City and County of San Francisco Office of Contract Administration Purchasing Division

First Amendment

THIS AMENDMENT (this "Amendment") is made as of July 1, 2015 in San Francisco, California, by and between Larkin Street Youth Services ("Contractor"), and the City and County of San Francisco, a municipal corporation ("City"), acting by and through its Director of the Office of Contract Administration.

RECITALS

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to amend the Agreement on the terms and conditions set forth herein to extend the performance period, increase the contract amount, and update standard contractual clauses;

NOW, THEREFORE, Contractor and the City agree as follows:

- 1. **Definitions.** The following definitions shall apply to this Amendment:
- 1a. Agreement. The term "Agreement" shall mean the Agreement dated July 1, 2010 from RFP 23-2009, dated July 31, 2009, Contract Numbers BPHM11000096, between Contractor and City, as amended to a Sole Source by this First amendment.
- 1b. Contract Monitoring Division. Effective July 28, 2012, with the exception of Sections 14B.9(D) and 14B.17(F), all of the duties and functions of the Human Rights Commission under Chapter 14B of the Administrative Code (LBE Ordinance) were transferred to the City Administrator, Contract Monitoring Division ("CMD"). Wherever "Human Rights Commission" or "HRC" appears in the Agreement in reference to Chapter 14B of the Administrative Code or its implementing Rules and Regulations, it shall be construed to mean "Contract Monitoring Division" or "CMD" respectively.
- 1c. Other Terms. Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.
- 2. Modifications to the Agreement. The Agreement is hereby amend as follows:
 - 2a. Section 2 of the Agreement currently reads as follows:
 - 2. Term of the Agreement

Subject to Section 2, the term of this Agreement shall be from July 1, 2010 through December 31, 2015.

Such Section is hereby amended in its entirety to read as follows:

2. Term of the Agreement

Subject to Section 2, the term of this Agreement shall be from July 1, 2010 through December 31, 2017.

2b. Section 5 of the Agreement currently reads as follows:

5. Compensation

Compensation shall be made in monthly payments on or before the 30th day of each month for work, as set forth in Section 4 of this Agreement, that the Director of the Public Health Department, in his or her sole discretion, concludes has been performed as of the 30th day of the immediately preceding month. In no event shall the amount of this Agreement exceed Nine Million Nine Hundred Thirty Thousand Seven Hundred Ninety Five Dollars (\$9,930,795). The breakdown of costs associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein.

No charges shall be incurred under this Agreement nor shall any payments become due to Contractor until reports, services, or both, required under this Agreement are received from Contractor and approved by The Department of Public Health as being in accordance with this Agreement. City may withhold payment to Contractor in any instance in which Contractor has failed or refused to satisfy any material obligation provided for under this Agreement.

In no event shall City be liable for interest or late charges for any late payments.

Such section is hereby amended in its entirety to read as follows:

5. Compensation

Compensation shall be made in monthly payments on or before the 30th day of each month for work, as set forth in Section 4 of this Agreement, that the Director of the Public Health Department, in his or her sole discretion, concludes has been performed as of the 30th day of the immediately preceding month. In no event shall the amount of this Agreement exceed Eleven Million Eight Hundred Two Thousand Six Hundred Twenty-Nine Dollars (\$11,802,629). The breakdown of costs associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein.

No charges shall be incurred under this Agreement nor shall any payments become due to Contractor until reports, services, or both, required under this Agreement are received from Contractor and approved by The Department of Public Health as being in accordance with this Agreement. City may withhold payment to Contractor in any instance in which Contractor has failed or refused to satisfy any material obligation provided for under this Agreement.

In no event shall City be liable for interest or late charges for any late payments.

2c. Insurance. Section 15 is hereby replaced in its entirety to read as follows:

15. Insurance

- a. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:
- 1) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and
- 2) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence and \$2,000,000 general aggregate for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; and
- 3) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.
- 4) Professional liability insurance, applicable to Contractor's profession, with limits not less than \$1,000,000 each claim with respect to negligent acts, errors or omissions in connection with the Services.
- 5) Blanket Fidelity Bond (Commercial Blanket Bond): Limits in the amount of the Initial Payment provided for in the Agreement
- b. Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to provide:
- 1) Name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.
- 2) That such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that insurance applies separately to each insured against whom claim is made or suit is brought.
- c. All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in the Section entitled "Notices to the Parties."
- d. Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.
- e. Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.
- f. Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.
- g. The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.

h. If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

Notwithstanding the foregoing, the following insurance requirements are waived or modified in accordance with the terms and conditions stated in Appendix C Insurance.

2d. Replacing "Earned Income Credit (EIC) Forms" Section with "Consideration of Criminal History in Hiring and Employment Decisions" Section. Section 32 "Earned Income Credit (EIC) Forms" is hereby replaced in its entirety to read as follows:

32. Consideration of Criminal History in Hiring and Employment Decisions.

- a. Contractor agrees to comply fully with and be bound by all of the provisions of Chapter 12T "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code (Chapter 12T), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at www.sfgov.org/olse/fco. A partial listing of some of Contractor's obligations under Chapter 12T is set forth in this Section. Contractor is required to comply with all of the applicable provisions of 12T, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12T.
- b. The requirements of Chapter 12T shall only apply to a Contractor's or Subcontractor's operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, shall apply only when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco, and shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.
- c. Contractor shall incorporate by reference in all subcontracts the provisions of Chapter 12T, and shall require all subcontractors to comply with such provisions. Contractor's failure to comply with the obligations in this subsection shall constitute a material breach of this Agreement.
- d. Contractor or Subcontractor shall not inquire about, require disclosure of, or if such information is received, base an Adverse Action on an applicant's or potential applicant for employment's, or employee's: (1) Arrest not leading to a Conviction, unless the Arrest is undergoing an active pending criminal investigation or trial that has not yet been resolved; (2) participation in or completion of a diversion or a deferral of judgment program; (3) a Conviction that has been judicially dismissed, expunged, voided, invalidated, or otherwise rendered inoperative; (4) a Conviction or any other adjudication in the juvenile justice system; (5) a

Conviction that is more than seven years old, from the date of sentencing; or (6) information pertaining to an offense other than a felony or misdemeanor, such as an infraction.

