living. This program, using a two-pronged approach of coordinated case management and purchased services, provides the needed resources, not available through any other mechanism, to vulnerable older adults and younger adults with disabilities.

This report documents the activities of DAAS in the continuing implementation of the Community Living Fund.

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NEW ACTIVITIES

CLF Advisory Committee

The development and implementation of the CLF Advisory Council was originally projected to start in December 2007 with the first meeting scheduled for February 2008. Due to changes in key administrative staff at the Institute of Aging (IOA), as well as challenges in new program development, DAAS has agreed to the IOA request that the Long Term Care Coordinating Council CLF Ad Hoc Committee serve as a temporary Advisory Council to CLF. This committee meets on a quarterly basis or more frequently as needed. This committee agreed to take on this role beginning in May 2008, convening their first meeting on May 7, 2008.

Consumer Surveys and Other Evaluation Efforts Are Underway

Institute on Aging: Anonymous yearly surveys were mailed to approximately 100 participants in April 2008, to determine if their needs were being met through the program and what their experience had been like while participating in the Community Living Fund. Survey results will be compiled and reviewed by the CLF Director by August 2008. The first issue identified was the low response rate. Only 31 surveys were returned. In an effort to increase participation starting October 1, 2008, surveys will be mailed out to CLF clients the month after they terminate from CLF. Clients who remain in the program over one year will receive a survey in April 2009. Overall the responses were positive, with 84% rating the quality of the services received as good or better. 81% rated the staff as good or better. One of the main problems identified was the length of time it took to receive services. Efforts over the next six months will focus on reducing the waiting list and reducing the time a CLF client has to wait for services.

The Human Services Agency (HSA): HSA Planning Unit is currently conducting a year-end process evaluation in order to assess the effectiveness of the first full year of program implementation. Feedback from the Advisory Council, consumer surveys, and the process evaluation will be used to inform future program structure and implementation of services.

DAAS Implemented Expedited Meals Service

Meals on Wheels of San Francisco has expanded its contract with DAAS in order to provide immediate home-delivered meals to older adults and younger adults with disabilities through the CLF. Emergency home-delivered meals are provided to individuals who: are homebound by reason of illness, incapacitating disability, isolation, and lack of support network; have no safe, healthy alternative for meals; are on the citywide Clearinghouse waiting list for ongoing home-delivered meals; and have been assessed as needing emergency home-delivered meals by DAAS staff. Consumers will receive these emergency home-delivered meals until regular ongoing home-delivered meals become available through the Clearinghouse waitlist system. The contract services began in January 2008 and 39 unduplicated clients have been served through June 2008.

Case Management Training Institute

DAAS is working closely with the community to develop an effective training program for case managers. An RFP will be released in late FY 08-09 or early FY 09-10 to solicit proposals from case management experts. An offer to DAAS from a community-based organization to provide a series of case management trainings, free of charge, has turned out to be a very viable option. The Department has taken this opportunity to develop an understanding of the actual needs and a practical approach to addressing those needs before issuing the RFP. The pilot training program for the CLF case managers and their supervisors will begin in September 2008.

DAAS/DPH Development of Diversion and Community Integration Program (DCIP)

As a result of a City settlement with regard to the Chambers lawsuit and LHH residents, DAAS has taken a lead role in actively collaborating with the Department of Public Health to create a new unit known as the Diversion and Community Integration Program (DCIP). The DCIP will provide an integrated approach for individuals who are diverted or discharged from Laguna Honda Hospital, and for other members of the community who are at imminent risk of admission to LHH. The DCIP will operate with the goal of placing affected individuals in the setting that is most appropriate to their needs and preferences, and will focus on enhancing services that allow clients to remain in the community as long as possible. The target, as established in the settlement agreement, is to identify and secure housing and services for 100 eligible Laguna Honda clients during the first fifteen months of the DCIP program. CLF case management staff will be closely working with LHH discharge staff to meet this goal. We anticipate that this initiative will result in an increase in the proportion of new CLF clients who have been recently discharged from LHH.

