City and County of San Francisco



Edwin M. Lee, Mayor

Human Services Agency

Department of Human Services Department of Aging and Adult Services

Trent Rhorer, Executive Director

MEMORANDUM

TO:	AGING and A	DULT SERVIC	CES COMMISSIC	N	
THROUGH:	SHIREEN MO	CSPADDEN, EX	XECUTIVE DIRE	CTOR /	
FROM:			TY DIRECTOR CTOR OF CONTI	RACTS D	
DATE:	NOVEMBER	2, 2016			
SUBJECT:	PUBLIC AUT	THORITY (NO	ISCO IN-HOME N-PROFIT) FOR IVE SERVICES		
GRANT TERM:	7/1/16- 6/30/20	0			
TOTAL AMOUNT:	<u>New</u> \$250,686,075	Contingenc \$12,534,304		379	
ANNUAL AMOUNT:	<u>FY16/17</u> \$60,891,530	<u>FY17/18</u> \$62,009,033	<u>FY18/19</u> \$63,256,925	<u>FY19/20</u> \$64,528,586	
Funding Source FUNDING: PERCENTAGE:	<u>County</u> \$50,137,215 20%	<u>State</u> \$75,205,822 30%	<u>Federal</u> \$125,343,038 50%	<u>Contingency</u> \$12,534,304	<u>Total</u> \$263,220,379 100%

The Department of Aging and Adult Services (DAAS) requests authorization to enter into a new grant agreement with the San Francisco In-Home Supportive Services Public Authority (SF IHSS PA) for Independent Provider (IP) Mode In-Home Supportive Services for the term of July 1, 2016 through June 30, 2020 for an amount of \$250,686,075 plus a 5% contingency of \$12,534,304 for a total not to exceed amount of \$263,220,379. In accordance with Charter Section 9.118(b), "any contracts or agreements entered into by a department requiring anticipated expenditures by the City and County of \$10,000,000 shall be subject to approval of the Board of Supervisors by resolution." This grant was previously approved by the City and County of San Francisco Board of Supervisors on July 20, 2016 (Resolution #275-16).

Background

The In-Home Supportive Services (IHSS) Program aids eligible low-income seniors with chronic and disabling conditions by matching them with Independent Providers (IP) who assist them in personal care that they are no longer able to handle and in completing routine household tasks. The provision of this

service allows seniors to remain safely in their own homes, while encouraging independence and rehabilitation where possible. IHSS is provided through either (a) an independent provider (IP), or (b) a contracted agency provider for clients who are unable to find and/or supervise their own IP's. Currently, there are approximately 23,000 IHSS clients, 95% who utilize IP's.

The SF IHSS Public Authority has two separate grants with HSA, one for the general operations and the administration of health and dental benefits, and one for Emergency On-Call Services (addressed by a separate Commission action.) General operations, known as Provider Mode, include: Registry, Criminal background checks for the IP workforce (Fingerprinting), the Mentorship Program and IP Health Care Benefits. The PA's administrative function also includes an Advisory Council, whose board members attend meetings, and for which they are paid a stipend. The Advisory Council is supported by the state with pass-through funding. This split facilitates the Department's reporting and accounting as it is required to report expenditures and is reimbursed according to the functions of each program.

Services to be Provided

The IHSS Public Authority maintains a Registry of eligible IP's for consumers who need help finding workers, determines the homecare workers' eligibility for benefits, provides background investigations of new homecare workers including fingerprinting, and provides employment training for IP's. It also provides outreach to consumers, encouragement of consumer participation in IHSS services, and education regarding use of the registry to enhance the quality and accessibility of care. SF IHSS PA advocates for improved quality of service and compensation, distributes educational materials, and conducts monthly worker orientation presentations to expand the number and quality of workers on the IHSS Central Registry. The PA offers training opportunities to Registry home care providers through a partnership with Homebridge Training (formerly TAPCA). The Personal Care Assistant Basic Training course consists of 48 hours of training that includes CPR/First Aid certification.

The Mentorship Program assists and educates consumers on the programs and available resources that will enable them to successfully transition back into their communities. The mentors facilitate consumers in discharges from Laguna Honda Hospital over a 60-day transition period, half of which is spent on instructing consumers on how to flourish in their homes and communities. The Mentorship program is partially supported through a work order from the Department of Public Health.

The IHSS Public Authority enrolls eligible providers in health and dental plans. IP's who are authorized to work and are paid for two consecutive months (and for at least 25 hours in one of those months) become eligible to apply for a full medical plan called Healthy Workers, administered by the San Francisco Health Plan.

Grantee Selection

The Board of Supervisors established the San Francisco IHSS Public Authority in May 1995 as an independent public agency under California Welfare and Institutions Code section 12301.6 to "provide for the delivery of in-home supportive services and to perform various activities related to delivery of IHSS services." The IHSS Public Authority provides services necessary to support IHSS clients through support of their IP providers.

Location and Time of Services

In-Home Supportive Services are provided to consumers at their places of residence. Individual Providers (IP) are trained on site at 832 Folsom Street, 9th Floor, San Francisco, CA 94107 and at Homebridge, Inc., 1035 Market Street, L-1, San Francisco, CA 94103. Administrative tasks associated with the IP's are located on site (fingerprinting, benefits.)

Funding

This grant utilizes a combination of Federal, State, and County funds.

ATTACHMENTS

Appendix A – Services to be Provided

Appendix B – Program Budget - Operations

Appendix B(a) - Program Budget - Fingerprinting Project

Appendix B(b) - Program Budget - Advisory Council

Appendix B(c) - Program Budget - Consumer Peer Mentoring Program

Appendix A – Services to be Provided

San Francisco IHSS Public Authority Consumers in Independent Provider Mode – In-Home Supportive Services

July 1, 2016 – June 30, 2020

I. Purpose of Grant

The purpose of the contract is to improve services under the Independent Provider mode for In-Home Supportive Services (IHSS) consumers in the City and County of San Francisco. In order to accomplish this goal, the major service areas are:

- A. maintaining a home care worker registry;
- B. providing and administering health and dental benefits for independent providers;
- C. conducting criminal background checks of potential independent providers; and
- D. providing a mentorship program for IHSS consumers.

II. Worker Registry Service

A. Definitions:

Grantee	San Francisco In-Home Supportive Services Public Authority
HSA	Human Services Agency of the City and County of San Francisco
IP	Independent Provider is the term used to describe In-Home Supportive Individual Providers
Consumer	An individual who has been assessed and authorized by DAAS social workers to receive personal care, domestic, and related services through the San Francisco IHSS Program.
DAAS	San Francisco Department of Aging & Adult Services
CMIPS	Case Management Information and Payroll System, the state wide IHSS database



Department of Justice

B. Target Population

DOI

The Registry target populations consist of: (1) all IHSS consumers who receive in home help services through the San Francisco IHSS program and (2) Individuals who wish to work as IPs.

