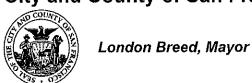
City and County of San Francisco



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 & ADULT SERVICES COMMISSION

THROUGH: SHIREEN McSPADDEN, EXECUTIVE DIRECTOR

FROM: CINDY KAUFFMAN, DEPUTY DIRECTOR

JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS .) 1/1

DATE: NOVEMBER 6, 2019

SUBJECT: GRANT MODIFICATION: ON LOK DAY SERVICES (NON-PROFIT)

HEALTH PROMOTION: Self-Management of Chronic Health Conditions,

Physical Fitness and Fall Prevention Programs

Contingency **GRANT TERM:** Total Current Modification Revised 7/1/19-7/1/19-7/1/19-7/1/19-6/30/21 6/30/21 6/30/21 6/30/21 \$1,582,237 \$1,190,336 \$1,438,398 \$143,839 TOTAL \$248,062 AMOUNT ANNUAL See Table AMOUNT **MODIFICATION** Federal Contingency Total County State \$24,806 \$272,868 FUNDING: \$248,062 \$0 \$0 100% PERCENTAGE: 100% 0% 0%

The Department of Aging and Adult Services (DAAS) requests authorization to modify the existing grant agreements with On Lok Day Services for the period of July 1, 2019 through June 30, 2021, in the additional amount of \$248,062 plus a 10% contingency for a total amount not to exceed of \$1,582,237. The purpose of the grant is to provide older adults and adults with disabilities with health promotion and disease prevention programs focused on education, physical fitness, and fall prevention.

Background

In order to address community needs for programs that improve and/or maintain the health and well-being of older adults and adults with disabilities and to support this population in living independently in the community, DAAS implemented two health promotion and disease prevention programs. They are Physical Fitness & Fall Prevention and Self-Management of Chronic Health Conditions. Both programs promote lifestyle changes and support and encourage individuals to actively manage their health and wellness. The programs also support independent living in the community, improve quality of life, and maintain and/or improve physical health.

Services to be Provided

The Physical Fitness and Fall Prevention program, also known as Always Active, consists of three different types of exercise classes, an ongoing group exercise class, a 12-week fall prevention series of classes, and fall prevention maintenance classes. The ongoing group exercise classes contain five specific fitness components that include cardiovascular exercise, joint mobility, upper and lower body strength training, flexibility, and balance. The 12-week fall prevention series of classes, developed by the University of San Francisco, uses a series of assessment tools to individualize training and maximize the benefit of the training during the 12 week series. The ongoing fall prevention maintenance classes are offered two times per week for participants who have completed the 12-week fall prevention series and would like to continue strengthening the areas of fitness that were reassessed at the conclusion of the fall prevention series.

The programs provided under Self-Management of Chronic Health Conditions are Healthier Living and Diabetes Empowerment Education Program (DEEP). Both programs are evidenced-based and provide participants with education and tools to help better manage chronic health conditions such as diabetes, heart disease, arthritis, and chronic pain. Both programs consist of 6 sessions and are led by leaders certified by the licensed organizations.

The funding amounts are detailed in the following table:

Program	FY 19/20	FY 20/21	Modification	Total FY 19-21	10% Contingency	Total Not to Exceed
Physical Fitness & Fall Prevention	\$389,495	\$399,232	\$117,146	\$905,873	\$90,587	\$996,460
Self-Management of Chronic Health Conditions	\$198,325	\$203,284	\$130,916	\$532,525	\$53,252	\$585,777
Total	\$587,820	\$602,516	\$248,062	\$1,438,398	\$143,839	\$1,582,237

Please refer to the attached Appendix A for more detailed information about the services and program requirements.

Grant Modification

The Physical Fitness & Fall Prevention program has experienced growth and high demand since 2017. The number and location of classes offered has increased. This modification will provide the program with an additional full time staff member to assist with administrative work including consumer registration and enrollment, collecting of physician's release forms, capturing attendance, evaluating instructors, conducting site inventory, etc. This work is important to maintaining the overall quality and function of the program.

The modification for the Self-Management of Chronic Health Conditions program will enable On Lok Day Services to hire a part time staff to support program operations. The modification will also provide the additional funding needed for increased administrative costs related to changes in program licensing.

Grantee Performance

Fiscal Monitoring: On Lok was monitored on February 26, 2019 and is in full compliance.

Program Monitoring: On Lok was monitored on June 7, 2019 and is in full compliance.

Selection

Grantee was selected through RFP 843 which was competitively bid in March 2019.

Funding

Funding for this modification will be provided by the Dignity Fund. The funding is from one time only funds and add-back funding from the Board of Supervisors budget process.

ATTACHMENTS On Lok Day Services

Physical Fitness & Fall Prevention

Appendix A-1-Services to be Provided Appendix B-1-Budget

Self-Management of Chronic Health Conditions

Appendix A-1-Services to be Provided Appendix B-1- Budget

APPENDIX A-1 SERVICES TO BE PROVIDED BY GRANTEE

Health Promotion Program
Physical Fitness & Fall Prevention
July 1, 2019 to June 30, 2021

Modification: November 1, 2019

I. Purpose

The purpose of this grant is to provide older adults and adults with disabilities with health promotion and disease prevention programs focused on physical fitness and fall prevention. Health promotion and disease prevention programs promote lifestyle changes and support and encourage individuals to actively manage their health and wellness. The programs also are intended to support independent living in the community, improve quality of life, and maintain and/or improve physical health.

II. Definitions

Adult with a Disability

A person 18-59 years of age living with a disability

Always Active Program The Always Active program consists of 3 different types of exercise classes: ongoing group exercise classes, a 12-week fall prevention series of classes, and ongoing fall prevention

maintenance classes.

CA-GetCare

A web-based application that provides specific functionalities for

contracted agencies to perform consumer

intake/assessment/enrollment, record service units, run reports,

etc.

CARBON

Contracts Administration, Reporting and Billing On Line System

Certified Exercise

Leader

An individual who holds a Functional Aging Institute (FAI) certification, or other national exercise certification, and has completed their exercise leader training with Always Active staff.

City

City and County of San Francisco, a municipal corporation

Controller

Controller of the City and County of San Francisco or designated

agent

DAAS

Department of Aging and Adult Services

Disability

Mental, cognitive and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional

adjustment.

Fall Prevention

A 12-week fall prevention series of classes under the Always Active program; developed by the University of San Francisco (USF). An ongoing fall prevention maintenance class is also held 2 times per week for participants who have completed the fall prevention series.

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

On Lok Day Services

Group Exercise Classes

Ongoing group exercise classes that are part of the Always Active program. Classes are held 2-3 times per week at each location and include 5 components: cardiovascular exercise, joint mobility, upper and lower body strength training, flexibility, and balance.