CLF Increased Case Management Staffing

In order to deal with the waiting list, consisting mainly of community-based referrals for one-time-only needs, the CLF increased the number of case management staff at the IOA by 2 FTE in March 2008. The addition of this staff has also allowed the program to almost halve the time spent on the waiting list for the remaining referents who are primarily people with longer-term case management needs. However, this amount of time is not acceptable and staff is looking into different options for solving this issue. See section on 'Program Challenges' below.

PROGRAM CHALLENGES

CLF Waiting List for Case Management and Services

As noted above, there continues to be a waiting list for CLF referents from the community even with the increase in case management services initiated earlier this year. An obvious concern is that the referents that are applying for CLF case management and purchased services assistance are those who may have the greatest needs and who are possibly at imminent risk of institutionalization. The issue is complicated by the fact that CLF continues to get more referrals for LHH discharge and diversion. As LHH referents are the program's priority population, the intake unit is preferentially expediting those

referrals. Even with a focus earlier this year on expediting those referrals with one-time-only needs, the waiting list problem still remains, albeit the waiting time is considerably shorter. We are evaluating and implementing two methods of approaching this problem.

1. **Case Management Staffing:** As DAAS monitors the CLF program and try to adjust the program to fit the emerging and dynamic needs of both community-based referents at high risk of institutionalization and LHH referents, staff have ascertained that intensive case management is a primary need in its own right. Increasing case management staff once again will substantially reduce the waiting list, as well as accommodate the DCIP program. This program has a need for intensive community case management as it begins to discharge LHH residents who have a greater need for services and supports than many of those previously discharged.
2. **The Emergency Needs Protocol for CLF Referents:** The second solution focuses on the community referrals, both those already on the CLF waiting list and those who have been newly referred and placed on the waiting list. With the increase in case management staff, staff anticipates a continued decrease in the time people spend on the waiting list. In addition, it is imperative that the program assures that this group is not in need of *immediate* in-home assessment, service plan and actions taken to stabilize their situation in order to avert institutionalization. Hence, we are developing an assessment protocol that addresses this exact issue. In August 2008, intake staff will begin to monitor waiting list clients by phone monthly at a minimum, or more frequently as needed, in order to:
 - Determine continuing CLF need and eligibility, and
 - Provide continuing assistance in accessing alternative service resourcesIf intake staff becomes aware of a new or existing waiting list client with *immediate* needs, that referral will be expedited into the CLF program.

The IOA and DAAS Development of Dedicated CLF Databases.

The development of the CLF database, CaseCare by RTZ Associates, encountered problems early on; however, RTZ Associates responded quickly, dedicating additional staff to troubleshoot and change programming. As problems continue to occur RTZ continues to respond quickly. Efforts in the next 6 months will be to make CaseCare compatible with other databases such as TCM's database.

The IT department of the Human Services Agency has developed an intake tracking system, "DAAS-Net," for the DAAS intake and screening unit. The system facilitates the capture of CLF applicant demographic and eligibility information. It also allows DAAS intake staff to communicate in real time with the IOA about clients who have been screened as eligible for the program. DAAS-Net was launched in January 2008. Launching the new system in the middle of the fiscal year has created some challenges for consolidating data about client referrals for the entire fiscal year. As a result, IT staff developed a method for CLF staff to enter historical data. This process has been initiated and will be monitored for quality.

SUMMARY OF SERVICES¹

Referral Intake and Screening

During FY 2007- 2008, the Intake and Screening Unit received 878 referrals for the CLF program. Three hundred and fifty-seven of these referrals came between January and June 2008. Summaries of six-month and year-end referral statistics are included in Appendix A.²

Approximately 74% of the referrals received in the last six months of the program (264) met initial eligibility requirements. Those individuals were referred to the IOA for a more detailed assessment and eligibility verification. As of August 2008, the status of those 264 cases was as follows:

- 122 had been approved to receive service;
- 136 had been placed on a waiting list for future services or were pending services; and
- 6 were deemed ineligible at the time of assessment (often due to the availability of alternative resources that made the use of CLF funds unnecessary).

The status of the remaining 93 referrals is as follows:

- 41 did not meet basic eligibility criteria (most often due to the availability of alternative resources);
- 1 withdrew the application before completing the referral; and
- 51 were pending initial eligibility determination.

