

City and County of San Francisco

Department of Human Services Department of Aging and Adult Services

Office of Early Care and Education

Trent Rhorer, Executive Director

MEMORANDUM

то:	AGING & ADULT SERVICES COMMISSION
THROUGH:	SHIREEN McSPADDEN, EXECUTIVE DIRECTOR
FROM:	CINDY KAUFFMAN, DEPUTY DIRECTOR JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS $\int \omega d$
DATE:	NOVEMBER 6, 2019
SUBJECT:	NEW CONTRACT: RESOURCE DEVELOPMENT ASSOCIATES (FOR-PROFIT) TO PROVIDE CASE MANAGEMENT SYSTEMS ASSESSMENT
CONTRACT TERM:	12/16/2019 - 6/30/2020 Contingency Total
CONTRACT AMOUNT	\$124,679 \$12,468 \$137,147
Funding Source FUNDING: PERCENTAGE:	County State Federal Contingency Total \$124,679 \$12,468 \$137,147 100% 100% 100%

The Department of Aging and Adult Services (DAAS) requests authorization to enter into a contract with Resource Development Associates (RDA) for the period of December 16, 2019 – June 30, 2020; in the amount of \$124,679 plus a 10% contingency for a total amount not to exceed \$137,147. The purpose of this contract is for the provision of consulting services to review case management service available citywide for older adults and adults with disabilities.

Background

The San Francisco Human Service Agency's (HSA) Department of Aging and Adult Services plans and administers a variety of federal, state, and local programs to assist older adults and adults with disabilities and their families to maximize self-sufficiency, safety, health, and independence so that they can remain living in the community for as long as possible and maintain the highest quality of life.

On November 8, 2016, the voters of San Francisco approved Proposition I, which established the Dignity Fund through a City Charter amendment. The Dignity Fund is a guaranteed funding stream to provide needed services and supports for older adults and adults with disabilities. The



London Breed, Mayor

Human Services Agency

Charter amendment for the Dignity Fund requires the City to make an annual baseline contribution to the Fund and to increase its contributions to the Fund over the baseline amount in FY 17/18 through FY 26/27.

DAAS, in consultation with the Oversight and Advisory Committee (OAC), developed a FY 18/19 allocation plan for the expenditure of the added \$3 million dollars based on information and recommendations in the 2018 Dignity Fund Community Needs Assessment (DFCNA) that included assessing case management needs for older adults and adults with disabilities. The DFCNA highlighted the importance of case management services in the community and noted that social service providers consistently identified a need for increased case management capacity. System analysis is required to understand the scale of unmet demand, identify the type(s) of case management needed, and assess opportunities to streamline access and collaboration across case management programs within the City.

Services to be Provided

RDA will work closely with DAAS for planning of assessment components and to clarify, vet, and finalize the systems assessment design, methodology, and timeline. The contractor will conduct a broad array of data collection and analysis activities, including administrative data review, interviews, focus groups, and surveys, constituting review of case management services available citywide. RDA will develop an outreach strategy in collaboration with DAAS that will create opportunities for a robust cross-section of target populations and those with one or more equity factors. A comprehensive systems assessment report will be provided following research of the case management system in San Francisco. Finally, RDA will develop a systems map, with key strengths and pain points, and outline targeted recommendations for quality improvement.

Selection

Contractor was selected through Request for Qualification (RFQ) #847 which was issued in May 2019.

Funding

Funding for this grant is provided by Dignity Fund.

ATTACHMENTS

Appendix A – Services to be Provided Appendix B – Program Budget

Appendix A – Services to be Provided

Resource Development Associates

Consulting Services for Case Management Systems Assessment

December 16, 2019 – June 30, 2020

I. Purpose of Contract

The purpose of this contract is for the provision of consulting services to review case management services available citywide for older adults and adults with disabilities. The goal of the systems assessment and other identified deliverables in Section IV-Description of Services is to identify gaps and service needs in the city case management system for older adults and adults with disabilities in order to assist the department in making funding decisions for services.