HSA

Human Services Agency of the City and County of San Francisco

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. Used by consumers to self-identify their income status and is not 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.

OCP

Office of Community Partnerships. (Previously known as Office on the Aging / OOA.)

OCM

Office of Contract Management, San Francisco Human Services

Agency

Older Adult

Person who is 60 years or older; used interchangeably with the

term "senior"

Senior

Person who is 60 years or older; used interchangeably with the

term "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.

Health

Questionnaire

SF12 Perception of The SF-12® is a multipurpose short-form generic measure of health status and outcome from the participant's point of view. The tool is developed by Quality Metric Incorporated and proven

to provide valid outcome data.

III. Target Population

The target population is older adults and adults with disabilities living in the City and County of San Francisco.

Grantee shall additionally target services to members of one or more of the following groups that have been identified as demonstrating the greatest economic and social need:

- Low income
- Limited or No English Speaking Proficiency
- Minority populations
- Frail
- LGBTO+

Eligibility for Health Promotion Services IV.

Persons 60 years of age and above, and persons between 18 and 59 living with a disability.

V. **Location and Time of Services**

The workshops will be conducted in San Francisco; dates and locations are determined by the Grantee and reviewed and approved by OCP.

Description of Services and Program Requirements VI.

1. Grantee will provide health promotion and disease prevention programs focused on physical fitness and fall prevention. Health promotion and disease prevention programs will promote lifestyle changes and support and encourage individuals to actively manage their health and wellness.

- 2. Grantee will secure community partner sites to host Always Active classes and establish signed agreements with community partner/s to clarify the expectations and responsibilities between the parties involved. Grantee will provide DAAS-OCP with copies of all signed partner site agreements.
- 3. Grantee will provide Always Active classes, which will be:
 - Conducted by certified exercise leaders and implemented in a manner to assure program fidelity and quality according to the program model;
 - Offered in group settings in at least 20 accessible locations throughout the city such as congregate meal sites, community centers, senior housing, or senior centers;
 - Offered in at least three (3) different languages to meet needs in the community, including English, Chinese (Cantonese & Mandarin), and Spanish.
 - Offered at least 2-3 times a week at each location, at 1-hour per session, or as per the program model dictates;
 - Enrolled at a minimum class size of 10 participants and maximum of 30 participants per leader.
- 4. Grantee will plan and conduct a minimum of two workshops annually for certified exercise leaders. Workshops will be a minimum of 4 hours and consist of exercise leader sharing, relevant guest speakers, and continuing education from the Functional Aging Institute.
- 5. Grantee will provide an opportunity for program participants to make voluntary contributions.
- 6. Grantee will conduct program outreach and marketing of the health promotion programs. An outreach plan will be provided to DAAS for review and approval within 60 days after contract begins, and updated annually and as needed. Outreach strategies should be neighborhood-based and citywide and may include activities such as disseminating materials at community meetings and other group settings or special events/fairs, announcements in bulletins, electronic bulletins, and other mass media. As part of program outreach, Grantee will post workshops and maintain current information for DAAS sponsored workshops on the Always Active web site: www.alwaysactive.org. Specifically for the fall prevention series, outreach will include contacting public and private health clinics and hospitals in the City and providing them with information about the classes.
- 7. Grantee will conduct and document program quality-fidelity monitoring visits at minimum once per year for each exercise leader, and at minimum two monitoring visits yearly at each site. Grantee will provide support and technical assistance, as needed, to exercise leaders and community partners to ensure that the classes follow the curriculum and program model for program fidelity. Fidelity monitoring checks will be shared with DAAS on a quarterly basis in September, December, March and June.
- 8. Grantee will maintain a minimum of 20 certified exercise leaders at all times. Track and maintain a current list of certified exercise leaders, and share an updated list with DAAS twice a year, and as requested.

- 9. Grantee will administer the SF12 Perception of Health Questionnaire and the Functional Reach Test, Timed Up and Go Test, and 30 Second Chair Stance Test on a sample of participants in the group exercise classes. Grantee will analyze the data, and share survey results with DAAS OCP by May 1st each grant year or on a mutually agreed upon date between OCP and the Grantee. The number of participants assessed will be a statistically significant sample, as determined by USF.
- 10. Grantee will collect pre and post data for all participants enrolled in the fall prevention series, analyze the data, and share survey results with DAAS OCP by May 1st each grant year or on a mutually agreed upon date between OCP and the Grantee. Assessments include the Functional Reach Test, Timed Up and Go Test, and 30 Second Chair Stance Test.
- 11. Grantee will administer an annual consumer satisfaction survey to at least 40% of participants enrolled in the program using a survey tool approved by DAAS OCP. The survey results will be shared with DAAS OCP by March 15th each grant year or a mutually agreed upon date between OCP and the Grantee.
- 12. Grantee will have policy and procedures that are compliant with the DAAS policy memoranda manual.

VII. Service Objectives

Provide the minimum annual service units indicated in Table A below.

Table A: Annual Service Units	FY 2019-2020	FY 2020-2021
	Service Units	Service Units
# Unduplicated consumers to be served	1,045	1,045
# Hours group exercise classes	2,352	2,352
# Hours fall prevention series and	312	312
maintenance classes		
Total # Hours	2,664	2,664

VIII. Outcome Objectives

- 1. At least <u>85%</u> of surveyed participants will report that their health and/or fitness has improved since enrolling in the Always Active program.
- 2. At least 70% of the fall prevention series participants who complete the Functional Reach Test, Timed Up and Go Test, and 30 Second Chair Stance Test will demonstrate maintenance or improvement based on the results of their pre and post test comparisons.
- 3. At least 70% of the assessed participants in the group exercise classes will maintain a 70th percentile or better score on average as measured through the Functional Reach Test, Timed Up and Go Test, and 30 Second Chair Stance Test.
- 4. At least <u>70%</u> of the assessed participants in the group exercise classes will show that on average, they maintain scores higher than the 50th percentile for Physical Composite Scale as measured through SF12 survey tool.

VIII. Reporting and other Requirements

- 1. The grantee will enter into the CA GetCare Service Unit section all Service Objectives by the 5th working day of the month for the preceding month.
- 2. Monthly reports must be entered into the Contracts Administration, Reporting, and Billing Online (CARBON) system and include Service Objectives.
- 3. 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.
- 4. Grantee shall develop and deliver an annual summary report of SOGI data collected in the year as requested by DAAS/HSA. The due date for submitting the annual summary report is July 10th.
- 5. Grantee shall develop and deliver ad hoc reports as requested by DAAS/HSA.
- 6. 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.
- 7. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
- 8. Grantee will assure that services delivered are consistent with professional standards for this service.
- 9. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
- 10. Grantee will develop a Grievance Policy consistent with Office on the Aging Program Memorandum #33 Consumer Grievance Policy.

11. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies "Focal Points" which are designed to help older adults connect to services throughout the City. These Focal Points are:

Design	ated Community Focal Points	
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAAS Benefits and Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

12. For assistance with reporting and contract requirements, please contact:

Lauren McCasland Nutritionist DAAS OCP

email: Lauren.McCasland@sfgov.org

and

Esperanza Zapien Senior Contract Manager HSA OCM

email: Esperanza.Zapien@sfgov.org

VIII. Monitoring Activities

1. 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 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 of provision of the California Department of Aging (CDA) Security Awareness training to staff; 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; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.

2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, 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 the Personnel Manual, Emergency Operations Plan, and Compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

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Non-DAAS Expenditures \$91,643 \$91,643 \$91,643 \$91,643 \$90,004 Salanies & Benefits \$20,037 \$20,037 \$20,037 \$20,037 \$20,037 \$20,037 Subrioral Details Expenditures \$111,680 \$111,680 \$111,680 \$111,680 \$13,61 \$16,041 Subrioral Details Expenditures \$111,680 \$111,680 \$111,680 \$111,680 \$116,041 TOTAL Non-DAAS Expenditures \$111,680 \$111,680 \$11,680 \$11,680 \$116,041 TOTAL Non-DAAS Expenditures \$11,345 \$58,573 \$510,082 \$510,082 \$510,082 HSA-DAAS Revenues \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,346 \$11,460 \$11,400 Fundraising \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400 \$11,400	Non-DAAS Expenditures \$91,643 Salaries & Benefits \$91,643 Salaries & Benefits \$20,037 Subtotal \$111,680 Indirect Percentage (%) - Indirect costs \$111,680 Subcontractor/ Capital Expenditures \$111,680 TOTAL DAAS & Non-DAAS \$111,680 EXPENDITURES \$58,573 HSA-DAAS Revenues			and mark	
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Stringer	Subtores \$111,680 Subtored \$111,680 Indirect Percentage (%) - Indirect Percentage (%) - Indirect costs Subcontractor/ Capital Expenditures TOTAL Non-DAAS EXPENDITURES \$111,680 TOTAL DAAS & Non-DAAS \$501,175 EXPENDITURES \$58,573 HSA-DAAS Revenues \$58,573	327.0		\$20,037	\$40,074
Indirect Percentage (%) - Indirect Costs Ind	Indirect Percentage (%) - Indirect costs Subcontractor/ Capital Expenditures TOTAL Non-DAAS EXPENDITURES \$111,680 TOTAL DAAS & Non-DAAS \$501,175 EXPENDITURES \$58,573 HSA-DAAS Revenues			\$116,041	\$227,721
Non-DAAS Revenues Section Sect	Indirect costs \$111,680 Subcontractor/ Capital Expenditures \$111,680 TOTAL Non-DAAS EXPENDITURES \$111,680 TOTAL DAAS & Non-DAAS \$501,175 EXPENDITURES \$58,573 HSA-DAAS Revenues \$2220,150				
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SAPE	EXPENDITURES \$501,173 \$505,573 HSA-DAAS Revenues			\$573.846	\$1 133 594
HSA-DAAS Revenues \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,150 \$378,173 <td>HSA-DAAS Revenues</td> <td></td> <td></td> <td>4010,010</td> <td></td>	HSA-DAAS Revenues			4010,010	
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CODB \$11,345 \$11,345 \$21,082 \$21,082 TOTAL HSA-DAAS REVENUES \$389,495 \$58,573 \$448,068 \$399,232 \$58,573 \$457,805 Non-DAAS Revenues \$700 \$700 \$700 \$700 \$700 \$700 Fundraising \$49,540 \$49,540 \$49,540 \$4,361 \$53,301 Community Living Campaign \$61,440 \$61,440 \$61,440 \$61,440 \$61,440 TOTAL NON-DAAS REVENUES \$111,680 \$111,680 \$111,680 \$111,680 \$116,041 Total DAAS & Non-DAAS Revenues \$501,175 \$58,573 \$58,573 \$513,68 \$513,69 Full Time Equivalent (FTE) 2.57 0.67 3.24 \$51,384 \$51,480 Prepared by: Zoev Wang Telephone No.: (415) 550-2211 3.49 3.49	Addback \$58,573			\$58,573	\$117,146
TOTAL HSA-DAAS REVENUES \$58,573 \$448,068 \$339,232 \$58,573 \$4457,805 Non-DAAS Revenues \$700 \$700 \$700 \$700 \$700 \$700 Project Income \$49,540 \$49,540 \$49,540 \$49,540 \$54,361 \$53,901 Community Living Campaign \$61,440 \$61,440 \$61,440 \$61,440 \$61,440 \$61,440 TOTAL NON-DAAS REVENUES \$111,680 \$111,680 \$111,680 \$111,680 \$111,680 \$111,680 \$116,041 Full Time Equivalent (FTE) 2.57 0.67 2.57 0.92 \$349 Full Time Equivalent (FTE) Telephone No.: 3.24 2.57 0.92 \$349	CODB \$11,345		082	\$21,082	\$32,427
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Non-DAAS Revenues \$700 <td>TOTAL HSA-DAAS REVENUES \$389,495 \$58,573</td> <td></td> <td></td> <td>\$457,805</td> <td>\$905,873</td>	TOTAL HSA-DAAS REVENUES \$389,495 \$58,573			\$457,805	\$905,873
Non-DAAS Revenues \$700 <td></td> <td></td> <td></td> <td></td> <td></td>					
Project Income \$7.00	Non-DAAS Revenues		002	0023	\$4.400
Fundraising \$49,540 \$49,540 \$49,540 \$45,540 \$45,540 \$45,640 \$61,440	me de la companya de	1		¢53 001	\$103.441
Community Living Campaign \$61,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,440 \$51,460 \$61,440 \$51,440 \$51,460 \$61,440 \$51,460 \$61,440 \$51,460 \$61,440 \$61,450 \$61,4	040,046			000,000	£422 880
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Total DASS & Non-DAS Revenues \$501,175 \$58,573 \$559,748 \$510,912 \$62,934 \$573,846 Full Time Equivalent (FTE) 2.57 0.67 3.24 2.57 0.92 3.49 Prepared by: Zoey Wang Telephone No.: (415) 550-2211	TOTAL MON DAAS DEVENIES \$444 680			\$116,041	\$227,721
Full Time Equivalent (FTE) 2.57 0.67 3.24 2.57 0.92 3.49 Prepared by: Zoey Wang Telephone No.: (415) 550-2211	Total DAAS & Non-DAAS Revenues \$501.175 \$58.573			\$573,846	\$1,133,594
Prepared by: Zoey Wang Telephone No.: (415) 550-2211	Enll Time Enlinglant (ETE)			3.49	
riepaled by. 2009 yvang	Talanhone No .	(415) 550-27			10/17/2019
	richaide by. Eocy wailg				

