



Edwin M. Lee, Mayor

Department of Human Services
Department of Aging and Adult Services

Trent Rhorer, Executive Director

MEMORANDUM

TO: HUMAN SERVICES COMMISSION

THROUGH: TRENT RHORER, EXECUTIVE DIRECTOR

FROM: SYLVIA DEPORTO, DEPUTY DIRECTOR
JOHN TSUTAKAWA, DIRECTOR OF CONTRACTS *JCT*

DATE: MARCH 17, 2017

SUBJECT: NEW CONTRACT: **LISA ELLIS (FOR-PROFIT) TO PROVIDE PROGRAM COORDINATION & SUPPORT SERVICES**

GRANT TERM:	3/1/17- 6/30/19	<u>Contingency</u>	<u>Total</u>		
GRANT AMOUNT:	\$205,333	\$20,533	\$225,866		
TOTAL ANNUAL AMOUNT:	<u>FY 16/17</u> \$29,333	<u>FY 17/18</u> \$88,000	<u>FY18/19</u> \$88,000		
Funding Source	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
FUNDING	\$112,933	\$20,533	\$71,867	\$20,533	\$225,866
PERCENTAGE:	55%	10%	35%		100%

The Human Services Agency (HSA) requests authorization to enter into a contract with Lisa Ellis for the period of March 1, 2017 to June 30, 2019, in the amount of \$205,333 plus a 10% contingency of \$20,533 for a total contract amount not to exceed \$225,866. The purpose of this contract is to provide coordination and support between Family and Children’s Services (FCS), Community Behavioral Health Services (CBHS), Juvenile Probation Department (JPD), San Francisco Unified School District (SFUSD), placement providers, community-based organizations (CBOs), and other stakeholders to meet the Continuum of Care Reform (CCR) mandated by AB 403.

Background

The Family and Children’s Services (FCS) division’s work is increasingly complex, as state and federal mandates have increased, and several large reform efforts are underway simultaneously. These include, but are not limited to:

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- Implementation of practice changes and partnerships to meet the mandates of the Katie A v. Bonta settlement agreement;
- Implementation of Continuum of Care Reform (CCR) mandated by AB 403;
- Implementation of the California Core Practice Model for child welfare, recently developed by the counties;
- Development and evaluation of investments under the Title IV-E Waiver, including Safety Organized Practice (SOP), Wraparound, Visitation and others identified during the course of the Waiver.

The sweeping nature of these reforms and practice changes, and the need for coordination among county agencies (SFHSA, DPH, JPD) and numerous CBOs, demands a high level of local coordination and support to ensure effective service delivery, training, and utilization management (data and fiscal coordination, etc.). Additionally, there are significant cultural changes for both public and private agencies to support the transformation that this requires.

Services to be Provided

At the direction of the FCS staff and/or management, the CONTRACTOR will provide coordination and support between FCS, CBHS, JPD, SFUSD, placement providers, CBO service providers, Community Behavioral Health Services (CBHS) and other stakeholders to meet the mandates of major reforms and systems changes. Duties will include, but not be limited to, the following:

- Development and support of implementation structures, including leadership teams, implementation teams/workgroups, in collaboration with FCS management and other partners. This includes meeting preparation, agenda development, documentation and tracking of action steps, and coordination with appropriate parties as required.
- Coordination of the CCR interagency leadership team to review program status, identify systemic issues and develop plans to address the same, integrate CCR program with other state and/or county reform efforts such as Katie A. and the core practice model, review and update training plans, and other items as required.
- Devising and supporting structures and communication materials that support integration of various initiatives into the CPM.
- Development and utilization of project plans, meeting charters, templates and communications materials.
- Meeting or corresponding regularly with the designated managers from each of the county departments and fiscal staff of the various agencies to ensure good communication among all participants and to sort out and document the details of the utilization system as required.
- Development of outcome and data reports in partnership with HSA fiscal and data units.
- Attending meetings as required with county (SFHSA, JPD and CBHS) and providers/partners to review programmatic fiscal standing of programs.
- Development and coordination of reports, materials, and documentation, as necessary.
- Provision of technical assistance and program support to provider agencies and other partners
- Attending or participating in CDSS conference calls or meetings as required.

- Assistance with Katie A. implementation and system coordination to support case level review processes for individual children.
- Other duties as assigned by HSA and/or FCS staff.

For more specific detail regarding services to be provided, please refer to Appendix A (attached)

Selection

Grantee was selected through Request for Qualifications (RFQ) #726 which was released December 12, 2016. The Contractor was determined qualified by an impartial review panel.

Funding

Funding for this grant is provided by a combination of county, state and federal funds.

ATTACHMENTS

Appendix A – Services to be Provided

Appendix B – Calculation of Charges

Appendix A – Services to be Provided
Lisa Ellis
FCS Program Coordination & Support Services
Effective March 1, 2017 – June 30, 2019

I. Purpose of Contract

The Family and Children’s Services (FCS) division of the San Francisco Human Services Agency (HSA) oversees the county child protective service functions including the child abuse hotline and investigations, family maintenance and reunification, and permanent placement. The mission of FCS is to protect children, maintain and reunify families, and obtain safe permanent care for children who cannot be reunified with their families.