Activities of Daily Living (ADL)	The basic tasks of everyday life including eating, bathing, dressing, toileting, and transferring (i.e., getting in and out of a bed or chair).
Adult/s with Disabilities	Person/s 18 years of age or older living with one or more disabilities.
CARBON	Contracts Administration, Reporting and Billing On Line System
Caregiver	Adult, 18 years of age or older, who provide in-home care to older adults and/or adults with a disabilities.
Case Management	Case Management is a process to plan, seek, advocate for, and monitor services from different social service or health care organizations and staff on behalf of a client. The process enables social workers in an organization, or in different organizations, to coordinate their efforts to serve a given client through professional teamwork, thus expanding the range of needed services offered. Case Management limits problems arising from fragmentation of services, staff turnover, and inadequate coordination among providers. Case Management can occur within a single, large organization or within a community program that coordinates services among settings. (National Association of Social Workers Standards for Social Work Case Management, 2013)
City	City and County of San Francisco, a municipal corporation
Communities of Color	Persons who identify with a race or ethnicity other than non- Hispanic White.

II. Definitions

Controller	Controller of the City and County of San Francisco or designated agent
Contractor	Resource Development Associates (RDA)
DAAS	Department of Aging and Adult Services
Dignity Fund	The City and County of San Francisco, City Charter, Sections 16.128-1 through 16.128-12. DAAS expends monies in the Fund solely to help older adults and adults with disabilities secure and utilize the services and support necessary to age with dignity in their own homes and communities.
Dignity Fund Community Needs Assessment (DFCNA)	A community needs assessment report required every four years by the City Charter Amendment for the Fund. The findings from each DFCNA inform an allocation plan for the expenditure of the Fund. The first DFCNA was completed in fiscal year 17-18.
Disability	A condition or combination of conditions that is attributable to a mental, cognitive or physical impairment, including hearing and visual impairments, that results in substantial functional limitations in one (1) or more of the following areas of major life activity: a) Self-care: activities of daily living (ADL), and instrumental activities of daily living (IADL); b) Capacity for independent living and self-direction; c) Cognitive functioning, and emotional adjustment.
HSA	San Francisco Human Services Agency
Instrumental Activities of Daily Living (IADL)	Activities related to independent living and include preparing meals, managing money, shopping for groceries or personal items, medication management, performing light or heavy housework, and using a telephone.
LGBT/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 300% of the federal poverty line defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services.

Mental Health and/or Behavioral Health Conditions	Conditions that affect a person's thinking, feeling, mood or behavior, such as depression, anxiety, bipolar disorder, schizophrenia, post-traumatic stress disorder, and substance abuse. Such conditions may be occasional or chronic and affect someone's ability to relate to others and function each day. (https://www.cdc.gov/mentalhealth/)
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
Older Adult	Person who is 60 years of age or older; used interchangeably with the term "senior".
RDA	Resource Development Associates (contractor)
Senior	Person who is 60 years of age or older; used interchangeably with the "older adult".

III. Target Population

This grant will provide a system assessment of case management that serves older adults and/or adults with disabilities living in the City and County of San Francisco who have mental health and/or behavioral health conditions, herein referred to as the target population. The target population may also have additional equity factors identified in the DFCNA:

- Social Isolation
- Low Income
- Limited or No English Speaking Proficiency
- Communities of Color
- Sexual Orientation and Gender Identity

IV. Description of Services

The consultant will engage a four-phased approach designed to provide a timely, comprehensive, and actionable assessment. Following is a description of each phase, including the purpose of each task and how it will contribute to a successful systems assessment with recommendations for improvement.

Phase I: Project Launch & Discovery (Months 1-2)

The planning stage is a vital component of the assessment process, during which time RDA will work closely with the DAAS project team to clarify, vet, and finalize the systems assessment design, methodology, and timeline, along with expectations of both RDA and DAAS. RDA will develop an understanding of the objectives and assumptions, as well as the context in which the systems assessment will be developed.

Task I.1Project Kickoff Meeting. RDA will begin by meeting with DAAS project staffto confirm all parties' understanding of the systems assessment goals, activities, and timeline.This meeting will also serve to establish the roles and responsibilities of RDA and DAAS staff.