The Homecoming Services Network provided services to 35 additional unduplicated clients during this six-month period. The emergency meals provider served another 31 unduplicated clients.

Purchased Services

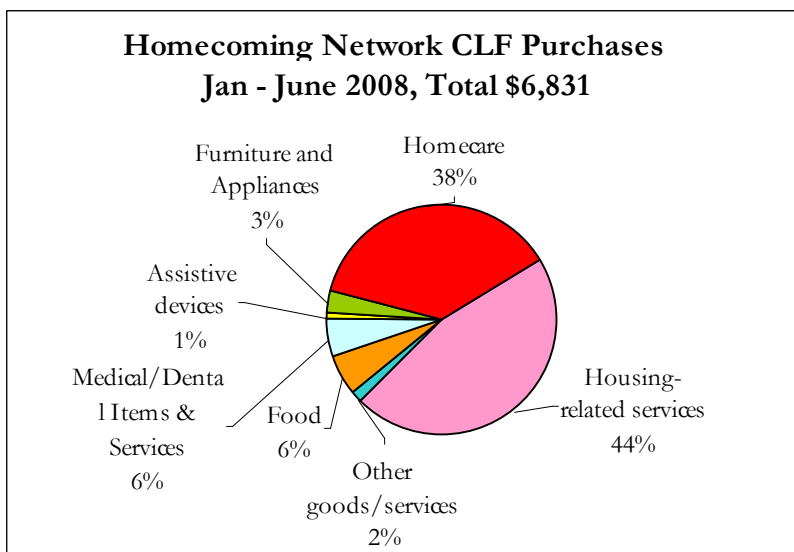
The most common purchases, in terms of costs, among IOA clients were in the following service areas during the last six months:

- Homecare services (43% of all purchases);
- Housing-related services/rent (16%);
- Non-medical home equipment (10%); and
- Assistive devices (9%).

Purchases through the Homecoming Network totaled \$6,831 during the same period. The breakdown of those purchases by service type is shown in the chart below.

¹ Please see Appendix A for more detailed information regarding client demographics and referral sources.

² Calculations of these statistics are based on a combination of data sources. The launch of the DAAS-Net system provided an enhanced data tracking system starting in January 2008. However, historical data was tracked in a simple Excel-based system. These figures represent the best possible data available from each data source.



Referral Sources

Referrals came from 33 local organizations over the last six months. The largest numbers of referrals have come from:

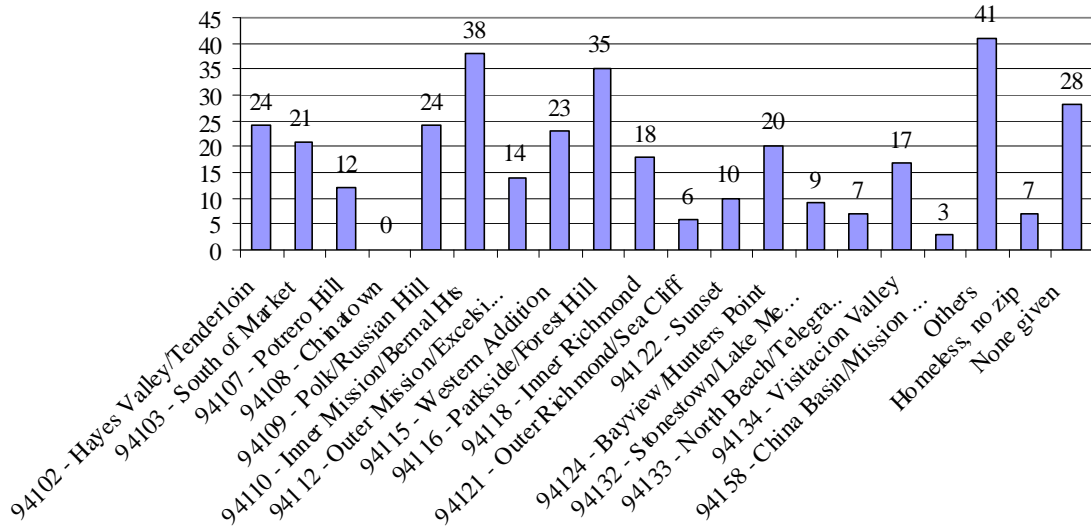
- Canon Kip (29%);
- In-Home Supportive Services and the IHSS Consortium (23%);
- 30th Street Senior Center (13%); and
- Laguna Honda Hospital and TCM (9%).

