



**SAN FRANCISCO
HUMAN SERVICES AGENCY**

Department of Benefits
and Family Support

Department of Disability
and Aging Services


P.O. Box 7988
San Francisco, CA
94120-7988
www.SFHSA.org



London Breed
Mayor

Trent Rhorer
Executive Director

MEMORANDUM

TO: DISABILITY AND AGING SERVICES COMMISSION
THROUGH: KELLY DEARMAN, EXECUTIVE DIRECTOR
FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR
 ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS ^{DS}
DATE: June 7, 2023
SUBJECT: NEW GRANT: **MULTIPLE GRANTEES** (NON-PROFIT) FOR
 PROVISION OF THE VILLAGE AND COMMUNITY BRIDGE
 MODELS

GRANT TERM: 07/01/2023 – 06/30/2027

GRANT AMOUNT:	New \$3,205,352	Contingency \$320,535	Total \$3,525,887		
ANNUAL AMOUNT	FY 23/24 \$801,338	FY 24/25 \$801,338	FY 25/26 \$801,338	FY 26/27 \$801,338	Total \$3,205,352
Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
Funding:	\$3,205,352			\$320,535	\$3,525,887
Percentage:	100%				100%

The Department of Disability and Aging Services (DAS) requests authorization to enter into grants with multiple providers for the period of July 1, 2023 through June 30, 2027, in an amount of \$3,205,352 plus a 10% contingency for a total amount not to exceed \$3,525,887. The purpose of the grant is to provide programs using the Village and the Community Bridge model.

Background

Community Service programs are an integral part of the Department of Disability and Aging Services (DAS) overall budget and service plan. Community Service programs consist of activities and/or services that are aimed at supporting older adults and adults with disabilities to live as independently as possible in the community. Community Services focus on the physical, social, psychological, economic, educational, recreational, and/or creative needs of older adults and adults with disabilities. Community Service are traditionally delivered at Community Centers located throughout the City.

The two modes described below utilize different models for delivery of Community Services. Each model looks to reach out to its service area to offer

programming designed to engage its participants, many of whom are not otherwise accessing ‘traditional’ Community Service programs.

	FY 23/24 – FY 26/27 Annual amount	Grant total	Contingency	Not-to-Exceed
Golden Gate Senior Services	\$179,096	\$716,384	\$71,638	\$788,022
NEXT Village San Francisco	\$247,527	\$990,108	\$99,011	\$1,089,119
San Francisco Village	\$374,715	\$1,498,860	\$149,886	\$1,648,746
Total	\$801,338	\$3,205,352	\$320,535	\$3,525,887

Services to be Provided

Community Bridge Model

The Community Bridge model started as a pilot project ‘hybrid’ of a Village model and a site-based Community Center in FY14/15. Now known as a Community Bridge model, this program builds upon site-based Community Service programs, blending off-site service coordination, development of social networks, and the recruitment of volunteers to help with delivery of services. The Community Bridge model supports seniors and adults with disabilities within its immediate service area.

Grantee Golden Gate Senior Services’ Community Bridge program is based at the Richmond Senior Center and focuses its services in the Richmond District.

Village Model

The Village model is a membership driven organization through which paid staff, volunteers, and the members themselves coordinate a wide array of services for the purpose of supporting independence and aging in place. DAS-funded Village model programs share a defined set of core elements including an annual membership fee which encourages a high engagement of members, a financial sustainability plan, use of volunteers for delivery of services, membership services to assist with member requests, and educational activities designed to promote awareness of aging and aging-in-place resources.

Grantee San Francisco Village offers its Village model services citywide, and Grantee NEXT Village San Francisco focuses its Village model services on Supervisorial District 3, the Northeastern section of the City.

Selection

Grantees were selected through RFP #1056, which was issued in April 2023.

Funding

Funding for these grants is provided thru County General Funds

Attachments

Community Bridge Model

Golden Gate Senior Services

Appendix A, Scope, Tech support

Appendix B, Budget

Village Model

NEXT Village San Francisco

Appendix A, Scope

Appendix B, Budget

San Francisco Village

Appendix A, Scope

Appendix B, Budget

APPENDIX A – SERVICES TO BE PROVIDED

Golden Gate Senior Services Community Bridge July 1, 2023 - June 30, 2027

I. Purpose

The purpose of this grant is to fund the community services program known as the Community Bridge. The Community Bridge is a model through which paid staff, volunteers, and the members themselves coordinate a wide array of services and activities for older adults and adults with disabilities, for the purpose of promoting independence, building relationships within the neighborhoods, and supporting aging in place. The Bridge model offers the benefit of having a fixed site as a home base and providing services by staff and volunteers in the community.

II. Definitions

Adult with a Disability	A person 18-59 years of age 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
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.
CARBON	Contracts Administration, Reporting, and Billing Online System
City	City and County of San Francisco
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	Golden Gate Senior Services
HSA	San Francisco 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
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. 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
OCP	Office of Community Partnerships
Older Adult	A person who is 60 years or older
Socially Isolated	Having few social relationships and few people to interact with regularly
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)
Village Model	A membership driven organization with the goal of allowing community members to reside in their own homes while being able to access services that address their changing lifestyles as they age

III. Target Population and Eligibility

This program is designed to serve all ethnicities and populations, with focused expertise to promote the unique cultural needs which have been identified as demonstrating the greatest economic and social need:

- Persons with low income
- Persons who are socially isolated
- Persons with limited English-speaking proficiency

- Persons from communities of color
- Persons who identify as LGBTQ+
- Persons at risk of institutionalization

To be eligible for the Community Bridge program, an individual must be:

- A resident of San Francisco *and* A person aged 60 and above *or* a person aged 18-59 with a disability *and* in need of services as described in this description of services.

