

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
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.

<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)	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
1	BUDGET FORMS		Appendix B, pg. 1	
2			10/22/2020	
3	HUMAN SERVICES AGENCY - DEPARTMENT OF DISABILITY AND AGING SERVICE			
4	BUDGET PROPOSAL FORMS			
5	Grantee's Name: Centro Latino de San Francisco		Grant Term	
6	(Check One) New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification _____			
7	Effective Date of Mod:	No. of Mod:	11/1/20 to 6/30/21	
8	Program Name: HDM	11/1/20 to 6/30/21	TOTAL	Average cost/meal
9	Annual # Meals Contracted	24,096	24,096	
10	Program Term	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
11	DAS Expenditures			
12	Salaries & Benefits	\$112,232	\$112,232	\$4.66
13	Operating Expense	\$56,440	\$56,440	\$2.34
14	Subtotal	\$168,672	\$168,672	\$7.00
15	Indirect Percentage (max 10%)			
16	Indirect Cost (Line 15 X Line 14, check Gen.Guidance regarding indirect exclusion)			
17	Capital Expenditure			
18	COVID OTO			
19	Suppl Grocery OTO	\$31,474	\$31,474	
20	TOTAL DAS EXPENDITURES	\$200,146	\$200,146	\$7.00
21				
22	Non-DAS Expenditures			
23	Salaries & Benefits	\$10,353	\$10,353	\$0.43
24	Operating Expense	\$24,555	\$24,555	\$1.02
25	Capital Expenditure			
26	TOTAL Non-DAS EXPENDITURES	\$34,908	\$34,908	\$1.45
27				
28	TOTAL DAS & Non-DAS EXPENDITURES	\$235,054	\$235,054	\$8.45
29				
30	HSA-DAS Revenues			
31	Meals	\$168,672	\$168,672	
32	Capital OTO			
33	COVID OTO			
34	Suppl Grocery OTO	\$31,474	\$31,474	
35	TOTAL HSA-DAS REVENUES	\$200,146	\$200,146	
36	PER MEAL COST, HSA-DAS	6.999982343	6.999982343	
37	PER MEAL COST with COVID OTO, HSA-DAS	\$8.31	\$8.31	
38	Non-DAS Revenues			
39	Project Income	8,096	\$8,096	\$0.34
40	Agency Cash - Fundraising	\$16,459	\$16,459	\$0.68
41	Agency In-Kind Volunteer	\$10,353	\$10,353	\$0.43
42	Nutrition Compliance Revenues			
43				
44	TOTAL NON HSA-DAS REVENUES	\$34,908	\$34,908	
45	PER MEAL COST, NON HSA-DAS	\$1.45	\$1.45	
46	TOTAL REVENUES	\$235,054	\$235,054	
47	PER BAG COST, TOTAL	\$9.75	\$9.75	
48	Full Time Equivalent (FTE)			
50	Prepared by: Victor de la Rocha		Date: 10/22/20	
51	HSA-CO Review Signature:			
52	HSA #1			

	A	B	C	D	E	F	G	H
1	Grantee's Name: Centro Latino de San Francisco					Appendix B, page 2		
2	Program Name: HDM					Date: 10/22/20		
3	11/1/20 to 6/30/21							
4								
5	Salaries & Benefits Detail							TOTAL
6								
7								
8	H.S.A-DAS	Agency Totals		For DAS Nutrition		11/1/20 to 6/30/21		11/1/20 to 6/30/21
9	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary	Budgeted Salary	
10	Accountant/HR - Riano, Olivia	\$72,800	38%	16%	6%	\$4,261	\$4,261	
11	Administrator/Educator - Schaefer	\$72,800	77%	5%	4%	\$2,885	\$2,885	
12	Driver II/Food Purchaser - Rodri	\$39,520	63%	35%	22%	\$8,542	\$8,542	
13	Driver II/Custodian /Food Purcha	\$39,520	50%	35%	18%	\$6,947	\$6,947	
15	Driver II HDM - Valdivezo, Raul	\$37,440	25%	46%	12%	\$4,329	\$4,329	
16	Driver II HDM/Food Purchaser -	\$39,520	80%	33%	26%	\$10,363	\$10,363	
18	Executive Director - Bonilla, Glor	\$79,040	100%	7%	7%	\$5,147	\$5,147	
19	Food Prep/FSW MNC /VA - Gale	\$37,440	100%	6%	6%	\$2,174	\$2,174	
20	Head Cook II - Zelaya, Mercado	\$45,760	100%	10%	10%	\$4,435	\$4,435	
21	Head Cook II - Angeles, M. Alfre	\$37,440	88%	11%	10%	\$3,767	\$3,767	
22	Head Cook I - Crespin, Dora	\$47,840	40%	26%	11%	\$5,034	\$5,034	
24	Janitor / Dishwasher - Castaned	\$37,440	63%	12%	7%	\$2,704	\$2,704	
25	Programs Manager/Activities Co	\$54,080	100%	7%	7%	\$3,696	\$3,696	
26	Food Prep/ Janitor - Lorenzo B	\$41,600	69%	5%	3%	\$1,427	\$1,427	
28	Nutritionist/Activities Facilitator -	\$58,240	93%	9%	9%	\$5,062	\$5,062	
30	Social Worker I - Rivera, Sylvia	\$47,840	93%	15%	14%	\$6,554	\$6,554	
31	Site Manager/ Cook - Rodriguez	\$41,600	100%	17%	17%	\$6,878	\$6,878	
34	Controller - de la Rocha, Victor	\$93,600	13%	8%	1%	\$976	\$976	
35	Consumer Intake/Social Service	\$54,080	88%	14%	12%	\$6,573	\$6,573	
36	Cook/Food Server - Russell Mer	\$37,440	53%	14%	8%	\$2,810	\$2,810	
41	TOTALS	\$ 1,439,360	1982%			\$97,788	\$97,788	
42								
43	FRINGE BENEFIT RATE	14.8%						
44	EMPLOYEE FRINGE BENEFITS	\$ 212,593				\$14,443	\$14,443	
45								
46								
47	TOTAL DAS SALARIES & BENEFITS	\$ 1,651,953				\$112,232	\$112,232	
48								
49								
50	Non - DAS	Agency Totals		For DAS Meal		TOTAL		
51	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE (a)	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary	Budgeted Salary	
52	Position #1 - Volunteer	\$ 31,200	23%					
53	Position #2 - Volunteer	\$ 31,200	100%	20%	20%	\$6,090	\$6,090	
54	Position #3 - Volunteer	\$ 31,200	30%	20%	6%	\$1,827	\$1,827	
55	Position #4 - Volunteer	\$ 31,200	30%	20%	6%	\$1,827	\$1,827	
56	Position #5 - Volunteer	\$ 31,200	30%	7%	2%	\$609	\$609	
57								
58								
59								
60								
61								
62								
63								
64								
65								
66								
67								
68								
69	TOTAL NON-DAS	\$ 156,000	213%	65%	33%	\$10,353	\$10,353	
70								
71	FRINGE BENEFIT RATE							
72	EMPLOYEE FRINGE BENEFITS	\$ -						
73								
74								
75	TOTAL Non-DAS SALARIES & BENEFITS	\$ 156,000				\$10,353	\$10,353	
76								
77	TOTAL DAS & Non-DAS SALARIES & BENEFITS	\$ 1,807,953				\$122,585	\$122,585	
78	HSA #2	Form Rev. 12/22/16						

