



SAN FRANCISCO HUMAN SERVICES AGENCY

MEMORANDUM

TO: DEPARTMENT OF DISABILITY AND AGING SERVICES
COMMISSION

THROUGH: KELLY DEARMAN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS

DATE: WEDNESDAY, JUNE 4, 2025

SUBJECT: GRANT MODIFICATION: KIMOCHI INC. (NON-PROFIT) FOR
PROVISION OF CASE MANAGEMENT

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	<u>Current</u>	<u>Modification</u>	<u>Revised</u>	<u>Contingency</u>	<u>Total</u>
GRANT TERM:	7/01/23 6/30/27	05/01/25 06/30/27	7/01/23 6/30/27		
GRANT AMOUNT:	\$741,531	\$200,132	\$941,663	\$94,166	\$1,035,829
MODIFIED ANNUAL AMOUNT:	<u>FY23/24</u>	<u>FY24/25</u>	<u>FY25/26</u>	<u>FY26/27</u>	
	\$181,971	\$186,520	\$292,301	\$280,871	
FUNDING SOURCE:	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
	\$864,491		\$77,172	\$94,166	\$1,035,829
PERCENTAGE:	92%		8%		100%

The Department of Disability and Aging Services (DAS) requests authorization to modify the existing grant with Kimochi Inc. for the provision of Case Management for the period of May 1, 2025 through June 30, 2027 in the additional amount of \$200,132 plus a 10% contingency for a revised total amount not to exceed \$1,035,829.

Background

Case management facilitates service connections for older adults and adults with disabilities. These services promote and maintain the optimum level of functioning in the most independent setting possible. Examples of service connections in which a case manager might assist include: connection to health services, money management, coordination of service providers or stabilization of a living situation. Kimochi Inc. is an established provider of services to seniors



and adults with disabilities. In addition, Kimochi Inc. is a current provider of DAS funded case management services.

Services to be Provided

The case management services contain core elements to ensure standardized and effective delivery of services. These core elements include a centralized waitlist and an on-line module that allows case managers to document and track client progress. Upon completion of service plan goals, clients can be re-assessed, and if it is determined that case management services are no longer required, then clients are dis-enrolled and referred to other community-based services as needed. Depending on the client's needs, case managers meet with clients at least monthly to ensure consistent delivery of services. Services provided under DAS funded case management include:

1. Intake/Enrollment
2. Comprehensive Assessment
3. Service Planning
4. Service Plan Implementation
5. Monitoring
6. Progress Notes
7. Reassessment
8. Discharge/Disenrollment

Under this modification, Kimochi Inc. will receive an additional \$200,132 for their current grant. The DAS Benefits and Resource Hub manages the citywide case management waitlist. This funding investment aims to reduce the number of clients currently on the waitlist and, in turn, decrease the wait time for newly referred clients.

To support this effort, funding has been allocated to enable Kimochi to hire one full-time case manager. This position is expected to carry full caseloads.

Funding will be provided annually for the remainder of Kimochi's grant term (FY25/26 and FY26/27) supported by Dignity Fund savings.

Selection

Grantee was selected through Request for Proposals #1086 which was competitively bid in March 2023.

Funding

Funding for this grant is provided through County General and Federal Funds.

Attachments

Appendix A1 – SCOPE of Services
Appendix B1 - Budget

APPENDIX A-1: SERVICES TO BE PROVIDED

Kimochi, Inc.
DAS Case Management
July 1, 2023 to June 30, 2027

Modification: May 1, 2025

I. Purpose of Grant:

DAS Office of Community Partnerships funds case management programs to help facilitate connections for older adults and adults with disabilities to services that promote and maintain the optimum level of functioning in the most independent setting. Activities of case management services include intake/enrollment, assessment, service planning and implementation, monitoring, reassessment, and ultimately discharge/disenrollment from services.

