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**MEMORANDUM**

TO:	Department of Disability and Aging Services (DAS) Commission
THROUGH:	Kelly Dearman, DAS Executive Director
FROM:	Daniel Kaplan, Deputy Director of Finance and Administration, Human Services Agency (HSA)
DATE:	January 5, 2022
SUBJECT:	Disability and Aging Services Budget for FY 2022-23 & FY 2023-24

The City’s budget projections forecast significant improvements in revenues, including the benefit of excellent returns in the pension funds, as the City continue to recover from the Covid-19 pandemic and ensuing economic recession. This good news – combined with financial restraint over the last several years – means the City has a projected \$108.1 M *surplus* across FY 2022-23 and FY 2023-24. In addition, the City’s long-term, structural deficit is much improved. New revenue sources – including voter-approved new taxes<sup>1</sup> and federal relief funding – have helped to improve the picture and put the City on steadier footing than it has been in many years.

As a result, City departments are not being asked to make any proposed cuts, but instead to deliver a proposal that does not add any new General Fund costs. HSA, working with the Mayor’s Office, will aim to reprioritize existing funding and leverage new revenues towards programs and services that will deliver results and meet the top priorities of the City. These priorities include continuing the historic recent investments in homelessness, mental health, and anti-poverty programs, as well as:

- Restoring the vibrancy of the City, including improving public safety and street conditions;
- Focusing on economic recovery;

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<sup>1</sup> Projections include a host of measures approved in November 2020 including an increase to transfer tax rates (Prop I), overhaul of business taxes (Prop F), and establishment of a new tax on executive compensation (Prop L).



**London Breed**  
Mayor

**Kelly Dearman**  
Executive Director



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- Delivering on accountability and equity in City spending.

### **HSA Budget Strategies**

HSA is using the following principles in building its proposed budget:

- Maintain client services;
- Maximize revenue opportunities with our State and Federal partners;
- Look for opportunities to repurpose existing position vacancies and funds to meet new needs.

The relative health of the State's budget, as well as the passage of several substantial Federal relief measures, has led to higher-than-anticipated revenues in the current year. We anticipate that the positive State budget will allow for continued investment in the budget year and that the Agency's budget will reflect new State investments, especially in the Adult Protective Services program, and initiatives that provide housing to HSA's clients.

### **DAS Program Highlights:**

As DAS prepares its budget submission, it is looking at community needs and key organizational issues across the department. Below are highlights of those current year developments and accomplishments that will shape the budget-planning process.

### **Direct Services Division**

#### **In-Home Supportive Services (IHSS)**

After a decade of stagnant caseload growth, the IHSS program has seen an 8.5% increase in its caseload since November 2019. The program has approximately 24,850 recipients currently, up from 22,867 in November 2019. IHSS anticipates seeing increased growth in the next fiscal year as a result of the State's planned Medi-Cal expansion to individuals over the age of 50 who are undocumented, beginning in May 2022. Additionally, the City's current and future efforts to house thousands of formerly-homeless individuals are expected to contribute to IHSS caseload growth, as placement into housing allows for connection to needed IHSS services.



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The individual IHSS caseloads carried by DAS social workers have experienced parallel growth, and the program is actively exploring ways to manage increased workload demands. Currently 8% of IHSS recipients either do not have an assigned caregiver, or have not submitted timesheets demonstrating they received care. The program has also seen a decline in the capacity of the City's contract mode provider, Homebridge, to serve high-needs IHSS recipients and as a result, IHSS is tasked with triaging clients who require this intensive level of service. This has resulted in additional workload for IHSS social workers who manage a wide spectrum of care needs through a patchwork of Public Authority emergency on-call referrals, Adult Protective Services referrals, and assistance through other appropriate City services. Building a robust caregiver workforce has always been challenging given the number of workers needed, wage competition, and difficulty of the work; demand for essential workers during the pandemic has exacerbated the challenge of hiring and retaining enough dedicated caregivers.