Task I.2 Document Review. RDA will review the findings from the first Dignity Fund Community Needs Assessment and other pertinent documentation such as policies or reports produced by DAAS and other agencies to build a comprehensive understanding of a) what work has been done to evaluate the existing case management system and b) what policies and protocols may influence this system.

Task I.3 Discovery Protocol Development and Key Informant Interviews. RDA will conduct two to four interviews with key San Francisco stakeholders to understand the current environment of the case management services system in San Francisco. This will allow RDA to integrate their existing understanding of the Dignity Fund and the DFCNA with additional information about behavioral health and mental health services in San Francisco. In collaboration with the DAAS project team, RDA will develop a protocol to guide these semi-structured interviews, the findings from which will be used to inform subsequent activities.

Task I.4 Benchmarking Protocol Development and Interviews. RDA will conduct two to four interviews with representatives from comparable counties and cities to understand how they have been successful in establishing case management systems that successfully link older adults and adults with disabilities to services to support their mental health. RDA will work with DAAS to identify appropriate contacts for interviews and to develop a protocol to guide the interviews.

Task I.5 Best Practices Literature Review and Inventory. In conjunction with the benchmarking interviews, RDA will review existing literature to identify best practices in case management for older adults and adults with disabilities who have behavioral and/or mental health conditions. The literature review will include best practices for working with consumers within this population who have one or more of the equity factors identified in the DFCNA, although not limited to equity factors. RDA will also explore best practices in staff training,

development, and resources to support recommendations ensuring San Francisco has a quality workforce with the tools and skillsets to serve this population efficiently and effectively. RDA will develop an inventory of best and promising practices pertaining to case management with adult populations that will inform data analysis and findings development.

Deliverables:

- 1. Project Kickoff Meeting: Contractor will coordinate meeting with DAAS project team to confirm project timeline, objectives, and team roles and responsibilities.
- 2. Interview Instruments and Interviews: Contractor will produce and submit Key Informant and Benchmarking Interview Instruments for review by the DAAS project team.
- **3.** Best Practices Inventory Document: Contractor will develop summary document that provides an inventory of best and promising practices pertaining to case management with adult populations.

Phase II: Data Collection and Analysis (Months 1-5)

The second phase consists of a broad array of data collection and analysis activities constituting RDA's review of case management services available citywide for the diverse clients and consumers served by the target population. Through these diverse collection activities, which incorporate the perspectives of the target population consumers, caregivers, and service providers, RDA will provide a comprehensive systems assessment report. Throughout this phase, RDA will work closely with DAAS to validate analytic decisions and facilitate partnership and outreach with other key agencies and consumer groups.

Task II.1 Analytic Plan Development. RDA will develop an analytic plan that maps data sources and intended analyses onto guiding questions. This analytic plan will serve as a living document to guide the assessment and guarantee that data collection and analysis activities clearly address the assessment research questions. RDA will work closely with DAAS to establish research questions and ensure the identification of data sources that are accessible and comprehensive.

Task II.2 Outreach Strategy Development. RDA will develop a strategy in collaboration with DAAS that will identify community groups and providers RDA can partner with to disseminate our consumer survey and recruit for focus groups to ensure they are able to reach the target population, and particularly those with one or more equity factors. RDA will work closely with DAAS to create a brief, inclusive, and accessible survey, which will be administered in paper and online, in each of the city's threshold languages to help understand where, how, and from whom older adults and adults with disabilities with behavioral and/or mental health conditions receive case management services. RDA will work with DAAS to provide introductions and facilitate this partnership, and will develop outreach materials that that can be distributed among DAAS and other San Francisco agency staff, provider networks, and locations where consumers and caregivers can be found.

Task II.3 Consumer Survey Development, Administration, and Analysis. RDA will work with DAAS and its provider agencies to distribute the survey and outreach materials, in line with the outreach strategy. Following the survey administration, RDA will enter and clean the data for analysis. RDA will use descriptive analysis to understand who took the survey and their average responses. RDA will also use inferential statistics to compare groups to determine if any key significant differences exist that can inform the review of the case management system and recommendations for improvement.