II. Definitions

Adult with a Disability	Person 18-59 years of age or older living with a disability
At Risk of Institutionalization	To be considered at risk of institutionalization, a person must have, at a minimum, one of the following: 1) functional impairment in a minimum of two Activities of Daily Living (ADL): eating, dressing, transferring, bathing, toileting, and grooming; or 2) a medical condition to the extent requiring the level of care that would be provided in a nursing facility; or 3) be unable to manage his/her own affairs due to emotional and/or cognitive impairment, evidenced by functional impairment in a minimum of three Instrumental Activities of Daily Living (IADLs): preparing meals, managing money, shopping for groceries or personal items, performing housework, using a telephone
CARBON	SFHSA's web-based Contracts Administration, Reporting, and Billing On-line System
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	An inclusive term and unifying term for persons who do not identify as White, who have been historically and systemically disadvantaged by institutionalized and interpersonal racism
DAS	Department of Disability and Aging 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
Grantee	Kimochi, Inc.
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
Limited English-Speaking Proficiency	Any person who does not speak English well or is otherwise unable to communicate effectively in

	English because English is not the person's primary language
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
OCP	Office of Community Partnerships
Older Adult	Person who is 60 years or older
SF DAS GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
SFHSA	San Francisco Human Services Agency
Socially Isolated	Having few social relationships and few people to interact with regularly
SOGI	Sexual Orientation and Gender Identity; <i>Ordinance No. 159-16</i> amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (<i>Chapter 104, Sections 104.1 through 104.9</i>).

III. Target Population

This program is designed to serve all people who can benefit from the services outlined in this Appendix, and particularly those demonstrating the greatest economic and social need. To ensure that the most vulnerable people are aware of and can benefit from this program, Grantee shall ensure that program services are accessible to:

- Persons with low to moderate income
- Persons who are socially isolated
- Persons with limited English-speaking proficiency
- Persons from communities of color or communities that have historically been under-served
- Members of the LGBTQ+ community
- Persons at risk of institutionalization

IV. Eligibility for Services

To be eligible for services, clients must be:

- An older adult aged 60 years or older, or
- An adult with a disability aged 18-59
- A resident of San Francisco
- At an income level of 400% of federal poverty or less
- Not currently receiving duplicative case management services
- Has a demonstrable need for case management and is willing to participate in the program.
 - Demonstrable need includes inability to coordinate needed services, identifiable service needs such as connection to health services, money management, or stabilization of living situation
 - Needs limited to only ‘case monitoring’ (i.e., no active service plan needs) or ‘finding housing’ are not a demonstrable need for OCP case management services

V. Description of Services

Grantee shall provide case management services to eligible clients consistent with OCP Policy Memorandum #39 “OCP Case Management Program Standards” (as revised March 5, 2018). The OCP Case Management Program Standards include core elements described below. Performance of core elements are recorded in the SF DAS GetCare database which all OCP case management providers are required to utilize.

***Grantee shall continue to follow guidance in or instructions from health care providers, the Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and local health departments relating to COVID-19. If there are contradictory requirements between the most current CDC, CDPH, and local health department guidance or health orders, providers should follow the strictest requirements. These requirements shall be followed with the intent to maximize the health and safety of Grantee staff and clients receiving services.

A. The case management process includes at a minimum the following:

1. Intake/Enrollment

All case management providers will access the Centralized Intake and Waitlist system, which serves as the starting point for clients needing case management services. All clients seeking to enroll in case management services must go through the Centralized Intake and Waitlist (CIW) process. Referrals for OCP case management can come from City agencies, hospitals, community-based organizations, friends and family of potential clients, and self-referrals from clients themselves. The CIW process helps determine presumptive eligibility of the potential client, track unmet needs, and streamline the referral process. Case management providers will select clients from the CIW for enrollment in services.

2. Comprehensive Assessment

Comprehensive assessment is the process of collecting in-depth information about a client's situation and level of functioning. The comprehensive assessment identifies specific problems to be addressed in a service plan to coordinate services.