Appendix B-1, Page 2		Revised	TOTAL	Budgeted Salary	\$17,512	\$3.770	\$71,458	\$63,648	\$72,833	\$374,863	6401 948	2	\$476,076	TOTAL	Budgeted Salary \$41,198 \$8,756 \$1,784	0\$	\$4,204	\$34,278	\$3,434	\$147,754	\$39,893	\$187,647	\$663,723
Append		Revised			\$11,092	\$1,885	\$35,729	\$31,824	\$42,326	\$193,341	1 500 500	402,202	\$245,543		Budgeted Salary Bu \$20,599 \$4,378	0\$	\$2,102 \$22,050	\$0 \$17,139	\$3,434	\$75,594	\$20,410	\$96,004	\$341,547
Z		Modified 7747094		Budgeted Salary B					\$42,326	\$42,326	0 0 7 7 7	074.	\$53,754						\$3,434	\$3,434	\$927	\$4,361	\$58,115
Σ		14 100 GB GB 1417	DAAS DAAS	Budgeted Salary	\$8,756	\$1,885	\$35,729	\$31,824	\$25,709	\$151,015	1777	\$40,774	\$191,789	SAAC-NON	Budgeted Salary \$20,599 \$4,378	769'64	\$2,102	\$17,139	0\$	\$72,160	\$19,483	\$91,643	\$283,432
7 7			A Program	Adji	10% 0.10		51% 0.51		92% 0.92 92% 0.92	389% 3.49				HSA Dracesm	% PTE funded by HSA (Max Adjusted 110%) FTE 113% 0.05		3% 0.03 40% 0.40		8% 0.08	119% 1.19			110
7		7000 00111	Agency Totals HS	Total FTE	8 8 8	1.00	1,00	0.60	1.00	8.60	27%		89	d none Totale	Total 1:00 1:00 1:00 1:00 1:00 1:00 1:00 1:0	8 8	00.0	1.00	1.00	8.60	27%	686	686
	,	Pe		** = T	\$11,092 \$158,452 \$8,756 \$87,560			\$31,824 \$53,0		\$181,522 \$618,889	paris 1	\$49,011	\$230,533 \$785,989	Acces.	08 8 €		\$2,102 \$70,056 \$22,050 \$55,124	\$17,139 \$42.8		\$72,160 \$618,889	\$19,483	\$91,643 \$785,989	\$322,176 \$785,989
_		ed Revised	U2/U5/8-81/1// U2/U8	ā	\$1.	.\$	\$3;	če Q	\$30,507 \$30	\$30,507 \$18		\$8,237	\$38,744 \$23		Budgeted Salary. \$20.58	•	\$2	.81		.9	<i>io</i>	Š	\$38,744 \$3;
9		-	02/07/179-6/30/20	ed Budgeted	756 756	946 885	729	824		5					64 Av	892 \$0	\$2,102 \$22,050	\$17.139	80	\$72,160	\$19,483	\$91,643	2
LL.		Detail	//1/19-6/3U/20	a °	0.07 \$11,092 0.10 \$8,756				0.60 \$25 0.67	3.24 \$151,07		\$40,77	\$191,789	OV VO WOIN			0.03 \$2			1.11 \$7.	\$	6\$	\$283,43
9 O	revention	Salaries & Benefits Detail	5/30/20 HSA Program		10%	2% 4%	21%	100%	60% 100%	397%					% FTE funded by HSA (Max Adj 13%) F F F F F F F F F F F F F F F F F F F	10%	3%	40%	%0	111%			
5 8	Fitness & Fall P	Salar	7/1/19-6/30/20 Agency Totals HS/	1	\$158,452 1.00 \$87,560 1.00	i	\$70,056 1.00	- 1 1	\$42,848 1.00 \$45,760 0.67	\$618,889 8.27	27%		\$785,989	Section Printers and Section Section 1997	Agency onas Annual Full TimeSalary Total for FTE \$158,452 1.00 \$87,560 1.00	\$58,916 1.00	\$70,056 1.00	1 1	\$45,760 0.67	\$618,889 8.27	27%	\$785,989	\$785,989
A	On Lok Day Services Program: Health Promotion-Physical Fitness & Fall Prevention		10 H.S.A-DAAS	Ar Til	or		Jer	_	Health Promotion Prog Assistant #2 Health Promotion Prog Assistant #3	TOTAL H.S.A-DAAS	≈ FRINGE BENEFIT RATE		S SALARIES &	38	TITLE and NAME	As Admin Assistant	Health Promotion Prog Manager Always Active Prog Specialist	Health Promotion Prog Assistant #1	Health Promotion Prog Assistant #3	TOTAL NON-DAAS	FRINGE BENEFIT RATE	TOTAL Non-DAAS SALARIES & BENEFITS	TOTAL DAAS & Non-DAAS SALARIES & BENEFITS HSA #2