C. Description of Services

- i. Registry services are intended to benefit consumers by aiding them in hiring an IP who comes as close as possible to meeting their individual needs, so that they are able to form a stable employer relationship with the IP.
- **ii.** Grantee shall design and maintain a registry database of IPs who have cleared Registry screening and IHSS IP enrollment. The registry database will serve the purpose of compiling appropriate referral lists for IHSS consumers who request such assistance.
- **iii.** Grantee shall recruit and enroll individual providers to the Registry on an ongoing basis.
- **iv.** Grantee shall monitor both the number and diversity of active Registry workers to ensure that the Registry best meets the service and language needs of IHSS consumers. Registry demographics should reflect the ethnic and linguistic makeup of the IHSS consumer population.
- v. Grantee shall require Registry IPs to participate in personal care assistance training offered through the Homebridge Training program.
- vi. Grantee will identify consumers who need help in the hiring process and refer them to the Mentorship Program.

D. Grantee Responsibilities

- i. Grantee shall analyze demographics of IHSS consumer population quarterly.
- **ii.** Grantee shall check in with Registry workers on a quarterly basis to verify their continued interest and eligibility for the program.



- iii. Grantee will track numbers of users of Registry services on a daily, weekly, and monthly basis.
- iv. Grantee will ensure the Registry database contains at least 5 active and available providers to every one consumer Registry user. Recruitment will be made through outreach and presentations as necessary to maintain Registry size and diversity.
- v. Grantee shall provide consumers with a list of at least 5 Registry workers whose skills match consumer service and language needs as closely as possible.
- vi. Grantee shall develop policy guidelines for referring consumers and IPs to the Union and/or the Independent Provider Assistance Center (IPAC) for questions regarding union contract or contact info, timesheets, or payroll. Grantee shall ensure Registry staff are knowledgeable and be able to know when to refer questions or issues to the Union or IPAC.
- vii. Grantee shall require that potential workers applying to be active on the Registry have met all legal requirements to become an IHSS worker, including having passed a criminal background check through DOJ, as well as verifying that they are active in CMIPS.
- viii. Grantee shall require that all IPs joining the Registry attend a Registry orientation.
- ix. Grantee shall maintain policies and procedures relating to the conduct of both IHSS Registry consumers and Registry IPs. The Grantee shall implement a protocol by which IPs and consumers who do not follow established rules and guidelines may no longer utilize Registry services. Grantee and DAAS staff will inform each other of conduct problems of consumers and collaboratively address issues. Documentation of violations and determinations will be maintained through this process and retained for monitoring.
- **x.** Grantee shall notify DAAS social worker by email the same day a Registry list has been sent to a consumer, and shall retain documentation for monitoring.
- **xi.** Grantee shall conduct follow up with Registry consumers within 15 days after sending out a list to determine how things are going and if the consumer has hired from the list. Follow-up shall be documented.

Appendix A FY 2016-2020



- **xii.** Grantee shall work in collaboration with IHSS social workers to identify Registry consumers unable to hire on their own.
- xiii. Grantee will maintain records for reporting purposes of the following: Registry consumer follow up results, DAAS SW notifications (both initial and follow-up), records of pre-screening interviews, as well as determinations about IPs and consumers who are no longer allowed to participate in the Registry due to rule violations.

III. IHSS Provider Benefits Administration Service

A. Definitions

Vendors	Entities contracted with IHSS-PA for Health and Dental Benefits
COBRA	Consolidated Omnibus Reconciliation Act of 1985

B. Target Population

The target population consists of IHSS independent providers enrolled with IHSS and who meet eligibility requirements to enroll in the health and dental benefits provided by the Grantee.

C. Description of Services

Grantee shall provide the following services during the term of this grant:

- i. Analysis of IP eligibility for health and dental benefits
- ii. Dissemination of IP enrollment information and applications
- iii. Information and Referral services for IP health and dental coverage questions
- iv. Assistance during open enrollment to add/change/delete health and dental coverage
- v. Maintenance of eligible IP enrollment data
- vi. Collaboration with vendors to update eligibility list and notify all potential COBRA beneficiaries of available benefits.

D. Grantee Responsibilities

- i. Grantee shall receive and review all enrollment applications to determine eligibility for health and dental insurance coverage
- ii. Grantee shall notify IPs of enrollment status



- iii. Grantee shall follow procedures to ensure that all qualified IPs have proper health and dental insurance coverage
- **iv.** Grantee shall respond promptly to IP inquiries regarding health and dental insurance coverage
- v. Grantee shall assist IPs with resolving discrepancies of coverage
- vi. Grantee shall ensure that all records pertaining to health and dental insurance are safely stored
- vii. Grantee shall collect and analyze benefit participation/utilization data for annual reports to DAAS.

IV. Independent Provider Enrollment Service

A. Definitions

PEAU	Provider Enrollment Appeals Unit
CDSS	California Department of Social Services
CORI	Criminal offender record information
IPEC	In-Home Supportive Services Public Authority Provider Enrollment Center
ACL	All County Letter
Tier 1	W & I Code Section 12305.81 – which prohibits any individual who in the last 10 years has been convicted of, or incarcerated following a conviction for, a crime involving fraud against a government health care or supportive services program, or a violation of subdivision (a) of section 273a of the Penal Code (PC) (abuse of a child under circumstances/conditions likely to produce great bodily harm or death), or Section 368 of the PC (abuse of an elder or dependent adult), or similar violations in another jurisdiction. (apply to felony and misdemeanor offenses.)



Tier 2	Exclusionary crimes including: W&IC section 12305.87 and include the following: – A violent or serious felony, as specified in PC section 667.5(c), and PC section 1192.7(c); – A felony offense for which a person is required to register as a sex offender, pursuant to PC section 290(c); and – A felony offense for fraud against a public social services program, as defined in W&IC section 10980(c)(2) and (g)(2).
<u>Tier 1 Notification</u> <u>Forms</u>	
SOC 852	
SOC 855 A SOC 858 A SOC 859 A	Notice to Applicant Provider of Provider Ineligibility Due to Tier 1 Crimes (SOC 852) Notice to Recipient of Provider Ineligibility Due to Tier 1 Crimes (SOC 855A) Notice to Provider of Provider Ineligibility—Tier 1 Crimes Ineligibility— Subsequent Conviction (SOC 858A)
	Notice to Recipient of Provider Ineligibility—Tier 1 Crimes Ineligibility— Subsequent Conviction (SOC 859A)
SOC 856	To Request An Appeal (SOC 856)
<u>Tier 2 Notification</u> <u>Forms</u>	
SOC 852 A	Notice to Applicant Provider of Provider Ineligibility Due to Tier 2 Crimes (SOC 852A)
SOC 855 B	Notice to Recipient of Provider Ineligibility Due to Tier 2 Crimes (SOC 855B)
SOC 856	To Request An Appeal (SOC 856)
SOC 857	Notice to Recipient of Provider Eligibility