	A	B	C	D	E	F
1	Grantee's Name: Centro Latino de					Appendix B, page 3
2	Program Name:					10/22/20
3	11/1/20 to 6/30/21					
4	Operating Expense Detail					
7	H.S.A-DAS	Annual #Meals Contracted:		24,096		TOTAL
8	Expenditure Category	Term:	11/1/20 to 6/30/21			11/1/20 to 6/30/21
9	Rental of Property					
10	Utilities(Elec, Water, Gas, Phone, Scavenger)			\$2,155		\$2,155
11	Office Supplies, Postage			\$753		\$753
12	Building Maintenance Supplies and Repair			\$1,965		\$1,965
13	FOOD COSTS					
14	Raw Food	per meal \$	1.09	\$26,276		\$26,276
15	Cong Food Svc Supplies	per meal \$	0.39	\$9,397		\$9,397
16	HDM Food Svc Supplies	per meal \$	-			
17	Catered Meals	per meal \$	-			
18	CONSULTANT/SUBCONTRACTOR Descriptive Title					
19	Registered Dietitian					
20						
21	OTHER COSTS:					
22	Insurance			\$2,376		\$2,376
23	Staff Training & Travel			\$400		\$400
24	Auto - Fuel & Insurance			\$7,430		\$7,430
25	Registration Fees			\$2,400		\$2,400
26	Uniforms					
27	Repair/Maintenance			\$1,640		\$1,640
28	Payroll Services			\$489		\$489
29	Accounting / Audit Fees			\$1,159		\$1,159
30	TOTAL DAS OPERATING EXPENSE			\$56,440		\$56,440
32	Non-DAS					TOTAL
33	Expenditure Category					
34	Rental of Property			\$9,197		\$9,197
35	Utilities(Elec, Water, Gas, Phone, Scavenger)					
36	Office Supplies, Postage					
37	Building Maintenance Supplies and Repair					
38	FOOD COSTS					
39	Raw Food	per meal \$	0.64	\$15,358		\$15,358
40	Cong Food Svc Supplies	per meal \$	-			
41	HDM Food Svc Supplies	per meal \$	-			
42	Catered Meals	per meal \$	-			
43	CONSULTANT/SUBCONTRACTOR Descriptive Title					
44	Registered Dietitian					
45						
46	OTHER COSTS:					
47	Insurance					
48	Staff Training & Travel					
49	Rental of Equipment					
50	Rental of Equipment					
51	Small equipment & Supplies					
52	Auto - Fuel & Insurance					
53	Repair/Maintenance					
54						
56	TOTAL Non-DAS OPERATING EXPENSE			\$24,555		\$24,555
58	TOTAL DAS & Non-DAS OPERATING EXPENSE			\$80,995		\$80,995
63	HSA #3	Form Rev. 12/22/16				

Grantee's Name: Centro Latino de San Francisco
 Program Name: HDM
 11/1/20 to 6/30/21

Appendix B, Page
 Document Date:

10/22/20

COVID OTO Expenditure Detail

H.S.A-DAS		TOTAL	
		11/1/20 to 6/30/21	11/1/20 to 6/30/21
No.	ITEM/DESCRIPTION		
1	supplementary grocery bags: 3185 bags of supplementary grocery bags at 9.88 per bag include grocery and delivery cost	31,474	31,474
			0
			0
			0
			0
			0
			0
TOTAL DAS-Suppl Grocery OTO COST		31,474	31,474

HSA #4 Form Rev. 12/22/16

Allocation Methodology: (If you have multiple programs, describe how you allocate among shared program costs., Indicate DAS and non-DAS-OTC funding above.

NOTE: Green highlighted cells have formulas that link data to Budget Summary page

Equipment is defined as \$5000 or more a unit

NOTE: Cells with formulas are protected to avoid accidental changes. To unprotect, go to Toolbar, "Review", select "Unprotect

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.

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)	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	E	F	G
1	Budget		Appendix B, Page 1	
2			Document Date: November 2020	
3				
4	HUMAN SERVICES AGENCY BUDGET SUMMARY			
5	BY PROGRAM			
6				
7	Name			
8	Jewish Family and Children's Services			
9	(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>			
10	If modification, Effective Date of Mod. No. of Mod.			
11	Program: ENP home delivered meals			
12	Budget Reference Page No.(s)			
13	Program Term	11/01/20 - 06/30/21	Total	cost/meal
15	Annual # Meals Contracted	7,410	7,410	
16	DAS Expenditures			
17	Salaries & Benefits			
18	Operating Expenses	\$53,723	\$53,723	\$7.25
19	Subtotal	\$53,723	\$53,723	\$7.25
20	Indirect Percentage (%)			
21	Indirect Cost			
26	COVID OTO			
27	Total DAS Expenditures	\$53,723	\$53,723	\$7.25
28				
29	Non DAS Expenditures			
30	Salaries & Benefits	\$32,061	\$32,061	\$4.33
31	Operating Expenses	\$79,960	\$79,960	\$10.79
32	Subtotal	\$112,021	\$112,021	\$15.12
33	Capital/Subcontractor Expenditures			
34	Indirect Percentage (%)			
35	Indirect Cost	\$9,742	\$9,742	\$1.31
36	Total Non DAS Expenditures	\$121,763	\$121,763	\$16.43
37				
38	TOTAL DAS AND NON DAS EXPEDITURES	\$175,486	\$175,486	\$23.68
39				
40	DAS Revenues			
41	General Fund	\$53,723	\$53,723	\$7.25
42	State Fund			
43	Federal Fund			
44				
45				
46	Total DAS Revenue	\$53,723	\$53,723	\$7.25
47	<i>PER MEAL COST, DAS</i>	\$7.25	\$7.25	
48	Non DAS Revenues			
49	Project income	\$8,000	\$8,000	\$1.08
50	Fundraising	\$111,474	\$111,474	\$15.04
51	in-kind Volunteers			
52	In-kind Rent	\$2,289	\$2,289	\$0.31
53				
54	Total Non DAS Revenue	\$121,763	\$121,763	\$16.43
55	<i>PER MEAL COST, Non DAS</i>	\$16.43	\$16.43	
56	TOTAL DAS AND NON DAS REVENUE	\$175,486	\$175,486	
57	<i>PER MEAL COST, Total</i>	\$23.68	\$23.68	
58				
59	Full Time Equivalent (FTE) prorated for 8 of 12 mos	0.33		
61	Prepared by:	Jean Ijichi	Date: 9/24/20	
62	HSA-CO Review Signature:	_____		
63				
64	HSA #1		10/25/2016	

	A	B	C	D	E	H	I
1	Program: ENP home delivered meals						Appendix B, Page 2
2	(Same as Line 11 on HSA #1)						Document Date: November 2020
3							
4							
5	Salaries & Benefits Detail						
6							
7		Agency Totals		HSA Program		11/01/20 - 06/30/21	Total
8	DAS Salary	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Budget
9							
10							
11							
12							
13							
14							
15							
16	Totals						
17							
18	Fringe Benefits Rate						
19	Employee Fringe Benefits						
20							
21	Total DAS Salaries and Benefits						
22							
23							
24		Agency Totals		HSA Program		11/01/20 - 06/30/21	Total
25	Non DAS Salary	Annual Full Time Salary for FTE	Total FTE	% FTE funded by Non HSA (Max 100%)	Adjusted FTE	Budgeted Salary	Budget
26	Nutrition Manager	\$69,635	0.80	38.85%	0.31	\$21,643	\$21,643
27	SAH Director	\$118,482	1.00	1.78%	0.02	\$2,106	\$2,106
28							
29	Totals	\$188,117	1.80	40.63%	0.33	\$23,749	\$23,749
30							
31	Fringe Benefits Rate	35.00%					
32	Employee Fringe Benefits	\$65,841				\$8,312	\$8,312
33							
34	Total Non DAS Salaries and Benefits	\$253,958				\$32,061	\$32,061
35							
36							
37	Total DAS and Non DAS Salaries and Benefits	\$253,958				\$32,061	\$32,061
38							
39	HSA #2						10/25/2016

