# City and County of San Francisco

London Breed, Mayor

# Human Services Agency

Department of Human Services Department of Aging and Adult Services Office of Early Care and Education

Trent Rhorer, Executive Director

# MEMORANDUM

TO:	AGING & A	DULT SERVI	CES COMMIS	SSION	
THROUGH:	SHIREEN M	ICSPADDEN,	EXECUTIVE	DIRECTOR	
FROM:		JFFMAN, DE TAKAWA, DII		TOR CONTRACTS	14)
DATE:	JUNE 5, 201	9			
SUBJECT:	FRANCISCO		FIT) FOR THE	PROVISION O	CIATION OF SAN F SOCIAL SUPPORT
GRANT TERM:	<u>Current</u> 7/1/17- 6/30/19	<u>Modification</u> 7/1/19- 6/30/20	<u>Revised</u> 7/1/17- 6/30/20	<u>Contingency</u>	<u>Total</u> 7/1/17- 6/30/20
TOTAL AMOUNT	\$579,003	\$290,089	\$869,092	\$86,909	\$956,001
ANNUAL AMOUNT	<u>FY17/18</u> \$288,914	<u>FY18/19</u> \$290,089	<u>FY19/20</u> \$290,089		20 20 20
Funding Source MODIFICATION FUNDING: PERCENTAGE:	<u>County</u> \$290,089 100%	<u>State</u> \$0 0%	<u>Federal</u> \$0 0%	Contingency \$29,008	<u>Total</u> \$319,097 100%

The Department of Aging and Adult Service (DAAS) requests authorization to modify the existing grant with Mental Health Association of San Francisco, for the period of July 1, 2019 to June 30, 2020 for the provision of social support services for hoarding disorder in the amount of \$290,089, plus a 10% contingency for a total amount not to exceed \$956,001.

#### Background

Hoarding disorder is a serious but treatable disorder. Hoarding behaviors can cause people who suffer from the disorder to feel isolated and alone. These behaviors impede the development of interpersonal relationships, leading to a wide range of safety concerns, and can result in a need for extensive intervention and support. Eviction from housing can also occur as a result of hoarding behaviors. Social Support Services for Hoarding Disorder provides social support, outreach, and education to those suffering from hoarding disorder, as well as outreach and

education to community providers. The program also convenes a city-wide task force comprised of representatives from City departments, non-profit housing, and service providers that keep up to date with current "best practices" that are then implemented within the program model.

#### Services to be Provided

This modification is a continuation of services currently being provided and will continue for the 2019 – 2020 fiscal year. Services will be provided in the Grantee's main location at 870 Market Street and throughout San Francisco. In an effort to educate the public on hoarding disorder, the Grantee will provide community trainings and presentations throughout the year. The Grantee will also provide peer led and family support groups, treatment groups, information and referral, and outreach and education to community providers. The Grantee will also maintain an on-line resource tool allowing individuals to search for additional community resources and services they may require. Additionally, the Grantee will organize and convene the city wide Hoarding Disorder Task Force. The ongoing goals of the task force are to identify gaps in services, design strategies to reduce eviction, raise community awareness about the complexities of hoarding behavior, and improve the quality of life for those who compulsively hoard. Finally, the members strategize on how to facilitate collaboration among service systems needed to implement multi-disciplinary "best practice" strategies on hoarding disorder.

#### Performance

The grantee was program and fiscal monitored in March 2019, and found in compliance.

#### Selection

Grantee was selected through Request for Proposals #677, competitively bid in March 2016.

#### Funding

Funding for this service will be provided through County General Funds.

#### ATTACHMENTS

Appendix A2 – Services to be provided by Grantee Appendix B2 – Program Budget Appendix F2 – Site Chart

# APPENDIX A2 – SERVICES TO BE PROVIDED BY GRANTEE Mental Health Association of San Francisco

# Social Support Services for Hoarding Disorder July 1, 2019 to June 30, 2020

# I. Purpose

The purpose of this grant is to provide social support services to improve the quality of life and to prevent eviction and homelessness for individuals with hoarding disorder challenges; to improve coordination of the City's response to hoarding issues; and to improve the skills of family members and professionals working with individuals with hoarding disorder challenges.

# II. Definitions

Adult with a Disability	Person 18-59 years of age living with a disability.
CA-CetCare	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.
City	City and County of San Francisco, a municipal corporation
DAAS	Department of Aging and Adult Services
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
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 individual or others.