Task II.4 Administrative Data Review. RDA will work with DAAS and other City and County key agencies to identify appropriate administrative datasets for analysis. RDA will create clear, specific data requests for information about consumers currently receiving case management services (e.g., demographics, service type, frequency of services, and location of services). RDA will match consumers across datasets to understand the extent to which consumers receive case management services from multiple providers to the extent data is available to do so. If location data are available, RDA will also develop a map of where consumers reside compared to where they receive services. RDA will also request waitlist data (e.g., demographics, service type, and location of waitlisted services) which they will analyze to understand the demand among the target population and those with one or more equity factors for different case management services.

Task II.5 Consumer, Caregiver, and Provider Focus Groups. RDA will conduct between ten to twenty-six focus groups with key stakeholders including consumers in the target population, their caregivers, and providers of case management services to develop a broad and deep understanding of existing case management services available to the target population. RDA will develop specific protocols for each population in collaboration with DAAS. Areas of focus for the groups will be informed by both conversations with DAAS and the best practices and benchmarking conducted in Phase I. RDA will include the following areas of focus as a starting point:

- Strengths of currently available case management services: What works best for consumers, caregivers, and providers? What services do consumers recommend? What current practices (e.g., communication and collaboration between providers and City departments, warm handoffs, data and information sharing, data management systems) are most successful?
- *Gaps in currently available case management services:* What types of support do consumers, caregivers, and providers feel are missing from the current system? Are there specific groups of people who experience greater difficulty navigating the current system? Are there specific geographies of San Francisco with fewer case management services available?
- Areas for improving currently available case management services: What practices do consumers, caregivers, and providers think facilitate successful case management? What practices do they think impede successful case management? What types of training curriculum and resources do providers and caregivers need to support the target population? How can communication pathways between the City and case management providers be improved? To what extent do existing services overlap with each other? What are the best ways to reach the target population? What about members with one or more equity factors?

In what ways must case management approaches adapt to better support the target population?

RDA will work with DAAS to identify specific groups when developing the analytic plan and identify consumer groups based on demographic characteristics, neighborhoods, and service needs. For caregiver and provider groups, RDA will identify participants based on location, population served, and case management services provided.

Task II.6Analysis and Mapping. Following the completion of the survey, focus groups,and administrative data analysis, RDA will triangulate findings to inform the reporting for PhaseIII. RDA will analyze the data to identify key themes, including but not limited to:

- Case management needs of the target population, with particular consideration for those with one or more equity factors.
- Distinctions in case management services that inform consumers' access to services, such as providers who primarily make referrals and linkages compared to those who provide more hands-on case management.
- Areas of the case management system that are working well and areas that are either missing or have opportunities for improvement.

RDA will also provide a systems map that reviews how consumers "flow" through the case management system, with key strengths and pain points identified. RDA will use this map as a tool for visualizing the systems successes and challenges, and for informing targeted recommendations for quality improvement.

Task II.7 Draft and Conduct Initial Findings Summary Presentation. RDA will prepare a presentation of the initial assessment findings from Phases I and II for the DAAS project team and key assessment stakeholders as identified by DAAS and RDA. The presentation will focus on the review of the existing case management system, including our assessment of consumers' needs, case management strengths and gaps, and opportunities for improvement, as well as findings from the best practice and benchmarking activities. RDA will include discussion of methodology to make clear how findings were determined. Following the presentation, RDA will engage DAAS and key partners in a discussion of the findings to vet our interpretation and begin co-creating recommendations based on our findings. This presentation will happen no later than the twenty-second week of the contract.

Deliverables:

1. Analytic Plan: Contractor will develop and submit an analytic plan to DAAS project team that maps data sources, guides the assessment, and ensures that data collection and analysis activities clearly address the assessment research questions.

- 2. Consumer Survey and Focus Group Instruments, and Survey and Focus Group: Contractor will develop a consumer survey and focus group facilitation instruments for submission to DAAS project team for comment and input.
- 3. Data Requests: Contractor will develop and submit clear, specific data requests for information about consumers currently receiving case management services (e.g., demographics, service type, frequency of services, and location of services).
- 4. Initial Findings Summary Presentation: Contractor will prepare a presentation of the initial assessment findings from Phases I and II for the DAAS project team and key assessment stakeholders as identified by DAAS and RDA Draft and Final Systems Assessment Report.