L	0 0	3	E S	-	X	O N	80	
-								Appendix B-1, Page 3
7 m	On Lok Day Services	1						
4 w	Program: Health Promotion-Physical Fitness & Fall Prevention	nonuas				٠		
φ ~	Operating Expense Detail							
60 GD								Revised
9 ;	H.S. 4-DAAS		Modified	Revised	•	Modified	Revised	TOTAL
12	Category	TERM 7/1/19-6/30/20	7/1/19-6/30/20	7/1/19-6/30/20	7/1/20-6/30/21	7/1/20-6/30/21	7/1/20-6/30/21	7/1/19-6/30/21
55	Rental of Property						Conce	000.34
	Utilities(Elec, Water, Gas, Phone, Garbage)	\$2,500		\$2,500	\$2,500		\$2,500	000 CE
5 6	Unice Supplies, Postage Building Maintenance Supplies and Renair	\$4 140		\$4.140	\$4.140		\$4,140	\$8,280
	Printing and Reproduction	\$1,000		\$1,000	\$1,000		\$1,000	\$2,000
_	Insurance	\$3,000		\$3,000	\$3,000		83,000	se;000
ğ	Staff Training	\$3,000		\$3,000	\$3,000		\$3,000	000 as
8 8	Staff Travel-(Local & Out of Town)	\$2,500	\$1,000	\$500	\$500		\$500	\$1,000
	אמוזימי כן בלתקשונים							
	CONSULTANTS							
24	**************************************				The state of the s			
52	A A STANDARD	Wednesday						
	F							
		40.408	\$14.011	254.419	49 341		\$49.341	\$103,760
g 2	Exercise Leader Superios Program Support Services - Self-Help	\$4,700	(\$4,700)	0\$	\$4,700	(\$4,700)	0\$	0\$
8	Power Music App	\$800		\$800	\$800		\$800	\$1,600
		\$1,700		\$1,700	\$1,700		\$1,700	\$3,400
8								
g ;		400						
8 8								
+	TOTAL DAAS OPERATING EXPENSE	\$65,748	\$10,311	\$76,059	\$74,681	\$ (4,700)	\$69,981	\$146,040
37	Non-DAAS					, de de	200000	77110 8130/21
8	Expenditure Category	TERM 7/1/19-6/30/20	7/1/19-6/30/20	7/1/19-6/30/20	7/1/20-6/30/21	//1/20-6/30/21	17/12/0-6/30/12/1	1,1115-01501Z1
83		400		760	123		723	89\$
\$ £	Offices(Elec, water, eas, Priorie, Garbage) Office Stronges Postage	\$296		\$296	\$296		\$296	\$592
		\$2,216		\$2,216	\$2,216		\$2,216	\$4,432
43		\$535		\$535	\$535		\$535	\$1,070
44		\$808		\$808	\$808		8089	31,515
4. 13.		80		2	900		8333	\$646
\$ \$	Staff Travel-(Local & Out of Town)	\$223		\$274	\$274		\$274	\$548
4 8								
6	CONSULTANTS							
SS					The state of the s			
51	- dayway-	- House			-			
25								
S		C15 A37		\$15.437	\$15.437		\$15,437	\$30,874
¥ F	Dower Missic App	\$50		\$50	\$50		\$50	\$100
8 8		\$64		\$64	\$64		798	\$128
l's								
88 88	TOTAL Non-DAAS OPERATING EXPENSE	\$20,037	80	\$20,037	\$20,037	\$0	\$20,037	\$40,074
8 2	TOTAL DAAS & Non-DAAS OPERATING EXPENSE	\$85,785	\$10,311	960'96\$	\$94,718	\$ (4,700)	\$90,018	\$186,114
[8]	62 HSA #3							10/10/2019

					,		
B B	U U	0	1	1	9	Appendi	Appendix B-1, Page 4
N C							
Program: Health Promotion-Physical Fitness & Fall Prevention							
S O	Subcontractor/Capital Expenditures	apital Expendit	ures Revised	0	Modified	Modified Revised Revised	Revised
ACTOR	00/00/9-01/1/2	771/19,8180,00	2	7/1/20-6/30/21	7/1/20-6/30/21 7/1/20-6/30/21	7/1/20-6/30/21 7/1/19-6/30/21	771/19-6/30/21
11 Sequela Livino (San Francisco Senior Center)	\$64,326			\$64,326		\$64,326	\$128,652
12 University of San Francisco	\$44,434		\$44,434	\$44,434		\$44,434	\$88,868
		4,700	\$4,700		\$4,700	\$4,700	\$9,400
71							
15 TOTAL SUBCONTRACTOR COST	\$108,760	\$4,700	\$113,460	\$108,760	\$4,700	\$113,460	\$226,920
17							
‡ 1 1			711/10 8/30/00			7/1/20-6/30/21	7/1/19-6/30/21
TEMPORE SERVICES SERV	300 (10) (10)		1111	200 00 10 10 10 10 10 10 10 10 10 10 10 1			100 Oct 100 Oc
Equipment A							
						ì	
23							
24							
25 TOTAL EQUIPMENT COST			20			0\$	DA.
98			000000000000000000000000000000000000000			171100,80001	171170-813001 71119-813001
	\$15000000000000000000000000000000000000		07/05/05/01/1/	200000000000000000000000000000000000000		1111200002	40000 N N
28 Description:	7-10 V (10 V						
33							
32 TOTAL REMODELING COST			80			so	so
33							
34 TOTAL H. S. A DAAS SUBCONTRACTOR/CAPITAL EXPENDITURE	\$108,760	\$4,700	\$113,460	\$108,760	\$4,700	\$113,460	\$226,920
36 Non-UAAS			7/1/19.6/20/20			711/20-6/30/21	7/1/20-6/30/21 7/1/19-6/30/21
			220000000000000000000000000000000000000				
38 Subcontractor 1					Literation		
S Subcollidation 2							
T. T							
45.2							
43 TOTAL SUBCONTRACTOR COST	\$0	\$0	so	\$0	\$0	80	\$0
44				A transfer of the state of the			
46 EQUIPMENT TERM	CIDON CONTROL MANAGEMENT CONTROL	197000000000000000000000000000000000000	7/1/19-6/30/20	WANTED STATE OF THE PARTY OF TH	0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0	7/1/20-6/30/21	17/08/9-8/1///
Units							
48 Equipment A							
84							
15							
52 TOTAL EQUIPMENT COST	\$0	\$0	SO	20	20	so	\$0
						THE POST OF THE POPULA	711110 6730121
			7/1/19-6/30/20	S0000000000000000000000000000000000000		// 1/20-0/30/21	17113-0120171
	- William (1998)	ORTHONIS CONTRACTOR					
25 Translation oc							
85							
59 TOTAL REMODELING COST	\$0	90 90	80	\$0	80	SO	80
61 TOTAL NON-DAAS SUBCONTRACTOR/CAPITAL EXPENDITURE	0\$	0\$	80	80	\$00	OS .	\$0
	2000			9400 750	64 700	C113 AED	069 3663
63 Total DAAS & Non DAAS Subcontractor/ Capital Expenditures	\$108,760	\$4,700	\$113,460				

APPENDIX A-1 SERVICES TO BE PROVIDED BY GRANTEE

Health Promotion Program Self-Management of Chronic Health Conditions July 1, 2019 to June 30, 2021

Modification: November 1, 2019

I. Purpose

The purpose of this grant is to provide older adults and adults with disabilities with evidence-based health promotion and disease prevention programs focused on education and tools to help better manage chronic health conditions such as diabetes, heart disease, arthritis, and chronic pain. Evidence-based health promotion and disease prevention programs promote lifestyle changes and support and encourage individuals to actively manage their health and wellness. The programs are also intended to support independent living in the community, improve quality of life, and maintain and/or improve physical health.

II. Definitions

ACL

Administration for Community Living

https://acl.gov/

Adult with a

A person 18-59 years of age living with a disability

Disability

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 On-Line system

Certified Master

Trainer

An individual who is trained and certified by the program license holder of Healthier Living or DEEP. A trained and certified individual completes master training courses and is qualified to lead workshop sessions.

Certified Lay Leader

An individual who has successfully completed the Healthier Living or DEEP Lay Leader training and provided at least one Healthier Living or DEEP workshop within a year of their training.