	A	B	C	D	I	J	K	
1	Program: ENP home delivered meals						Appendix B, Page 3	
2	(Same as Line 11 on HSA #1)						Document Date: November 2020	
3								
4								
5	Operating Expense Detail							
6								
7				11/01/20 - 06/30/21				Total
9	Annual # Meals Contracted			7,410				7,410
10								
11	DAS Operating Expenses							
12	<u>Expenditure Category</u>							
13	Rental of Property							
14	Utilities (Elec, Water, Gas, Phone, Garbage)							
15	Office Supplies, Postage							
16	Building Maintenance Supplies and Repair							
17	Printing and Reproduction							
18	Insurance							
19	Staff Training							
20	Staff Travel-(Local & Out of Town)							
21	Rental of Equipment							
22	Alarm, internet, comcast							
23	Kitchen equipment repairs							
24	Vehicle operation (repair, gas, parking)							
25								
26	<u>Food Cost</u>							
27	Raw Food			<i>per meal</i>				
28	Cong Food Svc Supplies			<i>per meal</i>				
29	Catered Meals			<i>per meal</i> \$7.25	\$53,723			\$53,723
30	HDM Food Svc Supplies							
31								
32								
33	<u>Consultant</u>							
34								
35								
36								
37								
38	Total DAS Operating Expenses				\$53,723			\$53,723
39								
40								
41	Non DAS Operating Expenses							
42	<u>Expenditure Category</u>							
43	Rental of Property				\$2,594			\$2,594
44	Utilities (Elec, Water, Gas, Phone, Garbage)				\$1,429			\$1,429
45	Office Supplies, Postage				\$411			\$411
46	Building Maintenance Supplies and Repair				\$902			\$902
47	Food Supplies				\$5,040			\$5,040
48	Insurance				\$251			\$251
49	Staff Training							
50	Staff Travel-(Local & Out of Town)				\$344			\$344
51	Rental of Equipment				\$72			\$72
52	Vehicle operation (repair, gas, parking)				\$19,430			\$19,430
53								
54	<u>Food Cost</u>							
55	Raw Food			<i>per meal</i>				
56	Cong Food Svc Supplies			<i>per meal</i>				
57	Catered meals			<i>per meal</i> \$2.00	\$14,820			\$14,820
58	HDM Food Svc Supplies							
59								
60								
61	<u>Consultant</u>							
62	Drivers (staffing agency)				\$34,667			\$34,667
63								
64								
65								
66	Total Non DAS Operating Expenses				\$79,960			\$79,960
67								
68								
69	Total DAS and Non DAS Operating Expenses				\$133,683			\$133,683
70								
71	HSA #3						10/25/2016	

**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	I	J
1	BUDGET FORMS			Appendix B, pg. 1	
2				10/13/2020	
3	HUMAN SERVICES AGENCY - DEPARTMENT OF AGING AND ADULT SERVICES				
4	BUDGET PROPOSAL FORMS				
5	Grantee's Name: Kimochi, Inc.			Grant Term	
6				11/1/20-6/30/21	
7	Program: HD-ENP		HD-ENP NEW	TOTAL	Average cost/meal
8	Annual #Meals Contracted		28,000	28,000	
9	Program Term		11/1/20-6/30/21	11/1/20-6/30/21	
10	DAS Expenditures				
11	Salaries & Benefits		\$29,046	\$29,046	\$1.04
12	Operating Expense		\$180,674	\$180,674	\$6.45
13	Subtotal		\$209,720	\$209,720	\$7.49
14	Indirect Percentage (%)		0%	\$0	
15	Indirect Cost (Line 14 X Line 13)		\$0	\$0	\$0.00
16	Capital Expenditure		\$12,000	\$12,000	\$0.43
17	TOTAL DAS EXPENDITURES		\$221,720	\$221,720	\$7.92
18					
19	Non-DAS Expenditures				
20	Salaries & Benefits		\$74,061	\$74,061	\$2.65
21	Operating Expense		\$3,804	\$3,804	\$0.14
22	Indirect Cost		\$33,000	\$33,000	\$1.18
23	TOTAL Non-DAS EXPENDITURES		\$110,865	\$110,865	\$3.96
24					
25	TOTAL DAS & Non-DAS EXPENDITURES		\$332,585	\$332,585	\$11.45
26					
27	HSA-DAS Revenues				
28	Meals HD ENP		\$209,720	\$209,720	\$7.49
29					
30	OTO-Capital		\$12,000	\$12,000	\$0.43
31					\$0
32					\$0
33	TOTAL HSA-DAS REVENUES		\$221,720	\$221,720	\$7.92
34	Per MEAL COST, HSA-DAS		\$7.49	\$7.49	
35					\$7.92
36	Non-DAS Revenues				
37	Project Income		73,181	\$73,181	\$2.61
38	Donations		29,140	\$29,140	\$1.04
39	Fundraising			\$0	
40	Agency In-Kind Volunteer		\$4,740	\$4,740	
41	Agency In-Kind Food		\$3,804	\$3,804	
42					\$0
43	TOTAL NON HSA-DAS REVENUES		\$110,865	\$110,865	
44	PER MEAL COST, NON HSA-DAS		\$ 3.96	\$ 3.96	\$3.96
45	TOTAL REVENUES		\$332,585	\$332,585	\$11.45
46	PER MEAL COST, TOTAL		\$11.45	\$11.88	
47	Full Time Equivalent (FTE)				
49	Prepared by: Rod Valdepenas			10/13/2020	
50	HSA-CO Review Signature: _____				
51	HSA #1 (10/20/15)				
52	NOTE: Cells with formulas are protected to avoid accidental changes. To unprotect, go to "Tools" then "Unprotect sheet".				
53	Figures in column B are just examples. Replace these figures with your agency's actual figures in the Salary, Operating & Capital Detail worksheets.				

	A	B	C	D	E	F	G	H	N
1	Grantee's Name: Kimochi, Inc.								
2	Program Name:							10/13/20	
3	HD-ENP NEW								
4									
5	Salaries & Benefits Detail								
6									
7									
8	H.S.A-DAS	Agency Totals		For DAS Nutrition			11/1/20-6/30/21		TOTAL
9	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE	% Nutr Prog (b)	Adjusted Nutr FTE		Budgeted Salary		11/1/20-6/30/21
10	Potwasher G. Cardoza	\$40,560	100%	72%	72%		\$29,046		\$29,046
11									
12									
16									
17									
18									\$0
19					0%		\$0		\$0
20	TOTALS	\$ -	0%	0%	0%		\$29,046		\$29,046
21									\$0
22	FRINGE BENEFIT RATE								\$0
23	EMPLOYEE FRINGE BENEFITS								\$0
24									\$0
25									\$0
26	TOTAL DAS SALARIES & BENEFITS	\$ -					\$29,046		\$29,046
27									
28									
29	Non - DAS	Agency Totals		For DAS Meal					TOTAL
30	POSITION TITLE and NAME	Time Salary for	FTE (a)	Prog (b)	Nutr FTE		Salary		11/1/20-6/30/21
31									
32	Agency In-Kind Volunteer						\$ 4,740.12		\$4,740
33									\$0
34									\$0
35	Nut. Coord. K. Fukumitsu	\$50,918	100%	21%	21%		\$10,597		\$10,597
36	Asst. Cook Y. Inagawa	\$34,320	100%	3%	3%		\$1,144		\$1,144
37									\$0
38	Driver D. Sugaya	\$36,733	75%	100%	75%		\$27,550		\$27,550
39	Driver W. Schulze	\$40,286	50%	77%	38%		\$15,463		\$15,463
40									\$0
41									\$0
42									\$0
43									\$0
44									\$0
45									\$0
46									\$0
47	TOTAL NON-DAS	\$ 162,257					\$59,494	\$0	\$59,494
48									
49	FRINGE BENEFIT RATE								
50	EMPLOYEE FRINGE BENEFITS	\$ -					\$ 14,567		\$ 14,567
51									\$0
52									\$0
53	TOTAL Non-DAS SALARIES & BENEFITS	\$ 162,257					\$74,061		\$74,061
54									\$0
55	TOTAL DAS & Non-DAS SALARIES & BENEFITS	\$ 162,257					\$103,106		\$103,106

	A	B	C	D	K
1	Grantee's Name: Kimochi, Inc.				
2	Program Name:				10/13/20
3	HD-ENP NEW				
4					
5					
6					
7	Indirect Cost Detail				
8					
9	1. Salaries and Benefits			Total	
10				11/1/20-6/30/21	11/1/20-6/30/21
11					
12	Position Title	FTE	SALARIES	Total	
13				\$0	
14				\$0	
15				\$0	
16				\$0	
17				\$0	
18				\$0	
19				\$0	
20				\$0	
21				\$0	
22	Total		\$0	\$0	
23	EMPLOYEE FRINGE BENEFITS	%	\$ -	\$0	
24	TOTAL SALARIES & BENEFITS		\$0	\$0	
25	Non-DAS				
26	Position Title	FTE	SALARIES	Total	
27	Director - Executive		\$10,000	\$10,000	
28	Admin. Mgr.		\$3,000	\$3,000	
29	Controller		\$10,000	\$10,000	
30	Director of Program		\$10,000	\$10,000	
31	Janitor		\$0	\$0	
32	Receptionist 1		\$0	\$0	
33	Receptionist 2		\$0	\$0	
34					
35					
36	Total		\$33,000	\$33,000	
37	EMPLOYEE FRINGE BENEFITS	%		\$0	
38	TOTAL SALARIES & BENEFITS		\$33,000	\$33,000	
39					
40	HSA# 5				