#### *Collaborative Caregiver Support Team*

As the City emerges from the pandemic, there is growing interest in building on highly-successful models employed in the Shelter-In-Place (SIP) hotels to provide more collaborative and client-centered care. To expand this work to the wider City-funded Permanent Supportive Housing (PSH) portfolio, IHSS has partnered with HSH to pilot a new program called the Collaborative Caregiver Support Team (CCST). The goal of this pilot program is to tailor services to meet the needs of PSH residents and play a pivotal role in preventing formerly-homeless individuals from experiencing eviction and becoming homeless again. The daily support from a caregiver that can be provided through IHSS is a critical tool that the City can leverage to stabilize formerly-homeless individuals as they move into permanent housing. While the traditional consumer-directed model of IHSS works for the majority of IHSS recipients, it does not work well for high-need recipients with serious mental illness and substance use disorders. The pilot will provide a specialized team of IHSS social workers to connect with, and support, clients relocating from SIP hotels, staying in shelters, or moving into new PSH sites. This specialized team will also be able to more closely coordinate with other service providers, supporting these residents and ensuring continued enrollment in the IHSS program for



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individuals in need. The Mayor's Office has approved DAS' request to bring on 7 temporary positions in FY 21-22 so it can begin this pilot immediately.

#### *Independent Provider Service Enhancements*

The IHSS program continues to support the Independent Provider workforce through the Independent Provider Assistance Center (IPAC). Operations remain primarily virtual due to the continued risk posed by Covid-19 and flexibilities provided by the California Department of Social Services (CDSS). This year IPAC is working with HSA's Information Technology department to improve the central call center services through the implementation of Google's Contact Center Artificial Intelligence (CCAI) system. This system can answer some questions without a live operator and has the potential to significantly improve wait times for callers.

#### *Workforce Innovations*

In IHSS's continued efforts to increase recruitment and retention of the caregiver workforce, Homebridge launched an on-the-job, Certified Nursing Assistance (CNA) training program in September that allows participants to simultaneously learn and earn. This initiative is a partnership between DAS, Homebridge, City College of San Francisco (CCSF), University of California, San Francisco (UCSF), and the Office of Economic and Workforce Development (OEWD). The fully-accredited, 15-week course includes 10 hours of weekly instruction through CCSF, plus a clinical practice requirement of 100 hours at UCSF Health. Once participants finish the course and earn their CNA certificate, efforts will be made to place them in higher-paying CNA positions. With the promise of a career pathway in health care, Homebridge hopes to increase the number of highly-skilled caregiver candidates in its recruitment pipeline.

#### *Local Maintenance of Effort Costs and IP Wage Increases*

Changes in the FY 21-22 state budget to the In-Home Supportive Services (IHSS) Maintenance of Effort (MOE) framework, while favorable to the City's MOE obligation in the long run, result in slight cost increases until FY 24-25 compared to prior projections. The legislative changes eliminated some previously-scheduled modifications, which would have made counties responsible for a



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relatively larger share of all locally-initiated provider wage increases going forward. Instead, the State will continue to share in more of those costs, up to a 10% increase across three years. San Francisco will exceed its current 10% wage increase in FY 22-23, but have the opportunity for the State to share in a new round of increases beginning in FY 24-25. Costs to the City of the program continue to grow due to the required 4% inflation rate on the MOE, planned wage increases for IHSS providers, and increases in the hourly rate paid for contract mode services through Homebridge.

Under the City's Minimum Compensation Ordinance and the agreement with the IHSS Independent Providers' (IPs') union – which stipulates the following increases through FY 22-23, but is subject to renegotiation in the latter half of that fiscal year – wages for IHSS workers increased to \$18.00 on July 1, 2021, and are scheduled to increase to \$18.75 on July 1, 2022, followed by cost of living increases in line with the Consumer Price Index. In total, the City's MOE is projected to be \$153.5 million in FY 21-22 and then, assuming the proposed wage increases can be implemented, it will grow another \$14 million to \$167.7 million in FY 22-23 and a further \$10.9 million in FY 23-24, to a total of \$178.5 million.