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	County/PA/NPC Acknowledgement of Receipt of Waiver (SOC 857)
SOC 858 B	Notice to Provider of Provider Ineligibility—Tier 2 Crime Ineligibility—Subsequent Conviction (SOC 858B)
SOC 859 B	Notice to Recipient of Provider Ineligibility—Tier 2 Crimes Ineligibility— Subsequent Conviction (SOC 859B)
SOC 862	IHSS Recipient Request for Provider Waiver form (SOC 862)
SOC 863	IHSS Applicant Provider Request for General Exception form (SOC 863)
<u>SOC 881</u>	IHSS Provider Request to Remain Active in CMIPS

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B. Target Population

The target population consists of individuals who apply to become IPs in the San Francisco IHSS program. Those who clear all state requirements to become IPs are then enrolled with DAAS to provide IHSS home care services.

C. Description of Services

The Grantee shall:

- i. Receive Criminal Offender Record Information (CORI) for all applicants to ensure that state eligibility requirements are met for their enrollment as IHSS IPs;
- ii. Respond to all applicant requests regarding criminal background check status;
- iii. Update CMIPS of all eligible and ineligible IPs; and
- iv. Process all Provider Appeals of criminal background check results.
- v. Communicate with IPs who has not worked for 12 months regarding continued eligibility.

D. Grantee Responsibilities

- i. Provider CORI information
 - (1) Grantee shall analyze Criminal Offender Record Information (CORI) from the DOJ for Tier 1 or Tier 2 Convictions.

- (2) Grantee shall determine individual eligibility for IHSS service provision
- (3) Grantee shall enter individual eligibility information into CMIPS
 - a. Grantee shall develop procedures to ensure that IPs who have gone through the finger printing process have accurate record in CMIPS such as SSN, name and address.
- (4) Grantee shall notify consumer and prospective provider of eligibility determination using appropriate State notification forms
- (5) Per ACL 10-05, Grantee shall :
 - a. Destroy criminal history record information immediately following determination of applicants who have cleared.
 - **b.** Retain the criminal history record information of applicants who are disqualified based on a criminal record for a period of one year, for purposes of any legal appeal the provider may file.
- ii. Applicant requests
 - (1) Grantee shall develop procedures to respond to fingerprint status inquiries in a timely fashion.

iii. Appeals

- (1) Grantee shall develop procedures to receive applicant appeals and respond to questions regarding appeals
- (2) Grantee shall forward all appeals to the state PEAU
- (3) Grantee shall share CORI information with the PEAU, applicant, and consumer according to State IHSS regulations.
- iv. Inactive Providers
 - (1) Grantee shall send form SOC 881 via mail to IPs who have not submitted timesheets in 12 months
 - (2) Grantee will deactivate IPs who do not request to remain active in CMIPS

V. IHSS Mentorship Program

A. Definitions

Mentor

An individual with disabilities who has experience 1) transitioning from institutional settings to independent community living,

and/or 2) living independently in the community, and/or 3) hiring or managing IHSS Independent Providers.

IHSS Eligible	An individual who is currently: (1) an IHSS consumer; or (2) a Medi-Cal recipient and has applied for In Home Supportive Services through the San Francisco Department of Aging and Adult Services.
IP	Independent Provider of IHSS
Mentee	A recipient of the Consumer Mentoring Service.
SNFS	Skilled Nursing Facilities such as Laguna Honda Hospital

B. Target Population

- 1) IHSS-eligible Consumers in the process of discharging from institutional-living settings to community living in San Francisco,
- 2) Current recipients of San Francisco IHSS who are in need of shortterm support to remain living independently in the community, and
- 3) Current recipients of San Francisco IHSS who need help hiring and managing their IHSS Provider(s).

C. Description of Services

- i. Consumer Pre-Interview assistance
 - Grantee will provide mentors to consumers who need assistance with phone screening and interviewing potential Independent Providers from the Registry or elsewhere
- ii. Consumer Training
 - (1) Grantee will provide training and coaching on how to be a successful employer of an IHSS Independent Provider
- iii. Skilled Nursing Facility Discharge Mentoring
 - (1) Grantee will assist IHSS-eligible consumers in the process of discharging from skilled nursing facilities with hiring and training Independent Providers or working with Contract Home Care Providers



- (2) Grantee will provide coaching on how to be a successful employer of an IHSS Independent Provider or a successful user of IHSS Contract mode
- iv. Outreach and Referral
 - (1) Grantee will develop an outreach plan to inform Skilled Nursing Facilities, IHSS Consumers, DAAS IHSS Social Workers, and other community partners how individuals can access the IHSS Consumer Mentoring Services.
 - (2) Grantee will conduct sufficient outreach to achieve an annual unduplicated population of 100 Mentees.

D. Grantee Responsibilities

- i. Skilled Nursing Facility Discharge mentoring
 - (1) Grantee will provide mentors to work with consumers leaving SNFS on topics that will include, but not be limited to:
 - a. Accessing community-based resources
 - b. Hiring, managing, and retaining IHSS providers
 - c. Accessing and using public transportation
 - d. Exploring community services including banks, ATMs, markets, museums, restaurants, retail stores, etc.
 - e. Discussing/demonstrating personal hygiene/care routines.
- ii. Grantee will assist client and IP with planning homecare after discharge
 - (1) Assist to coordinate start date for IP's employment
 - (2) Assist in developing IP's regular schedule
- iii. Grantee will contact mentee within 3 months after discharge from the facility to assess the Mentee's satisfaction with the mentorship services and to determine the level of stability in living in the community. Additional earlier follow up may also be conducted, if necessary. All follow up activities will be documented in consumer records.
- iv. Consumer Records
 - (1) Grantee will create records for all consumers accessing Public Authority Services. Consumer Records will include:
 - a. Pre-interview assistance records
 - i. Assessment of consumer hiring needs
 - ii. Notes on interviewing and hiring process
 - iii. Outcome of hiring attempts
 - b. Consumer training records