Phase III: Report Development (Months 5 and 6)

The third phase integrates the work of the previous phases to produce the required deliverables ad hoc reports as requested by DAAS. Prior to developing the key deliverables for reporting, RDA will determine a review timeline and iteration process that enables DAAS to provide input and feedback while ensuring that RDA has the time and resources to address their feedback.

Task III Draft, Finalize, and Present Systems Assessment Report: The draft and final written report will be the culmination of all the preceding activities. The report will build on the initial findings summary presented in the previous month, and will provide a comprehensive review of the case management system along with recommendations to ensure it effectively and efficiently serves older adults and adults with disabilities who have a behavioral and/or mental health condition. The draft will be completed no later than the twenty-fourth week of the contract, and the final report will be completed no later than the twenty-sixth week. The case management systems assessment will include:

- An overview of the methodology and stakeholders engaged in the assessment.
- A description and visualization of the case management system for the target population.
- A summary of the population's case management needs, with specific callouts for consumers with one or more equity factors.
- An evaluation of the extent to which the existing system is meeting consumers' needs, with specific callouts for consumers with one or more equity factors.
- Recommendations for improving areas of the existing case management system that are either a) in need of additional support or b) missing from the system, in order to increase key San Francisco departments' and provider agencies' ability to effectively and efficiently provide case management services to the target population.

Deliverables:

- 1. Draft Case Management Systems Assessment Report: Contractor will develop and submit comprehensive assessment report to DAAS project team for review and comment.
- 2. Finalized Case Management Systems Report: Based on comments and requested revisions from contracting agency, contractor will revise, finalize, and submit assessment report.
- 3. Presentation of Assessment Report and Recommendations: Contractor will prepare a final presentation of assessment findings and recommendations for the DAAS project team and key assessment stakeholders as identified by DAAS.

Phase IV: Ongoing Communication and Project Management

RDA will lead bi-weekly calls with the DAAS project team to provide updates, findings and interpretations, and to engage with staff in any problem-solving needs that may arise. RDA's project manager will conduct management activities throughout the project, including leading the RDA team through assessment activities, providing guidance and support for project deliverables, budget management, proactively communicating with the DAAS project team about any project challenges, providing assistance to the DAAS project team as appropriate, and serving as the DAAS project team's main contact throughout the duration of the contract.

RDA will provide a final report summarizing activities, accomplishments, and challenges following the project conclusion.

Service Objectives:

- 1. Monthly Project Management Calls: Contractor will plan, coordinate, and facilitate biweekly communications with the DAAS project team as needed.
- 2. Ongoing Communications: Contractor will engage in additional ad hoc communication with DAAS project team as needed to ensure project is progressing appropriately and as planned.

V. Location and Time of Services

The bulk of Contractor's work shall be done at 2333 Harrison Street, Oakland, CA 94612. When necessary, Contractor will work directly with staff, such as attending face-to-face meetings, at locations to be determined.

VI. Schedule for Deliverables

By Week 8

- Finalize project timeline, objectives and team roles and responsibilities in a meeting with DAAS project team.
- Produce Key Informant Interview instrument and conduct an agreed upon number of (2-4) interviews with key stakeholders.
- Produce Benchmarking Interview instruments and conduct an agreed upon number of (2-4) interviews with representatives from comparable counties and cities.
- Deliver a summary that document best and promising practices.

By Week 12

- Develop an analytic plan with input from DAAS.
- Develop outreach strategy with input from DAAS.
- Develop and administrate consumer survey.

By Week 16

- Develop consumer, caregiver and provider focus groups and interview protocols.
- Conduct an agreed upon number of (10-26) consumer, caregiver and provider focus groups.

By Week 21

- Deliver a systems map.
- Presentation of the initial assessment findings from Phase I and II.