	A	B	C	D	E	F	L	M
1	Grantee's Name: Kimochi, Inc.					Appendix B, page 3		
2	Program Name:					10/13/2020		
3	HD-ENP NEW							
4	Operating Expense Detail							
5								
7	H.S.A-DAS	Annual #Meals Contracted:		28,000	TOTAL			
8	<u>Expenditure CategorW</u>	Term: 11/1/20-6/30/21			11/1/20-6/30/21			
9	Auto - Fuel			10,000			\$10,000	
10	Auto - Insurance			25,000			\$25,000	
11	Auto - License			3,000			\$3,000	
12	Auto - Maintenance			15,000			\$15,000	
13	Rent - Property			10,500			\$10,500	
14	Utilities			15,242			\$15,242	
15							\$0	
16								
17								
18								
19								
20							\$0	
21	FOOD COSTS						\$0	
22	Raw Food	<i>per meal</i>	\$ 2.93		\$81,932		\$81,932	
23	HD Food Svc Supplies	<i>per meal</i>	\$ 0.71		\$20,000		\$20,000	
24	HDM Food Svc Supplies	<i>per meal</i>			\$0		\$0	
25		<i>per meal</i>					\$0	
26	TOTAL DAS OPERATING EXPENSE				\$180,674 # #		\$180,674	
27								
28	Non-DAS						TOTAL	
29	<u>Expenditure Category</u>	Program						
30								
31								
32								
33								
34								
35								
36								
37								
38	FOOD COSTS						\$0	
39	Raw Food	<i>per meal</i>	\$ -		\$0		\$0	
40	HD Food Svc Supplies	<i>per meal</i>			\$0		\$0	
41	HDM Food Svc Supplies	<i>per meal</i>					\$0	
42	In Kind Food	<i>per meal</i>	\$0.14		\$3,804		\$3,804	
43							\$0	
44							\$0	
45							\$0	
46	TOTAL Non-DAS OPERATING EXPENSE				\$3,804 # #		\$3,804	
47							\$0	
48	TOTAL DAS & Non-DAS OPERATING EXPENSE				\$184,478 # #		\$184,478	

	A	B	C	G
1	Grantee's Name: Kimochi, Inc.		Appendix B, Page	
2	Program Name:		Document Date:	10/13/20
3	HD-ENP NEW			
4				
5	Increased Meal Expenses Associated with COVID 19			
6				
7				TOTAL
8	H.S.A-DAS		11/1/20-6/30/21	
9	No.	ITEM/DESCRIPTION		
10				
11		Industrial Rice Cooker	12,000	12,000
12				
13	TOTAL DAS-OOA EQUIPMENT & REMODELING COST		12,000	12,000
14				
15	Non-DAS			
16	No.	ITEM/DESCRIPTION		0
17				0
18				0
19				0
20	TOTAL NON DAS-OOA		0	0
21				
22	TOTAL DAS & NON-DAS		12,000	12,000
23	(Equipment and Remodeling Cost)			
24	HSA #4			

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.

<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)	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	E	F	G
1	Budget		Appendix B, Page 1	
2			Document Date: November 2020	
3				
4	HUMAN SERVICES AGENCY BUDGET SUMMARY			
5	BY PROGRAM			
6				
7	Name			
8	Meals on Wheels			
9	(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>			
10	If modification, Effective Date of Mod.		No. of Mod.	
11	Program: Home delivered meals for older adults			
12	Budget Reference Page No.(s)			
13	Program Term	11/01/20 - 06/30/21	Total	cost/meal
15	Annual # Meals Contracted	1,133,128	1,133,128	
16	DAS Expenditures			
17	Salaries & Benefits	\$2,073,514	\$2,073,514	\$1.83
18	Operating Expenses	\$2,255,035	\$2,255,035	\$1.99
19	Subtotal	\$4,328,549	\$4,328,549	\$3.82
20	Indirect Percentage (%)	0.00%	0.00%	
21	Indirect Cost	\$0	\$0	\$0.00
26	Capital Expenditures	\$0	\$0	\$0.00
27	COVID OTO	\$352,750	\$352,750	\$0.31
28	Total DAS Expenditures	\$4,681,299	\$4,681,299	\$4.13
29				
30	Non DAS Expenditures			
31	Salaries & Benefits	\$6,063	\$6,063	\$0.01
32	Operating Expenses	\$1,527,385	\$1,527,385	\$1.35
33	Indirect Cost	\$0	\$0	\$0.00
34	Capital/Subcontractor Expenditures	\$0	\$0	\$0.00
35	Total Non DAS Expenditures	\$1,533,448	\$1,533,448	\$1.35
36				
37	TOTAL DAS AND NON DAS EXPEDITURES	\$6,214,747	\$6,214,747	\$5.48
38				
39	DAS Revenues			
40	General Fund	\$2,733,951	\$2,733,951	\$2.41
41	State Fund	\$248,496	\$248,496	\$0.22
42	Federal Fund	\$1,346,102	\$1,346,102	\$1.19
43	COVID OTO	\$352,750	\$352,750	\$0.31
44		\$0	\$0	\$0.00
45		\$0	\$0	\$0.00
46		\$0	\$0	\$0.00
47		\$0	\$0	\$0.00
48	Total DAS Revenue	\$4,681,299	\$4,681,299	\$4.13
49	<i>PER MEAL COST, DAS</i>	<i>\$3.82</i>	<i>\$3.82</i>	
50	<i>PER MEAL COST with COVID OTO, DAS</i>	<i>\$4.13</i>	<i>\$4.13</i>	
51	Non DAS Revenues			
52	Project Income	\$58,640	\$58,640	\$0.05
53	Agency Cash- Fundraising	\$1,467,822	\$1,467,822	\$1.30
54	Agency In-kind Volunteer	\$6,986	\$6,986	\$0.01
55		\$0	\$0	\$0.00
56		\$0	\$0	\$0.00
57	Total Non DAS Revenue	\$1,533,448	\$1,533,448	\$1.35
58	<i>PER MEAL COST, Non DAS</i>	<i>\$1.35</i>	<i>\$1.35</i>	
59	TOTAL DAS AND NON DAS REVENUE	\$6,214,747	\$6,214,747	
60	<i>PER MEAL COST, Total</i>	<i>\$5.48</i>	<i>\$5.48</i>	
61				
62	Full Time Equivalent (FTE)			
64	Prepared by:	Date: 5/10/18		
65	HSA-CO Review Signature: _____			
66				
67	HSA #1		10/26/2020	