- i. List of training modules attended by consumer with dates
- c. Discharge mentoring records
 - i. List of training modules provided
 - ii. Documentation of IP hiring process
 - iii. Documentation of community needs
 - iv. Documentation of post discharge
- d. All staff contact with and about mentee will be documented in progress notes. This includes inperson visits, phone calls and collateral contacts with other agencies etc.
- v. Mentor Recruitment and Qualification
 - (1) Grantee will recruit and maintain an adequate number of Mentors to meet the annual Service Objectives.
 - (2) Grantee will ensure all Mentors have the following qualifications:
 - a. Mentors will have the following experience:
 - i. Experience transitioning from institutionalliving settings in San Francisco to community living and/or
 - ii. Experience living independently in the community and/or
 - iii. Experience with hiring and managing IHSS Independent Provider(s) and/or
 - iv. Experience working as an IHSS Provider.
 - b. Mentors will complete Mentorship training prior to providing services.
- vi. Mentor Training
 - (1) Grantee will develop a training curriculum specific to the needs of new IHSS Consumer Mentors.
 - (2) Grantee will provide all new Consumer Mentors with training.
 - (3) Grantee will maintain records of Mentor training attendance.

vii. Mentor Records

- (1) Grantee will maintain Mentor Records for all Consumer Mentors. These records will contain:
 - a. Job Application
 - b. Training Records



VI. Service Objectives

A. Worker Registry

- i. Number of unduplicated consumers to whom the Grantee will provide Registry lists annually. Target = a minimum of at least 1,000.
- ii. Number of diverse IPs on the Registry at any given point in time. Target = at least a ratio of 1:5 (of Registry consumers to IPs on list)

B. IHSS Provider Benefits Administration

- iii. Percentage of eligible IPs who receive health, dental, and/or COBRA enrollment packets within 30 days of when the Grantee receives CMIPS data. Target = a minimum of 95%.
- iv. Percentage of qualified IPs submitting enrollment packets that are subsequently enrolled into appropriate plans. (If the application is submitted before the 12^{th} of each month, coverage will start on the 1^{st} of the following month.) Target = a minimum of 95%.

C. Independent Provider Enrollment Service / Fingerprinting

 v. Percentage of all Criminal Offender Record information that is processed by the Grantee within 5 working days of receipt. Target = a minimum of 95%.

D. IHSS Consumer Mentorship Program

- **vi.** Number of unduplicated Mentees served annually. Target = a minimum of at least 100.
- vii. Number of individuals that Grantee assists in discharge from longterm care institutions to independent living. Target = a minimum of at least 20.
- viii. Number of consumers in the community to whom the Grantee will provide support to assist with continued independent living. Target = a minimum of at least 20.
- ix. Percentage of Registry-using consumers who receive assistance with pre-screening interviews. Target = a minimum of 10%.

VII. Outcome Objectives

A. Worker Registry

i. The average number of days it takes for a consumer to hire a provider after contacting the Registry. Target = 29 days or fewer.



- ii. In a written survey approved by HSA and conducted by the grantee, a minimum of 85% of the consumers will indicate:
 - 1. General satisfaction with the registry services provided (4 or 5 on a five point scale.)

 - 2. Consumers state they feel safe in the care of the providers (4 or 5 on a five point scale.)

B. IHSS Provider Benefits Administration

- iii. Percentage of qualified IPs who will be enrolled in proper health and dental insurance plans (including COBRA coverage.) Target = a minimum of 95%.
- iv. In a written survey approved by HSA and conducted by the grantee, a minimum of 85% of the providers will indicate:
 - 1. General satisfaction with the Benefits Administration provided (4 or 5 on a five point scale.)

C. Independent Provider Enrollment Service / Fingerprinting

v. Safety of 100% of the consumers is the object of the enrollment process and stringent criteria associated with fingerprinting.

D. IHSS Consumer Mentoring Service

On an annual basis, Grantee will meet the following outcome objectives:

- vi. Percentage of previously institutionalized Mentees who will be successfully living independently in the community 6 months after closure of services. Target = a minimum of 90%.
- vii. Percentage of Mentees receiving assistance with interviews that have stabilized IHSS home care 6 months after closure of mentorship services. Target = a minimum of 90%.
- viii. Percentage of Mentees who report that their mentor helped them to transition successfully to or remain in community living. Target = a minimum of 90%.

VIII. Reporting Requirements

- A. Grantee will provide a quarterly report of activities, referencing the tasks as described in Description of Services and Service Objectives. Reports are due 15 days after the close of the reporting period. Service Objectives will be entered into the Contracts Administration, Billing and Reporting Online (CARBON) system.
- B. Grantee will provide an annual report summarizing the grant activities, referencing the tasks as described in Description of Services, Service Objectives, and Outcome Objectives. This report will also include accomplishments and challenges encountered by the Authority. This



report is due 15 days after the completion of the program year and will be entered into CARBON.

- **C.** Grantee will enter the following services measures on a monthly basis into the CARBON system:
 - 1. Worker Registry: Number of unduplicated consumers to whom Registry lists was provided.
 - 2. IHSS Provider Benefits Administration: Number of qualified IPs submitting enrollment packets who are subsequently enrolled into appropriate plans.
 - 3. Independent Provider Enrollment Service: Number of Criminal Offender Records processed by the Grantee during reporting month.
 - 4. IHSS Consumer Mentoring Service: Number of unduplicated Mentees served during reporting month.

D. Grantee shall develop and deliver ad hoc reports as requested by HSA.

E. The reports are to be submitted electronically to the following staff:

Elena Baranoff Senior Administrative Analyst elena.baranoff@sfgov.org

Megan Elliott IHSS Program Director megan.elliott@sfgov.org

Alternatively, reports can be mailed to both staff at the following address:

Department of Human Services PO Box 7988 San Francisco, CA 94120

IX. Monitoring Activities

- A. <u>Program Monitoring</u>: Program monitoring will include review of client eligibility, back-up documentation for reporting progress towards meeting service and outcome objectives, and compliance with minimum program requirements.
- B. <u>Fiscal Compliance and Contract Monitoring</u>: Fiscal monitoring will include review of the Grantee's organizational budget, the general ledger, quarterly



balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and MOUs, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