IV. Location and Time of Services

Community Bridge primarily serves older adults and adults with disabilities in the City's District 1 area, though people from other districts are eligible to join. As a hybrid village model, the Community Bridge is center-based at Richmond Senior Center; activities happen at the Center and in local public spaces. Community Bridge staff work from home, at the Center or in neighborhood locations. Time of services will mostly be between Monday through Friday, 9 a.m. to 5 p.m., although other activities will be based on an agreed upon schedule as planned and coordinated by staff and members.

V. Description of Services

The Community Bridge model is a program with the goal of allowing community members to reside in their own homes while being able to access services that address their changing lifestyles as they age. Participants in the program become members of the Community Bridge. Membership services are described below.

The program will include the following four (4) core elements:

1. Financial Sustainability – The program will be required to develop an organizational plan to demonstrate current as well as future financial sustainability. This may include City/DAS funding and should also include fundraising and other funding opportunities. During the annual monitoring process, an OCP program analyst will review the financial sustainability plan to determine compliance with the plan as well as barriers or other challenges faced by the program.
2. Volunteer Recruitment and Development – The program relies heavily on the volunteers that take the time to become trained and assigned to work with specific members. The program will engage in volunteer recruitment, training, and retention practices to maximize volunteer support of the program.
3. Membership Services – The program will have a central contact point for coordination of membership services. Membership services will accept requests for services and then coordinate completion of those requests through paid staff, volunteers, or other members. Membership services will provide a “concierge-like service” which will include providing referrals to a vetted list of third-party services such as gardeners, handy persons, legal services, and other types of services which may be central to the goals of the program.
4. Educational Activities – There is often lack of knowledge within the aging and disability community regarding services available to provide support, encourage independence, and promote aging in place. Grantee will develop educational

activities among its membership to help increase awareness around services for older adults and adults with disabilities, including DAS/OCP resources.

On an annual basis, the Grantee will provide the following services:

- Unduplicated Consumers – Grantee will provide service to unduplicated consumers which consist of the membership base.

UNIT: One unduplicated consumer who is also a member of the program

- Volunteer Recruitment and Development - The Bridge program relies on the volunteers recruited, trained, and assigned to work with specific members. Grantee will conduct outreach to draw volunteers.

UNIT: One volunteer

- Service Hours - A unique features of this model is the utilization of volunteers and the members themselves to provide services to the membership. Volunteer hours shall include volunteer and member time spent providing services to members.

UNIT: One hour of service to Bridge members

- Activity Hours. Scheduled activities serve as a draw for members and a way to build social networks and connections among participants. Activities may include educational presentations, workshops, trainings, cultural events, social events, exercise classes, arts and crafts classes, discussion groups, sports activities, support groups, field trips, and any other group activity that brings people together.

UNIT: One hour of educational activity

VI. Grantee Responsibilities

- Grantee will develop and maintain policies and procedures for all aspect of program operation, including a quality assurance plan.
- Grantee will ensure adequate and culturally competent staff (paid and/or volunteer) to administer the program, deliver quality services to meet the needs of the consumers, and adhere to all the program standards.
- Grantee will resolve grievances related to program services at the program level and adhere to the DAS Grievance Policy and Procedure.
- Grantee will provide training and ongoing supervision and oversight of all program staff.
- As Grantee is a mandated reporter for witnessed or suspected elder abuse/neglect, staff (paid and/or volunteer) will complete an elder and dependent adult abuse training annually.
- Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules whenever applicable.
- Grantee will administer an annual consumer survey to gather input regarding consumer's direct experience.

- Grantee will communicate and collaborate regularly with DAS to help provide support and quality services to consumers.
- Grantee will attend DAS Commission, program-related, and other meetings as needed.

VII. Service Objectives

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

- Provide Community Bridge services for **250** unduplicated consumers.
- Provide volunteer recruitment and development services to **50** volunteers.
- Provide **1000** service hours to Bridge members.
- Provide **550** hours of scheduled activities.

VIII. Outcome Objectives

On an annual basis, Grantee will meet the following outcome objectives as collected through the annual consumer survey:

- Consumers report that their program participation has helped maintain or increase their independence and ability to live at home. Target: 75%
- Consumers report that through their program participation they learned about a new aging or aging-in place related service they were not previously aware of. Target: 75%
- Consumers report that through their program participation they experience increased opportunities for socialization and interacting with others. Target: 75%
- Maintain retention in program among current participants. Target: 75%

The consumer satisfaction survey should have a response rate of 50% of participants.

IX. Reporting Requirements

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

- A. The grantee will enter consumers' enrollment date into the DAS GetCare - Community Services module.
- B. The grantee will enter into the DAS GetCare Service Unit section all the units of service by the 5th working day of the month for the preceding month.
- C. Monthly, quarterly, and annual reports must be entered into the CARBON system as required by DAS and HSA Contracts staff.
- D. Grantee will submit response rates and aggregate data from annual satisfaction survey to OCP Program Analyst by March 15th of each grant year.
- E. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31st each grant year. This report must be submitted to the CARBON system.