Grantee	Mental Health Association of San Francisco
Hoarding Disorder (HD)	HD is the persistent difficulty discarding or parting with possessions, regardless of their actual value. This difficulty is due to a perceived need to save the items and to the distress associated with discarding them. The difficulty discarding possessions results in the accumulation of possessions that congest and clutter active living areas and substantially compromises their intended use. If living areas are uncluttered, it is only because of the interventions of third parties (e.g., family members, cleaners, or the authorities). The resulting hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (including maintaining a safe environment for oneself or others). The hoarding is not attributable to another medical condition (e.g., brain injury, cerebrovascular disease, Prader-Willi syndrome).
HSA	Human Services Agency
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. This is only to be used by consumers to self-identify their income status, not to be used as a means test to qualify for the program.
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 Adults	Person who is 60 years or older. Used interchangeably with senior.

OOA	Office on the Aging.
Senior	Person who is 60 years or older. Used interchangeably with older adult.
SOGI	Sexual Orientation and Gender Identity; Ordinance No. 159-16 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 (Chapter 104, Sections 104.1 through 104.9).
Task Force	A group comprised of interested individuals, City department representatives and agency representatives concerned with a specific issue and working together to coordinate services and improve service delivery to a target population.

# III. Target Population

This grant funding is intended to serve older adults and adults with disabilities who reside in the City and County of San Francisco with one or more of the following target priorities:

- 1. Low-income
- 2. Non or limited-English speaking
- 3. Minority
- 4. Frail
- 5. Member of LGBTQ+ Community

#### IV. Eligibility for Social Support Services for Hoarding Disorder

To be eligible for Social Support Services for Hoarding Disorder, individuals must be a resident of San Francisco and have a demonstrated behavior related to hoarding disorder.

#### V. Location and Time of Services

The details of the sites and operational hours are attached in the Site Chart (Appendix F2).

#### VI. Description of Services

#### Hoarding Disorder Task Force

Since hoarding is a multi-faceted issue, a coordinated response is needed from a broad range of stakeholders including City departments, non-profit housing and service providers and others affected by compulsive hoarding issues. The San Francisco Task Force on Compulsive Hoarding was created in 2007 to build on innovative, effective programs already being developed locally and to create a response to issues related to hoarding disorder in San Francisco.

The task force meets on a quarterly basis to identify gaps in services, discuss strategies to reduce eviction of those with hoarding disorder behaviors and raise community awareness about the complexities of hoarding behavior, as well as make new recommendations as needed on policy and best practices for what is needed to improve the quality of life to prevent eviction and homelessness of individuals with challenges related to hoarding disorder.

#### **Training and Presentations for the Community**

Trainings and presentations on compulsive hoarding are provided to professional staff including nurses, service providers, and clinicians; family members of individuals with challenges related to hoarding disorder; as well as other non-profit agencies, city employees and DAAS contractors (e.g., Housing Rights Committee, Legal Assistance to the Elderly, supportive housing providers and consumers) upon request.

#### Support Groups

MHASF provides weekly support groups to individuals with hoarding disorder throughout the term of the grant. A peer facilitator leads the support groups and assists support group members with creating goals for their recovery.

#### **Treatment Group**

MHASF provides treatment groups to individuals with hoarding disorder who want to set clear goals and work through treatment.

#### **Information and Referrals**

MHASF provides information and referral services, as well as educational materials about compulsive hoarding, to individuals with challenges related to hoarding disorder, their family members and service providers. Staff from MHASF can also provide linkages to additional community resources as needed.

#### **Community Outreach**

MHASF conducts outreach via community events (such as resource fairs) and conducting educational presentations on hoarding disorder services.

#### **Online Resource Tool**

The website allows visitors to specify searches and criteria to meet their own individual needs such as identifying the type of service they are seeking (i.e. food, shelter, mental health services, and/or primary care physician), preferred location in San Francisco (i.e. Chinatown, Tenderloin, or South of Market), and insurance type (Healthy SF, Medicare, Medi-Cal, or a private provider).

#### Family Support Group

MHASF provides support groups geared towards the family members and friends of individuals with challenges related to hoarding disorder. These family support groups are co-facilitated by an individual with hoarding challenges and will provide emotional support, promote service utilization, and create a safe, confidential space to discuss experiences.

### VII. Contractor Responsibilities/Units Of Service and Definitions

During the term of the grant, the grantee will be responsible for the following activities:

### Hoarding Disorder Task Force Meeting

Meet with City departments, non-profit housing and service providers, and others affected by challenges related to hoarding disorder. Maintain a current list of recommendations, task force preparation time, bi-monthly follow up work groups, along with strategies and action steps for implantation of those recommendations. The Task Force meets on a quarterly basis. Task force sub-committees meets six times a year to work on special projects as they are identified. Grantee shall provide **100 hours** in support of preparing and hosting task force and subcommittee meetings.