Appendix A FY 2016-2020



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2					Document Date:	10/12/16
3	HUMAN SERVICES AGENCY CO	NTRACT BUD	GET SUMMAR	RY		
4			BY PRO			
5	Contractor's Name				Contract Ter	m
6	San Francisco In-Home Supportive Services Public	c Authority			07/01/16	- 06/30/20
7	(Check One) New 🛛 Renewal Modificat					
8	If modification, Effective Date of Mod. No. of N					
9	Program: SF IHSS Public Authority (PA ADMIN / HE	ALTH / DENTAL)				
10	Budget Reference Page No.(s)	Í				TOTAL
11	Program Term: 7/1/16 - 6/30/20	FY2016-17	FY2017-18	FY2018-19	FY2019-20	7/1/16-6/30/20
12	Expenditures	112010-17	112011-10	112010-10	112010-20	11110 0100120
	Salaries & Benefits	\$1,567,275	\$1,567,275	\$1,567,275	\$1,567,275	\$6,269,100
	Operating Expense	\$59,080,071	\$60,194,574	\$61,441,466	\$62,714,127	\$243,430,238
	Subtotal	\$60,647,346	\$61,761,849	\$63,008,741	\$64,281,402	\$249,699,338
16	Indirect Percentage (%)					. ,
17	Indirect Cost (Line 16 X Line 15)	\$0	\$0	\$0	\$0	\$0
18	Capital Expenditure	\$4,500	\$7,500	\$8,500	\$7,500	\$28,000
19	Total Expenditures	\$60,651,846	\$61,769,349	\$63,017,241	\$64,288,902	\$249,727,338
20	HSA Revenues					
21	General Fund 20%	\$12,130,369	\$12,353,870	\$12,603,448	\$12,857,780	\$49,945,468
	State Funding 30%	\$18,195,554	\$18,530,805	\$18,905,172	\$19,286,671	\$74,918,201
	Federal Funding 50%	\$30,325,923	\$30,884,675	\$31,508,621	\$32,144,451	\$124,863,669
24 25						
	TOTAL HSA REVENUES	\$60,651,846	\$61,769,349	\$63,017,241	\$64,288,902	\$249,727,338
27	Other Revenues	\$00,051,040	\$01,709,349	\$03,017,241	\$04,200,902	\$249,121,330
28	Other Revenues				ŀ	
29						
30						
31						
32						
33	Total Revenues	\$60,651,846	\$61,769,349	\$63,017,241	\$64,288,902	\$249,727,338
34	Full Time Equivalent (FTE): 18.04 FTE PA Staff Only					
36	Prepared by:		г	Celephone: 415-5	93-8115	10/12/16
37	HSA-CO Review Signature:					
38	HSA #1					10/12/2016

1 2 3 4 5	Program Name: SF IHSS Public Authority PA ADMIN / HEALTH / DENTAL
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Salaries & Benefits Detail

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Appendix B, Page 2 Document Date: 10/12/16

9	-										
10	-		Agency	Fotels	For HS	A Program	FY2016-17 For DHS Program	FY2017-18 For DHS Program	FY2018-19 For DHS Program	FY2019-20 For DHS Program	TOTAL
12	POSITION TITLE	Current Salary	Annual Full Time Salary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	07/01/16 to 06/30/20
13	Executive Director (K. Dearman)	\$133,636	\$133,636	90%	100%	90%	\$120,273	\$120,273	\$120,273	\$120,273	\$481,091
14	Fiscal & Operations Manager (L. Chau)	\$105,558	\$105,558	75%	100%	75%	\$79,169	\$79,169	\$79,169	\$79,169	\$316,674
15	Program Manager (M. Olivares)	\$103,212	\$103,212	84%	100%	84%	\$86,698	\$86,698	\$86,698	\$86,698	\$346,793
16	Mentorship Program Manager	\$55,000	\$55,000	100%	100%	100%	\$55,000	\$55,000	\$55,000	\$55,000	\$220,000
17	Mentorship Liaison - Laguna Honda (T. Russell)	\$42,000	\$42,000	100%	100%	100%	\$42,000	\$42,000	\$42,000	\$42,000	\$168,000
18	Mentorship Liaison - One-Stop Center	\$42,000	\$42,000	100%	100%	100%	\$42,000	\$42,000	\$42,000	\$42,000	\$168,000
19	Executive Assistant (P. Hoctel)	\$60,027	\$60,027	55%	100%	55%	\$33,015	\$33,015	\$33,015	\$33,015	\$132,060
20	Benefits Coordinator (O. Ng)	\$49,117	\$49,117	100%	100%	100%	\$49,117	\$49,117	\$49,117	\$49,117	\$196,469
21	Sr Human Resources Generalist (M. Huang)	\$55,729	\$55,729	100%	100%	100%	\$55,729	\$55,729	\$55,729	\$55,729	\$222,916
22	Registry Supervisor (I. Selskaya)	\$60,403	\$60,403	100%	100%	100%	\$60,403	\$60,403	\$60,403	\$60,403	\$241,611
23	Program Assistant (Y. Cunningham)	\$52,252	\$52,252	100%	100%	100%	\$52,252	\$52,252	\$52,252	\$52,252	\$209,009
24	Registry / Counselor - 1 (E. Gutierrez)	\$45,990	\$45,990	100%	100%	100%	\$45,990	\$45,990	\$45,990	\$45,990	\$183,960
25	Registry / Counselor - 2 (E. Ramirez)	\$47,572	\$47,572	100%	100%	100%	\$47,572	\$47,572	\$47,572	\$47,572	\$190,289
26	Registry / Counselor - 3 (W. Chan)	\$45,990	\$45,990	100%	100%	100%	\$45,990	\$45,990	\$45,990	\$45,990	\$183,960
27	Registry / Counselor - 4 (S. Johnson-Auzenne)	\$49,986	\$49,986	100%	100%	100%	\$49,986	\$49,986	\$49,986	\$49,986	\$199,944
28	Registry / Counselor - 5 (V. Etalis)	\$48,851	\$48,851	100%	100%	100%	\$48,851	\$48,851	\$48,851	\$48,851	\$195,406
29	Registry / Counselor - 6 (J. Tang)	\$45,990	\$45,990	100%	100%	100%	\$45,990	\$45,990	\$45,990	\$45,990	\$183,960
30	Reserve for Overtime - Program Staff Only	\$16,000	\$16,000	0%	0%	0%	\$16,000	\$16,000	\$16,000	\$16,000	\$64,000
31	Receptionist / Admin Support (B. Hom)	\$42,000	\$42,000	100%	100%	100%	\$42,000	\$42,000	\$42,000	\$42,000	\$168,000
32	Deputy Director	\$109,500	\$109,500	100%	100%	100%	\$109,500	\$109,500	\$109,500	\$109,500	\$438,000
33		\$0	\$0	0%	0%	0%	\$0	\$0	\$0	\$0	\$0
34 35	TOTALS	l	\$1,210,815	18.04	19.00	18.04	\$1,127,536	\$1,127,536	\$1,127,536	\$1,127,536	\$4,510,144
36	FRINGE BENEFIT RATE	F	39.00%				39.00%	39.00%	39.00%	39.00%	39.00%
	EMPLOYEE FRINGE BENEFITS	L	\$472,218				439,739	439,739	439,739	439,739	\$1,758,956
38 39		-						100			
40	TOTAL SALARIES & BENEFITS		\$1,683,033				\$1,567,275	\$1,567,275	\$1,567,275	\$1,567,275	\$6,269,100
41	HSA #2										10/12/2016