- F. Grantee shall develop and deliver ad hoc reports as requested by HSA/DAS/OCP.
- G. Grantee shall develop and deliver a bi-annual summary report of SOGI data collected as requested by DAS/HSA. The due dates for submitting the summary reports are January 10 (for July 1 – December 31 data) and July 10 (for January 1 – June 30 data).
- H. Grantee will develop and maintain with OCP's approval, an updated Site Chart (using OCP's format) with details about the program.

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

Ella Lee

Ella.lee@sfgov.org

Senior Contract Manager, Office of Contract Management
Human Services Agency

Or

Melissa McGee

melissa.mcgee@sfgov.org

Program Manager, Office of Community Partnerships
Department of Disability and Aging Services

X. Monitoring Activities

- A. Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements, such as participant eligibility and targeted mandates, back up documentation for the units of service and all reporting, progress of service and outcome objectives, collection and maintenance of participant records, reporting of monthly service units on DAS GetCare, agency and organization standards, current organizational chart, provision of an Elder and Dependent Adult Abuse Report training to staff, completion of the California Department of Aging Security Awareness Training by staff, financial sustainability plan, program operation, written policies and procedures manual of program, written project income policies (if applicable), grievance procedure posted in the center/office and also given to the participants who are homebound, hours of operation, and appropriate provision of services according to Sections VII and VIII.
- 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 American with Disabilities Act, subcontracts, and Memoranda of Understanding, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name Golden Gate Senior Services					Term 7/1/23 - 6/30/27
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>					
If modification, Effective Date of Mod. _____ No. of Mod. _____					
Program: Community Bridge					
Budget Reference Page No.(s)					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	\$145,809	\$145,809	\$145,809	\$145,809	\$583,236
Operating Expenses	\$9,926	\$9,926	\$9,926	\$9,926	\$39,704
Subtotal	\$155,735	\$155,735	\$155,735	\$155,735	\$622,940
Indirect Percentage (%)	15%	15%	15%	15%	15%
Indirect Cost (Line 16 X Line 15)	\$23,361	\$23,361	\$23,361	\$23,361	\$93,444
Subcontractor/Capital Expenditures	\$0	\$0	\$0	\$0	\$0
Total Expenditures	\$179,096	\$179,096	\$179,096	\$179,096	\$716,384
HSA Revenues					
Local Fund	\$179,096	\$179,096	\$179,096	\$179,096	\$716,384
					\$0
					\$0
					\$0
					\$0
					\$0
TOTAL HSA REVENUES	\$179,096	\$179,096	\$179,096	\$179,096	\$716,384
Other Revenues					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
					\$0
Total Revenues	\$0	\$0	\$0	\$0	\$0
Full Time Equivalent (FTE)					
Prepared by:					Telephone No.:
HSA-CO Review Signature:	_____				
HSA #1					6/20/2018

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 Budgeted Salary	DAAS Budgeted Salary	DAAS Budgeted Salary	DAAS Budgeted Salary	TOTAL Budgeted Salary
RSC Director	\$118,976	0.05	100.00%	0.05	\$5,949	\$5,949	\$5,949	\$5,949	\$23,796
Program director	\$86,528	0.40	100.00%	0.40	\$34,611	\$34,611	\$34,611	\$34,611	\$138,444
Volunteer manager	\$68,640	0.38	100.00%	0.38	\$25,740	\$25,740	\$25,740	\$25,740	\$102,960
Activity liaison	\$64,896	0.45	100.00%	0.45	\$29,203	\$29,203	\$29,203	\$29,203	\$116,812
Bilingual program coordinator	\$58,240	0.50	100.00%	0.50	\$29,120	\$29,120	\$29,120	\$29,120	\$116,480
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
				-	\$0	\$0	\$0	\$0	\$0
TOTALS	\$397,280	1.78	500%	1.78	\$124,623	\$124,623	\$124,623	\$124,623	\$498,492
FRINGE BENEFIT RATE	17%								
EMPLOYEE FRINGE BENEFITS	\$67,538				\$21,186	\$21,186	\$21,186	\$21,186	\$84,744
TOTAL SALARIES & BENEFITS	\$464,818				\$145,809	\$145,809	\$145,809	\$145,809	\$583,236
HSA #2									6/20/2018

Operating Expense Detail

Expenditure Category	TERM					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
Rental of Property						\$0
Utilities(Elec, Water, Gas, Phone, Garbage)		\$948	\$948	\$948	\$948	\$3,792
Office Supplies, Postage		\$400	\$400	\$400	\$400	\$1,600
Building Maintenance Supplies and Repair						\$0
Printing and Reproduction						\$0
Insurance						\$0
Staff Training						\$0
Staff Travel-(Local & Out of Town)						\$0
Rental of Equipment						\$0
CONSULTANTS						\$0
						\$0
						\$0
						\$0
						\$0
OTHER						
Staff/Volunteer Training/Appreciation		\$600	\$600	\$600	\$600	\$2,400
IT and Web support		\$800	\$800	\$800	\$800	\$3,200
Program and events		\$3,678	\$3,678	\$3,678	\$3,678	\$14,712
Translation		\$1,500	\$1,500	\$1,500	\$1,500	\$6,000
Outreach		\$2,000	\$2,000	\$2,000	\$2,000	\$8,000
TOTAL OPERATING EXPENSES		\$9,926	\$9,926	\$9,926	\$9,926	\$39,704

APPENDIX A – SERVICES TO BE PROVIDED

NEXT Village San Francisco Village Model July 1, 2023 to June 30, 2027

I. Purpose

The purpose of this grant is to fund the Community Services program model known as the Village model. The Village model is membership-driven organization through which paid staff, volunteers, and the members themselves coordinate a wide array of services and activities for older adults and adults with disabilities, for the purpose of promoting independence, building relationships within the neighborhoods, and supporting aging in place.