Referral Demographics: July – December 2007

While the majority of referrals in the last six months have been over 60 years of age, 30% were younger adults with disabilities.

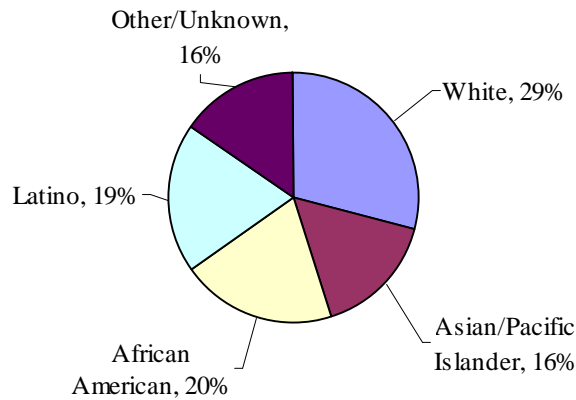
Individuals have been referred from almost 100% of San Francisco neighborhoods, with the largest numbers from the Inner Mission/Bernal Heights (94110), Parkside/Forest Hill (94116), Hayes Valley/Tenderloin (94102), Polk/Russian Hill (94109), and Western Addition (94115). See chart below for detail.

**CLF Referrals by Zip Code
January - June 2008 (n=357)**

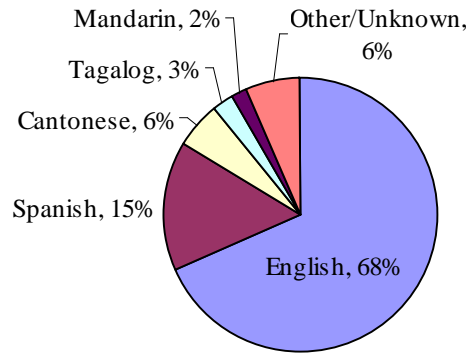


Referred clients also represent the diversity of these neighborhoods. However, the majority of referred clients report that English is their primary language (64%). The charts below provide greater detail on the diversity of client referrals from July through December 2007.

CLF Referrals by Ethnicity (n=357)



CLF Referrals by Language (n=357)



Program Outcome Measures

The Institute on Aging and other CLF contractors provided statistics for calculating three overarching outcome measures for the first year of the program. In FY 2007- 2008 these measures were as follows.

Performance Measure	Actual	Target
Number of unduplicated clients served by the CLF.	406	265
Percentage of formerly institutionalized Community Living Fund clients who have successfully continued community living for a period of at least six months.	73%	70%
Percentage of Community Living Fund clients who were previously at imminent risk of institutionalization who have successfully continued community living for a period of at least six months.	76%	70%

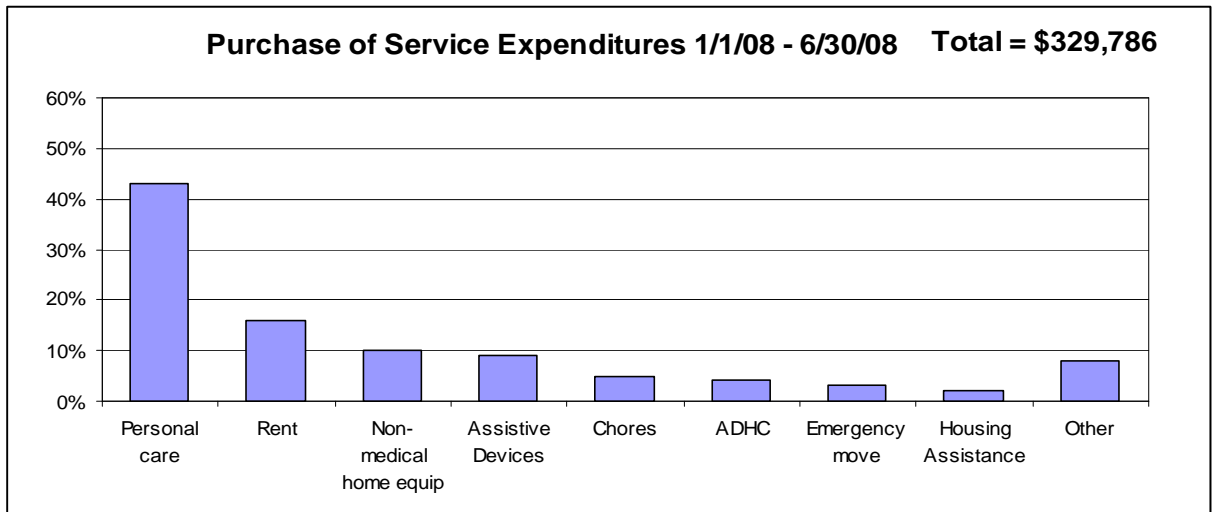
EXPENDITURE REPORT – FISCAL YEAR 2007/08