3. Service Planning

The information collected through the comprehensive assessment will allow a case manager to identify the client's needs and goals. The service plan is a systematic means of addressing each of the problems identified in the assessment.

4. Service Plan Implementation

The implementation of the service plan is the process of putting the plan into action. The case manager acts as a link between the client and the needed services, helping to assure the most appropriate, timely, and cost-effective delivery of service to the client.

5. Monitoring

Regular monitoring activities are conducted by the case manager to determine whether the goals and objectives of the care plan are being achieved and to assess ongoing need for case management services. Monitoring is necessary as the client's health or personal situation may change, which would require an alteration to the care plan. At a minimum, a quarterly face-to-face contact with each client is required. Phone calls will be made to the client during the months when no face-to-face contact occurs.

6. Progress Notes

Progress notes are the ongoing chronology of the client's record and case management activities. They should address the provision of services as planned; whether services continue to be necessary and appropriate and are being delivered as anticipated. Progress notes also indicate changes in client situation such as health, living situation, and functional ability.

7. Reassessment

Case management requires a comprehensive reassessment of each client on an annual basis and upon significant changes.

8. Discharge/Disenrollment

Discharge (also called termination of services or case closure) is the process whereby the case manager ends case management services to the client. Case management services will be ended when the client: (1) moves out of San Francisco, (2) no longer wishes to use case management, (3) improves or stabilizes to the point that services are no longer necessary, (4) dies, (5) exhibits threatening or dangerous behavior toward case management staff, or (6) is receiving duplicative services.

B. Client Caseload

The Grantee shall ensure that one full-time equivalent case manager should handle a monthly caseload of 40 clients. For case managers serving a caseload that requires frequent or urgent service needs, the monthly caseload requirement may be reduced to 32 active cases, but this requires notification and approval from the assigned OCP program analyst at the time of caseload reduction. This notification must include documentation to justify the reduction. Reduced caseloads will also be checked for supporting documentation during the annual program monitoring process.

C. Additional Requirements

- Grantee will participate in the case management City Wide Clinical Collaborative program.
- OCP Case Management Program Standards provide the framework for case management services, however the Grantee must establish its own policies and procedures to operationalize the standards within their own agency to best meet client needs.
- DAS funded case managers and case management supervisors will attend case management provider's meetings as scheduled.
- DAS funded case managers will be provided with adequate case management training as needed. DAS/OCP funded case management training purchased or provided by Grantee must be approved by DAS/OCP staff.

VI. Location and Time of Services:

Kimochi Inc. Case Management services are provided at 1715 Buchanan Street in San Francisco. Hours of operation are Monday through Friday from 9:00 a.m. to 5:00 p.m.

VII. Service Objectives

Annual Target			
	Original	Modified	
	FY23-27	FY25-26	FY26-27
Unduplicated Consumers	68	108	108

(Note: Unduplicated consumers to be served on an annual basis shall be at a minimum of 55 unduplicated consumers per 1.0 FTE Case Manager staff.)

- Grantee will complete **100%** of comprehensive assessments due each contract year.*
- Grantee will complete **100%** of service plans due each contact year.*
- Grantee will complete **90%** of monthly contacts during each contract year.*
- Grantee will complete **90%** of face-to-face contacts each contract year.*

* Tracked via documentation in the SF DAS GetCare database

VIII. Outcome Objectives

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

- A. **70%** of identified service goals will be met.*
- B. On an annual basis, the Grantee will meet the following objectives as collected through the annual consumer survey with a minimum return rate of 35%
 - Client reports they can reach their case manager if they have a question or concern. Target 85%
 - Client reports that they worked with their case manager to create goals. Target 85%
 - Client reports that they were connected to requested services and resources. Target 85%