By Week 26

- Deliver a draft of the comprehensive assessment report for review and comment.
- Deliver a final comprehensive assessment report.
- Present assessment findings and recommendations to DAAS and key assessment stakeholders.

VII. Reporting Requirements

Contractor will produce the required deliverables and provide ad hoc reports as requested by the DAAS. For assistance with reporting requirements or submission of reports, contact:

Ella.Lee@sfgov.org Contract Manager, Office of Contract Management

Or

Melissa.McGee@sfgov.org Program and Compliance Manager, Department of Aging and Adult Services

Appendix B – Fee Schedule Resource Development Associates (RDA) Consulting Services for Case Management Systems Assessment December 16, 2019 – June 30, 2020

- I. The contract term for the Consulting Services for Case Management Systems Assessment under this Agreement will begin effective December 16, 2019 and end June 30, 2020.
- II. Total contract amount for the period of December 16, 2019 through June 30, 2020 is not to exceed One Hundred Thirty-Seven Thousand, One Hundred and Forty-Seven Dollars (\$137,147). This amount includes \$7,159 in allowable project expenses as identified in the project budget.
- III. Contractor understand that, of the maximum dollar obligation listed in Article 3 of this Agreement, Twelve Thousand, Four Hundred and Sixty-Eight Dollars (\$12,468) is included as a contingency amount and is neither to be used in the Program Budget, nor available to Contractor without a modification to this Agreement executed in the same manner as this Agreement or a revision to the Program Budget of Appendix B, which has been approved by Contract Manager. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Human Services Agency laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.
- IV. Contractor shall submit invoices upon completion of task/deliverable outlined here:

Payment Schedule 1

- Finalize project timeline, objectives and team roles and responsibilities in a meeting with DAAS project team.
- Produce Key Informant Interview instrument and conduct an agreed upon number of (2-4) interviews with key stakeholders.
- Produce Benchmarking Interview instruments and conduct an agreed upon number of (2-4) interviews with representatives from comparable counties and cities.
- Deliver a summary that document best and promising practices.

Payment Schedule 2

\$17,764

\$15,773

- Develop an analytic plan with input from DAAS.
- Develop outreach strategy with input from DAAS.
- Develop consumer survey and outreach materials with input from DAAS.
- Administrate consumer survey.

Payment Schedule 3

- Develop consumer, caregiver and provider focus groups and interview protocols.
- Conduct an agreed upon number of (10-26) consumer, caregiver and provider focus groups.

Payment Schedule 4

- Develop and submit data requests for information about consumers currently receiving case management services and on waitlist.
- Deliver a system map.
- Presentation of the initial assessment findings from Phase I and II.

Payment Schedule 5

- Deliver a draft of the comprehensive assessment report for review and comment.
- Deliver a final comprehensive assessment report.
- Present assessment findings and recommendations to DAAS and key assessment stakeholders.

Total	\$124,679

Invoices shall document the number of hours spent on the associated deliverable/task as outlined in Attachment 1 to Appendix B Fee Schedule, and any additional work outside of the deliverable/task authorized in writing by DAAS staff or management. The Contractor further understands that payment will be made only upon DAAS staff and/or management confirmation of completion of each deliverable/task and will cover only those costs specifically associated with completion of that task/deliverable.

. A final closing invoice, clearly marked "FINAL," shall be submitted no later than fortyfive (45) calendar days following the closing date of the Agreement, and shall include only those Services rendered during the referenced period of performance. If Services are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to City. City's final reimbursement to the Contractor at the close of the Agreement period shall not exceed the total amount authorized and certified for this Agreement.

\$31,297

\$32,511

\$27,334

V.