Now that the Community Living Fund program is celebrating its first complete year in operation, staff continues to explore the most effective way to serve the community designed for this program. The IOA is currently in the process of reprogramming its CLF funding to provide for more case management positions in FY 08-09, as noted earlier in this report, which will aid in spending the Purchase of Service allocation. As can be seen in the chart below, the expenditures in this last six-month period have increased noticeably. As the CLF program staff in both DAAS and the IOA continues to learn more about the eligible population, there have been strategic decisions made about the disbursement of funds. Staff continues to work with DPH to best align services needed for those clients departing Laguna Honda Hospital. There is currently a balance of \$3.3 M in carry-forward CLF funds to be spent in the ongoing project.

Community Living Fund Expenditures

	Expenditures March 1, 2007 thru Dec 31, 2007	Expenditures Jan 1 thru June 30, 2008	Cumulative Project Expenditure
<u>IOA Contract</u>			
**Purchase of Service	\$ 317,342	\$ 329,786	\$ 647,128
Case Management	\$ 286,294	\$ 327,055	\$ 613,349
Capital & Equipment	\$ 56,090	\$ 0	\$ 56,090
Operations & Overhead	\$ 93,550	\$ 105,655	\$ 199,205
Subtotal	\$ 753,276	\$ 762,496	\$ 1,515,772
<u>DPH Work Order</u>			
Health at Home	\$ 118,365	\$ 203,215	\$ 321,580
<u>DAAS Internal</u>			
Staff Salaries / Fringes	\$ 279,007	\$ 209,291	\$ 488,298
<u>San Francisco Senior Center</u>			
Homecoming Services Network	\$ 11,918	\$ 6,831	\$ 18,749
<u>Meals on Wheels</u>			
Emergency Meals	\$ 0	\$ 106,380	\$ 106,380
<u>IT Contractor</u>			
	\$ 34,000	\$ 140,670	\$ 174,670
<u>Grand Total</u>	\$ 1,196,566	\$ 1,428,883	\$ 2,625,449

** see chart below for more detail on the types of purchases provided to CLF clients



- Other includes: communications devices, utilities, medical services, etc.

APPENDIX A: COMMUNITY LIVING FUND REFERRAL DATA

Age of All Referrals						
	July-Dec 2007	Jan-June 2008	FY 2007/2008	July-Dec 2007	Jan-June 2008	FY 2007/2008
Under 18	1	0	1	0%	0%	0%
18-59	146	107	253	28%	30%	29%
60+	320	248	568	61%	69%	65%
Age Missing	54	2	56	10%	1%	6%
Total	521	357	878	100%	100%	100%

Ethnicity of All Referrals						
	July-Dec 2007	Jan-June 2008	FY 2007/2008	July-Dec 2007	Jan-June 2008	FY 2007/2008
White	157	104	261	30%	29%	30%
Asian/Pacific Islander	89	57	146	17%	16%	17%
African American	119	71	190	23%	20%	22%
Latino	69	69	138	13%	19%	16%
Other/Unknown	87	56	143	17%	16%	16%
Total	521	357	878	100%	100%	100%