II. Definitions

Adult with a Disability	A person 18-59 years of age 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
CA GetCare	A web-based application that provides specific functionalities for contracted agencies to use to perform consumer intake/assessment/enrollment, record service units, run reports, etc.
CARBON	Contracts Administration, Reporting, and Billing Online System
City	City and County of San Francisco
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	NEXT Village San Francisco (NVSF)
HSA	San Francisco 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
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. 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
OCP	Office of Community Partnerships
Older Adult	A person who is 60 years or older
Socially Isolated	Having few social relationships and few people to interact with regularly
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).

III. Target Population and Eligibility

This program is designed to serve all ethnicities and populations, with focused expertise to promote the unique cultural needs which have been identified as demonstrating the greatest economic and social need:

- Persons with low income

- Persons who are socially isolated
- Persons with limited English-speaking proficiency
- Persons from communities of color
- Persons who identify as LGBTQ+
- Persons at risk of institutionalization

To be eligible for the Village model, an individual must be:

1. A resident of San Francisco *and*
2. A person aged 60 and above *or* a person aged 18-59 with a disability *and*
3. Willing to pay an annual membership fee in order to participate

IV. Location and Time of Services

NEXT Village San Francisco serves older adults and adults with disabilities in the City's District 3 area. NVSF has no fixed location and activities happen at local public spaces, the North Beach Library, and the Joe DiMaggio playground. NVSF staff work from home or in neighborhood locations and time of services will mostly be between Monday through Friday, 9 a.m. to 5 p.m., although other activities will be based on an agreed upon schedule as planned and coordinated by staff and members.

V. Description of Services

The Village model is a membership-driven organization with the goal of allowing community members to reside in their own homes while being able to access services that address their changing lifestyles as they age.

The program will include the following five (5) core elements:

1. Financial Sustainability – The program will be required to develop an organizational plan to demonstrate current as well as future financial sustainability. This may include City/DAS funding, but should also include membership fees, fundraising, and other funding opportunities. During the annual monitoring process, an OCP program analyst will review the financial sustainability plan to determine compliance with the plan as well as barriers or other challenges faced by the program.
2. Membership Fee – The program will have a minimum membership fee of \$120 per year. In addition to supporting the program's self-sufficiency, an annual membership fee encourages member engagement and program leadership's close attention to service offerings and member satisfaction. All membership fees will be paid by member, member spouse, children, or household member. Acceptance of membership fees from sources other than these requires pre- approval from the OCP program analyst. Review of membership payment and sources will be part of the annual program monitoring process.
3. Volunteer Recruitment and Development – The program relies heavily on the volunteers that take the time to become trained and assigned to work with specific members. The

program will develop volunteer recruitment, training, and retention practices to maximize volunteer support of the program.

4. Membership Services – The program will have a central contact point for coordination of membership services. Membership services will accept requests for services and then coordinate completion of those requests through paid staff, volunteers, or other members. Membership services will provide a “concierge-like service” which will include providing referrals to a vetted list of third-party services such as gardeners, handy persons, legal services, and other types of services which may be central to the goals of the program.
5. Educational Activities – There is often lack of knowledge within the aging and disability community regarding services available to provide support, encourage independence, and promote aging in place. Grantee will develop educational activities among its membership to help increase awareness around services for older adults and adults with disabilities, including DAS resources.

On an annual basis, the Grantee will provide the following services:

- Unduplicated Consumers – Grantee will provide service to unduplicated consumers which consist of the membership base.

UNIT: One unduplicated consumer who is also a member of the program

- Membership Growth - As a membership-based program, it is incumbent to increase and diversify the membership base. Grantee will increase outreach and expand membership through specific outreach to the target population, including making presentations at public forums, neighborhood associations, and other interested parties about the Village model.

UNIT: One new individual member

- Volunteer Recruitment and Development - The Village model relies on the volunteers recruited, trained, and assigned to work with specific Village members. Grantee will conduct outreach to draw volunteers that will commit to a minimum service requirement.

UNIT: One volunteer

- Service Hours - One of the unique features of the Village model is the utilization of volunteers and the members themselves to provide services to the membership. Volunteer hours shall include volunteer and member time spent providing Village services to members.

UNIT: One hour of service to Village members

- Educational Activities - There is often a lack of knowledge within the aging and disability community regarding services available to provide support, encourage independence, and promote aging-in-place. Grantee will develop educational activities among their membership to help increase awareness around services for older adults and adults with disabilities, including DAS resources.

UNIT: One hour of educational activity

- Annual Consumer Survey - Grantee will administer an annual consumer survey, pre-approved by OCP.