* Tracked via documentation in the SF DAS GetCare database

IX. Data Collection and Reporting Requirements

- A. Grantee will enter into SF DAS GetCare report of activities, referencing the tasks as described in Section VII & VIII- Service and Outcome Objectives.
- B. The grantee will enroll the clients into the SF DAS GetCare database: (<https://sfdas.getcarecom/paceseam/login.seam>) and enter all the required data in the Case Management Module as described in Section VII & VIII- Service and Outcome Objectives. Client level SOGI and demographic data shall also be entered into SF DAS GetCare.
- C. Grantee shall submit Community Services Block Grant (CSBG) time study to HSA/DAS for the months of February, May, August and November. The time study is due on the 10th day following the time study month and shall be entered online to this website link: <https://calmaa.hfa3.org/signin>
- D. Grantee will participate in an annual consumer survey in cooperation with the Office of Community Partnerships (OCP) with a minimum return rate of 35% of contracted annual unduplicated consumers to be served.
- E. Grantee shall develop and deliver ad hoc reports as requested by DAS/HSA.
- F. Grantee is required to attend all mandatory case management trainings, Quarterly Provider's Meetings, participate in the Clinical Collaborative or other meetings as scheduled by DAS.
- G. The Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules.

For assistance with reporting requirements or submissions of reports, contact:

Erica.Maybaum@sfgov.org

Program Analyst, Office of Community Partnerships, SFHSA

or

Emmy.Miller@sfgov.org

Contract Manager, Office of Contract Management, SFHSA

X. Monitoring Activities

- A. Program Monitoring:** Program monitoring will include review of client eligibility, and back-up documentation for reporting progress towards meeting service and outcome objectives.
- B. Fiscal Compliance and Contract Monitoring:** 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.

HUMAN SERVICES AGENCY BUDGET SUMMARY

Name
Kimochi, Inc.
(Check One) New Renewal Modification ☒
If modification, Effective Date of Mod. No. of Mod. 1

Term
7/1/23 - 6/30/27

Program: Case management									
Budget Reference Page No.(s)	Budget	Budget	Current Budget	Modification	Revised Budget	Current Budget	Modification	Revised Budget	7/1/23 - 6/30/27
Program Term	7/1/23 - 6/30/24	7/1/24 - 6/30/25		7/1/25 - 6/30/26			7/1/26 - 6/30/27		Total
Expenditures									
Salaries & Benefits	\$133,788	\$131,128	\$131,128	\$82,560	\$213,688	\$131,128	\$82,560	\$213,688	\$692,292
Operating Expenses	\$24,343	\$30,548	\$30,548	\$9,939	\$40,487	\$30,548		\$30,548	\$125,926
Subtotal	\$158,131	\$161,676	\$161,676	\$92,499	\$254,175	\$161,676	\$82,560	\$244,236	\$818,218
Indirect Percentage (%)	15%	15%	15%	14%	15%	15%	14%	15%	15%
Indirect Cost (Line 16 X Line 15)	\$23,840	\$24,844	\$24,844	\$13,282	\$38,126	\$24,844	\$11,791	\$36,635	\$123,446
Subcontractor/Capital Expenditures									
Total Expenditures	\$181,971	\$186,520	\$186,520	\$105,781	\$292,301	\$186,520	\$94,351	\$280,871	\$941,663
HSA Revenues									
Local Fund	\$156,101	\$156,101	\$156,101	\$105,781	\$261,882	\$156,101	\$94,351	\$250,452	\$824,536
Federal Fund (CFDA# 93.778)	\$19,293	\$19,293	\$19,293		\$19,293	\$19,293		\$19,293	\$77,172
FY 23-24 CODB	\$6,577	\$6,577	\$6,577		\$6,577	\$6,577		\$6,577	\$26,308
FY 24-25 CODB		\$4,549	\$4,549		\$4,549	\$4,549		\$4,549	\$13,647
TOTAL HSA REVENUES	\$181,971	\$186,520	\$186,520	\$105,781	\$292,301	\$186,520	\$94,351	\$280,871	\$941,663
Other Revenues									
Total Revenues									
Full Time Equivalent (FTE)									
Prepared by: Rod Valdepenas Telephone No.:									
HSA-CO Review Signature: _____									
HSA #1									