City

City and County of San Francisco, a municipal corporation

Controller

Controller of the City and County of San Francisco or designated

agent

CDA

California Department of Aging

DAAS

Department of Aging and Adult Services

Appendix A-I Health Promotion FY19-21; Rev 11/2019 Healthier Living & DEEP Page 1 of 9

DEEP

Diabetes Empowerment Education Program is an evidence-based health promotion program developed and licensed by the University of Chicago, Illinois. It is a 6-week program, at 2 hours per class, and provides participants with education and tools to help them better manage diabetes and prediabetes.

Disability

Mental, cognitive, and/or physical impairments, including hearing and visual impairments, that result in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, and self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment.

Evidence-Based Disease Prevention and Health Promotion Program A disease prevention and health promotion program as defined by Administration for Community Living that has demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability, and/or injury among older adults.

https://acl.gov/programs/health-wellness/disease-prevention

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

On Lok Day Services

Healthier Living Program / CDSMP An evidence-based health promotion program developed by Stanford University, also known as Chronic Disease Self-Management Program (CDSMP). It includes a series of 2 ½ hour workshops presented over a 6-week period and provides participants with education and tools to help them better manage chronic conditions such as diabetes, heart disease, arthritis, and chronic pain.

https://www.selfmanagementresource.com/programs/small-group/chronic-disease-self-management/

Lay Leader Training

Planning, coordinating, and providing in person training for individuals to become certified lay leaders to implement the Healthier Living program or DEEP. The training must align with the curriculum established and approved by the program license holder and follow any guidelines and/or criteria established by OCP. 1 training unit = the provision of one multi-day training.

Appendix A-1 Health Promotion FY19-21; Rev 11/2019 Healthier Living & DEEP Page 2 of 9

HSA

Human Services Agency of the City and County of San Francisco

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. Used by consumers to self-identify their income status and is not 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.

OCP

Office of Community Partnerships. (Previously known as Office on the Aging / OOA.)

OCM

Office of Contract Management, San Francisco Human Services Agency

Older Adult

Person who is 60 years or older; used interchangeably with the term "senior"

Older Americans Act (OAA)

7130.

The Older Americans Act (OAA), passed by Congress in 1965, with the goal of supporting older Americans to live at home and in the community with dignity and independence for as long as possible.

https://www.ncoa.org/public-policy-action/older-americans-act/

Partners in Care Foundation

A non-profit organization that the California Department of Aging has contracted with to administer evidenced-based health promotion programs.

Senior

Person who is 60 years or older; used interchangeably with the term "older adult"

SOGI

Sexual Orientation and Gender Identity; Ordinance No. 159-16

Appendix A-1 Health Promotion FY19-21; Rev 11/2019 Healthier Living & DEEP 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.)

Service Unit:

Contact

One contact = one person who attended a workshop session.

Service Unit: Graduate One graduate = one person who attended 5 out of 6 DEEP workshops, or 4 out of 6 Healthier Living workshops.

Title III D of OAA

Authorizing Legislation: Section 361 of the Older Americans Act (OAA) of 1965, as amended. It provides grants to states and territories based on their share of the population aged 60 and older for programs that support healthy lifestyles and promote healthy behaviors.

https://acl.gov/programs/health-wellness/disease-prevention

III. Target Population

The target population is older adults and adults with disabilities with a chronic health condition living in the City and County of San Francisco.

Grantee shall additionally target services to members of one or more of the following groups that have been identified as demonstrating the greatest economic and social need:

- Low income
- Limited or No English Speaking Proficiency
- Minority populations
- Frail
- LGBTO+

IV. Eligibility for Health Promotion Services

Persons 18 years of age or older with a chronic health condition or a caregiver of an adult with a chronic health condition.

V. Location and Time of Services

The workshops will be conducted in San Francisco; dates and locations are determined by the Grantee and reviewed and approved by OCP.

VI. Description of Services and Program Requirements

The evidence-based health promotion programs are partially funded with state grant and federal funds under Title IIID of the Older Americans Act to improve the quality of life for older adults and adults with disabilities by teaching behavior modification skills and coping strategies to manage chronic disease and by increasing their physical activity levels.

- 1. Grantee will secure community partner sites to host health promotion workshops and establish signed agreements with community partner/s to clarify the expectations and responsibilities between the parties involved. Grantee will provide DAAS-OCP with copies of all signed partner site agreements.
- 2. Grantee will provide Healthier Living and DEEP classes. Classes will be:
 - Conducted by certified lay leaders or master trainers and implemented in a manner to assure program fidelity and quality according to the program model.
 - Offered in group settings in different accessible locations throughout the city such as congregate meal sites, community centers, senior housing, or senior centers.
 - Offered in at least three (3) different languages to meet needs in the community, including English, Chinese (Cantonese & Mandarin), and Spanish.
 - Enrolled at a minimum class size of 12 participants and maximum of 25 participants for Healthier Living and maximum of 20 participants for DEEP.
- 3. Grantee will provide an opportunity for program participants to make voluntary contributions.
- 4. Grantee will conduct program outreach and marketing of the health promotion programs. An outreach plan will be provided to DAAS for review and approval within 60 days after the contract begins, and updated annually and as needed. Outreach strategies should be neighborhood-based as well as citywide and may include activities such as disseminating materials at community meetings and other group settings or special events/fairs, announcements, electronic bulletins, and other mass media. As part of program outreach, Grantee will post workshops and maintain current information for DAAS sponsored workshops on the State's web site: www.CaHealthierLiving.org
- 5. Grantee will conduct and document program quality-fidelity monitoring visits at one or more sessions of a workshop facilitated by all new lay leaders. New lay leaders shall be evaluated by the grantee within one month of starting a workshop. Grantee will provide support and technical assistance to lay leaders, as needed, to ensure that the workshops follow the curriculum and program model for program fidelity. A minimum of four additional fidelity checks for existing lay leaders and master trainers will also be conducted annually. Fidelity checks will be shared with DAAS on a quarterly basis in September, December, March and June.
- 6. Grantee will track and maintain a current list of lay leaders and master trainers and share an updated list with DAAS twice a year, and as requested.
- 7. Grantee will ensure workshop leaders publicize and actively recruit workshop graduates to the DAAS-NCOA sponsored Healthier Living Alumni online community (https://community.selfmanage.org) so they will continue to have the support/resources to make positive lifestyle changes to maintain or improve their health. Grantee will inform and invite the program graduates to join the online community at the 5th and 6th workshop session.

- 8. Grantee will develop and maintain current program policies and procedures with OCP's approval to meet the Health Promotion service standards set forth by the licensed organization and OCP, including but not limited to having a current list of master trainers and lay leaders, inventory list of program workbooks, and health promotion incentives available. Policy and procedures will also be compliant with local/city, state, and federal regulatory agencies, including the DAAS policy memoranda manual.
- 9. Grantee will have a representative to participate in the statewide CA Healthier Living Coalition.
- 10. Grantee will be responsible for collecting the Healthier Living participant attendance log, participant surveys from the workshops, and sending them to Partners in Care as indicated in the affiliate agreement between OCP and Partners in Care, and entering the service data into CaGetCare.
- 11. Grantee will be responsible for collecting the DEEP participant attendance log and participant surveys from the workshops, and entering the service data into CaGetCare.
- 12. Grantee will be responsible for documenting the number of participants enrolled, and the number of participants who completed the Health Promotion workshops and share with DAAS-OCP on a monthly basis.