	A	C	D	E	F	I	J	
1	Program: Home delivered meals for older adults						Appendix B, Page 2	
2	(Same as Line 11 on HSA #1)						Document Date: November 2020	
3								
4								
5	Salaries & Benefits Detail							
6								
7	Agency Totals		HSA Program		11/01/20 - 06/30/21	Total		
8	DAS Salary	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE		Budget	
9	Drivers (35)	\$39,634	14.38	100.00%	14.38	\$569,817	\$569,817	
10	Driver Mgr	\$82,601	1.00	38.22%	0.38	\$31,570	\$31,570	
11	Sr. Ops Mgr	\$95,000	1.00	38.22%	0.38	\$36,309	\$36,309	
12	Wait List Mgr	\$77,134	1.00	38.22%	0.38	\$29,480	\$29,480	
13	Customer Service Lead	\$60,569	1.00	54.22%	0.54	\$32,841	\$32,841	
14	Client Starts Lead	\$77,134	1.00	55.12%	0.55	\$42,516	\$42,516	
15	Special Delivery Lead	\$51,002	1.00	58.22%	0.58	\$29,693	\$29,693	
16	Safety Board Lead	\$50,000	1.00	58.22%	0.58	\$29,110	\$29,110	
17	Chief Prog Off	\$140,400	1.00	58.22%	0.58	\$81,741	\$81,741	
18	SalesForce Administrator	\$100,000	1.00	49.49%	0.49	\$49,490	\$49,490	
19	Chief Gov Off	\$144,427	1.00	38.36%	0.38	\$55,402	\$55,402	
20	Fleet & Facilities Dir	\$110,880	1.00	38.36%	0.38	\$42,534	\$42,534	
21	Maintenance	\$55,000	1.00	38.36%	0.38	\$21,098	\$21,098	
22	Maintenance	\$39,520	1.00	38.36%	0.38	\$15,160	\$15,160	
23	Maintenance	\$39,520	1.00	38.36%	0.38	\$15,160	\$15,160	
24	Volunteer Mgr	\$62,946	1.00	74.23%	0.74	\$46,725	\$46,725	
25	Volunteer Coordinator	\$52,749	1.00	74.23%	0.74	\$39,156	\$39,156	
26	Volunteer Coordinator	\$50,000	1.00	74.23%	0.74	\$37,115	\$37,115	
27	Volunteer Director	\$93,555	1.00	74.23%	0.74	\$69,446	\$69,446	
28	HR Manager	\$80,500	1.00	38.36%	0.38	\$30,880	\$30,880	
29	HR Manager	\$81,120	1.00	38.36%	0.38	\$31,117	\$31,117	
30	HR Director	\$108,832	1.00	38.36%	0.38	\$41,748	\$41,748	
31	Communications Director	\$105,000	1.00	38.36%	0.38	\$40,278	\$40,278	
32	Digital Marketing Manager	\$72,000	1.00	38.36%	0.38	\$27,619	\$27,619	
33	CEO	\$205,000	1.00	38.36%	0.38	\$78,638	\$78,638	
34					0.00	\$0	\$0	
35					0.00	\$0	\$0	
36					0.00	\$0	\$0	
37					0.00	\$0	\$0	
38	Totals	\$2,074,522	38.38	1267.03%	26.05	\$1,524,643	\$1,524,643	
39								
40	Fringe Benefits Rate	36.00%						
41	Employee Fringe Benefits	\$746,828				\$548,871	\$548,871	
42								
43	Total DAS Salaries and Benefits	\$2,821,350				\$2,073,514	\$2,073,514	
44								
45								
46		Agency Totals	HSA Program		11/01/20 - 06/30/21	Total		
47	Non DAS Salary	Annual Full Time Salary for FTE	Total FTE	% FTE (Max 100%)	Adjusted FTE		Budget	
48	Drivers (35)	\$39,634	0.02	100.00%	0.02	\$971	\$971	
49	Driver Mgr	\$82,601	1.00		0.00	\$0	\$0	
50	Sr. Ops Mgr	\$95,000	1.00		0.00	\$0	\$0	
51	Wait List Mgr	\$77,134	1.00		0.00	\$0	\$0	
52	Customer Service Lead	\$60,569	1.00		0.00	\$0	\$0	
53	Client Starts Lead	\$77,134	1.00		0.00	\$0	\$0	
54	Special Delivery Lead	\$51,002	1.00		0.00	\$0	\$0	
55	Safety Board Lead	\$50,000	1.00		0.00	\$0	\$0	
56	Chief Prog Off	\$140,400	1.00		0.00	\$0	\$0	
57	SalesForce Administrator	\$100,000	1.00		0.00	\$0	\$0	
58	Chief Gov Off	\$144,427	1.00	0.26%	0.00	\$376	\$376	
59	Fleet & Facilities Dir	\$110,880	1.00	0.26%	0.00	\$288	\$288	
60	Maintenance	\$55,000	1.00	0.26%	0.00	\$143	\$143	
61	Maintenance	\$39,520	1.00	0.26%	0.00	\$103	\$103	
62	Maintenance	\$39,520	1.00	0.26%	0.00	\$103	\$103	
63	Volunteer Mgr	\$62,946	1.00	0.30%	0.00	\$189	\$189	
64	Volunteer Coordinator	\$52,749	1.00	0.30%	0.00	\$158	\$158	
65	Volunteer Coordinator	\$50,000	1.00	0.30%	0.00	\$150	\$150	
66	Volunteer Director	\$93,555	1.00	0.30%	0.00	\$281	\$281	
67	HR Manager	\$80,500	1.00	0.26%	0.00	\$209	\$209	
68	HR Manager	\$81,120	1.00	0.26%	0.00	\$211	\$211	
69	HR Director	\$108,832	1.00	0.26%	0.00	\$283	\$283	
70	Communications Director	\$105,000	1.00	0.26%	0.00	\$273	\$273	
71	Digital Marketing Manager	\$72,000	1.00	0.26%	0.00	\$187	\$187	
72	CEO	\$205,000	1.00	0.26%	0.00	\$533	\$533	
73	0	\$0	0.00		0.00	\$0	\$0	
74	0	\$0	0.00		0.00	\$0	\$0	
75	0	\$0	0.00		0.00	\$0	\$0	
76	0	\$0	0.00		0.00	\$0	\$0	
77	Totals	\$2,074,522	24.02	104.06%	0.07	\$4,458	\$4,458	
78								
79	Fringe Benefits Rate	36.00%						
80	Employee Fringe Benefits	\$746,828				\$1,605	\$1,605	
81								
82	Total Non DAS Salaries and Benefits	\$2,821,350				\$6,063	\$6,063	
83								
84								
85	Total DAS and Non DAS Salaries and Benefits	\$5,642,701				\$2,079,577	\$2,079,577	
86								
87	HSA #2						10/26/2020	

	A	B	C	D	I	J	K
1	Program: Home delivered meals for older adults					Appendix B, Page 3	
2	(Same as Line 11 on HSA #1)					Document Date: November 2020	
3							
4							
5	Operating Expense Detail						
6							
7						11/01/20 - 06/30/21	Total
9	Annual # Meals Contracted					1,133,128	1,133,128
10							
11	DAS Operating Expenses						
12	<u>Expenditure Category</u>						
13	Rental of Property					\$0	\$0
14	Utilities (Elec, Water, Gas, Phone, Garbage)					\$46,131	\$46,131
15	Office Supplies, Postage					\$25,225	\$25,225
16	Building Maintenance Supplies and Repair					\$20,016	\$20,016
17	Printing and Reproduction					\$0	\$0
18	Insurance					\$10,004	\$10,004
19	Staff Training					\$7,118	\$7,118
20	Staff Travel-(Local & Out of Town)					\$3,833	\$3,833
21	Rental of Equipment					\$0	\$0
22	Auto- Fuel & Insurance					\$33,998	\$33,998
23	Fees, Dues, Advertising					\$4,374	\$4,374
24	Outside Services					\$45,862	\$45,862
25	Grant, volunteer and client costs					\$37,125	\$37,125
26	Other operating costs					\$4,379	\$4,379
27						\$0	\$0
28							
29	<u>Food Cost</u>						
30	Raw Food		<i>per meal</i>	\$1.78	\$2,016,970	\$2,016,970	
31	Cong Food Svc Supplies		<i>per meal</i>	\$0.00	\$0	\$0	
32	HDM Food Svc Supplies		<i>per meal</i>	\$0.00	\$0	\$0	
33	Catered Meals		<i>per meal</i>	\$0.00	\$0	\$0	
34						\$0	\$0
35						\$0	\$0
36							
37	<u>Consultant</u>						
38	Consultant A					\$0	\$0
39						\$0	\$0
40						\$0	\$0
41							
42	Total DAS Operating Expenses					\$2,255,035	\$2,255,035
43							
44							
45	Non DAS Operating Expenses						
46	<u>Expenditure Category</u>						
47	Rental of Property					\$0	\$0
48	Utilities (Elec, Water, Gas, Phone, Garbage)					\$0	\$0
49	Office Supplies, Postage					\$0	\$0
50	Building Maintenance Supplies and Repair					\$0	\$0
51	Printing and Reproduction					\$0	\$0
52	Insurance					\$0	\$0
53	Staff Training					\$0	\$0
54	Staff Travel-(Local & Out of Town)					\$0	\$0
55	Rental of Equipment					\$0	\$0
56	Auto- Fuel & Insurance					\$974	\$974
57	Fees, Dues, Advertising					\$0	\$0
58	Outside Services					\$0	\$0
59	Grant, volunteer and client costs					\$0	\$0
60	Other operating costs					\$0	\$0
61	Fundraising					\$76,007	\$76,007
62							
63	<u>Food Cost</u>						
64	Raw Food		<i>per meal</i>	\$1.28	\$1,450,404	\$1,450,404	
65	Cong Food Svc Supplies		<i>per meal</i>	\$0.00	\$0	\$0	
66	HDM Food Svc Supplies		<i>per meal</i>	\$0.00	\$0	\$0	
67	Catered Meals		<i>per meal</i>	\$0.00	\$0	\$0	
68						\$0	\$0
69						\$0	\$0
70							
71	<u>Consultant</u>						
72	Consultant A					\$0	\$0
73						\$0	\$0
74						\$0	\$0
75							
76	Total Non DAS Operating Expenses					\$1,527,385	\$1,527,385
77							
78							
79	Total DAS and Non DAS Operating Expenses					\$3,782,420	\$3,782,420