- e. Contractor or Subcontractor shall not inquire about or require applicants, potential applicants for employment, or employees to disclose on any employment application the facts or details of any conviction history, unresolved arrest, or any matter identified in subsection 32 above. Contractor or Subcontractor shall not require such disclosure or make such inquiry until either after the first live interview with the person, or after a conditional offer of employment.
- f. Contractor or Subcontractor shall state in all solicitations or advertisements for employees that are reasonably likely to reach persons who are reasonably likely to seek employment to be performed under this Agreement, that the Contractor or Subcontractor will consider for employment qualified applicants with criminal histories in a manner consistent with the requirements of Chapter 12T.
- g. Contractor and Subcontractors shall post the notice prepared by the Office of Labor Standards Enforcement (OLSE), available on OLSE's website, in a conspicuous place at every workplace, job site, or other location under the Contractor or Subcontractor's control at which work is being done or will be done in furtherance of the performance of this Agreement. The notice shall be posted in English, Spanish, Chinese, and any language spoken by at least 5% of the employees at the workplace, job site, or other location at which it is posted.
- h. Contractor understands and agrees that if it fails to comply with the requirements of Chapter 12T, the City shall have the right to pursue any rights or remedies available under Chapter 12T, including but not limited to, a penalty of \$50 for a second violation and \$100 for a subsequent violation for each employee, applicant or other person as to whom a violation occurred or continued, termination or suspension in whole or in part of this Agreement.
- **2e. Protection of Private Information.** Section 64 is hereby added to the Agreement, as follows:
- 64. Protection of Private Information. Contractor has read and agrees to the terms set forth in San Francisco Administrative Code Sections 12M.2, "Nondisclosure of Private Information," and 12M.3, "Enforcement" of Administrative Code Chapter 12M, "Protection of Private Information," which are incorporated herein as if fully set forth. Contractor agrees that any failure of Contactor to comply with the requirements of Section 12M.2 of this Chapter shall be a material breach of the Contract. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract, bring a false claim action against the Contractor pursuant to Chapter 6 or Chapter 21 of the Administrative Code, or debar the Contractor.

2f. Health Care Accountability Ordinance. Section 44 is hereby replaced in its entirety to read as follows:

44. Health Care Accountability Ordinance.

Contractor agrees to comply fully with and be bound by all of the provisions of the Health Care Accountability Ordinance (HCAO), as set forth in San Francisco Administrative Code Chapter 12Q, including the remedies provided, and implementing regulations, as the same may be amended from time to time. The provisions of section 12Q.5.1 of Chapter 12Q are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the HCAO is available on the web at www.sfgov.org/olse. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12Q.

- a. For each Covered Employee, Contractor shall provide the appropriate health benefit set forth in Section 12Q.3 of the HCAO. If Contractor chooses to offer the health plan option, such health plan shall meet the minimum standards set forth by the San Francisco Health Commission.
- b. Notwithstanding the above, if the Contractor is a small business as defined in Section 12Q.3(e) of the HCAO, it shall have no obligation to comply with part (a) above.
- c. Contractor's failure to comply with the HCAO shall constitute a material breach of this agreement. City shall notify Contractor if such a breach has occurred. If, within 30 days after receiving City's written notice of a breach of this Agreement for violating the HCAO, Contractor fails to cure such breach or, if such breach cannot reasonably be cured within such period of 30 days, Contractor fails to commence efforts to cure within such period, or thereafter fails diligently to pursue such cure to completion, City shall have the right to pursue the remedies set forth in 12Q.5.1 and 12Q.5(f)(1-6). Each of these remedies shall be exercisable individually or in combination with any other rights or remedies available to City.
- d. Any Subcontract entered into by Contractor shall require the Subcontractor to comply with the requirements of the HCAO and shall contain contractual obligations substantially the same as those set forth in this Section. Contractor shall notify City's Office of Contract Administration when it enters into such a Subcontract and shall certify to the Office of Contract Administration that it has notified the Subcontractor of the obligations under the HCAO and has imposed the requirements of the HCAO on Subcontractor through the Subcontract. Each Contractor shall be responsible for its Subcontractors' compliance with this Chapter. If a Subcontractor fails to comply, the City may pursue the remedies set forth in this Section against Contractor based on the Subcontractor's failure to comply, provided that City has first provided Contractor with notice and an opportunity to obtain a cure of the violation.
- e. Contractor shall not discharge, reduce in compensation, or otherwise discriminate against any employee for notifying City with regard to Contractor's noncompliance or anticipated noncompliance with the requirements of the HCAO, for opposing any practice proscribed by the HCAO, for participating in proceedings related to the HCAO, or for seeking to assert or enforce any rights under the HCAO by any lawful means.
- f. Contractor represents and warrants that it is not an entity that was set up, or is being used, for the purpose of evading the intent of the HCAO.

- g. Contractor shall maintain employee and payroll records in compliance with the California Labor Code and Industrial Welfare Commission orders, including the number of hours each employee has worked on the City Contract.
 - h. Contractor shall keep itself informed of the current requirements of the HCAO.
- i. Contractor shall provide reports to the City in accordance with any reporting standards promulgated by the City under the HCAO, including reports on Subcontractors and Subtenants, as applicable.
- j. Contractor shall provide City with access to records pertaining to compliance with HCAO after receiving a written request from City to do so and being provided at least ten business days to respond.
- k. Contractor shall allow City to inspect Contractor's job sites and have access to Contractor's employees in order to monitor and determine compliance with HCAO.
- 1. City may conduct random audits of Contractor to ascertain its compliance with HCAO. Contractor agrees to cooperate with City when it conducts such audits.
- m. If Contractor is exempt from the HCAO when this Agreement is executed because its amount is less than \$25,000 (\$50,000 for nonprofits), but Contractor later enters into an agreement or agreements that cause Contractor's aggregate amount of all agreements with City to reach \$75,000, all the agreements shall be thereafter subject to the HCAO. This obligation arises on the effective date of the agreement that causes the cumulative amount of agreements between Contractor and the City to be equal to or greater than \$75,000 in the fiscal year.
 - 2g. Add Appendices A-1a, A-1b and A-2 dated 7/1/2015 to Agreement as amended.
- 2h. Delete Appendix B-Calculation of Charges and replace in its entirety with Appendix B-Calculation of Charges dated 7/1/2015 to Agreement as amended.
- 2i. Add CBHS Budget Documents/Appendices B-1a, B-1b and B-2 dated 7/1/2015 to Agreement as amended.
- 2j. Delete Appendix D-Additional Terms and replace in its entirety with Appendix D-Additional Terms dated 7/1/2015 to Agreement as amended.
- 2k. Delete Appendix E-HIPAA Business Associate Agreement and replace in its entirety with Appendix E-HIPAA Business Associate Agreement dated 5/19/2015 to Agreement as amended.
- 3. Effective Date. Each of the modifications set forth in Section 2 shall be effective on and after July 1, 2015.