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3]								
4	Program Nam								
5	PA ADMIN / H	EALTH / DEN	TAL						
7	1			Opera	ating Expen	se Detail			
8	1				5.				
9	1								
10]								
11 12	EXPENDITU	RE CATEGO	RY	TERM	FY2016-17	FY2017-18	FY2018-19	FY2019-20	TOTAL
	Rental of Prop				\$259,770	\$259,770	\$259,770	\$259,770	\$1,039,080
	Utilities(Teleph		Maintenance)		\$16,000	\$16,000	\$16,000	\$16,000	\$64,000
15	Postage				\$15,000	\$15,000	\$15,000	\$15,000	\$60,000
16	Office Supplies	6			\$22,000	\$22,000	\$22,000	\$22,000	\$88,000
17	Printing (News	letter / Commu	unications / Office Forms)	2	\$36,500	\$36,500	\$36,500	\$36,500	\$146,000
18	Insurance			74	\$19,000	\$19,000	\$19,000	\$19,000	\$76,000
19	Prof. Members	hip / Staff Trai	ning / Recruitment / Meetings		\$9,500	\$9,500	\$9,500	\$9,500	\$38,000
20	Staff Travel (M	ileage / Accom	nmodations)		\$5,500	\$5,500	\$5,500	\$5,500	\$22,000
21	CONSULTAN	T/SUBCONT	TRACTOR DESCRIPTIVE TIT	LE					
22	Independent A	uditor			\$35,000	\$35,000	\$35,000	\$35,000	\$140,000
23	Bookkeeping &		ces		\$40,000	\$40,000	\$40,000	\$40,000	\$160,000
24	Technology Co	insultant			\$42,000	\$42,000	\$42,000	\$42,000	\$168,000
25	Legal Counsel				\$28,000	\$28,000	\$28,000	\$28,000	\$112,000
	Benefits Manag				\$128,500	\$128,500	\$128,500	\$128,500	\$514,000
27	Homecare Reg				\$14,000	\$14,000	\$14,000	\$14,000	\$56,000
28	Other Consultir	ng			\$10,000	\$10,000	\$10,000	\$10,000	\$40,000
29	OTHER								-
30	Exchange (Mor	nthly Email Ser	vice - Cloud)		\$2,000	\$2,000	\$2,000	\$2,000	\$8,000
31	Education & Ou	utreach (Incl. S	DN)		\$18,000	\$18,000	\$18,000	\$18,000	\$72,000
32	CAPA Annual [Dues			\$16,600	\$16,600	\$16,600	\$16,600	\$66,400
33	Mentorship Pro	gram Stipend	/ Training Materials		\$42,500	\$42,500	\$42,500	\$42,500	\$170,000
			Act) - July thru March		\$585,000	\$0	\$0	\$0	\$585,000
	Health Insurance		and the second	-	\$54,453,610	\$55,754,765	\$56,953,310	\$58,177,623	\$225,339,308
_	Dental Insurance	ce - Liberty Der	ntal	-	\$3,281,591	\$3,679,939	\$3,728,286	\$3,776,634	\$14,466,450
37									
38	TOTAL OPERA	TING EXPENS	SE	-	\$59,080,071	\$60,194,574	\$61,441,466	\$62,714,127	\$243,430,238
39									
40	HSA #3								10/12/2016

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3	Drogra	n Namai CE III CC Dublic Authority						
	PA AD	m Name: SF IHSS Public Authority MIN / HEALTH / DENTAL						
6								
7				ital Expenditu				
8			(Equip	ment and Remo	deling Cost)			
9								TOTA
10	EQUI	PMENT	TERM	FY2016-17	FY2017-18	FY2018-19	FY2019-20	FY2016-2
11	No.	ITEM/DESCRIPTION						
12	1	5 telephone Equipments (Incl headsets	& Liftsets)	\$4,500	\$0	\$0	\$0	\$ 4
13								
14	2	4 Computers & 4 Monitors		\$0	\$7,500	\$0	\$7,500	\$ 15
15								
16	3	1 New copier/printer with Service Contra	ct	\$0	\$0	\$8,500	\$0	\$ 8
17								
18								
19		-						
20								
21								
22		-						
23								
24								
25								
26								
27								
		QUIPMENT COST		\$4,500	\$7,500	\$8,500	67.500	¢ 00.
29	01112 2		L	\$4,000	\$7,500	\$0,500	\$7,500	\$ 28,
		ODELING						
					-			
	escripti	on:		-				
32								
33								
34			F					
	OTAL R	EMODELING COST	L		0	0	0	
36			r					
		APITAL EXPENDITURE		\$4,500	\$7,500	\$8,500	\$7,500	\$28,0
38 (E	quipme	nt and Remodeling Cost)						

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2	-				Document Date:	10/12/16
3	HUMAN SERVICES AGENCY CO	ONTRACT BU				
4			BY PRO	GRAM		
5	Contractor's Name				Contract Te	rm
6	San Francisco In-Home Supportive Services Pul	blic Authority			07/01/16	- 06/30/20
7	(Check One) New 🛛 Renewal Modifie					
8	If modification, Effective Date of Mod. No. c	of Mod.				
9	Program: SF IHSS Public Authority (FINGER PRIM	NTING PROJECT	[)			
						TOTAL
<u> </u>	Budget Reference Page No.(s)	FY2016-17	FY2017-18	FY2018-19	FY2019-20	7/01/16-6/30/20
	Program Term: 7/1/16 - 6/30/20 Expenditures	F12010-17	F12017-10	112010-13	112013-20	1101110-0100120
12		\$144 421	\$144,421	\$144,421	\$144,421	\$577,685
	Salaries & Benefits	\$144,421 \$14,950	\$14,950	\$14,950	\$14,950	\$59,800
	Operating Expense Subtotal	\$159,371	\$159,371	\$159,371	\$159,371	\$637,485
	Indirect Percentage (%)	\$105,071	\$155,571	\$100,071	\$100,071	4007,400
10		\$0	\$0	\$0	\$0	\$0
-	Indirect Cost (Line 16 X Line 15)	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0
	Capital Expenditure	\$159,371	\$159,371	\$159,371	\$159,371	\$637,485
19	Total Expenditures	\$159,571	\$159,571	\$159,571	\$155,571	\$007,400
20	HSA Revenues	¢04.074	¢24.074	\$21 074	\$31,874	\$127,497
	General Fund 20% State Funding 30%	\$31,874 \$47,811	\$31,874 \$47,811	\$31,874 \$47,811	\$47,811	\$191,245
23	Federal Funding 50%	\$79,686	\$79,686	\$79,686	\$79,686	\$318,742
24						
25						
26	TOTAL HSA REVENUES	\$159,371	\$159,371	\$159,371	\$159,371	\$637,485
27	Other Revenues					
28 29		\$0	\$0	\$0	\$0	\$0
30						
31						
32						669761
33	Total Revenues	\$159,371	\$159,371	\$159,371	\$159,371	\$637,485
34	Full Time Equivalent (FTE): 1.66 FTE PA Staff Only					
36	Prepared by:			Telephone: 415-	593-8115	10/12/16
37	HSA-CO Review Signature:	-	an and an and a			i i
38	HSA #1					10/12/2016