### **Adult Protective Services**

This year the State passed Assembly Bill 135 which expanded the Adult Protective Services (APS) program to provide services to at-risk adults earlier in their lives, and before reaching a crisis point. The new law intends to carry this out through a multi-faceted approach, which includes changing the definition of “older adult” for APS program eligibility from 65 to 60, effective January 1, 2022. The law also requires APS programs across the State to provide longer-term case management for those with complex needs, provides funding to serve individuals experiencing homelessness through the Home Safe program, and encourages the Statewide development of multidisciplinary teams to increase systems-level collaboration. San Francisco's APS program is slated to receive an additional \$2.4 M annually to implement this expansion. With these new mandates and funding, APS will need to increase its workforce, as well as enhance existing quality assurance and quality improvement mechanisms to improve client outcomes while delivering safety and stability in the least-restrictive environment. DAS is working with the Mayor's Office



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to put forward a mid-year supplemental appropriation for FY 21-22 so the program can begin to hire immediately for the new positions.

#### *Home Safe*

In July 2021, CDSS also expanded the APS Home Safe program as part of the State's larger investment to address homelessness. The current program expansion will allow San Francisco's APS program to leverage \$3.4 M in State funding through 2024, with no county match requirements. San Francisco was one of 25 counties that originally launched a Home Safe pilot program in 2019. APS carried out the pilot in collaboration with the Institute on Aging (IOA), and intends to continue, and augment, that effective model co-designed by both organizations.

The Home Safe pilot is targeted at assisting low-income older people, and adults with disabilities, who are at imminent risk of homelessness due to self-neglect. San Francisco's model relies on the provision of intensive case management activities that target eviction prevention, assessment in congregate homeless shelters and Permanent Supportive Housing units, and tailored housing-transition plans that meet the client's functional and safety needs. These activities are coupled with purchase of service dollars that can be utilized to pay for critical services such as a monthly financial patch to support a vulnerable adult's stay in a Residential Care Facility for the Elderly.

Since its inception, the Home Safe pilot program has enabled 75 older adults and/or adults with disabilities to remain housed and safe by enhancing their ability for self-care and self-protection. APS and IOA are actively collaborating with HSH to expand Home Safe. It is anticipated that an additional 300 clients will be served before the end of FY 23-24. Additionally, the State has indicated that increased funding for the Home Safe program will continue through at least the next budget year.

#### *High Risk Self-Neglect Multi-Disciplinary Team*

San Francisco's APS program also initiated a new collaboration with HSH, DPH, the San Francisco Fire Department, IOA and UCSF to share information regarding services and resources available to vulnerable



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adults who are experiencing self-neglect, and/or who are at risk of experiencing homelessness. The team is focused on coordinating care and bringing a holistic approach to assisting individuals with complex needs. The project also aims to diminish silo effects by educating team stakeholders about the array of options available at organizations engaged in the same, or related, work throughout the City. IOA's Elder Abuse Prevention program team is coordinating and facilitating this multi-disciplinary forum and monitoring intervention outcomes.

### **Public Guardian**

The Office of the Public Guardian (PG) is in the process of reorganizing staffing and program structure in order to improve its ability to respond to the City's need for conservatorships to assist individuals with cognitive impairment who are unable to provide for their health and well-being. In recent years, the PG has seen an increase in individuals who are referred with complex clinical portraits, including substance use disorders and behavioral health needs.

In response, PG has created a program manager position to oversee the approximately 320 clients served annually. Additionally, this new role will provide specialized expertise to fulfill the fiduciary obligations of the conservator, such as protecting clients from abuse and neglect, pursuing civil and criminal remedies, and managing complex estate issues effectively. This will help the PG to prioritize issues, streamline processes, standardize training and protocols, ensure quality of service delivery, increase accountability, and protect individuals and the City from liability.