Legal Effect. Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

	CITY	CONTRACTOR .	
	Recommended by:	, Larkin Street Youth Services	
C	BARBARA A. GARCIA, MPA. Director of Health	Date Date	
	Approved as to Form:		
	DENNIS J. HERRERA City Attorney		
Ву	Call Scythlyfly, KATHY MURPHY	6/8/15 Date	
٠	Deputy City Attorney		
	Approved:	Sherilyn Adams Executive Director 701 Sutter Street, 2nd Floor San Francisco, CA 94109	20/10 ate
	,	City vendor number: 10991	
٠	JACI FONG Director of the Office of Contract Administration, and Purchaser	Date	

Program: Routz TAY Housing & Supportive Services

City Fiscal Year: 2015-16

CMS#: 6997

Appendix A-1a Contract Term: 7/1/15-6/30/16

1. Program Name: Routz TAY Housing & Supportive Services

501 Ellis Street

San Francisco, CA 94109

(415) 673-0911 (415) 749-3838 FAX

Program Code:

38IXHS

Mode/SFC:

60/78

2. Nature of Document (check one)

☐ New ☐ Renewal

Modification

3. Goal Statement

The goal of the Routz TAY Housing and Supportive Services Program is to provide 50 total units of housing at scattered and single sites as well as an array of supportive services for transitional age youth (TAY) who have serious mental illness and are homeless, marginally housed or at risk of homelessness.

4. Target Population

The Larkin Routz TAY Housing and Supportive Services Program target population is TAY (ages 18 – 25) in San Francisco who have serious mental illness and are homeless, marginally housed, or at imminent risk of homelessness. These TAY represent diverse genders, races, ethnicities and sexual orientations. Most services will be provided at the Aarti Hotel at the corner of Ellis and Leavenworth in zip code 94102.

5. Modality(ies)/Interventions

Over the course of each contract year, the Routz TAY Housing and Supportive Services program will provide approximately 60 TAY with serious mental illness with housing and an accompanying array of supportive services, including wraparound case management, mental health intervention and counseling, peer-based counseling, life skills including money management, vocational training and employment counseling, and emergency financial assistance.

Mode 60, Housing (Housing Nights): One Unit of Service is equal to one night of housing.

Scattered Site:

10 units X 85% occupancy X 365 days=

3,103 housing nights

Aarti: 40 units X 85% occupancy X 365 days= TOTAL CONTRACTED = 12,410 Aarti housing nights

15,513 housing nights

6. Methodology

The Larkin Routz TAY Housing and Supportive Services Program provide two major services to the target population: safe stable housing, and an array of accompanying supportive services for all residents. The program is designed to serve both youth in the Full Service Partnerships (FSPs) at Family Service Agency (FSA) and the CBHS TAY Program and youth who are not engaged in FSPs but share the eligibility requirements of having serious mental illness and being homeless, marginally housed or at imminent risk of homelessness. Youth engaged in FSPs are known for the purposes of this contract as HSP (Housing Services Partnership) youth; those not engaged in FSPs are referred to as TRH (Transitional Residential Housing) youth. The provision of some supportive services differs according to a youth's engagement with FSPs, but the target population of homeless TAY with serious mental health issues is understood to be the same regardless of this distinction.

Housing for Youth with Mental Health Issues: The program provides a total of 50 housing slots. Forty of the housing slots are at the Aarti Hotel at the corner of Ellis and Leavenworth in zip code 94102 and 10 additional slots at the scattered housing sites, currently located on Naples and Sadowa Streets.

While some TAY have the motivation and ability to live independently in a scattered-site unit, others require a sense of community at a single site in order to feel secure and connected to services. A partnership with Tenderloin Neighborhood Development Corporation to provide 40 units at the Aarti Hotel ensures that this

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housing model is available for the majority of youth in the program. This co-location of units will provide centralized access to supportive services, and help to address youth issues such as depression or isolation and the need to build a community of support. TAY in all housing, be it the Aarti or scattered-site, will receive supportive services (including clinical services) delivered from a strengths-based, trauma-informed, harm reduction perspective.

All housing units are clean, safe and healthy living environments. It is important that clients who have been marginalized, homeless and underserved have access to housing units that are pleasant, have reasonable natural light, are in good repair, and are located near important community amenities for additional supports. In addition to meeting all health and building codes, units will be maintained of desirable quality.

The Aarti Hotel is a 4 story, 40 unit building with a community space on the bottom floor. It is located at the corner of Ellis and Leavenworth in San Francisco. It has offices available for Larkin Street staff and also for at the FSA and CBHS staff to see their TAY clients on site. The building is owned by Tenderloin Neighborhood Development Corporation (TNDC) with whom Larkin Street has a Master Lease.

- The Master lease provides for the following TNDC staffing (known as the property management team):
 - 0.5 FTE General Manager
 - o 0.5 FTE Maintenance Supervisor
 - o 1.5 FTE Maintenance II
 - 3 FTE Desk Clerk
- Maintenance of the building/units will be provided by TNDC
- TNDC-provided Front Desk staff will be on duty 24 hours a day, 7 days per week. 40 hours per week during the daytime hours will be covered by a Larkin staff and the remaining 3 FTE is TNDC's responsibility. The Desk Clerk is responsible for screening all visitors to confirm that they are authorized guests of building subtenants and to ensure visitors are escorted by tenants at all times, maintaining complete and accurate confidential Building Logs and completing incident reports as necessary, providing general administrative assistance to the General Manager, answering the phone and providing customer service to the general public and subtenants of the building.

<u>Housing Support Services</u>: The Housing Support Services are an array of supportive services for program residents including 1) supportive counseling and clinical case management services; 2) special funds and money management; 3) maintenance of the housing units; 4) behavior management of the TAY youth to maintain housing stability; 5) staff coverage and supervision.

Housing Support Services: Supportive Counseling/Clinical Case Management Services
 Supportive Services including clinical case management (based on stages of change and motivational interviewing), harm reduction and peer-based counseling, assessments, vocational/employment services, and life skills training (see below for details) are available to all TAY residing in the 50 housing units.

<u>Theoretical Model:</u> All services are based on a youth-focused theoretical model of wellness and recovery and delivered from a *Stages of Change* model. The Recovery Model is widely recognized as an effective, client-centered philosophy and approach to the treatment of mental illness. It suggests that individuals can gain valuable tools and strategies to cope with mental illness.

The Stages of Change model is founded on the idea that behavior change does not happen in one step, but rather that people tend to progress through different stages on their way to successful change. These stages include pre-contemplation, in which the client is not yet considering change or is unwilling or unable to change; contemplation, in which the client acknowledges concerns and is considering the possibility of change but is ambivalent and uncertain; preparation, in which the client is committed to and planning to make a change in the near future but is still considering what to do; action, in which the client is actively taking steps to change but has not yet reached a stable state; maintenance, in which the client has achieved initial goals and is now working to maintain goals; and recurrence, in which the client has experienced a recurrence of symptoms and must now cope with consequences and decide what to do next. Integrated services move youth through stages of change using evidence based best practices (including stage-wise CM, motivational interviewing and harm reduction counseling) for working with people with persistent mental illness and co-

Program: Routz TAY Housing & Supportive Services

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occurring disorders. By correctly assessing a client's stage of readiness program counselors and case managers welcome them into a hopeful partnership and set realistic goals and expectations for change.

Assessment and Individual Service Planning: The case management process begins with a psychosocial assessment to determine mental health needs, stages of change/readiness, strengths on which to build, short-and long-term goals, etc. This informs the development of the client's individual needs and services plan.