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2	-									Document Date: 10	0/12/16
	Program Name: SF IHSS Pub		,								
5	FINGER PRINTING PROJECT	r									
6	-										
7				Salari	es & Be	nefits Det	ail				
8											
9 10							FY2016-17	FY2017-18	FY2018-19	FY2019-20	
11			Agency	Totals	For HS	A Program	For DHS Program	For DHS Program	For DHS Program	For DHS Program	TOTAL
			Annual Full						, of officer regram	i or brie region	
12	POSITION TITLE	Current Salary	TimeSalary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	07/01/16 to 06/30/20
	Fiscal & Operations Manager	105,558	\$105,558	25%	100%	25%	\$26,389.50	\$26,389.50	\$26,389,50	\$26,389.50	\$105,558.00
	Program Manager	103,212	\$103,212	16%	100%	16%	\$16,513.92	\$16,513.92	\$16,513.92	\$16,513.92	
15	Executive Assistant	60,027	\$60,027	25%	100%	25%	\$15,006.75	\$15,006.75	\$15,006.75	\$15,006.75	\$60,027.00
16	DOJ Documents Techniciam	45,990	\$45,990	100%	100%	100%	\$45,990.00	\$45,990.00	\$45,990.00	\$45,990.00	\$183,960.00
17											
18											
19											
20	TOTALS		\$314,787	1.66	4.00	1.66	\$103,900.17	\$103,900.17	\$103,900,17	\$103,900.17	\$415,600,68
21	101/120		4011,101	1.001	1.00	1.001	¢100,000.171	4100,000.17	0100,000.171	\$100,000.11	0410,000.00
22	FRINGE BENEFIT RATE		39.00%				39.00%	39.00%	39.00%	39.00%	39.00%
	EMPLOYEE FRINGE BENEFIT	s	\$122,767	8.89%			\$40,521.07	\$40,521.07	\$40,521.07	\$40,521.07	\$162,084.27
24 25											
	TOTAL SALARIES & BENEFITS] 。	\$437,554				\$144 404 04	6144 404 04	C144 404 04	C144 401 04	¢£77.604.05
_		s L	Φ437,554				\$144,421.24	\$144,421.24	\$144,421.24	\$144,421.24	\$577,684.95
27	HSA #2										10/12/2016

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2	1								Document Dat	e: 10/12/1	16
3]										
	Program Name: SF FINGER PRINTING										
5	FINGER PRINTING	RUJE									
7	1			c	Operat	ting Expens	e Detail				
8	1										
9 10	1										
10											
11 12	EXPENDITURE CA	TEGO	RY	Т	ERM	FY2016-17	FY2017-18	FY2018-19	FY2019-20	Т	OTAL
13	Rental of Property					\$3,200	\$3,200	\$3,200	\$3,200	\$	12,800
14	Utilities(Telephone / I	Repair 8	Maintenance)			\$2,500	\$2,500	\$2,500	\$2,500	\$	10,000
15	Office Supplies					\$1,500	\$1,500	\$1,500	\$1,500	\$	6,000
16	Insurance					\$2,250	\$2,250	\$2,250	\$2,250	\$	9,000
17	Postage (SOC881 - N	lotice to	IP for Inactivity)			\$5,500	\$5,500	\$5,500	\$5,500	\$	22,000
18	CONSULTANT/SU	BCON	RACTOR DESCRIPTIVE T	ITLE							
19				-							
20					3						
21			_								
22					1			-			
23	OTHER										
24											
25					3						
26					,		·				
27										-	
28	TOTAL OPERATING	EXPEN	SE			\$14,950	\$14,950	\$14,950	\$14,950	\$	59,800
29											
30	HSA #3										10/12/2016

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2]				Document Date:	10/12/16
3	HUMAN SERVICES AGENCY	CONTRACT BL	JDGET SUM	/IARY		
4			BY PRO	GRAM		
5	Contractor's Name				Contract Te	rm
6	San Francisco In-Home Supportive Services P	ublic Authority			07/01/16	- 06/30/20
7	(Check One) New 🗵 Renewal Mod	ification				
8	If modification, Effective Date of Mod. No.	of Mod.				
9	Program: SF IHSS Public Authority (ADVISORY	COUNCIL)				
10	Budget Reference Page No.(s)					TOTAL
11	Program Term: 7/1/16 - 6/30/20	FY2016-17	FY2017-18	FY2018-19	FY2019-20	7/1/16-6/30/20
12	Expenditures					telen og senere er i 425 bri og senere er i 604ar Senere er
13	Salaries & Benefits	\$35,263	\$35,263	\$35,263	\$35,263	\$141,052
14	Operating Expense	\$25,050	\$25,050	\$25,050	\$25,050	\$100,200
	Subtotal	\$60,313	\$60,313	\$60,313	\$60,313	\$241,252
16	Indirect Percentage (%)					
17	Indirect Cost (Line 16 X Line 15)	\$0	\$0	\$0	\$0	\$0
18	Capital Expenditure	\$0	\$0	\$0	\$0	\$0
19	Total Expenditures	\$60,313	\$60,313	\$60,313	\$60,313	\$241,252
20	HSA Revenues					
21	General Fund 20%	\$12,063	\$12,063	\$12,063	\$12,063	\$48,250
	State Fund 30%	\$18,094	\$18,094	\$18,094	\$18,094	\$72,375
	Federal Fund 50%	\$30,156	\$30,156	\$30,156	\$30,156	\$120,626
24 25						
26	TOTAL HSA REVENUES	\$60,313	\$60,313	\$60,313	\$60,313	\$241,252
27	Other Revenues					
28						
29		\$0	\$0	\$0	\$0	\$0
30 31						
32						
	Total Revenues	\$60,313	\$60,313	\$60,313	\$60,313	\$241,252
34	Full Time Equivalent (FTE): .30 FTE PA Staff Only					
36	Prepared by:		г	elephone: 415-	593-8115	10/12/16
37	HSA-CO Review Signature:	_				
38	HSA #1					10/12/2016