### **Public Conservator**

The Office of the Public Conservator (PC) will be conducting outreach and training activities throughout the year for health and social services providers to educate stakeholders about mental health conservatorships as a resource for individuals with serious mental illness.

Last year, the PC piloted the Outpatient Referral pathway, an initiative that sought to conserve appropriate individuals directly from the community. An evaluation of this pilot revealed various knowledge gaps across systems that can be addressed through targeted training. Outreach and education will also clarify roles, obligations, and legal





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necessities that are associated with legally establishing clients as gravely disabled. These activities will ideally lead to improved conservatorship referrals from providers, and better outcomes in court that will directly benefit vulnerable adults.

### **Community Services Division**

#### **Benefits and Resource Hub**

The DAS Benefits and Resource Hub (BRH) has resumed in-person service transactions for all consumers seeking assistance through DAS and the County Veterans Services Office (CVSO).

The CVSO continues to promote and use Microsoft Bookings so consumers can schedule Zoom meetings with a Veterans Services Representative (VSR) online. With the use of this technology, the CVSO team has been able to increase the number of veterans and veteran's dependents they can assist daily. In addition, the CVSO team has expanded in-person services to the San Francisco Veterans Administration Medical Center (at Fort Miley). The CVSO has designated VSR staff at this location 1-2 days per week. In addition, CVSO staff have collaborated with volunteers (One Vet One Voice) to work at here on days when no VSR is available.

In August 2021, BRH leadership engaged with the City's Office of Civic Innovations and was selected for the Civic Bridge Innovation project. BRH staff identified a need to develop a more coordinated strategy to conduct outreach and engage community members in a more intentional fashion. The pandemic has amplified the importance of community engagement and provided new opportunities for this type of focused outreach. Through the Civic Bridge Project, DAS has been partnered with ZS Associates to develop a strategic outreach plan and messaging framework. This 16-week project will result in toolkits aimed at increasing awareness of the wide array of DAS services available throughout the community; in particular, outreach will be targeted to communities of color in San Francisco. Also, DAS is researching procurement options to develop an Online Resource Directory that will serve as a singular and easy-to-use digital tool to both find and utilize local resources.

The DAS Intake unit continues to serve as a critical link in ensuring older adults, and adults with disabilities, are able to safely shelter in place and receive healthy meals and requisite support during the





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pandemic. The conclusion of the Great Plates Delivered program in July 2021 brought extraordinary call volume to the Intake unit who supported the transition of hundreds of consumers to DAS home-delivered meal programs and other nutrition resources.

### **Office of Community Partnerships**

#### *Covid-19 Impacts*

With the ongoing Covid-19 pandemic and uncertainty about emerging variants, return to pre-pandemic levels of in-person services has been a cautious and deliberate process. Community Centers and DAS-funded, community-based services are open and serving clients, but in-person services are mostly in one-to-one or limited-group settings. Optional, in-person congregate meal dining services have restarted in a few locations, with reduced in-person seating available; to-go meals remain the primary way clients are accessing congregate meal services. Demand for nutrition and food support remains above pre-pandemic levels, and efforts are underway to build capacity to continue to meet need. Home-Delivered Meals are currently providing 15% more meals per year than before the pandemic's onset. Congregate Meals have seen a sustained 45% increase in demand, with Grocery programs having a sustained 20% increase in demand. Costs of food and food production have also increased due to changes in service delivery and general rises in costs (e.g., to-go containers, use of on-site freezers, etc.).

Phone and online access remain popular and growing channels for community members to connect with services. For example, clients can have an online meeting with an attorney to get assistance with a legal issue or participate in a Zoom group-exercise class. Despite increasing reliance on digital resources, many are not technologically prepared for this change in service delivery. SF Connected, and related DAS-funded digital divide programs continue to work to bridge this gap and increase online access through training, technical support, and provision of devices. In FY 20-21 over 1,000 people benefitted from SF Connected digital literacy services through over 7,000 training and support hours, and more than 400 devices were distributed directly to program participants. These service levels are projected to be met again, or exceeded, in the current year.