# **Community Training**

Grantee shall conduct training for professionals and other groups to provide better interventions for the target population. Trainings will be facilitated by the Program Manager, MHASF staff experts, or a training consultant for the Institute on Compulsive Hoarding disorder. Community training hours include time for pre/post trainings and content development. Grantee shall provide **100 hours** of community trainings. Total number of participants in trainings is **200 unduplicated consumers**.

# Support Group

Grantee shall provide peer-led support groups for individuals with challenges related to hoarding disorder to work on issues they face in their lives related to hoarding disorder. The peer facilitator will also assist support group members with creating goals for their recovery. The Grantee shall provide **90 hours** of support group services and serve **100 unduplicated participants** annually.

#### **Treatment Group**

A clinician led treatment group, utilizing Cognitive Behavioral Therapy (CBT) to work with individuals with challenges related to hoarding disorder who want to set clear goals and work through them utilizing treatment. The Grantee shall provide **32 hours of treatment** groups and serve **10 unduplicated participants annually**.

#### **Information and Referral**

To provide written and on-line resources related to individuals with challenges related to hoarding disorder by phone and/or in person. The Grantee shall provide **1000 Information and Referral contacts** annually. A contact is one interaction with an individual either in person or through the agency hotline.

#### **Community Outreach**

Community outreach will occur at **12 community events** in San Francisco and the Grantee will **facilitate 20 community presentations annually.** 

#### **Family Support Group**

Peer member led group for family and friends of individuals with challenges related to hoarding disorder. The group provides emotional support, promotes services utilization and

creates a safe, confidential space to discuss experiences. The Grantee will provide **45 hours** of Family Support groups and serve **12 unduplicated participants** annually.

### **Online Resource Tool Development**

Provide and maintain an online resource guide and database that functions as an interactive, accessible resource tool. During annual monitoring visit Grantee shall provide a written summary on web-site traffic for that fiscal year.

### VIII. Service Objectives

Annually, the contractor will meet the following service objectives:

- 1. Grantee will provide a total of <u>100</u> hours of Hoarding Disorder Task Force meetings.
- 2. Grantee will provide a total of <u>100</u> hours of community training to professionals and other groups.
- 3. Grantee will provide community trainings to a total of **200** unduplicated participants.
- 4. Grantee will provide a total of <u>90</u> hours of peer-led support groups.
- 5. Grantee will provide support group education to a total of <u>100</u> unduplicated participants.
- 6. Grantee will provide a total of <u>32</u> hours of clinician-led treatment groups.
- 7. Grantee will provide treatment group education to a total of <u>10</u> unduplicated participants.
- 8. Grantee will provide a total of **<u>1,000</u>** information and referral contacts.
- 9. Grantee will provide a total of **12** community outreach events.
- 10. Grantee will provide a total of **20** community presentations.
- 11. Grantee will provide a total of <u>45</u> hours of family and friends support group meetings.
- 12. Grantee will provide family and friends support to <u>12</u> unduplicated participants.

# IX. Outcome Objectives

The Grantee is required to follow specific outcome objectives that demonstrate and measure the impact, outcomes, or results of services. The grantee is expected to survey a minimum of 65% of the clients regarding the following outcomes:

- At least ninety percent (90%) of consumers who complete the treatment group will have maintained their current housing situation.
- At least ninety percent (90%) of consumers who complete the treatment group will have a plan in place to reduce compulsive hoarding behaviors as a result of the goals they set during their time in the group.

- At least seventy percent (70%) of those who attended community trainings will be able to identify at least one new resource that can help those individuals with challenges related to hoarding disorder.
- At least seventy percent (70%) of those individuals who attended the family and friend support groups will report having identified at least one new coping strategy for assisting their loved one with challenges related to hoarding disorder

# X. Monitoring Activities

A. <u>Program Monitoring</u>: Program monitoring will include review of 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 that program staff have completed the California Department of Aging (CDA) Security Awareness Training; program operation, which includes a review of a written policies and procedures manual of all OOA 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; employee resume, job description, and whether services are provided appropriately according to Service and Outcome Objectives - Sections VIII and IX.

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.

# XI. Reporting Requirements

Grantee will provide various reports during the term of the grant agreement.

- A. The grantee will enroll the clients into the CA GetCare database (<u>https://ca.getcare.com/caprovider/</u>), and enter all the required data in the database.
- B. The grantee will enter into the CA GetCare Service Unit section all the units of service by the 5<sup>th</sup> working day of the month for the preceding month.
- C. Monthly, quarterly, and annual reports must be entered into the Contracts Administration, Reporting, and Billing Online (CARBON) system as required by DAAS and Contracts Department staff.