VI. Grantee Responsibilities

- Grantee will develop and maintain policies and procedures for all aspect of program operation, including a quality assurance plan.
- Grantee will ensure adequate and culturally competent staff (paid and/or volunteer) to administer the program, deliver quality services to meet the needs of the consumers, and adhere to all the program standards.
- Grantee will resolve grievances related to program services at the program level and adhere to the DAS Grievance Policy and Procedure.
- Grantee will provide training and ongoing supervision and oversight of all program staff.
- As Grantee is a mandated reporter for witnessed or suspected elder abuse/neglect, staff (paid and/or volunteer) will complete an elder and dependent adult abuse training annually.
- Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules whenever applicable.
- Grantee will administer an annual consumer survey to gather input regarding consumer's direct experience.
- Grantee will communicate and collaborate regularly with DAS to help provide support and quality services to consumers.
- Grantee will attend DAS Commission, program-related, and other meetings as needed.

VII. Service Objectives

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

- Provide Village Model services for **130** unduplicated consumers.
- Provide volunteer recruitment and development services to **100** volunteers.
- Provide **2000** service hours to Village members.
- Provide **200** hours of activities services, including educational activities that promote health, independence, and services provided by DAS.

VIII. Outcome Objectives

On an annual basis, Grantee will meet the following outcome objectives as collected through the annual consumer survey:

- At least 75% of respondents via an annual Consumer Satisfaction Survey report that participation in healthy aging activities provided by the Village Model has made them feel healthier (stronger, better balance, etc.)
- At least 75% of respondents via an annual Consumer Satisfaction Survey report that mutual help services provided by the Village Model has helped maintain or increase their independence and ability to live at home.
- At least 75% of respondents via an annual Consumer Satisfaction Survey report that activities provided by the Village Model has helped them feel more connected and less isolated.
- At least a 75% retention rate among current members on an annual basis. This measure will track all memberships which come up for renewal during each fiscal year and whether that membership was renewed or not.
- As an extra outcome, NEXT Village will host outings that specifically blends the API and non-API community such as trips to the Asian Art Museum, a meal, and participation in annual celebratory events such as those hosted by AAPI.

Based on a consumer satisfaction survey, pre-approved by DAS OCP, with a response rate of **at least 50%** of the annual unduplicated enrollment when the grantee administers the survey.

IX. Reporting Requirements

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

- A. The grantee will enter consumers' enrollment date into the CA GetCare - Community Services module.
- B. The grantee will enter into the CA GetCare Service Unit section all the units of service by the 5th working day of the month for the preceding month.
- C. Monthly, quarterly, and annual reports must be entered into the CARBON system as required by DAS and HSA Contracts staff.
- D. Grantee will submit response rates and aggregate data from annual satisfaction survey to OCP Program Analyst by March 15th of each grant year.
- E. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is

due to HSA no later than July 31st each grant year. This report must be submitted to the CARBON system.

- F. Grantee shall develop and deliver ad hoc reports as requested by HSA/DAS/OCP.
- G. Grantee shall develop and deliver a bi-annual summary report of SOGI data collected as requested by DAS/HSA. The due dates for submitting the summary reports are January 10 (for July 1 – December 31 data) and July 10 (for January 1 – June 30 data).
- H. Grantee will develop and maintain with OCP's approval, an updated Site Chart (using OCP's format) with details about the program.

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

Tara.Alvarez@sfgov.org

Senior Contract Manager, Office of Contract Management
Human Services Agency

or

melissa.mcgee@sfgov.org

Program Manager, Office of Community Partnerships
Department of Disability and Aging Services

X. Monitoring Activities

- A. Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements, such as participant eligibility and targeted mandates, back up documentation for the units of service and all reporting, progress of service and outcome objectives, collection and maintenance of participant records, reporting of monthly service units on CA GetCare, agency and organization standards, current organizational chart, provision of an Elder and Dependent Adult Abuse Report training to staff, completion of the California Department of Aging Security Awareness Training by staff, financial sustainability plan, program operation, written policies and procedures manual of program, written project income policies (if applicable), grievance procedure posted in the center/office and also given to the participants who are homebound, hours of operation, and appropriate provision of services according to Sections VII and VIII.
- 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 American with Disabilities Act, subcontracts, and Memoranda of Understanding, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

NEXT VILLAGE SAN FRANCISCO	Term 7/1/23-6/30/27				
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>					
If modification, Effective Date of Mod. No. of Mod.					
Program: Village Model					
Budget Reference Page No.(s)					
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	7/1/23-6/30/27
Expenditures					
Salaries & Benefits	\$172,571	\$172,571	\$172,571	\$172,571	\$690,285
Operating Expense	\$48,435	\$48,435	\$48,435	\$48,435	\$193,740
Subtotal	\$221,006	\$221,006	\$221,006	\$221,006	\$884,025
Indirect Percentage (%)	12%	12%	12%	12%	12%
Indirect Cost (Line 16 X Line 15)	\$26,521	\$26,521	\$26,521	\$26,521	\$106,083
Capital Expenditure					
Total Expenditures	\$247,527	\$247,527	\$247,527	\$247,527	\$990,108
HSA Revenues					
General Fund	\$247,527	\$247,527	\$247,527	\$247,527	\$990,108
TOTAL HSA REVENUES	\$247,527	\$247,527	\$247,527	\$247,527	\$990,108
Other Revenues					
Total Revenues					
Full Time Equivalent (FTE)	2.65	2.65	2.65	2.65	
Prepared by: Gail Switzer	Telephone No.: 415-218-9271			Date 3/27/2023	
HSA-CO Review Signature:	_____				
HSA #1	10/25/2016				

Program: Village Model
 (Same as Line 9 on HSA #1)