		Subject					
	Project Director	Matter Exnert	Project Manager	Research	Research Associate	Total Hours	Total Cost
Activities hourly rate:		\$200	\$185	\$135	\$135		
Phase I: Project launch and discovery		-					
Task I.1 Project kickoff meeting	.9		9	5		17	\$3,135
Task I.2 Document review	4		4	4		12	\$2,180
Task L3a Discovery protocol development	2	1	5	ŝ		8	\$1,425
Task I.3b Two to four interviews with key San Francisco stakeholders			3	4		7	\$1,095
Task I.4a Benchmarking protocol development	2		2	4		8	\$1,360
Task I.4b Two to four interviews with representatives from comparable counties and cities	·		3	4		7	\$1,095
Task 1.5 Draft best practices inventory document	2		12	12		26	\$4,290
Phase I total						85	\$14,580
Phase II: Data collection and analysis							
Task II. I Analytic plan development	33	7	9			11	\$2,185
Task II.2 Outreach strategy development	4	1	8			- I3	\$2,580
Task II.3a Consumer survey development	9		16	20		42	\$7,010
Task II.3b Consumer survey administration	7		ŝ	9		П	\$1,815
Task II.3c Consumer survey analysis	£		7	16		21	\$3,205
Task II.4 Administrative data requests and review	4		5	20		26	\$3,970
Task II.5a Develop consumer, caregiver and provider focus groups and intereview protocols	3	·	2	12		17	\$2,665
Task II.5b Ten to twenty-six consumer, caregiver, and provider focus groups	9		52	46	52	156	\$24,200
Task II.6 Analysis and mapping	14	2	44	20		80	\$14,390
Task II.7 Draft and conduct initial findings summary presentation	12		24	14		50	\$9,030
Phase II total						427	\$71,050
Phase III: Reporting							
Task III.a Draft and finalize systems assessment report	30		40	50		120	\$20,900
Task III.b Draft and present findings and recommendations	10		8	12		30	\$5,350
Phase III total						150	\$26,250
Phase IV: Ongoing Project Management and Communication							
Task IV.1 Bi-weekly client calls and ad hoc communication	4		9	9		. 16	\$2,820
Task IV.2 Project management and internal communication	4		9	9		. 16	\$2,820
Task IV total						32	\$5,640
Activities Total						694	S117,520

Attachment 1 - Budget

Resource Development Associates Consulting Service for Case Management Systems Assessment

Appendix B, Attachment 1 - Budget Oct 2019

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Resource Development Associates Consulting Service for Case Management Systems Assessment

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Appendix B, Attachment 1 - Budget Oct 2019

Attachment 2 - Timeline

	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020
Activities	1 2	3456	7 8 9 10 11	11 12 13 14	15 16 17 18	17 18 19 20 21 22	23 24 25 26
Phase 1: Project launch and discovery			· · · · · · · · · · · · · · · · · · ·				
Task I.1 Project kickoff meeting						· · · · ·	
Task I.2 Document review	· · · · · · · · · · · · · · · · · · ·						
Task I.3 Discovery protocol development and key informant interviews				A A A A A A A A A A A A A A A A A A A	anna an		
Task I.4 Benchmarking protocol development and interviews							
Task I.5 Best practices literature review and inventory						· · · · · ·	· · · · · · · · · · · · · · · · · · ·
Phase 2: Data collection and analysis							
Task II.1 Analytic plan development							nama kanana a unu kaka a uuru ya u u du du du du u u du du du du du du d
Task II.2 Outreach strategy development				- 1, 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Task II.3 Consumer survey development, administration, and analysis							and the second s
Task II.4 Administrative data review					· · · · · · · · · · · · · · · · · · ·		
Task II.5a Develop consumer, caregiver and provider focus group and interevi	review protocols						
Task II.5b Consumer, caregiver, and provider focus groups							anders a serie and the series and the series of the series
Task II.6 Analysis and mapping							
Task II.7 Draft and conduct initial findings summary presentation		· · · · ·					And
Phase 3: Report development						A SAN A S	
Task III.a&b Draft, finalize, and present systems assessment report	5. 5 Sec. *		No. 1 1 1 1				
Phase 4: Ongoing Communication and Project Management			" (and it is a statement)"		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	20 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -	en yez yez annan a (Alternandorsenia) , an a a a a a a Theorem Second and a
Task IV.1 Bi-weekly client calls and ad hoc communication							
Task IV.2 Project management and internal communication							

Resource Development Associates Consulting Service for Case Management Systems Assessment

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Appendix B, Attachment 2 - Timeline Oct 2019