	A	D	E
1	Program: Home delivered meals for older adults		Appendix B, Page 5
2	(Same as Line 11 on HSA #1)		Document Date: November 2020
3			
4			
5	COVID OTO Detail		
6			
7		11/01/20 - 06/30/21	Total
9	DAS COVID OTO Expenditure		
10	Increased labor/staffing cost	\$352,750	\$352,750
11		\$0	\$0
12		\$0	\$0
13		\$0	\$0
14		\$0	\$0
15	Total Equipment Cost	\$352,750	\$352,750
16			
17	HSA #4		10/26/2020

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.

<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)	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
1	BUDGET FORMS		Appendix B, pg. 1	
2			10/12/2020	
3	HUMAN SERVICES AGENCY - DEPARTMENT OF DISABILITY AND AGING SERVICES			
4	BUDGET PROPOSAL FORMS			
5	Grantee's Name: On Lok Day Services		Grant Term	
6	(Check One) New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification _____			
7	Effective Date of Mod:	No. of Mod:	11/1/20 to 6/30/21	
8	Program: Enter 1 Prog ONLY (e.g. Cong-ENP, HDM-ENP, Cong-AWD, or HDM-AWD)	HDM-ENP	TOTAL	Average cost/meal
9	Annual # Meals Contracted	154,902	154,902	
10	Program Term	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
11	DAS Expenditures			
12	Salaries & Benefits	\$160,527	\$160,527	\$1.04
13	Operating Expense	\$530,137	\$530,137	\$3.42
14	Subtotal	\$690,664	\$690,664	\$4.46
15	Indirect Percentage (max 10%)	9%	9%	
16	Indirect Cost (Line 15 X Line 14, check Gen.Guidance regarding indirect exclusion)	\$62,160	\$62,160	\$0.40
17	Capital Expenditure			
18	COVID OTO	\$6,838	\$6,838	\$0.04
19	TOTAL DAS EXPENDITURES	\$759,662	\$759,662	\$4.86
20				
21	Non-DAS Expenditures			
22	Salaries & Benefits	\$67,746	\$67,746	\$0.44
23	Operating Expense	\$204,189	\$204,189	\$1.32
24	Capital Expenditure			
25	TOTAL Non-DAS EXPENDITURES	\$271,935	\$271,935	\$1.76
26				
27	TOTAL DAS & Non-DAS EXPENDITURES	\$1,031,597	\$1,031,597	\$6.62
28				
29	HSA-DAS Revenues			
30	Meals	\$759,662	\$759,662	
31				
32				
33				
34	TOTAL HSA-DAS REVENUES	\$759,662	\$759,662	
35	PER MEAL COST, HSA-DAS	\$4.86	\$4.86	
36	PER MEAL COST with COVID OTO, HSA-DAS	\$4.90	\$4.90	
37	Non-DAS Revenues			
38	Project Income	\$65,059	\$65,059	\$0.42
39	Agency Cash - Fundraising	\$206,876	\$206,876	\$1.34
40	Agency In-Kind Volunteer			
41	Nutrition Compliance Revenues			
42				
43	TOTAL NON HSA-DAS REVENUES	\$271,935	\$271,935	
44	PER MEAL COST, NON HSA-DAS	\$1.76	\$1.76	
45	TOTAL REVENUES	\$1,031,597	\$1,031,597	
46	PER BAG COST, TOTAL	\$6.66	\$6.66	
47	Full Time Equivalent (FTE)			
49	Prepared by: Meko Ma		Date: 10/12/20	
50	HSA-CO Review Signature:			
51	HSA #1			

	A	B	C	D	E	F	G	H	
1	Grantee's Name: On Lok Day Services						Appendix B, page 2		
2	Program Name:						Date:	10/12/20	
3	HDM-ENP								
4									
5									
6									
7									
8	H.S.A-DAS	Salaries & Benefits Detail					TOTAL		
		Agency Totals		For DAS Nutrition		11/1/20 to 6/30/21	11/1/20 to 6/30/21		
9	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary	Budgeted Salary		
10	ACCOUNTANT	\$60,320	100%	20%	20%	\$8,043	\$8,043		
11	ADMINISTRATIVE SECRETARY	\$59,010	100%	6%	6%	\$2,360	\$2,360		
12	ASSISTANT DIRECTOR OF OPERATIONS	\$90,002	100%	9%	9%	\$5,400	\$5,400		
13	DIRECTOR	\$130,000	100%	6%	6%	\$5,200	\$5,200		
14	NUTRITION OPERATIONS MANAGER	\$73,965	100%	7%	7%	\$3,452	\$3,452		
15	NUTRITION PROGRAM COORDINATOR	\$53,040	100%	39%	39%	\$13,790	\$13,790		
16	HOSPITALITY COORDINATOR	\$45,760	100%	14%	14%	\$4,271	\$4,271		
17	DRIVERS #1	\$39,853	100%	70%	70%	\$18,598	\$18,598		
18	DRIVERS #2	\$35,173	63%	55%	34%	\$8,060	\$8,060		
19	DRIVERS #3	\$40,435	63%	55%	34%	\$9,266	\$9,266		
20	DRIVERS #4	\$36,275	63%	55%	34%	\$8,313	\$8,313		
21	DRIVERS #5	\$34,320	63%	55%	34%	\$7,865	\$7,865		
22	DRIVERS #6	\$34,362	100%	70%	70%	\$16,035	\$16,035		
23	DRIVERS #7	\$34,362	50%	55%	28%	\$6,300	\$6,300		
24	ON CALL DRIVERS (1)	\$41,413	40%	55%	22%	\$6,074	\$6,074		
25	NUTRITION PROGRAM SEPCIALIST	\$51,085	100%	7%	7%	\$2,384	\$2,384		
26									
27									
28	TOTALS	\$ 859,373	1340%	558%	415%	\$125,412	\$125,412		
29									
30	FRINGE BENEFIT RATE	28.0%							
31	EMPLOYEE FRINGE BENEFITS	\$ 240,624				\$35,115	\$35,115		
32									
33									
34	TOTAL DAS SALARIES & BENEFITS	\$ 1,099,997				\$160,527	\$160,527		
35									
36									
37	Non - DAS	Agency Totals		For DAS Meal			TOTAL		
38	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE (a)	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary	Budgeted Salary		
39	ACCOUNTANT	\$ 60,320	100%	9%	9%	\$3,619	\$3,619		
40	ADMINISTRATIVE SECRETARY	\$ 59,010	100%	2%	2%	\$787	\$787		
41	ASSISTANT DIRECTOR OF OPERATIONS	\$ 90,002	100%	4%	4%	\$2,400	\$2,400		
42	DIRECTOR	\$ 130,000	100%	2%	2%	\$1,733	\$1,733		
43	NUTRITION OPERATIONS MANAGER	\$ 73,965	100%	4%	4%	\$2,036	\$2,036		
44	NUTRITION PROGRAM COORDINATOR	\$ 53,040	100%	16%	16%	\$5,658	\$5,658		
45	HOSPITALITY COORDINATOR	\$ 45,760	100%	6%	6%	\$1,830	\$1,830		
46	DRIVERS #1	\$ 39,853	100%	30%	30%	\$7,971	\$7,971		
47	DRIVERS #2	\$ 35,173	63%	24%	15%	\$3,517	\$3,517		
48	DRIVERS #3	\$ 40,435	63%	24%	15%	\$4,044	\$4,044		
49	DRIVERS #4	\$ 36,275	63%	24%	15%	\$3,628	\$3,628		
50	DRIVERS #5	\$ 34,320	63%	24%	15%	\$3,432	\$3,432		
51	DRIVERS #6	\$ 34,362	100%	30%	30%	\$6,872	\$6,872		
52	DRIVERS #7	\$ 34,362	50%	24%	12%	\$2,749	\$2,749		
53	ON CALL DRIVERS (1)	\$ 41,413	40%	24%	10%	\$2,650	\$2,650		
54	NUTRITION PROGRAM SEPCIALIST								
55									
56	TOTAL NON-DAS	\$ 808,288	1240%	247%	185%	\$52,926	\$52,926		
57									
58	FRINGE BENEFIT RATE	28.0%							
59	EMPLOYEE FRINGE BENEFITS	\$ 226,321				\$14,819	\$14,819		
60									
61									
62	TOTAL Non-DAS SALARIES & BENEFITS	\$ 1,034,609				\$67,746	\$67,746		
63									
64	TOTAL DAS & Non-DAS SALARIES & BENEFITS	\$ 2,134,606				\$228,273	\$228,273		
65	HSA #2	Form Rev. 12/22/16							