- D. 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<sup>st</sup> each grant year. This report must be submitted into the CARBON system.
- E. Grantee shall submit Community Services Block Grant (CSBG) time study to HSA/DAAS for the months of February, May, August and November. The time study is due on the 10<sup>th</sup> day following the time study month and shall be entered online to this website link: <u>https://calmaa.hfa3.org/signin</u>
- F. Grantee program staff will complete the California Department of Aging (CDA) Security Awareness Training on an annual basis; Grantee will maintain evidence of staff completion of this training.
- G. Grantee will provide an annual consumer satisfaction survey report to OOA by March 15<sup>th</sup> each grant year.
- H. Grantee shall develop and deliver ad hoc reports as requested by HSA and DAAS.
- I. Grantee shall develop and deliver an annual summary report of SOGI data collected in the year as requested by HSA. The due date for submitting the annual summary report is July 10<sup>th</sup>.
- J. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable and to take all reasonable efforts to implement HIPAA requirements.

Additional reports may be required, and should be sent to:

Monte Cimino	Steve Kim
Human Services Agency	Human Services Agency
DAAS/Office on the Aging	Office of Contract Management
1650 Mission St. 5 <sup>rd</sup> Floor	1650 Mission St. 3 <sup>rd</sup> Floor
San Francisco, CA 94103	San Francisco, CA 94103

monte.cimino@sfgov.org steve.kim@sfgov,org

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4	HUMAN SERVICES AGE	NCY GRANT BUI	DGET SUMMARY	,	
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9	If modification, Effective Date of Mod. 7/1	/2019 No. of M	od. #2		
10	Program: Social Support Services for H	oarding Disorder			Revised
11	Budget Reference Page No.(s)			NEW	Total
	Program Term	07/01/17-06/30/18	7/01/18 - 6/30/19	7/01/19 - 6/30/20	07/01/16-06/30/20
13	Expenditures	• · - • - • ·			<b>A-</b> <i>i i</i> <b>-</b> <i>i</i> <b>-</b> <i>i</i> <b>-</b>
	Salaries & Benefits	\$178,781	\$184,784	\$181,177	\$544,742
	Operating Expense	\$72,449	\$67,468	\$71,074	\$210,991
	Subtotal	\$251,230	\$252,252	\$252,251	\$755,733
	Indirect Percentage (%)	15%	15%	15%	
	Indirect Cost (Line 16 X Line 15)	\$37,684	\$37,837	\$37,838	\$113,359
	Capital Expenditure	\$0	\$0	\$0	\$0
	Total Expenditures	\$288,914	\$290,089	\$290,089	\$869,092
21	HSA-DAAS Revenues	****	<b>#</b> 000.000	4000 000	<b>\$000 000</b>
22	General Fund	\$288,914	\$290,089	\$290,089	\$869,092
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29	TOTAL HSA-DAAS REVENUES	\$288,914	\$290,089	\$290,089	\$869,092
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	Prepared by: Rachel del Rossi / Shukri S	hiraz	Telephone No.:	415-421-2926 x313	Date 5/31/2018
	HSA-CO Review Signature:				
10	HSA #1				6/5/2019

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 Program: Social Support Services for Hoarding Disorder

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 (Same as Line 9 on HSA #1)

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#### Salaries & Benefits Detail