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	TOTAL
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	DHS Program	DHS Program	DHS Program	DHS Program	7/1/23-6/30/27
					Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	
<i>Executive Director</i>	\$117,979	1.00	45%	0.45	\$53,091	\$53,091	\$53,091	\$53,091	\$212,362
<i>Volunteer Coordinator</i>	\$84,500	1.00	100%	1.00	\$84,500	\$84,500	\$84,500	\$84,500	\$338,000
<i>Administrative Assistant</i>	\$37,727	0.65	95%	0.62	\$23,390	\$23,390	\$23,390	\$23,390	\$93,560
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TOTALS		2.65	240%	2.07	\$160,981	\$160,981	\$160,981	\$160,981	\$643,922
FRINGE BENEFIT RATE	7.2%								
EMPLOYEE FRINGE BENEFITS					\$11,591	\$11,591	\$11,591	\$11,591	\$46,362
TOTAL SALARIES & BENEFITS					\$172,571	\$172,571	\$172,571	\$172,571	\$690,285
HSA #2	10/25/2016								

Program: Village Model
 (Same as Line 9 on HSA #1)

Operating Expense Detail

<u>Expenditure Category</u>	TERM					TOTAL
		<u>7/1/23-6/30/24</u>	<u>7/1/24-6/30/25</u>	<u>7/1/25-6/30/26</u>	<u>7/1/26-6/30/27</u>	\$
Rental of Property		\$20,172	\$20,172 #	\$20,172 #	\$20,172	\$121,032
Utilities(Elec, Water, Gas, Phone, Garbage)		\$2,988	\$2,988 #	\$2,988 #	\$2,988	\$17,928
Office Supplies, Postage		\$1,000	\$1,000 #	\$1,000 #	\$1,000	\$6,000
Building Maintenance Supplies and Repair						
Printing and Reproduction		\$1,000	\$1,000 #	\$1,000 #	\$1,000	\$6,000
Insurance						
Staff Training						
Staff Travel-(Local & Out of Town)						
Rental of Equipment						
CONSULTANT/SUBCONTRACTOR DESCRIPTIVE TITLE						
IT Consultant		\$251	\$251 #	\$251 #	\$251	\$1,506
Graphic Designer		\$1,000	\$1,000 #	\$1,000 #	\$1,000	\$6,000
OTHER						
Mon Ami Data Base		\$18,000	\$18,000 #	\$18,000 #	\$18,000	\$108,000
Other Databases		\$1,000	\$1,000 #	\$1,000 #	\$1,000	\$6,000
Program Expenses		\$3,024	\$3,024 #	\$3,024 #	\$3,024	\$18,144
TOTAL OPERATING EXPENSE		\$48,435	\$48,435	\$48,435	\$48,435	\$193,740
HSA #3						10/25/2016

APPENDIX A – SERVICES TO BE PROVIDED

SAN FRANCISCO VILLAGE Village Model

July 1, 2023 to June 30, 2027

I. Purpose

The purpose of this grant is to fund the Community Services program model known as the Village model. The Village model is a membership driven organization through which paid staff, volunteers, and the members themselves coordinate a wide array of services for the purpose of supporting independence and aging in place.

II. Definitions

Adult with a Disability	A person 18-59 years of age 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
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.
CARBON	Contracts Administration, Reporting, and Billing Online System
City	City and County of San Francisco
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	San Francisco Village
HSA	San Francisco 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
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. 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
OCP	Office of Community Partnerships
Older Adult	A person who is 60 years or older
Socially Isolated	Having few social relationships and few people to interact with regularly
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).

III. Target Population / Eligibility for Village Membership

This program is designed to serve all ethnicities and populations, with focused expertise to promote the unique cultural needs which have been identified as demonstrating the greatest economic and social need:

- Persons with low income
- Persons who are socially isolated
- Persons with limited English-speaking proficiency
- Persons from communities of color
- Persons who identify as LGBTQ+
- Persons at risk of institutionalization

To be eligible for the Village model, an individual must be:

1. A resident of San Francisco *and*
2. A person aged 60 and above *or* a person aged 18-59 with a disability *and*
3. Willing to pay an annual membership fee in order to participate

IV. Location and Time of Services

San Francisco Village is located at 3220 Fulton Street. The offices accommodate some Village activities while other activities happen in different neighborhoods in San Francisco, including member's homes.

V. Description of Services

The Village model is a membership driven organization with the goal of allowing community members to reside in their own homes while being able to access services that address their changing lifestyles as they age.

Each Village model will contain the following five (5) core elements:

- 1) Financial Sustainability. A Village model program will be required to develop an organizational plan to demonstrate current as well as future financial sustainability. This may include City/DAS funding, but should also include membership fees, fundraising, and other funding opportunities. During the annual monitoring process, DAS program analyst will review financial sustainability plan to determine compliance with plan as well as barriers or other challenges faced by Village program.
- 2) Membership Fee. All Village programs will have a minimum membership fee of \$120 per year. In addition to supporting program self-sufficiency, an annual membership fee encourages engagement of the membership as well as close attention to service offerings and member satisfaction by Village leadership.

All membership fees will be paid by member, member spouse, children or household member. Acceptance of membership fees from sources other than these requires pre-

approval from Office of Community Partnerships analyst. Review of membership payment and sources will be part of the annual program monitoring process.