In addition to long-term planning toward youth's stated goals and connections to the other program supportive services (such as education/employment, housing support, etc.; see below), each client's plan includes weekly clinical goals which are reviewed during each meeting between the youth and case manager (case management occurs at least weekly, for at least an hour per session). The establishment of incremental short term goals gives the youth an opportunity to experience frequent positive reinforcement, and to celebrate successes at many points throughout their journey toward medium- and long-term goals.

The frequency and content of case management is a program expectation, and youth who miss sessions are contacted by program staff and assisted in creating an immediate remediation plan, which is strengths-based and individualized, to ensure that they remain on track going forward.

The individual needs and services plan includes mental health needs and requirements as well, with linkages to additional clinical services (such as therapy, peer counseling, support groups, psychiatric care, etc.) either within Larkin's wider continuum of services or through outside providers with whom we maintain robust referral partnerships.

Case Manager Role for HSP Clients: The role of the Larkin Case Manager is different for the HSP client than it is for the TRH client. The HSP client is enrolled in a FSP program and already has an Intensive Clinical Case Manager at FSA or CBHS who is responsible for the mental health treatment and clinical case management of the case. Larkin staff will coordinate with the FSP staff to ensure that each TAY's treatment plan is non-duplicative of mental health services which are to be provided by the FSP staff and also to offer other relevant housing support services. The Larkin Street Case Manager and the FSP Case Manager should work in close collaboration with each other on each HSP case. The collaboration and specification of roles should be noted in the treatment plan and chart notes and should also be clearly explained to the client. The FSP clinicians from FSA and CBHS should be actively working with the client including visiting them at the Aarti. FSA and CBHS Case Managers have office space on-site at the Aarti.

Case Manager Role for TRH Clients: The role of the Larkin Case Manager for the TRH client differs in that it may include some mental health case management and intervention when necessary in addition to the full array of housing support services that Larkin provides. Some of the TRH clients may already be in mental health treatment. Those who are not will be linked to treatment by the Larkin Street Routz Case Manager. Once youth are linked to treatment, coordination with the mental health provider should take place so that treatment is not duplicated by Larkin and should be noted in the chart notes and treatment plan.

<u>Use of Motivational Interviewing in Clinical Case Management:</u> Clinical Case Management and Counseling are based on motivational interviewing methodologies, which are broken into 5 steps. Each of the 5 steps includes specific services (including case management, harm reduction counseling, assessments, vocational/employment services, and life skills training) and all steps are integrated and can overlap depending on client needs and progress toward goals.

The Motivational Interviewing steps are:

- 1. <u>Expressing empathy:</u> This step builds trust through case management sessions and peer-based counseling sessions which use active listening and youth-centered harm reduction philosophy based methods of "meeting clients where they're at" and establishing the rapport will help move them through the remaining MI steps and integrated services.
- 2. <u>Establishing personal goals:</u> Goals are established by each client with the support of his or her case manager in the context of an individualized service plan. The process includes assessments of the youth's strengths, social supports, vocational/educational needs, and coping strategies; case management

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connecting youth to necessary supports within the program and in the wider community; and planning for service provision.

- 3. <u>Developing discrepancy:</u> This is a process which takes place through case management and individual counseling through which youth identify their core values and goals for recovery and wellness and compare their behaviors to these values in order to identify and address discrepancies. It involves the development of greater awareness of consequences, and includes the clients as full partners in setting goals and examining their ideal pathways toward greater self-efficacy and wellness.
- 4. Rolling with resistance: During case management and individual counseling provided through the MI methodology, staff explores youth's resistance to change rather than forcing against it. Peer counseling and case management in the program use this method for creating an egalitarian counseling style, recognizing the past and current efficacy of clients' defenses and survival skills, and adjust case planning and strategy as necessary. This MI step helps to repair clients' negative past experiences with the mental health system and ensures that case planning and goal setting are client-led.
- 5. Supporting self-efficacy: The program supports clients' developing self efficacy by using strengths-based assessments (as opposed to inventories of symptoms), identifying and reframing youth's strengths and past experiences; identifying coping strategies; and not fostering dependence on the system. In order to encourage personal and financial independence, the program also provides Pre-Vocational/Employment Training and a Life Skills Curriculum:
 - a. Pre-vocational and employment training includes a functional assessment to identify clients' strengths and needs in this area, followed by connection to Larkin Street's HIRE Up job readiness continuum. The existing HIRE Up employment and educational services has been fine tuned to meet the specific needs of youth with mental-health related challenges. Pre-Vocational/Employment Training is integrated into clients' case plans and supported through individual counseling. Case managers and peer counselors also advocate and collaborate with HIRE Up staff to encourage client success and to help youth build trust in their own abilities to earn income and establish a meaningful societal role.
 - b. The life skills training curriculum first matches clients with the living situation best suited to capacity and goals (i.e., congregate living at the Aarti or scattered site housing). This is followed by a functional skills assessment which addresses critical life skills such as cooking, budgeting, self-care, hygiene, socialization, etc.

Then, peer counselors and case managers, with youth input, design opportunities within the community to build skills as needed. For example, youth who can benefit from a greater engagement in services and a more meaningful role in the community in the absence of specific job skills may be recruited to serve as Peer Liaisons. There is one Peer Liaison per floor at the Aarti whose role it is to help peer counselors with food shopping, assist with the coordination of community meetings, take out garbage or perform other building tasks on the weekends when the custodian is not available, and communicate with other youth on the floor on behalf of counseling staff.

Finally, regular Life skills groups are offered through program supportive services based on need. The life skills groups are community based interventions offered in the context of the housing program (rather than taking place off site or in staff offices) through which youth can witness life skills in action (e.g., shopping for food or cooking nutritious meals together). Groups also have a socialization component, creating opportunities for youth to work together in ways that reduce isolation, teach stress tolerance, and create interpersonal effectiveness. Groups are conducted at least weekly by peer counseling staff, and case managers also participate on a regular basis.

<u>Collaboration with other service providers:</u> In addition to the above described program methodologies and activities, Larkin staff will work in collaboration with other service providers whenever there are

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other service providers involved on the case. Larkin Street staff and the TAY FSP providers will work in close collaboration with each other. Interagency meetings are held at least monthly with Larkin, FSA and CBHS staff in attendance to discuss cases, to develop individualized client treatment plans, to address client and or provider concerns, to problem solve, to coordinate their work together with clients, to clarify provider roles; to develop protocols, and to support each other. Communication between providers should happen on a frequent and consistent basis both on the phone and in person. The program managers from each program should also guide staff in coordination and supervision of the work and also should coordinate with each other.