Primary Language of All Referrals						
	July- Dec 2007	Jan- June 2008	FY 2007/2008	July- Dec 2007	Jan- June 2008	FY 2007/2008
English	334	244	578	64%	68%	66%
Spanish	46	54	100	9%	15%	11%
Cantonese	35	20	55	7%	6%	6%
Tagalog	19	9	28	4%	3%	3%
Mandarin	10	7	17	2%	2%	2%
Other/Unknown	77	23	100	15%	6%	11%
Total	521	357	878	100%	100%	100%
Zip Code of All Referrals						
	July- Dec 2007	Jan- June 2008	FY 2007/2008	July- Dec 2007	Jan- June 2008	FY 2007/2008
94102 - Hayes Valley/Tenderloin	51	24	75	10%	7%	9%
94103 - South of Market	36	21	57	7%	6%	6%
94107 - Potrero Hill	17	12	29	3%	3%	3%
94108 - Chinatown	4	0	4	1%	0%	0%
94109 - Polk/Russian Hill	50	24	74	10%	7%	8%
94110 - Inner Mission/Bernal Hts	42	38	80	8%	11%	9%
94112 - Outer Mission/Excelsior/Ingleside	30	14	44	6%	4%	5%
94115 - Western Addition	29	23	52	6%	6%	6%
94116 - Parkside/Forest Hill	23	35	58	4%	10%	7%
94118 - Inner Richmond	8	18	26	2%	5%	3%
94121 - Outer Richmond/Sea Cliff	6	6	12	1%	2%	1%
94122 - Sunset	6	10	16	1%	3%	2%
94124 - Bayview/Hunters Point	33	20	53	6%	6%	6%
94132 - Stonestown/Lake Merced	8	9	17	2%	3%	2%
94133 - North Beach/Telegraph Hill	9	7	16	2%	2%	2%
94134 - Visitacion Valley	20	17	37	4%	5%	4%
94158 - China Basin/Mission Creek	7	3	10	1%	1%	1%
Others	41	41	82	8%	11%	9%
Homeless, no zip	14	7	21	3%	2%	2%
None given	87	28	115	17%	8%	13%
Total	521	357	878	100%	100%	100%

Referent Organizations						
	July- Dec 2007	Jan- June 2008	FY 2007/2008	July- Dec 2007	Jan- June 2008	FY 2007/2008
30th Street Senior Center	8	41	49	2%	11%	6%
Adult Protective Services	20	6	26	4%	2%	3%
ALS Association	1	1	2	0%	0%	0%
Article	2		2	0%	0%	0%
Bayview Hunters Point ADHC	7	6	13	1%	2%	1%
Bernal Heights Neighborhood Center	1	1	2	0%	0%	0%
Canon Kip	25	96	121	5%	27%	14%
Catholic Charities	6	1	7	1%	0%	1%
CATS	1		1	0%	0%	0%
Central City Older Adults	2	2	4	0%	1%	0%
Chinese Hospital	1		1	0%	0%	0%
Citywide Case Management	1		1	0%	0%	0%
Civic Center Residence	1		1	0%	0%	0%
Community Living Campaign	1		1	0%	0%	0%
CPMC	5	5	10	1%	1%	1%
CPMC-Psych	1		1	0%	0%	0%
Curry Center	1		1	0%	0%	0%
Department of Public Health		1	1	0%	0%	0%
El Dorodo Hotel	1		1	0%	0%	0%
Episcopal Community Services	2		2	0%	0%	0%
Family Health Center	1		1	0%	0%	0%
Family Service Agency	1		1	0%	0%	0%
Family/Friend	7		7	1%	0%	1%
Golden Gate ADHC	7		7	1%	0%	1%
Hamilton Family Center	1		1	0%	0%	0%
Health at Home	32	5	37	6%	1%	4%
Hospice by the Bay	1		1	0%	0%	0%