4/24/2025

Kimochi, Inc. Program: Case management													Page 2
Salaries & Benefits Detail													
POSITION TITLE	Agency Totals		HSA Program		7/1/23 - 6/30/24	7/1/24 - 6/30/25	7/1/25 - 6/30/26			7/1/26 - 6/30/27			7/1/23 - 6/30/27
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	DAAS	DAAS	DAAS	DAAS	DAAS	DAAS	DAAS	DAAS	TOTAL
					budget	budget	current budget	modification	revised	current budget	modification	revised	Revised total
Social services program coordinator	\$66,560	0.40	100%	0.40	\$26,624	\$26,624	\$26,624		\$26,624	\$26,624		\$26,624	\$106,496
Case manager, Japanese speaking	\$58,240	0.60	100%	0.60	\$34,944	\$34,944	\$34,944		\$34,944	\$34,944		\$34,944	\$139,776
Case manager, Korean speaking	\$54,080	0.75	100%	0.75	\$40,560	\$40,560	\$40,560		\$40,560	\$40,560		\$40,560	\$162,240
Case manager	\$66,560	100.00	100%	100.00				\$66,560	\$66,560		\$66,560	\$66,560	\$133,120
				-									
				-									
				-									
				-									
TOTALS	\$245,440			-	\$102,128	\$102,128	\$102,128	\$66,560	\$168,688	\$102,128	\$66,560	\$168,688	\$541,632
FRINGE BENEFIT RATE	31.00%						28%		27%			27%	
EMPLOYEE FRINGE BENEFITS	\$76,086				\$31,660	\$29,000	\$29,000	\$16,000	\$45,000	\$29,000	\$16,000	\$45,000	\$150,660
TOTAL SALARIES & BENEFITS	\$321,526				\$133,788	\$131,128	\$131,128	\$82,560	\$213,688	\$131,128	\$82,560	\$213,688	\$692,292
HSA #2													4/24/2025

Operating Expense Detail										
Expenditure Category	TERM	budget		current budget		modification		revised		TOTAL
		7/1/23 - 6/30/24	7/1/24 - 6/30/25		7/1/25 - 6/30/26		7/1/26 - 6/30/27		7/1/23 - 6/30/27	
Insurance - D&O/Other		\$1,500	\$1,815	\$1,815	\$363	\$2,178	\$1,815	\$1,815	\$7,308	
Insurance - General		\$3,400	\$3,978	\$3,978	\$796	\$4,774	\$3,978	\$3,978	\$16,130	
Office Supplies, Postage		\$2,750	\$4,455	\$4,455	\$2,200	\$6,655	\$4,455	\$4,455	\$18,315	
Printing and Reproduction		\$2,793	\$3,200	\$3,200	\$800	\$4,000	\$3,200	\$3,200	\$13,193	
Staff Training		\$1,000	\$1,000	\$1,000	\$1,000	\$2,000	\$1,000	\$1,000	\$5,000	
Telephone		\$4,750	\$6,250	\$6,250	\$1,750	\$8,000	\$6,250	\$6,250	\$25,250	
Utilities(Elec, Water, Gas, Phone, Garbage)		\$3,900	\$4,800	\$4,800	\$700	\$5,500	\$4,800	\$4,800	\$19,000	
CONSULTANTS										
OTHER										
Computer / IT / Website		\$2,750	\$3,400	\$3,400	\$2,000	\$5,400	\$3,400	\$3,400	\$14,950	
Dues / Subscriptions		\$1,500	\$1,650	\$1,650	\$330	\$1,980	\$1,650	\$1,650	\$6,780	
TOTAL OPERATING EXPENSES		\$24,343	\$30,548	\$30,548	\$9,939	\$40,487	\$30,548	\$30,548	\$125,926	
HSA #3									4/24/2025	