Client Charts: Larkin Street will keep a chart for each client who receives housing support services whether case management or special needs funds. The chart shall include a face sheet with identifying information such as client name, address and phone number (if available), contact information, date of birth, social security number, emergency numbers (if available), as well as referral source information and any linkage the client has to community agencies of any type. The chart must also include progress notes completed by program staff documenting the support services provided (with date and duration of service per client noted) and other information that will document the decisions and actions made by program staff, as well as any correspondence provided or received on behalf of the client. For case management services, a brief service plan must be included in the chart within the first month with specific objectives. Documentation is subject to review by CBHS staff.

Larkin Street will submit a monthly encounter log to the CBHS Program Manager with a list of unduplicated clients, bednights, the number of case management sessions per client, and aggregated hours of service for all clients.

All client charts and program service delivery documentation (or copy of documentation) will remain onsite for regular review by CBHS program managers and SFDPH Placement Office, Utilization Management, and Business Office of Contract Compliance.

2) Housing Support Services: Funds and Money Management In order to ensure the smooth transition of each youth into housing, Larkin Street allots move-in costs for each youth. These funds are provided to youth in the form of gift certificates to local retailers that provide basic furniture, bedding, cleaning supplies, etc., so that youth who have been unstably housed or homeless and living on the streets have the required amenities to furnish, maintain, and feel comfortable in their new homes.

Each young person is required to pay up to 30% of their monthly income toward "rent" (income will include SSI and General Assistance). Their monthly contributions will be deposited into an interest-bearing savings account and returned to them when they leave housing. This strategy encourages money management and helps to prepare youth for independent living when they exit services. It also provides a source of funds for security deposits and other move-in costs when they transition out of the program. The Housing Specialist will establish a monthly rental payment schedule and collect rent on the 1st and 15th of each month. The Housing Specialist will work closely with each young person to establish a written rental payment plan to address any issues around late payment or non-payment of rent and reinforce the program's expectations around timely payment.

This rent payment model is an effective means of imitating real life situations and helps to prepare youth for greater self-sufficiency. It provides an opportunity to build life skills while also having access to support and strengths-based remediation planning provided from a harm reduction perspective when necessary.

3) Housing Support Services: Maintenance of Units
Prior to leasing a scattered site unit, a Larkin Street staff member conducts a thorough inspection of each unit, its amenities, and its location to ensure that it meets health and building codes, that it is safe and secure, and that it is conveniently located with respect to public transportation and essential neighborhood resources.

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Peer counselors or case managers make regular (at least twice monthly; usually weekly) home visits to all residents (scattered site and Aarti) to ensure the unit is maintained properly by the occupant and the property owner (if applicable). Larkin Street will rely on the property manager to complete all needed maintenance and repairs on the units, and we will advocate on behalf of the youth if the property owner is slow to respond to reasonable requests. Larkin Street will be liable for property damage that tenants cannot resolve themselves, and employs a full-time facilities manager to address such issues as they arise.

4) Housing Support Services: Behavior Management of TAY to maintain housing stability

Once housed, program staff will work closely with the youth and their service providers to address behavior issues that would jeopardize the youth's housing, including failure to abide by the program agreements or disruptive behavior. Efforts to avoid the loss of housing will include interfacing with the property owner and the youth around repeat incidents, implementing correction plans, and coordinating with the FSP (if applicable) to address factors that may be contributing to a resident's behavior.

All TAY are expected to abide by the rules of the house, to be respectful of their peers and of Larkin staff and to work closely with Larkin's case managers and peer counselors. The program keeps official and updated resident rules and consequences, grievance procedures, and other required policies in accessible locations, and reviews them with residents at entry into the program and periodically thereafter to ensure that all clients are aware of their rights and responsibilities.

Correction plans that result from rule violations consist of a 30-day contract with specific, strengths-based goals designed with the youth's input to remedy the situation. Case managers meet frequently with youth on 30-day corrective plans in order to give them the intensive support they need to stabilize and regain compliance with program expectations.

Should Larkin Street's interventions fail to resolve the issue, however, Larkin Street will first encourage a young person to relinquish their unit. Youth will be given a 30-day notice and Larkin Street will attempt to secure alternative housing to prevent the young person from becoming homeless. Alternative housing may include inpatient substance abuse or mental health programs or supported living.

Weekly inter-departmental meetings and case conferences ensure continuity of care across programs and enable staff to leverage existing resources and identify new opportunities for each youth. Case management supervision is housed under the Clinical Services division of the agency, headed by the Clinical Director, in order to ensure consistency with organization wide clinical practices.

Larkin continually assesses the youth enrolled in the program in order to ensure that they are placed in the housing that best meets each client's individual needs. Other housing across our continuum of care will be made available as needed.

5) Housing Support Services: Staff Coverage and Emergency Response
Case Managers and other program staff will be on-site at the Aarti Hotel during regular business hours
and during planned activities or appointments outside of business hours. They will also travel to the
scattered sites to visit and work with the TAY there. They will visit with clients regularly as needed to
address housing and behavioral issues, to check-in on their status and progress, and to work on the goals
of their treatment plan.

Larkin Street has an established response protocol to ensure that we are immediately available for emergencies, 24 hours a day 7 days a week. A manager- or director-level staff person is designated as the on-call contact for each program during evening and weekend hours when the Housing Specialist is unavailable to respond to issues that arise. The protocol ensures that a decision-maker is available 24 hours a day, seven days a week to address such emergency calls from building owners and tenants. Front desk staff is on site 24 hours a day 7 days a week to monitor who goes in and out of the facility and to provide security and emergency response as needed.

A. Program outreach, recruitment, promotion, and advertisement.

Referral and Placement for all clients of this program, including all available housing slots at the Aarti and scattered sites, will observe the following process:

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- 1. The SFDPH Placement Office is the sole referral source for placement of clients in the Routz TAY Housing and Supportive Services Program.
 - a. SFDPH Placement maintains a referral pool of clients awaiting referral
 - b. Larkin Street may request their clients be placed into the referral pool following the process established by the SFDPH Placement Office for acceptance in the referral pool.
- 2. SFDPH Placement performs a document review for eligibility as a means to pre-screen all clients awaiting referral for placement. Upon review, SFDPH Placement will either:
 - a. Notify Routz Program staff, through email and/or FAX, that the applicant is authorized for placement in the Routz program; or,
 - b. Arrange a face-to-face interview with the applicant to determine appropriate placement, and refer applicant to the Routz program; or,
 - c. Refer applicant to another housing program.
- 3. Upon receipt of authorization of SFDPH Placement Office for placement in the Routz TAY Housing and Supportive Services Program, Larkin Street program staff will:
 - a. Screen the applicant onsite with expectation of placement in the program,
 - b. Communicate immediately with SFDPH Placement if any circumstance arises that inhibits placement
 - i. Larkin Street will provide full access to client charts and service utilization at Utilization Management meetings.
 - Larkin Street will ensure that Routz Case Managers are fully trained in DPH charting standards.
- 4. Ongoing monitoring of placement at the Aarti and scattered sites will take place at regularly scheduled Utilization Management meetings.
 - a. The following Larkin Street staff participate in the meetings:
 - i. Routz Assitant Program Manager
 - ii. Routz Associate Director
 - iii. Routz Case Managers (as needed)
 - b. Upcoming vacancies will be discussed and planned
 - c. Discharge from the program will be discussed and planned