Referent Organizations (continued)	July- Dec 2007	Jan- June 2008	FY 2007/2008	July- Dec 2007	Jan- June 2008	FY 2007/2008
IHSS	23	64	87	4%	18%	10%
IHSS Consortium	37	10	47	7%	3%	5%
Independent Living Resource	2		2	0%	0%	0%
IOA/ADH	1		1	0%	0%	0%
IOA/Linkages	10		10	2%	0%	1%
IOA/MSSP	22	8	30	4%	2%	3%
Jewish Family and Children Services	1	2	3	0%	1%	0%
Kaiser Home Health	13	5	18	2%	1%	2%
Kaiser Hospital	1	1	2	0%	0%	0%
Kimochi	2		2	0%	0%	0%
Laguna Honda Hospital- ADHC		1	1	0%	0%	0%
LHH	24	16	40	5%	4%	5%
LHH Letter	5		5	1%	0%	1%
LHH/ADH	2		2	0%	0%	0%
Little Brothers	1		1	0%	0%	0%
Mabini Adult Day Health	4	5	9	1%	1%	1%
Meals on Wheels		1	1	0%	0%	0%
Mentone Hotel	1		1	0%	0%	0%
Mercy Housing	1		1	0%	0%	0%
Mission Creek- ADHC	4	5	9	1%	1%	1%
Mission SRO Collaborative	1		1	0%	0%	0%
MSC South	1		1	0%	0%	0%
Mt. Zion Hospital	1		1	0%	0%	0%
NEMS	1		1	0%	0%	0%
North Beach Citizens	1		1	0%	0%	0%
On Lok	3	1	4	1%	0%	0%
Potrero Hill Health Center	1		1	0%	0%	0%
Presentation ADH	2		2	0%	0%	0%
Private Conservator	1		1	0%	0%	0%
Protection and Advocacy	1		1	0%	0%	0%

Referent Organizations (continued)	July- Dec 2007	Jan- June 2008	FY 2007/2008	July- Dec 2007	Jan- June 2008	FY 2007/2008
Public Conservator	6		6	1%	0%	1%
Rebuilding Together	1		1	0%	0%	0%
Renal Advantage Inc	1		1	0%	0%	0%
Rep Payee Program/CAAS	1		1	0%	0%	0%
San Francisco Senior Center	13		13	2%	0%	1%
San Francisco Senior Center- Homecoming	1	2	3	0%	1%	0%
SE Mission Geriatric Services	2		2	0%	0%	0%
Self Help ADHC	6		6	1%	0%	1%
Self Help for the Elderly	2		2	0%	0%	0%
Self Help/APS	1		1	0%	0%	0%
Self Referral	8	1	9	2%	0%	1%
SF Homeless Outreach	4		4	1%	0%	0%
SF Housing Authority	4		4	1%	0%	0%
SF Housing Coalition	1		1	0%	0%	0%
SFGH	26	12	38	5%	3%	4%
SFGH - Pysch Services	1	1	2	0%	0%	0%
SFGH/EDCM Team	1		1	0%	0%	0%
Southeast Mission Geriatric	1		1	0%	0%	0%
St Francis of Assisi	1		1	0%	0%	0%
St. Anthony's	2		2	0%	0%	0%
St. Lukes	5	1	6	1%	0%	1%
St. Marys- ADHC	8		8	2%	0%	1%
Sutter VNH	5	6	11	1%	2%	1%
TCM	20	12	32	4%	3%	4%
Tenderloin Neighborhood Dev Corp	1	2	3	0%	1%	0%
Transitional Age Youth	1		1	0%	0%	0%
Trauma Recovery Center	1		1	0%	0%	0%
Tunnell Center	7		7	1%	0%	1%
UCSF	1		1	0%	0%	0%

Referent Organizations (continued)	July- Dec 2007	Jan- June 2008	FY 2007/2008	July- Dec 2007	Jan- June 2008	FY 2007/2008
UCSF Citywide Team	3		3	1%	0%	0%
UCSF Homecare	9	5	14	2%	1%	2%
UCSF Hospital		2	2	0%	1%	0%
UCSF Langley Porter	1		1	0%	0%	0%
UCSF Medical Center	2		2	0%	0%	0%
VAMC	4		4	1%	0%	0%
Westside Crisis	1		1	0%	0%	0%
None listed	65	29	94	12%	8%	11%
Grand Total	521	357	878	100%	100%	100%