- 3) Volunteer Recruitment and Development. The Village model relies heavily on the volunteers that take the time to become trained and assigned to work with specific Village members. Each Village program will develop volunteer recruitment, training, and retention practices to maximize volunteer support of their Village.
- 4) Membership Services. The Village model will have a central contact point for coordination of membership services. Membership services will accept requests for services and then coordinate completion of those requests through paid staff, volunteers, or other members. Membership services will provide a “concierge-like service” which will include providing referrals to a vetted list of third party services such as gardeners, handypersons, legal services, and other services which may be central to the goals of the Village model.
- 5) Educational activities. There is often a lack of knowledge within the aging and disability community regarding services available to provide support, encourage independence, and promote aging-in-place. Grantee will develop educational activities among their membership to help increase awareness around aging and aging-in-place services, including DAS/OCP resources.

On an annual basis, the Grantee will provide the following services as part of the Village model:

- 1) Unduplicated Consumers. Grantee will provide service to unduplicated consumers which consist of the membership base.

UNIT: One unduplicated consumer who is also a member of the Village program.

- 2) Membership growth. As a membership based program it is incumbent to increase and diversify the membership base. Grantee will increase outreach and expand respective Village model membership through specific outreach to the target population; making presentations at public forums, neighborhood associations, and other interested parties about the Village model.

UNIT: One new individual member.

- 3) Volunteer Recruitment and Development. The Village model relies on the volunteers recruited, trained, and assigned to work with specific Village members. Grantee will conduct outreach to draw volunteers that will commit to a minimum service requirement.

UNIT: One volunteer

- 4) Service hours. One of the unique features of the Village model is the utilization of volunteers and the members themselves to provide services to the membership. Volunteer hours shall include: volunteer and member time spent providing Village services to members.

UNIT: One hour of service to Village members.

- 5) Educational activities. Grantee will develop educational activities among their membership to help increase awareness around aging and aging-in-place services, including DAS/OCP resources.

UNIT: One hour of educational activity.

- 6) Additionally, Grantee will provide care navigation to members. Care navigation is defined broadly as it relates to the physical, social, and mental health of members: adjusting to a new diagnosis, caring for a family member, learning to live with a chronic illness, moving to assisted living, accessing government programs, adapting to changes in mobility, pre and post medical procedure or hospitalization, and learning to rely on others.

UNIT: One hour of care navigation.

VI. Grantee Responsibilities

- Grantee will develop and maintain policies and procedures for all aspect of program operation, including a quality assurance plan.
- Grantee will ensure adequate and culturally competent staff (paid and/or volunteer) to administer the program, deliver quality services to meet the needs of the participants, and adhere to all the program standards.
- Grantee will resolve grievances related to program services at the program level and adhere to the DAS Grievance Policy and Procedure.
- Grantee will provide training and ongoing supervision and oversight of all program staff.
- As Grantee is a mandated reporter for witnessed or suspected elder abuse/neglect, staff will complete elder and dependent adult abuse trainings annually.
- Grantee will be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules whenever applicable.
- Grantee will administer an annual satisfaction survey to gather input regarding participant's direct experience.
- Grantee will communicate and collaborate regularly with DAS to help provide support and quality services to participants.
- Grantee will attend DAS Commission, program-related, and other meetings as needed.

VII. Service Objectives

On an annual basis, Grantee will:

- Provide Village model services for **450** unduplicated consumers.
- Provide volunteer recruitment and development services to **100** volunteers.
- Provide **3,800** service hours to Village members.
- Provide **600** hours of educational activities.
- Provide **500** hours of care navigation.

VIII. Outcome Objectives

On an annual basis, Grantee will meet the following outcome objectives as collected through the annual consumer survey:

- At least 75% of Village members report via an annual consumer satisfaction survey that their Village membership has helped maintain or increase their independence and ability to live at home.
- At least 75% of Village members report via an annual consumer satisfaction survey that through their Village membership they learned about a new aging or aging-in-place related service they were not previously aware of.
- At least 75% of Village members report via an annual consumer satisfaction survey that through their Village membership their experience increased opportunities for socialization and interacting with others.
- At least a 75% retention rate among current members on an annual basis. This measure will track all memberships which come up for renewal during each fiscal year and whether that membership was renewed or not.
- 95% of members will age-in-place after one year. This will be measured by the number of members who do not move out of their homes to higher levels of care.

Based on a consumer satisfaction survey, pre-approved by DAS OCP, with a response rate of **at least 50%** of the annual unduplicated enrollment when the grantee administers the survey.

IX. Reporting Requirements

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

- A. The grantee will enter consumers' enrollment date into the DAS GetCare - Community Services module.
- B. The grantee will enter into the DAS GetCare Service Unit section all the units of service by the 5th 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 DAS and contracts department staff.
- D. Grantee will submit response rates and aggregated data from annual consumer satisfaction survey to Office of Community Partnerships staff by March 15th of each grant year.
- E. 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 on line to this website link:
<https://sfhsa.hfa3.org/signin>
- F. Grantee shall issue a Fiscal Closeout Report at the end of the fiscal year. The report is due to HSA no later than July 31 each grant year. This report must be submitted to the CARBON system.
- G. Grantee shall develop and deliver ad hoc reports as requested by HSA/DAS/OCP.
- H. Grantee shall develop and deliver a bi-annual summary report of SOGI data collected as requested by SF-HSA. The due dates for submitting the bi-annual summary reports are January 10th (July 1st through December 31st data) and July 10th (January 1st through June 30th data).
- I. Grantee will develop and maintain with OCP's approval, an updated Site Chart (using OCP's format) with details about the program.
- J. Apart from reports requested to be sent via e-mail to the program analyst and/or contract manager, all other reports and communications should be sent to the following addresses:

Melissa McGee
Program Manager
DAS, Office of Community Partnerships
P.O. Box 7988
San Francisco, CA 94120
(415) 355-6782
melissa.mcgee@sfgov.org

Tara Alvarez
Contract Manager
Human Services Agency
P.O. Box 7988
San Francisco, CA 94120
(415) 557-5626
tara.alvarez@sfgov.org

X. Monitoring Activities

- a. Program Monitoring: Program monitoring will include review of compliance to specific program standards or requirements; client eligibility and targeted mandates, back up documentation for the units of service and all reporting, and progress of

service and outcome objectives; how participant records are collected and maintained; reporting performance including monthly service unit reports on DAS 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; financial sustainability plan; program operation, which includes a review of a written policies and procedures manual of all OCP funded programs, written project income policies if applicable, grievance procedure posted in the center/office, and also given to the consumers who are homebound, hours of operation are current; a board of director list and whether services are provided appropriately according to Sections VII and VIII.

- 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, and HIPAA.

**HUMAN SERVICES AGENCY BUDGET SUMMARY
BY PROGRAM**

Name				Term	
San Francisco Village				7/1/23-6/30/27	
(Check One) New <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Modification <input type="checkbox"/>					
If modification, Effective Date of Mod.			No. of Mod.		
Program: Senior Village Model					
Budget Reference Page No.(s)					TOTAL
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	7/1/23-6/30/27
Expenditures					
Salaries & Benefits	\$257,268	\$257,268	\$257,268	\$257,268	\$1,029,070
Operating Expense	\$71,430	\$71,430	\$71,430	\$71,430	\$285,720
Subtotal	\$328,698	\$328,698	\$328,698	\$328,698	\$1,314,790
Indirect Percentage (%)	14%	14%	14%	14%	14%
Indirect Cost (Line 16 X Line 15)	\$46,017	\$46,017	\$46,017	\$46,017	\$184,070
Total Expenditures	\$374,715	\$374,715	\$374,715	\$374,715	\$1,498,860
HSA Revenues					
General Fund	\$374,715	\$374,715	\$374,715	\$374,715	\$1,498,860
TOTAL HSA REVENUES	\$374,715	\$374,715	\$374,715	\$374,715	\$1,498,860
Other Revenues					
Total Revenues					
Full Time Equivalent (FTE)					
Kate Hoepke, Executive Director			Telephone No.: 415-387-1375		5/22/2023
HSA-CO Review Signature: _____					
HSA #1					10/25/2016

Program: Senior Village Model
(Same as Line 9 on HSA #1)

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	TOTAL
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	DHS Program		DHS Program	DHS Program	7/1/23-6/30/27
					Budgeted Salary	Budgeted Salary	Budgeted Salary	Budgeted Salary	
Executive Director	\$154,000	1.00	30%	0.30	\$46,200	\$46,200	\$46,200	\$46,200	\$184,800
Member Services Director	\$84,500	1.00	50%	0.50	\$42,250	\$42,250	\$42,250	\$42,250	\$169,000
Program & Creative Director	\$84,500	1.00	40%	0.40	\$33,800	\$33,800	\$33,800	\$33,800	\$135,200
Wellness/Volunteer Coordinator	\$75,000	1.00	40%	0.40	\$30,000	\$30,000	\$30,000	\$30,000	\$120,000
Care Navigator (new position)	\$75,000	1.00	50%	0.50	\$37,500	\$37,500	\$37,500	\$37,500	\$150,000
Communications Director	\$84,500	1.00	25%	0.25	\$21,125	\$21,125	\$21,125	\$21,125	\$84,500
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TOTALS		6.00	2.35	2.35	\$210,875	\$210,875	\$210,875	\$210,875	\$843,500
FRINGE BENEFIT RATE	22%								
EMPLOYEE FRINGE BENEFITS					\$46,393	\$46,393	\$46,393	\$46,393	\$185,570
TOTAL SALARIES & BENEFITS					\$257,268	\$257,268	\$257,268	\$257,268	\$1,029,070
HSA #2	10/25/2016								

San Francisco Village
 (Same as Line 9 on HSA #1)

Operating Expense Detail

<u>Expenditure Category</u>	TERM	<u>7/1/23-6/30/24</u>	<u>7/1/24-6/30/25</u>	<u>7/1/25-6/30/26</u>	<u>7/1/26-6/30/27</u>	TOTAL
						\$ -
Rental of Property		\$51,430	\$51,430	\$51,430	\$51,430	\$205,720
Utilities(Elec, Water, Gas, Phone, Garbage)						
Office Supplies, Postage						
Building Maintenance Supplies and Repair						
Printing and Reproduction		\$20,000	\$20,000	\$20,000	\$20,000	\$80,000
Insurance						
Staff Training						
Staff Travel-(Local & Out of Town)						
Rental of Equipment						
CONSULTANT/SUBCONTRACTOR DESCRIPTIVE TITLE						
OTHER						
TOTAL OPERATING EXPENSE		\$71,430	\$71,430	\$71,430	\$71,430	\$285,720