	A	B	C	D	E	F
1	Grantee's Name: On Lok Day Servi					Appendix B, page 3
2	Program Name:					10/12/20
3	HDM-ENP					
4	Operating Expense Detail					
7	H.S.A-DAS	Annual #Meals Contracted:	154,902		TOTAL	
8	Expenditure Category	Term:	11/1/20 to 6/30/21		11/1/20 to 6/30/21	
9	Rental of Property					
10	Utilities(Elec, Water, Gas, Phone, Scavenger)		\$9,017		\$9,017	
11	Office Supplies, Postage		\$1,959		\$1,959	
12	Building Maintenance Supplies and Repair		\$19,659		\$19,659	
13	FOOD COSTS					
14	Raw Food	per meal	\$ -			
15	Cong Food Svc Supplies	per meal	\$ -			
16	HDM Food Svc Supplies	per meal	\$ -			
17	Catered Meals	per meal	\$ 3.11	\$481,828	\$481,828	
18	CONSULTANT/SUBCONTRACTOR Descriptive Title					
19	Registered Dietitian		\$7,026		\$7,026	
20						
21	OTHER COSTS:					
22	Insurance		\$2,788		\$2,788	
23	Staff Training & Travel					
24	Rental of Equipment					
25	Small equipment & Supplies					
26	Auto - Fuel & Insurance		\$7,861		\$7,861	
27	Repair/Maintenance					
28						
29						
30	TOTAL DAS OPERATING EXPENSE			\$530,137		\$530,137
32	Non-DAS					TOTAL
33	Expenditure Category					
34	Rental of Property					
35	Utilities(Elec, Water, Gas, Phone, Scavenger)		\$ 7,273.33		\$7,273	
36	Office Supplies, Postage		\$1,580		\$1,580	
37	Building Maintenance Supplies and Repair		\$15,857		\$15,857	
38	FOOD COSTS					
39	Raw Food	per meal	\$ -			
40	Cong Food Svc Supplies	per meal	\$ -			
41	HDM Food Svc Supplies	per meal	\$ -			
42	Catered Meals	per meal	\$ 1.06	\$163,649	\$163,649	
43	CONSULTANT/SUBCONTRACTOR Descriptive Title					
44	Registered Dietitian		\$5,667		\$5,667	
45	Consultant-Translator		\$70		\$70	
46						
47						
48	OTHER COSTS:					
49	Insurance		\$2,249		\$2,249	
50	Staff Training & Travel		\$133		\$133	
51	Rental of Equipment		\$667		\$667	
52	Rental of Equipment		\$177		\$177	
53	Small equipment & Supplies		\$6,341		\$6,341	
54	Auto - Fuel & Insurance		\$125		\$125	
55	Repair/Maintenance		\$401		\$401	
56						
58	TOTAL Non-DAS OPERATING EXPENSE			\$204,189		\$179,479
59						
60	TOTAL DAS & Non-DAS OPERATING EXPENSE			\$734,326		\$709,615
65	HSA #3					

	A	B	C	D
1	Grantee's Name: On Lok Day Services		Appendix B, Page	
2	Program Name:		Document Date: 10/12/20	
3	HDM-ENP			
4				
5	COVID OTO Expenditure Detail			
6				TOTAL
7	H.S.A-DAS		11/1/20 to 6/30/21	11/1/20 to 6/30/21
8	No.	ITEM/DESCRIPTION		
9	1	Freezer Lease	6,838	6,838
10				
11				
12				
13				
14				
15				
16				
17	TOTAL DAS-COVID OTO COST		6,838	6,838
18				
19	HSA #4 Form Rev. 12/22/16			

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.

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)	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
1	BUDGET FORMS		Appendix B, pg. 1	
2			Date: 10/16/2020	
3	HUMAN SERVICES AGENCY - DEPARTMENT OF DISABILITY AND AGING SERVICES			
4	BUDGET PROPOSAL FORMS			
5	Grantee's Name: Self-Help for the Elderly		Grant Term	
6	(Check One) New <input checked="" type="checkbox"/> Renewal ___ Modification ___			
7	Effective Date of Mod:	No. of Mod:	11/1/20 to 6/30/21	
8	Program: Enter 1 Prog ONLY (e.g. Cong-ENP, HDM-ENP, Cong-AWD, or HDM-AWD)	HDM-ENP	TOTAL	Average cost/meal
9	Annual # Meals Contracted	84,000	84,000	
10	Program Term	11/1/20 to 6/30/21	11/1/20 to 6/30/21	
11	DAS Expenditures			
12	Salaries & Benefits	\$370,276	\$370,276	\$4.41
13	Operating Expense	\$210,088	\$210,088	\$2.50
14	Subtotal	\$580,364	\$580,364	\$6.91
15	Indirect Percentage (max 10%)	10%		
16	Indirect Cost (Line 15 X Line 14, check Gen.Guidance regarding indirect exclusion)	\$58,036	\$58,036	\$0.69
17	Capital Expenditure			
18	COVID OTO	\$76,000	\$76,000	\$0.90
19	TOTAL DAS EXPENDITURES	\$714,400	\$714,400	\$7.60
20				
21	Non-DAS Expenditures			
22	Salaries & Benefits	\$198,257	\$198,257	\$2.36
23	Operating Expense	\$231,800	\$231,800	\$2.76
24	Capital Expenditure			
25	TOTAL Non-DAS EXPENDITURES	\$430,057	\$430,057	\$5.12
26				
27	TOTAL DAS & Non-DAS EXPENDITURES	\$1,144,457	\$1,144,457	\$12.72
28				
29	HSA-DAS Revenues			
30	Meals	\$638,400	\$638,400	
31	OTO COVID-19	\$76,000	\$76,000	
32				
33				
34	TOTAL HSA-DAS REVENUES	\$714,400	\$714,400	
35	PER MEAL COST, HSA-DAS	7.6	7.6	
36	PER MEAL COST with COVID OTO, HSA-DAS	\$8.50	\$8.50	
37	Non-DAS Revenues			
38	Project Income	22,088	\$22,088	\$0.26
39	Agency Cash - Fundraising	\$384,729	\$384,729	\$4.58
40	Agency In-Kind Volunteer	\$23,240	\$23,240	\$0.28
41	Nutrition Compliance Revenues			
42				
43	TOTAL NON HSA-DAS REVENUES	\$430,057	\$430,057	
44	PER MEAL COST, NON HSA-DAS	\$5.12	\$5.12	
45	TOTAL REVENUES	\$1,144,457	\$1,144,457	
46	PER BAG COST, TOTAL	\$13.62	\$13.62	
47	Full Time Equivalent (FTE)			
49	Prepared by: Leny Nair	Date: 10/16/2020		
50	HSA-CO Review Signature:			
51	HSA #1			