VII. Service Objectives:

1. Provide the minimum annual service units indicated in Table A below.

FY 2019-2020	Healthier Living	DEEP	Total
Total # Workshops Offered*	15	36	51
Total # consumers enrolled in the program	213	452	665
Total # Contacts One contact = one individual who attends a workshop session.	1,044	2,215	3,259
Total # Graduates	160	339	499
Total # of Master Trainers Trained	1	0	1 .
Total # Lay Leaders Trained	.18	0	18
FY 2020-2021	Healthier Living	DEEP	Total
Total # Workshops Offered*	15	36	51
Total # consumers enrolled in the program	213	452	665
Total # Contacts One contact = one individual who attends a workshop session.	1,044	2,215	3,259
Total # Graduates	160	339	499
Total # of Master Trainers Trained	1.	0	1
Total # Lay Leaders Trained	18	0	18

- *The number of workshop types offered (i.e. Healthier Living and DEEP) are subject to change based on identified needs in the community and available resources and as shown on the OCP approved Site Chart. Any change in the type of workshop provided must be preapproved by DAAS OCP. The total number of units however will remain a minimum of 51.
- 2. Graduate on average of a minimum 65% of participants enrolled per workshop in Healthier Living and DEEP.

VIII. Outcome Objectives:

- Based on pre and post surveys, at least 75% of the DEEP workshop participants will report a greater understanding of diabetes and how to prevent and/or better manage it.
- 2. Based on pre and post surveys, at least 75% of the Healthier Living workshop participants will report more confidence in managing their chronic health conditions.

IX. Reporting and other Requirements

- 1. The grantee will enter into the CA GetCare Service Unit section all Service Objectives by the 5th working day of the month for the preceding month.
- 2. Monthly reports must be entered into the Contracts Administration, Reporting, and Billing Online (CARBON) system and include Service Objectives.
- 3. 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.
- 4. Grantee shall develop and deliver an annual summary report of SOGI data collected in the year as requested by DAAS/HSA. The due date for submitting the annual summary report is July 10th.
- 5. Grantee shall develop and deliver ad hoc reports as requested by DAAS/HSA.
- 6. 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.
- 7. Grantee shall be compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules to the extent applicable.
- 8. Grantee will assure that services delivered are consistent with professional standards for this service.

- 9. Pursuant to California Department of Aging Requirement, Grantor reserves the right to reduce funding available for this contract in the event that actual costs are below funding levels initially budgeted for the delivery of services.
- 10. Grantee will develop a Grievance Policy consistent with Office on the Aging Program Memorandum #33 Consumer Grievance Policy.
- 11. Through the Older Americans Act Area Plan development process, the City of San Francisco identifies "Focal Points" which are designed to help older adults connect to services throughout the City. These Focal Points are:

Design	ated Community Focal Points	
Name	Address	Phone
Western Addition Senior Center	1390 1/2 Turk St, San Francisco, 94115	415-921-7805
Bayview Senior Connections	5600 3rd St, San Francisco, 94124	415-647-5353
OMI Senior Center (CCCYO)	65 Beverly St, San Francisco, 94132	415-335-5558
Richmond Senior Center (GGSS)	6221 Geary Blvd, San Francisco, 94121	415-404-2938
30th Street Senior Center (On Lok)	225 30th St, San Francisco, 94131	415-550-2221
Openhouse	1800 Market St, San Francisco, 94102	415-347-8509
SF Senior Center (SFSC)	481 O'Farrell St, San Francisco, 94102	415-202-2983
Aquatic Park Senior Center (SFSC)	890 Beach St, San Francisco, 94109	415-202-2983
South Sunset Senior Center (SHE)	2601 40th Ave , San Francisco, 94116	415-566-2845
Self-Help for the Elderly	601 Jackson St, San Francisco, 94133	415-677-7585
Geen Mun Activity Center (SHE)	777 Stockton St, San Francisco, 94108	415-438-9804
Toolworks	25 Kearny St, San Francisco, 94108	415-733-0990
DAAS Benefits and Services Hub	2 Gough St, San Francisco, 94103	415-355-6700

12. For assistance with reporting and contract requirements, please contact:

Lauren McCasland Nutritionist DAAS OCP

email: Lauren.McCasland@sfgov.org

and

Esperanza Zapien Senior Contract Manager HSA OCM

email: Esperanza.Zapien@sfgov.org

X. Monitoring Activities

- 1. 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 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 of provision of the California Department of Aging (CDA) Security Awareness training to staff; 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; a board of directors list and whether services are provided appropriately according to Sections VI and VII, the log of service units which are based on the hours of scheduled activities; sign-in sheets of consumers who participated in each activity; documentation that shows reported units of service are based on scheduled activities at the site, not activities that are always available at the facility such as cards or pool; translation and social services are based on staff hours.
- 2. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Grantee's organizational budget, 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 the Personnel Manual, Emergency Operations Plan, compliance with the Americans with Disabilities Act, subcontracts, MOUs, the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