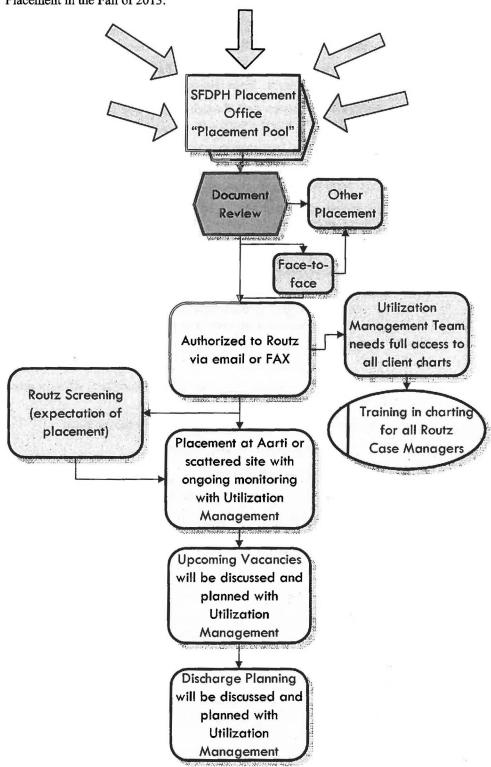
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5. The following diagram briefly illustrates the Routz TAY Housing and Supportive Services placement process as outlined above, and as discussed with Larkin Street program staff and SFDPH Placement in the Fall of 2013:



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Although all clients of the Routz TAY Housing and Supportive Services Program are homeless or at-risk youth who have mental health challenges, some processes and services differ for the two categories of youth the program serves:

- 1) The Housing Service Partnership (HSP) designation describes TAY (ages 18-25) in the Full Service Partnerships (FSPs) at Family Service Agency (FSA) and the CBHS TAY Program who have serious mental illness and are homeless, marginally housed or at imminent risk of homelessness. Referrals to the Housing Service Partnership (HSP) are made directly from FSP program staff to the SFDPH Placement Office. Larkin Street works collaboratively and closely with the designated Full-Service Partnership providers, Family Service Agency and CBHS TAY Services, on an ongoing basis. For HSP referrals, Larkin Street involves the appropriate members of the FSP treatment team in the assessment and interview process. HSP housing is authorized for up to 2 years. Special approval of HSP housing for more than 2 years will be granted as needed, as determined on a case-by-case basis with the Utilization Management team.
- 2) The Transitional Residential Housing (TRH) designation refers to TAY (ages 18-25) who have serious mental illness and are homeless, marginally housed or at imminent risk of homelessness. Referrals to the Transitional Residential Housing (TRH) come from the SFDPH Placement Office. Transitional Residential Housing is authorized for up to 2 years.

Once a youth is referred for housing, he or she meets with the Routz Program Manager to conduct an initial interview and assessment to discuss program expectations. The youth identify components of their current support systems, make commitments to continue their engagement in the services they are receiving, identify the situations that serve as triggers for them, and create safety plans to ensure a successful transition into the program. Then the youth meets with an Education and Employment Specialist for an educational and vocational assessment. Next, the young person sees a Case Manager to discuss goals and prepare a consumer-driven preliminary case plan. After this, the Program Manager, Case Manager, and Education Specialist Liaison will present the client to the Program Director.

Regardless of the referral source, placement decisions are based on the young person's demonstrated motivation to meet the program's expectations for accessing supportive services and establishing and working toward reasonable goals around treatment, recovery, education, and employment. Factors that would indicate that a client is not an appropriate fit for housing would include a lack of motivation to work toward goals, or if the extent of their treatment needs suggests that supportive housing would not be a safe option. Youth who are not eligible for the Routz TAY Housing and Supportive Services program are guided toward other more appropriate services to meet their needs.

The Routz Program Manager and Program Director are primarily responsible for coordinating this process with the SFDPH Placement Office. They are supported by the Program Manager for Client Care whenever possible to ensure consistency and compliance throughout the Authorization Process and accompanying documentation requirements.

Once a young person is accepted into the program the Manager establishes a move-in date. If no units are available the young person is placed on a waiting list with access to Larkin Street's youth shelter programs to ensure that they are safely housed in the interim. Once a move-in date is established, the Manager schedules the youth to meet with the property manager to view the unit, review all applicable house rules, sign the program agreement, and receive their keys.

B. Consumer participation/engagement in the development, implementation and evaluation of programs
Larkin Street places a high value on client participation in our mission. Our Youth Advisory Council provides
a formal forum for reviewing and resolving community concerns, evaluating programmatic issues, and
creating positive change at Larkin Street. Members receive leadership training and serve as mentors and role
models to their peers. Youth speakers participate in graduation ceremonies and other celebrations to further
support positive role modeling and acknowledge their achievements.

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Youth are extensively involved in the design, development and implementation of Larkin Street program initiatives and help to conduct assessment of community need, to review trends, and to design and plan for new Larkin Street programs and facilities. Youth are equal partners in the process of program evaluation and in assuring that Larkin Street's high standard of relevant and effective services is maintained. They participate in formal external evaluations and provide continuous input to the agency through weekly community meetings, quarterly consumer satisfaction surveys, and occasional targeted focus groups.

C. Staff attitudes, knowledge and skills to understand, communicate with, and effectively serve people across cultures.

Larkin Street maintains a broad emphasis on cultural competency throughout the organization. The staff is racially and culturally diverse, represents various sexual orientations, and receives ongoing training in issues related diversity and cultural competency to ensure effective and responsive service delivery. Positive, youth-focused messages are reinforced continuously through the physical environment, the composition of the staff, services (e.g., we strive to have at least one Spanish-speaking staff member at every program site) and referrals to culturally appropriate services off-site in order to strengthen self-esteem and identity.

Cultural competency is bolstered through our extensive staff training program. We provide extensive opportunities for our staff to access high-quality, relevant trainings internally as well as providing each staff member with training allowance to access external training resources. The internal staff training program is overseen by the Human Resources Department, as well as the Clinical Services Division. All direct service staff are required to take Larkin Street's Core Curriculum, which includes trainings on Creating a Welcoming Environment, Cultural Humility, and other clinical topics with cultural components. Supplemental trainings are also available to all staff, including sessions on Racism, Gangs, Relationship and Rapport Building, and other topics which include cultural components.

Our cultural competency is enhanced by our use of peer staff. Larkin Street has a long history of recruiting, training, and supporting peer staff in our programs. Peer staff act as advocates and counselors, as well as providing valuable guidance from the consumer point of view for other program staff. They may share life experiences similar to our client population in terms of experiences of homelessness, being in the TAY age range, being behavioral health consumers, and/or experiencing recovery from substance abuse. Peer staff receives extensive training on topics addressing service provision, professionalism, boundaries, and self care. All staff at Larkin Street receives at least an hour weekly of individual and group supervision and peers receive daily support from their supervisors. Larkin Street considers the expertise that peers bring to our work as critical to optimally serving our client population.