Form Rev. 12/22/16

	A	B	C	D	E	F	G	H
1	Grantee's Name: Self-Help for the Elderly					Appendix B, page 2		
2	Program Name:					Date: 10/16/2020		
3	HDM-ENP							
4								
5	Salaries & Benefits Detail					TOTAL		
6								
7								
8	H.S.A-DAS	Agency Totals		For DAS Nutrition		11/1/20 to 6/30/21	11/1/20 to 6/30/21	
9	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary	Budgeted Salary	
10	Director of Nutrition	\$90,000	100%	11%	11%	\$10,200	\$10,200	
11	HDM Coordinator	\$47,216	100%	37%	37%	\$17,313	\$17,313	
12	HDM Supervisor	\$39,000	100%	29%	29%	\$11,180	\$11,180	
13	Driver	\$35,360	100%	30%	30%	\$10,608	\$10,608	
14	Driver	\$36,400	100%	29%	29%	\$10,677	\$10,677	
15	Driver	\$36,400	100%	29%	29%	\$10,677	\$10,677	
16	Driver	\$36,400	100%	29%	29%	\$10,677	\$10,677	
17	Driver	\$35,360	100%	11%	11%	\$4,007	\$4,007	
18	Driver	\$36,400	100%	16%	16%	\$5,824	\$5,824	
19	Driver	\$35,360	100%	67%	67%	\$23,573	\$23,573	
20	Driver	\$35,360	100%	67%	67%	\$23,573	\$23,573	
21	HDM Worker	\$35,360	100%	21%	21%	\$7,308	\$7,308	
22	HDM Worker	\$35,360	100%	53%	53%	\$18,859	\$18,859	
23	HDM Worker	\$35,360	100%	55%	55%	\$19,566	\$19,566	
24	HDM Worker	\$35,360	100%	42%	42%	\$14,851	\$14,851	
25	HDM Worker	\$35,360	100%	38%	38%	\$13,437	\$13,437	
26	HDM Worker	\$35,360	100%	33%	33%	\$11,787	\$11,787	
27	HDM Worker	\$35,360	100%	67%	67%	\$23,573	\$23,573	
28	HDM Worker	\$35,360	100%	67%	67%	\$23,573	\$23,573	
29								
30								
31								
32								
33	TOTALS	\$ 746,136	1900%	720%	720%	\$271,263	\$271,263	
34								
35	FRINGE BENEFIT RATE	37%						
36	EMPLOYEE FRINGE BENEFITS	\$ 272,340				\$99,013	\$99,013	
37								
38								
39	TOTAL DAS SALARIES & BENEFITS	\$ 1,018,476				\$370,276	\$370,276	
40								
41								
42	Non - DAS	Agency Totals		For DAS Meal		TOTAL		
43	POSITION TITLE and NAME	Annual Full Time Salary for FTE	Total % FTE (a)	% Nutr Prog (b)	Adjusted Nutr FTE	Budgeted Salary	Budgeted Salary	
44	Driver	\$35,360	100%	100%	25%	\$5,893	\$5,893	
45	Driver	\$36,400	100%	100%	35%	\$8,493	\$8,493	
46	Driver	\$35,360	100%	100%	35%	\$8,251	\$8,251	
47	Driver	\$35,360	100%	100%	41%	\$9,665	\$9,665	
48	Driver	\$35,360	100%	100%	24%	\$5,658	\$5,658	
49	HDM Worker	\$35,360	100%	100%	38%	\$8,958	\$8,958	
50	HDM Worker	\$35,360	100%	100%	29%	\$6,836	\$6,836	
51	HDM Worker	\$35,360	100%	100%	44%	\$10,372	\$10,372	
52	HDM Worker	\$35,360	100%	100%	72%	\$16,973	\$16,973	
53	HDM Worker	\$35,360	100%	100%	37%	\$8,722	\$8,722	
54	Contracts Mgr	\$55,112	100%	100%	54%	\$19,840	\$19,840	
55	Transp Dispatcher	\$46,280	100%	100%	40%	\$12,341	\$12,341	
56	Meal site & kitchen volunteers					\$23,240	\$23,240	
57								
58								
59								
60								
61	TOTAL NON-DAS	\$ -				\$145,243	\$145,243	
62								
63	FRINGE BENEFIT RATE	36.5%						
64	EMPLOYEE FRINGE BENEFITS	\$ -				\$53,014	\$53,014	
65								
66								
67	TOTAL Non-DAS SALARIES & BENEFITS	\$ -				\$198,257	\$198,257	
68								
69	TOTAL DAS & Non-DAS SALARIES & BENEFITS	\$ 1,018,476				\$568,533	\$568,533	
70	HSA #2	Form Rev. 12/22/16						

	A	B	C	D	E	F
1	Grantee's Name: Self-Help for the I					Appendix B, page 3
2	Program Name:					Date: 10/16/2020
3	HDM-ENP					
4	Operating Expense Detail					
5						
6						
7	H.S.A-DAS	Annual #Meals Contracted:	84,000		TOTAL	
8	Expenditure Category	Term:	11/1/20 to 6/30/21		11/1/20 to 6/30/21	
9	Rental of Property					
10	Utilities(Elec, Water, Gas, Phone, Scavenger)		\$1,600		\$1,600	
11	Office Supplies, Postage					
12	Building Maintenance Supplies and Repair					
13	FOOD COSTS					
14	Raw Food	per meal \$ 0.15	\$12,600		\$12,600	
15	Cong Food Svc Supplies	per meal \$ -				
16	HDM Food Svc Supplies	per meal \$ 0.30	\$25,200		\$25,200	
17	Catered Meals	per meal \$ 2.00	\$168,000		\$168,000	
18	CONSULTANT/SUBCONTRACTOR Descriptive Title					
19	Registered Dietitian					
20						
21	OTHER COSTS:					
22	Insurance					
23	Staff Training & Travel					
24	Rental of Equipment					
25	Small equipment & Supplies					
26	Auto - Fuel & Insurance		\$2,688		\$2,688	
27	Repair/Maintenance					
28						
29						
30	TOTAL DAS OPERATING EXPENSE			\$210,088		\$210,088
31						
32	Non-DAS					TOTAL
33	Expenditure Category					
34	Rental of Property		\$200		\$200	
35	Utilities(Elec, Water, Gas, Phone, Scavenger)					
36	Office Supplies, Postage					
37	Building Maintenance Supplies and Repair					
38	FOOD COSTS					
39	Raw Food	per meal \$ 0.15	\$12,600		\$12,600	
40	Cong Food Svc Supplies	per meal \$ -				
41	HDM Food Svc Supplies	per meal \$ 0.30	\$25,200		\$25,200	
42	Catered Meals	per meal \$ 2.00	\$168,000		\$168,000	
43	CONSULTANT/SUBCONTRACTOR Descriptive Title					
44	Registered Dietitian					
45						
46	OTHER COSTS:					
47	Insurance		\$18,000		\$18,000	
48	Staff Training & Travel		\$250		\$250	
49	Rental of Equipment		\$250		\$250	
50	Rental of Equipment					
51	Small equipment & Supplies		\$500		\$500	
52	Auto - Fuel & Insurance		\$2,000		\$2,000	
53	Repair/Maintenance		\$5,000		\$5,000	
54						
55						
56	TOTAL Non-DAS OPERATING EXPENSE			\$231,800		\$231,800
57						
58	TOTAL DAS & Non-DAS OPERATING EXPENSE			\$441,888		\$441,888
59						
60						
61						
62						
63	HSA #3	Form Rev. 12/22/16				

	A	B	C	D
1	Grantee's Name: Self-Help for the Elderly		Appendix B, Page	
2	Program Name:		Document Date:	Date: 10/16/2020
3	HDM-ENP			
4				
5	COVID OTO Expenditure Detail			
6				TOTAL
7	H.S.A-DAS		11/1/20 to 6/30/21	11/1/20 to 6/30/21
8	No.	ITEM/DESCRIPTION		
9	2	New Vehicles for HDM new routes	\$76,000	\$76,000
10				
11				
12				
13				
14				
15				
16				
17	TOTAL DAS-COVID OTO COST		\$76,000	\$76,000
18				
19	HSA #4 Form Rev. 12/22/16			