SERVICES AGENCY BUDGET SUMMARY Form Fo	2							Appendio	- ' rage
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On Lok Day Services Program: Health Promotion-Chronic Heatth	nic Heath													, , , , , , , , , , , , , , , , , , , ,
9 7	Sat	Sataries & Be	Benefits Detail	=		i		Salaries	Salaries & Benefits Detail	ts Detail				
10 10 11 H.S.A-DAAS	7/1/19 Agency Totals	-6/30/20	1 20	71/19-6/30/20 DAAS	Modified Revised 7/1/19-6/30/20 7/1/19-6/30/20 DAAS	Revised 7/1/19-6/30/20	7/1/20- Agency Totals		/21 1SA Prog	wei	7/1/20-6/30/21 DAAS	Modified 7/1/20-6/30/21	Revised 7/1/20-6/30/21	Revised 77/19-6/30/21 TOTAL
AMAM AND THE WORLD	% FTE 12	% FTE funded by HSA HGA Act Trows	73	Budgeted	Budgeled	Budgeted 1	: ৭⊢	Total FTF	% FTE funded by HSA (Max Adjusted 100%) FTE	Adjusted FTE	Budgeted Salary	Budgeted Salary	Budoeted Salary	Budgeted Salary
12 Health Promotion Prog Manager	\$70,056 1.00 \$56,474 0.50	0 46%	0.46	\$32,226	(aux	\$32,226	\$70,056 \$56,474	1.00	^I . I	0.40	\$32,226	1414	\$32,226	\$45,178
DEEP Program Assistant		80%	0.40	\$18,947		\$18,947	\$47,368	199	1 1	0.40	\$18,947		\$18,947	\$37,894
- 1 -	\$47,133 1.00	0 20%	0.20	\$39,691	2000 CONTRACTOR OF THE PARTY OF	\$9,691	\$48,911	1.00	14 1	0.20	\$43,273		\$9,782	\$19,564
Healthier Living and DEEP Prog Assistant		.e 100%	95.0		\$25,532	\$25,532	\$45,760	0.80		0.71		\$32,708	\$32,708	\$58,240
82								+	\parallel					
7,								+	+	+				
Z.														
		-						\parallel	\parallel					
8										+				
27														
70 TOTAL H.S.A-DAAS	\$315,702 4.56	6 4.10	2.86	\$123,235	\$25,532	\$148,767	\$315,702	4.80	4.07	3.09	\$126,817	\$32,708	\$159,525	\$308,292
S FRINGE BENEET RATE							27%							
33 EMPLOYEE FRINGE BENEFITS				\$33,273	\$6,894	\$40,167		1			\$34,241	\$3,831	\$43,072	\$83,239
X X														
TOTAL DAAS SALARIES &	\$400,942			\$156,508	\$32,426	\$188,934	\$400.942				\$161,058	\$41,539	\$202,597	\$391,531
3 Non - DAAS	Agency Totals	HSA	Program	NON-DAAS		NON-DAAS	Agency Totals		HSA Proc	Itam	NON-DAAS		NON-DAAS	TOTAL
LE and NAME	Annual Full TimeSalary for FTE	% FTE funded by HSA (Max /	Adjusted FTE	Budgete Salary	Modified		Annual Full TimeSalary for FTE	Total FTE	% FTE funded by HSA (Max Adjusted 100%) FTE	Adjusted FTE	Budgeted Salary	Modified	Budgeted Salary	Budgeted Salary
Health Promotion Prog Manager Healthier Living Coordinator	\$70.056 \$56.474	30 0%	-	\$5.647	80	\$5,647	\$70,056	0.50	20%	0.10	\$5,647	OS .	\$5,647	\$11,294
42 DEEP Program Assistant	\$47,368 0.50	50 20%	0.00	\$4,737	08	\$4,737	\$47,368	0.50	20%	0.10	\$4.737		\$3,860	\$9,474
Healthier Living and DEEP Prog Assistant	\$45,760	8	1 1		°\$0	OS SO	\$45,760	0.80	11%	0.09	80	006'88	1	
88														
45									+					
\$ S		+						-						
51		-												
55														
35 TOTAL NON-DAAS	\$266,791 3.56	26 56%	96.0	\$17,826	0\$	\$17,826	\$266,791	3.80	%65	0.37	\$14,244	23,900	518,144	\$35,970
S FRINGE BENEFIT RATE BENEFITS	27%			\$4,813	<u>os</u>	54,813	27%				\$3,846	51,053	3] \$4,899	21//6\$
TOTAL Non-DAAS SALARIES &	\$338,825			\$22,639	OS	\$22,639	\$338,825				\$18,090	\$4,953	3 \$23,043	\$45,682
TOTAL DAAS & Non-DAAS	\$400,942			\$179.147	\$32,426	\$211,573	\$400,942				\$179,148	\$46,492	\$225,640	\$437,213
HSA#2	,						1						and the state of t	10/10/2019

0 2 8 V	Ē	9	7	¥	Z	० ।	Appendix B-1 Page
2 On Lok Day Services 3 On Lok Day Services 4 Program: Health Promotion-Chronic Health							
7 Operating Expense Detail	Detail				٠.		
H.S.A-DAAS		Modified	Revised		Modified	Revised	Revised TOTAL
12 Expenditure Category TERM. 13 Rental of Pronerty	7/1/19-6/30/20	77/1/19-6/30/20	7/1/19-6/30/20 \$0	7/1/20-6/30/21	7/1/20-6/30/21	777.20-5/30/21	\$00.00
Utilities(Elec, W	\$1,500		\$1,500	\$1,500	15 15 15 15 15 15 15 15 15 15 15 15 15 1	\$1,500	23,000
15 Office Supplies, Postage 16 Building Maintenance Supplies and Repair	\$3,000		\$1,000 \$3,000	\$3,000		000,83	000'98
77 Printing and Reproduction	\$2,000		\$2,000	\$2,000		\$2,000	\$4,000
18 insurance 19 Staff Training	SS SS		80	\$0		\$0	0\$
20 Staff Travel-(Local & Out of Town)	\$400		\$400	\$400		\$400	\$800
						CM AN AN AN AN AN AN AN AN AN AN AN AN AN	
22 CONSULTANTS							
25							
SK STATE							
	\$13,170		\$13,170	\$13,170		\$13,170	\$26,340
	\$1,500	000 88	\$1,500	\$1,500		\$1,500	\$5,000
30 Master Training (HL&DEEP)		\$8,029	\$20,82		\$5,089	\$5,089	\$13,118
32 Diabetes workshop kit & materials		\$6,051	\$6,051		\$5,051	\$5,051	\$12,102
34 DEEP License		\$600	\$600		8600	2800	\$1,200
35 Peer Educator Re-certification		\$300	\$300		\$400	\$200	2800
		\$2,100	\$2,100			80	\$2,100
38 TOTAL DAAS OPERATING EXPENSE	\$25,441	\$28,590	\$54,031	\$25,441	517,550	\$42,991	\$97,022
40 Non-DAAS	Ť	TH MG RECORD	74.49.80000	7470-63021	77170-62021	771,20-6/30/21	771119-6/30/21
41 Expenditure Category	070000-61717	07000001111					
Utilities(Elec, W	\$72		\$72	\$72		\$72	\$144
44 Othce Supplies, Postage 45 Building Maintenance Supplies and Repair	\$569		\$569	8998		\$569	\$1,138
	\$12		\$12	\$12		\$12	\$24
47 Insurance	\$82		\$32	S82		\$20	20
48 Staff Travel-(Local & Out of Town)	\$42		\$42	\$42		\$42	\$88
50 Rental of Equipment	\$395		5395	5395		\$395	\$790
SI CONSTITUTE							
22		2.1.4					8
25							
55 58 OTHER							
57							0\$
85							
83							
61 TOTAL Non-DAAS OPERATING EXPENSE	\$1,265	0\$	\$1,265	\$1,265	8	\$1,265	\$2,530
SALTOTAL DAAS & Non-DAAS OPERATING EXPENSE	S28 706	\$28,590	\$55,796	\$26,706	\$17.550	\$4,256	799,984