D. Cross-program collaboration to increase participants' opportunities for jobs, education, housing, etc. All Larkin Street clients are a part of the organization's integrated continuum of care, which includes linkages to employment and education services, housing, etc. Larkin Street's HIRE Up Education and Employment programming provides youth, including those engaged in Routz, with a range of opportunities including job readiness classes, paid internships, subsidized employment through YouthForce, GED and high school completion courses and tutoring, post-secondary counseling, linkages to services for learning disabled or other special needs clients, technology and other vocational training, and other individualized services.

E. Program's exit criteria and process

TAY can remain in housing up to 2 years, or until they age-out at age 25, whichever comes first. All clients have a 2-year limit; however, HSP clients will be granted extensions as needed. Move-out determinations and transition planning is done in close coordination between Larkin Street and the FSPs/CBHS program staff and must align with the clients' clinical needs, case plan and housing goals. Transition planning will occur when the TAY exhibits readiness to transition into a more independent housing situation or when his/her needs are not being met by the program. Transitional planning occurs well in advance of their 25th birthday.

Staff provides aftercare services for up to a year after youth leave services. Aftercare may include follow-up calls and visits from staff as appropriate in order to ensure a successful alternative living placement. The

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youth's case is closed only if the youth has stabilized off the streets, as determined by 30-day, 90-day, 6-month, and 1-year follow-ups.

<u>Vacancy Alerts:</u> When a TAY exits, a vacancy alert is reported to SFDPH Placement within 48hours. The average turnaround time for a new client to move-in is one week, and the maximum turnaround time is no more than 2 weeks.

<u>Temporary Vacancies</u>: As outlined in official CBHS policy, temporary vacancies are allowed in appropriate circumstances in 30, 60, or 90 day increments with approval of the System of Care Program Manager or designee. If a unit remains vacant on the 91st day, it must be vacated for a new referral. Clients are not charged fees during approved temporary vacancies.

Clients may receive permission to vacate their unit for a maximum of 90 days for the following reasons:

- Residential treatment for substance abuse and/or mental health issues, or
- Incarceration, or
- Hospitalization, or
- Family emergency.

A temporary vacancy cannot exceed 90 days, with the exception of extenuating circumstances and Utilization Management Team. Since the housing slots are paid for by DPH-CBHS, clients will not be charged for holding slots during the temporary vacancy.

F. Program staffing

Director of Specialty Residential Services: This position provides senior leadership of the day-to-day operations of the entire program (both modalities), including direct supervision of the MHSA Manager, contract oversight and reporting, and coordination with CBHS.

Manager of Specialty Community Based Housing: The primary role of the program manager is to provide oversight of community-based housing and supportive peer-based and wellness services targeting transitional aged homeless youth. This oversight includes all program activities, under both modalities. The Manager of Mental Health and Substance Abuse Services establishes and maintains relationships with property management and community behavioral healthcare providers and coordinates with CBHS' TAY Access Team. The Manager provides clinical leadership agency-wide and supervision to direct service staff. The Manager also provides on-site assessment and therapy to clients in LSYS's drop-in centers. This position is a member of the agency Management Team.

Case Manager: The case managers' responsibilities will include identifying TAY in need of peer-based support, including TAY who are on the streets, transitioning from emergency shelter programs, from CBHS system of care, and aging out of the children's system-of-care. Additional job requirements will include intake and assessment; case planning and contracting; individual and group counseling; resource brokerage and referral, case coordination and advocacy; financial assistance services; follow-up and aftercare; and record keeping. The case managers under the Housing and Supportive Services modality are based at the Aarti in order to be closer to the majority of the youth housed through the program.

Director of Specialty Residential Housing: This position provides senior leadership of the day-to-day operations of the entire program (both modalities), including direct supervision of the program manager, contract oversight, and coordination with CBHS.

Director of Facilities and Housing: The primary responsibility of the Director of Facilities is to oversee facility maintenance for sites across the Larkin Street continuum, including the Aarti and other locations where services are provided under this contract. He also has a direct service role, participating in the agency's Restorative Justice planning and implementation team, and involving clients in rectifying property damage and developing life skills related to apartment maintenance and upkeep. The Facilities Director also participates in meetings and coordination efforts with the Aarti property management company (TNDC) and/or landlords of other Routz scattered sites, assisting with mediation efforts when necessary.

Receptionist: Under the supervision of the Program Manager the Receptionist is responsible for screening visitors, and minor activities at the front desk of the Aarti building/Routz Program; Maintaining the safety of

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the site as well as providing ongoing administrative support and communication to the program manager and building manager; Monitoring the entrance of clients and staff, answering the facility telephone, maintaining administration/reception desk and files, and performing data entry.

Education Specialist Liaison: The primary role of the Education Liaison Specialist is to provide educational instruction, career development, counseling and planning to youth living in the Routz program. The Education Liaison Specialist provides youth with daily group and individual instruction in GED preparation, literacy and numeracy. The Education Liaison Specialist will coordinate with Larkin Street's HIRE Up Education and Employment staff to facilitate youth's transition from GED or High School Diploma services to postsecondary education.

Program Manager of Client Services: The role of the Manager of Client Services is to ensure consistent quality care across all Larkin Street programs, assist program staff and other managers in establishing program guidelines in accordance with best practices and in compliance with licensing/funding regulations, ensuring consistency and completeness of client case files, and consult on programmatic issues, concerns, and changes. For Routz TAY Housing and Supportive Services, the Manager of Client Services will help coordinate compliance with TAY Placement Team requirements, such as eligibility documentation, case file maintenance and review, and Utilization team meetings.

G. Systems Transformation Methodology

MHSA Vision Component: The concepts of recovery and resilience are widely understood and evident in programs and service delivery.

Larkin Street's Response: In all of our programs, including MHSA-funded activities, Larkin Street Youth Services uses a Positive Youth Development framework that builds on the strengths and resiliencies of youth to assist them in working toward recovery and ultimate independence. Staff is trained in wellness and recovery principles, and our program tools (e.g. assessments and service-planning documents) were designed based on research-based recovery-centered best practices.

MHSA Vision Component: Consumers are supported to determine and achieve their own goals and lead fulfilling and productive lives.

Larkin Street's Response: The youth consumers in our MHSA-funded programming are included in every part of their case planning and treatment process, so that they are able to determine their own goals and achieve incremental steps toward ultimate productivity and success. Youth work in our program based on their own specific strengths and interests.

MHSA Vision Component: Efforts to improve service coordination result in a seamless experience for clients.