8							NEW	Revised
10					07/01/17-06/30/18	7/01/18 - 6/30/19	7/01/19 - 6/30/20	07/01/17-06/30/20
11 12 POSITION TITLE	Agency 1 Annual Full TimeSalary for FTE	Totals Total % FTE	For HSA	A Program Adjusted FTE	Budgeted Salary	Budgeted Salary	Budgeted Salary	TOTAL
13 Executive Director	\$125,000	100%	100%	12.5%	\$15,625			\$15,625
14 Associate Director	\$95,000	100%	100%	23.0%	\$21,850			\$21,850
15 Project Coordinator	\$50,000	100%	100%	25.0%	\$12,500			\$12,500
16 Director of Training	\$99,000	100%	100%	23.0%	\$22,770			\$22,770
17 Project Coordinator	\$48,000	100%	100%	80.0%	\$38,400			\$38,400
18 Mental Heatlh Advocate	\$50,000	100%	100%	10.0%	\$5,000			\$5,000
19 Information Resource Specialist	\$48,000	100%	100%	56.0%	\$26,880			\$26,880
20 Executive Director				32.0%		\$39,684		\$39,684
21 Peer Support Manager				70.0%		\$37,500		\$37,500
22 Community Engagement Manager				29.0%		\$18,183		\$18,183
23 Outreach Specialist				29.0%		\$15,109		\$15,109
24 Community Advocate				19.0%		\$9,569		\$9,569
25 Marketing and Communications Coordinat	or			56.0%		\$27,782		\$27,782
26 Executive Director	\$125,000			20.0%			\$25,000	\$25,000
27 Peer Support Manager	\$66,000			50.0%			\$33,000	\$33,000
28 Program Coodinator - TBH	\$55,000			60.0%			\$33,000	\$33,000
29 Outreach Coordinator	\$52,000			30.0%			\$15,600	\$15,600
30 Community Advocate	\$48,000			19.2%			\$9,222	\$9,222
31 Marketing and Communications Coordinat	\$52,000			56.0%			\$29,120	\$29,120
32								
33 TOTALS	\$913,000	7.00	7.00		\$143,025	\$147,827	\$144,942	\$435,794
34 35 FRINGE BENEFIT RATE	25%	25%			25%	25%	25%	
36 EMPLOYEE FRINGE BENEFITS	\$228,248				\$35,756	\$36,957	\$36,235	\$108,948
37 38	<b>h</b>					*****		
39 TOTAL SALARIES & BENEFITS	\$1,141,248				\$178,781	\$184,784	\$181,177	\$544,742
40 HSA #2	L							6/5/2019

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<u>13</u> R	ental of Property			<del>.</del>	\$18,398	<u> </u>	\$32,035		\$32,0	35	\$	82,4
14 U	Itilities(Elec, Wate	er, Gas, Phon	e, Scavenger)		\$3,600	)	\$4,408		\$4,4	08	\$	12,4
15 0	office Supplies, Po	ostage		••••	\$1,200	)	\$1,405		\$1,4	05	\$	4,0
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<u>18</u> In	nsurance			_			\$1,603		\$1,6	03	\$	3,2
<u>19</u> S	taff Training (for	IHSS staff trai	ining)		\$5,131	<u> </u>		-			\$	5,1
<u>20</u> S	taff Travel-(Local	& Out of Tow	/n)	_	\$1,000		\$1,000	-	\$2,0	00 _	\$	4,0
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	xpert Trainer				\$7,200	)	\$3,894	- <u> </u>	\$3,5	<u> </u>	\$	14,5
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	rogram Stipends				\$2,500		\$2,000		\$1,0		\$	5,5
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	rogram Supplies				\$1,200		\$1,000	15940 	\$1,0		\$	<u>3,2</u> 7,0
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AGENCY: Mental Health Association of San Francisco		HSA/DAAS/OFFICE ON THE AGING	AGING	 FY 20	FY 2019-2020
CONTRACT MAILING ADDRESS: 870	CONTRACT MAILING ADDRESS: 870 Market Street, Suite 928, San Francisco, CA 94102	o, CA 94102			
DIRECTOR: Mark Salazar				PHONE NO.: (415) 421-2926	26
SITES: (includes congregate nutrition, community/social services, home-delivered meal, food distribution, etc.)	Main Office				
Address and Zip Phone Number Fax Number	870 Market Street, Suite 928; 94102 415-421-2926 415-421-2928				
Neighborhood Person in Charge Site Manager	Mark Salazar				
Programs Offered	Social Support for Hoarding Disorder				
Days Open	✓ Mon ✓ Tues ✓ Wed ✓ Thurs ✓ Fri Sat Sun	Mon Tues Wed Thur Fri Sat Sun	Mon Tues Wed Thur Fri Sat Sun	Mon Tues Wed Thur Sat	Mon Tues Wed Thur Fri Sat Sun
Hours Open	9:00AM - 5:00PM				
Hours of <u>scheduled</u> programming	Support Group: Alternating Monday or Wednesday Monday: 5:30PM – 7:00PM Wednesday: 3:00PM – 4:30PM				
	Treatment Group: (Tentative) Tuesday: 1:00PM – 3:00PM				
	Family Support Group: (Tentative) 3 <sup>rd</sup> Thursday of each Month: 2:00PM – 3:00PM				
	Online Resource Database: 24/7				
	On-Site and Telephone Based Information and Referral Services: Monday – Friday: 9:00AM – 5:00PM				
Handicapped Accessible	🗸 Yes No	Yes No	Yes No	Yes No	Yes No

SITE CHART – APPENDIX F2

Page <u>1</u> of <u>1</u>