FCS’s work is increasingly complex, as state and federal mandates have increased and several large reform efforts are underway simultaneously. These include, but are not limited to:

- Implementation of practice changes and partnerships to meet the mandates of the Katie A v. Bonta settlement agreement;
- Implementation of Continuum of Care Reform (CCR) mandated by AB 403;
- Implementation of the California Core Practice Model for child welfare, recently developed by the counties;
- Development and evaluation of investments under the Title IV-E Waiver, including Safety Organized Practice (SOP), Wraparound, Visitation and others identified during the course of the Waiver.

The sweeping nature of these reforms and practice changes, and the need for coordination among county agencies (SFHSA, DPH, JPD) and numerous CBOs, demands a high level of local coordination and support to ensure effective service delivery, training, and utilization management (data and fiscal coordination, etc.). Additionally, there are significant cultural changes for both public and private agencies to support the transformation that this requires.

The purpose of this contract is to provide coordination and support between FCS, Community Behavioral Health Services (CBHS), Juvenile Probation, SFUSD, placement providers, CBOs, and other stakeholders to meet the mandates of these reforms.

II. Definitions

CBHS	Community Behavioral Health Services
CBO	Community-Based Organization
CDSS	State of California Department of Social Services
CWS	Child Welfare Services
DPH	Department of Public Health
FCP	Family Connections Program
FCS	Family and Children’s Services, a division of the San Francisco Human Services Agency
HSA	Human Services Agency of the City and County of San Francisco
JPD	Juvenile Probation Department
NMD	Non-Minor Dependents

III. Target Population

The target population is children and families involved in the child welfare system, including non-minor dependents (NMDs).

IV. Description of Services

At the direction of the FCS staff and/or management, the CONTRACTOR will provide coordination and support between FCS, CBHS, JPD, SFUSD, placement providers, CBO service providers, Community Behavioral Health Services (CBHS) and other stakeholders to meet the mandates of major reforms and systems changes. Duties will include, but not be limited to, the following:

- Development and support of implementation structures, including leadership teams, implementation teams/workgroups, in collaboration with FCS management and other partners. This includes meeting preparation, agenda development, documentation and tracking of action steps, and coordination with appropriate parties as required.
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- Devising and supporting structures and communication materials that support integration of various initiatives into the CPM.
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- Development of outcome and data reports in partnership with HSA fiscal and data units.
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- Development and coordination of reports, materials, and documentation, as necessary.
- Provision of technical assistance and program support to provider agencies and other partners
- Attending or participating in CDSS conference calls or meetings as required.
- Assistance with Katie A. implementation and system coordination to support case level review processes for individual children.
- Other duties as assigned by HSA and/or FCS staff.

V. Units of Service

One unit of service = one hour of CONTRACTOR services.

- a. For FY16/17, (4 month period) from 3/1/17 to 6/30/17, approximately 293 hours will be provided
- b. FY FY17/18, from 7/1/17 to 6/30/18, approximately 880 hours will be provided
- c. For FY18/19, from 7/1/18 to 6/30/19, approximately 880 hours will be provided

Appendix B – Calculation of Charges
Lisa Ellis
FCS Program Coordination & Support Services
Effective March 1, 2017 – June 30, 2019

I. The contract term for FCS Program Coordination & Support Services under this Agreement will begin effective March 1, 2017 and end June 30, 2019.

II. Contractor will be compensated on an hourly basis and will invoice the San Francisco Human Services Agency (HSA), in accordance with the terms of the agreement, at the rate of \$100.00 per hour worked, for an approximate total of 2,053 hours during the term of the Agreement.

- For FY 16/17 (4 month period) from 3/1/17 to 6/30/17, at approximately 293 hours, for a total of \$29,333.
- For FY17/18 from 7/1/17 to 6/30/18, at approximately 880 hours, for a total of \$88,000.
- For FY18/19 from 7/1/18 to 6/30/19, at approximately 880 hours, for a total of \$88,000.

Total contract amount for the period of March 1, 2017 through June 30, 2019 is not to exceed **\$205,333**.

III. Contractor shall submit invoices on a monthly basis. Invoices shall document the number of hours spent on the tasks outlined in Appendix A, and any additional work performed under the scope of this contract.

IV. Contractor understands that, of the maximum dollar obligation listed in Section 4 of this Agreement, **Twenty Thousand, Five Hundred Thirty Three Dollars (\$20,533)** is included as a contingency amount and is neither to be used in the Program Budget, nor available to Contractor without a modification to this Agreement executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Manager. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Human Services Agency laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

V. A final closing invoice, clearly marked “FINAL,” shall be submitted no later than forty-five (45) calendar days following the closing date of the Agreement, and shall include only those Services rendered during the referenced period of performance. If Services are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to City. City’s final reimbursement to the Contractor at the close of the Agreement period shall not exceed the total amount authorized and certified for this Agreement.