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### *State and Federal Support*

California's "Master Plan for Aging," released in January 2021, reflects the State's prioritization of planning and supportive services for adults. Initial investments from the State in this process have brought new programs and funding to DAS. The State augmented funding for nutrition services in FY 20-21 in response to increased demand. DAS has also received increased Covid-relief funding from the Federal government for Older Americans Act programs. This includes a tentative allocation of \$3.36 M from the American Rescue Plan Act (ARPA), with specific details imminent.

### *Nutrition Programming*

For the four-year Dignity Fund Service and Allocation Plan cycle, FY 21-22 focuses on the start of new contracts in the Nutrition and Wellness and Self-Care and Safety program areas. Funding priorities in the Nutrition area include: meeting existing need, adding resources in underserved areas, and outreach to older and disabled San Franciscans not currently accessing services. Specifically, DAS aims to reduce the waitlist for Home-Delivered Meals through an expansion in capacity for Asian and Japanese cuisine meals, which represent a majority of currently waitlisted clients. Home-Delivered Meal providers have also added capacity in the current year to accommodate the roughly 700 clients who transitioned off the Great Plates Delivered restaurant meals program, a State-Federal pandemic relief effort which concluded in July. There is new, ongoing funding for a meal site in the OMI neighborhoods (Ocean View, Merced Heights, Ingleside and Ingleside Terrace) launched in Spring 2021. New congregate meal sites identified in Districts 4 and 11 are also funded starting this year and are working toward opening. Capacity for home delivered groceries in District 11 has been increased via partnership with a new provider in that area. Finally, new program initiatives still in process for FY 21-22 include an additional restaurant-based meal program site (the CHAMPSS program), collaboration with a faith-based network to provide to support underserved populations, and additional resources directed for culturally-appropriate grocery supplements to existing nutrition programs.



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### *Dignity Fund Community Needs Assessment*

Pursuant to legislation establishing the Dignity Fund back in 2016, DAS must conduct a Community Needs Assessment (CNA) every four years. The first Dignity Fund CNA took place in FY 17-18. DAS is currently in the midst of the second CNA, which will in turn guide funding recommendations and priorities for the following four-year cycle. This year's process began in September 2021 and will run through spring of 2022. The CNA includes community engagement in the form of: virtual and in-person community forums, targeted focus groups, consumer surveys, phone surveys, provider surveys, and key informant interviews. Population demographic and historical service level data is also collected and analyzed. Evaluation of the qualitative and quantitative information gathered through this process will result in a report to be released in May 2022.

### *BIPOC Listening Sessions*

From January through August 2021, the OCP team helped support a DAS-wide effort to host a series of listening sessions with the City's communities of color. Engaging with community members and providers in order to foster communication and best understand community need has always been a priority for DAS; however the "BIPOC Listening Sessions" initiative in 2021 was a focused, planned, and defined process gathering feedback across 26 focus groups and 41 individual interviews. DAS staff talked with nearly 170 people across five different communities of color to hear about the challenges and needs in their lives. Information gathered from this experience was recorded and synthesized into a report which includes findings and recommendations. The report is being finalized now with plans for early-2022 release.

### *Disability Community Cultural Center*

A site for San Francisco's Disability Community Cultural Center (DCCC) has been identified: the DCCC will be co-located with The Kelsey, an ambitious new housing project focusing on universal design and reserving 25 percent of its 112 units for people with disabilities. The Kelsey and DCCC will be situated at the corner of Van Ness Avenue and Grove Street in the City's Civic Center neighborhood, with construction starting in 2022. Office of Community Partnerships' staff



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are currently working through a procurement process to identify a community-based provider to serve as the lead for further development and launch of the new DCCC. The launch of a virtual DCCC in advance of the brick-and-mortar location is under study and discussion.

### **Next Steps**

At the next meeting of the Department of Disability and Aging Services Commission on February 2, we will present you with a full proposal of the DAS budget for FY 2022-23 and FY 2023-24, for your review and final approval.