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1						9			Appendix B(b), Pa Document Date: 1	
	Program Name: SF IHSS Public Authority									
5	ADVISORY COUNCIL									
6	4									
7	4		Salari	es & Be	nefits Det	aii				
9	1									
10	1					FY2016-17	FY2017-18	FY2018-19	FY2019-20	
11		Agency Annual Full	Totals	For HS	A Program	For DHS Program	For DHS Program	For DHS Program	For DHS Program	TOTAL
12	POSITION TITLE	TimeSalary for FTE	Total % FTE	% FTE	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	7/01/16-6/30/20
13	Executive Director	\$133,636	10%	100%	10%	\$13,364	\$13,364	\$13,364	\$13,364	\$53,4
14	Executive Assistant	\$60,027	20%	100%	20%	\$12,005	\$12,005	\$12,005	\$12,005	\$48,02
15										
16										
17										
18										
19	TOTALS	\$193,663	0.30	2.00	0.30	\$25,369	\$25,369	\$25,369	\$25,369	\$101,47
20	FRINGE BENEFIT RATE	39.00%				39.00%	39.00%	39.00%	39.00%	39.00
22	EMPLOYEE FRINGE BENEFITS	\$75,529		40		\$9,894	\$9,894	\$9,894	\$9,894	\$39,57
3	EMPLOYEE FRINGE BENEFITS						·			
5	TOTAL SALARIES & BENEFITS	\$269,192				\$35,263	\$35,263	\$35,263	\$35,263	\$141,05
6	HSA #2									10/12/20

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3	Program Name		ublic Authority						
5		DUNCIL	ublic Authority						
6									
7				Opera	ting Expense I	Detail			
8									
9 10	4								
10									
	EXPENDITUR	RE CATEGO	RY	TERM	FY2016-17	FY2017-18	FY2018-19	FY2019-20	TOTAL
13	D & O Insuranc	e			\$4,750	\$4,750	\$4,750	\$4,750	\$28,500
14	CICA Members	hip / Conferer	nce		\$4,300	\$4,300	\$4,300	\$4,300	\$17,200
15	Board Stipend				\$7,000	\$7,000	\$7,000	\$7,000	\$28,000
16	Communication	s			\$9,000	\$9,000	\$9,000	\$9,000	\$36,000
17									
18	CONSULTAN	T/SUBCON	FRACTOR DESCRIPTIVE TITLE						
19									
20									
21				_	_				
22									
23	OTHER								
24				_					
25									
26									
27									
28	TOTAL OPERAT	TING EXPEN	SE		\$25,050	\$25,050	\$25,050	\$25,050	\$109,700
29				-					
	HSA #3								10/12/2010
									10/12/2016

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1	Α	В	С		E	F	
2					-		
					. 10/12/10		
3	HUMAN SERVICES AGENCY CO	INTRACT BUDU					
5	Contractor's Name		BIPRU				
					:111		
				FY 2016-20			
7	1 ,						
8	Appendix B(c), Page 1 Document Date: 10/12/16 HUMAN SERVICES AGENCY CONTRACT BUDGET SUMMARY BY PROGRAM Contractor's Name Contract Term San Francisco In-Home Supportive Services Public Authority FY 2016-20 (Check One) New ☑ Renewal Modification						
9	Program: Mentorship Program (DPH)						
10	Budget Reference Page No.(s)					TOTAL	
11	Program Term: 7/1/16 - 6/30/20	FY2016-17	FY2017-18	FY2018-19	FY2019-20	7/1/16-6/30/20	
12	Expenditures						
13	Salaries & Benefits	\$0	\$0	\$0	\$0	\$0	
14	Operating Expense	\$20,000	\$20,000	\$20,000		\$80,000	
15	Subtotal	1				\$80,000	
16	Indirect Percentage (%)						
17	Indirect Cost (Line 16 X Line 15)	\$0	\$0	\$0	\$0	\$0	
18	Capital Expenditure	\$0	\$0	\$0	\$0	\$0	
19	Total Expenditures	\$20,000	\$20,000	\$20,000	\$20,000	\$80,000	
20	HSA Revenues				-		
21	General Fund	\$20,000	\$20,000	\$20,000	\$20,000	\$80,000	
22							
23 24							
25							
26	TOTAL HSA REVENUES	\$20,000	\$20,000	\$20,000	\$20,000	\$80,000	
27	Other Revenues						
28							
29 30		\$0	\$0	\$0	\$0	\$0	
31							
32							
33	Total Revenues	\$20,000	\$20,000	\$20,000	\$20,000	\$80,000	
34	Full Time Equivalent (FTE): 0						
36	Prepared by: Loc Chau - Fiscal & Operations Manage	er				10/12/16	
37	HSA-CO Review Signature:						
38 1	HSA #1					10/12/2016	

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3	Program Name: SF IHSS Public Authority							Document Date: 1	0/12/16	
4	Program Name: SF IHSS Public Authority									
5	Mentorship Program (DPH)									
6										
7			Salar	ies & Be	enefits De	tail				
7 8 9 10 11										
10						FY2016-17	FY2017-18	FY2018-19	FY2019-20	
11		Agency	Totals	For HS	A Program	For DHS Program			For DHS Program	TOTAL
		Annual Full TimeSalary			Adjusted					
12	POSITION TITLE	for FTE	FTE	% FTE	FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	07/01/16 to 06/30/20
13										
14										
15				1	1					
16		1			1					
17		1								
18										
19										
20										
21										
22										
23										
24										
25										
26										
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35	TOTALS	\$0	0.00	0.00	0.00	\$0	\$0	\$0	\$0	\$0
36 F	RINGE BENEFIT RATE	0.00								
37 E	MPLOYEE FRINGE BENEFITS	\$0		Sales and		\$0	\$0	\$0	\$0	\$0
38	MPLOYEE FRINGE BENEFITS									
40 T	OTAL SALARIES & BENEFITS	\$0	10126	6.5.6.18		\$0	\$0			
	SA #2	30			and the state	<u>۵</u> ۵	\$0]	\$0	\$0	\$0
4 I I I										10/12/2016



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1	4						Appendix B(c), I		
2	•						Document Date	10/12/16	
	Program Nam	e: SF IHSS PL	blic Authority						
	Mentorship F	Program (DPH)							
6				0	ting Europe	Detail			
7 8				Opera	ting Expense	Detall			
9									
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11									
12	EXPENDITU	RE CATEGO	RY	TERM	FY2016-17	FY2017-18	FY2018-19	FY2019-20	т
13	Training / Rec	ruitment / Meeti	ings		\$2,500	\$2,500	\$2,500	\$2,500	
14	Stipends				\$15,000	\$15,000	\$15,000	\$15,000	
15	Travel				\$500	\$500	\$500	\$500	
16	Outreach				\$2,000	\$2,000	\$2,000	\$2,000	
17									
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20				3					
21	CONSULTA	NT/SUBCONT	RACTOR DESCRIPTIVE TITLE						
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			SE .		\$20,000	\$20,000	\$20.000	\$20.000	
2011	I UTAL UPERA	ATING EXPENS		-	φ20,000	φ20,000	\$20,000	\$20,000	
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