Larkin Street's Response: Larkin Street's MHSA-funded programming is provided as part of a larger coordinated continuum of care including housing, supportive services, peer-based services, counseling and case management, mental health consultation, medical care, vocational and educational services, and enrichment activities. The intended result is a seamless experience for our youth clients, in which they can access all needed services from multiple points of entry according to their own individual capacities, situations, and needs.

7. Objectives and Measurements

A. BHS Standard Objectives

The BHS Performance Objectives are not applicable to this program.

B. Individualized Program Objectives

MHSA GOAL: Increased access to and utilization of behavioral health services (clinical, cultural-based healing, peer-led and other recovery oriented services).

Individualized Performance PROCESS Objective 1: By the end of the contract year, each youth in housing will receive an average of 3 case management sessions per month
 Evaluation: ...as measured by individual service records entered directly into Larkin Street's ETO (Efforts To Outcomes) cloud-based client management system by staff providing the service.

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 Individualized Performance PROCESS Objective 2: 100% of youth in housing will receive individual or group mental health services.

Evaluation: as measured by individual service records and group service records entered directly into Larkin Street's ETO (Efforts to Outcomes) cloud-based client management system by staff providing the service.

MHSA GOAL: Increased success in accessing and/or maintaining stable housing.

- 3) Individualized Performance OUTCOME Objective 1: By the end of the contract year, 75% of youth will be retained in housing or exit to other stable housing. Stable housing refers to either independent housing, permanent supportive housing or other subsidized situations, or transfer to another appropriate transitional living program or facility according to client's service needs/plan.

 Evaluation: ...as documented by program enrollment status in ETO, as well as in client case files and biopsychosocial assessments entered directly into ETO by the staff member administering the assessment at time of client exit.
- 4) Individualized Performance PROCESS Objective 3: 100% of clients in the Routz TAY Housing & Supportive Services Program will be approved for placement by the SFDPH Placement Office prior to residing in any units funded under this contract.
 Evaluation: Proof of approval by SFDPH will be maintained in clients' paper and/or electronic file.
- 5) Individualized Performance PROCESS Objective 4: Routz TAY Housing & Supportive Services staff will participate in 100% of Utilization Management meetings scheduled with the SFDPH Placement Office (weekly, bi-weekly, monthly, as agreed) to discuss applicants for vacancies, current placement, planned and unplanned exits, discharge planning, and/or any other issues regarding client entry, continuance, or exit from the housing program.
 Evaluation: Attendance sheets/rosters created and maintained by Larkin Street staff of each Utilization Management meeting.
- 6) Individualized Performance PROCESS Objective 5: 100% of clients in the Routz TAY Housing & Supportive Services Program will have an exit plan. The Exit Plan should be developed with the client within 30 days in residence and updated every six months and as needed.
 Evaluation: The Exit Plan will be maintained in client's physical case file.
- 7) Individualized Performance PROCESS Objective 6: Larkin Street will maintain case files on 100% of youth receiving services, in compliance with agency policy and with requirements set by the SFDPH Utilization Management Team, and standard DPH charting requirements.
 Evaluation: Individual Service Records, including utilization, referrals, individual service plans, assessments and reassessments, accomplishment of short, medium, and long-term goals, program enrollment status, etc. are mainly tracked through Larkin Street's ETO (Efforts to Outcomes) client management database. ETO is a cloud-based system which functions as a sort of electronic service record, providing real-time tracking of each client's activities and outcomes. Physical case files are also kept for case managed clients.

MHSA GOAL: Increased ability to manage symptoms and/or achieve desired quality-of-life goals as set by program participants.

8) Individualized Performance OUTCOME Objective 2: By the end of the contract year, 75% of youth in housing for at least one year will show an improvement in their ability to manage mental health issues. Evaluation: ... as measured by the bio-psychosocial assessment completed by service staff directly in ETO within 30 days of client entry into program and one year later (and/or at client exit).

Client Satisfaction

9) Individualized Performance OUTCOME Objective 3: By the end of the contract year, a minimum of 75% of youth of the Routz TAY Housing & Supportive Services program responding to client satisfaction surveys offered at least semi-annually will rate their overall satisfaction as a 1 or a 2 (with 1).

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being "completely satisfied") on a 4-point scale.

Evaluation: Surveys are available to all program participants at least quarterly, and submitted with an indication of which program participant is engaged in. Starting in 2013-14, program staff will make surveys available at more Routz gatherings and special events, hand distributing them when possible and encouraging young people to complete them. Surveys are submitted by staff to the Research and Evaluation Department for analysis and reporting.

8. Continuous Quality Assurance and Improvement

By monitoring and evaluating the comprehensive services Larkin Street provides to homeless and runaway youth, the agency ensures high quality service delivery that is innovative, responsive, and cost-effective. Larkin Street maintains case files on each youth receiving services. Records are kept on the number of times each youth visits each Larkin Street site and the services received. All data is entered into a computerized database and outcomes of all clients and their demographic representation are calculated. The Data Reporting Manager compiles program statistics including number of youth served, fulfilling treatment plans, and leaving street life. Larkin Street engages in ongoing qualitative and quantitative program evaluations. Staff from each program attends a weekly Team Meeting to discuss client cases and determine how the program is meeting clients' needs. Annually, there is a quantitative evaluation of services through a review of units of service provided. All evaluations are used in assessing progress towards goals, developing new services, planning programs, determining staffing patterns, and creating staff trainings.

Specific contract performance objectives are tracked monthly on a grants dashboard produced by the R&E Department and distributed to each program manager, the Division Directors, and the Director of Public Funding. Any shortfalls or repeated deviations from the expected objectives and outcomes are discussed by all relevant staff in order to identify and address challenges, or make changes to service delivery to improve performance. Program managers also provide a monthly narrative report on the trends, successes, and challenges in their programs. These monthly reports are used by senior staff to stay apprised of program developments and needs, and the Director of Public Funding draws from this information in order to report on performance and provide context on each program's progress toward its contracted goals.

Larkin Street agrees to abide by the most current policies and requirements established by the Health Commission, CBHS, and the funding source for this contract regarding Client Satisfaction and Cultural Competency:

<u>Cultural Competency:</u> Larkin Street complies with all DPH cultural competency requirements, including the submission of staff demographic information and the annual cultural competency report as required. We maintain a broad emphasis on cultural competency throughout the organization. The staff is racially and culturally diverse, represents various sexual orientations, and receives ongoing training in issues related diversity and cultural competency to ensure effective and responsive service delivery. Positive, youth-focused messages are reinforced continuously through the physical environment, the composition of the staff, services (e.g., we strive to have at least one Spanish-speaking staff member at every program site) and referrals to culturally appropriate services offsite in order to strengthen self-esteem and identity.

<u>Client Satisfaction:</u> Larkin Street is committed to involving youth in program evaluation and incorporating their feedback into future program design. Youth are asked on a regular basis to comment on the effectiveness of individual and group interventions and make suggestions for improvement. Additionally, all youth are given the opportunity to complete an anonymous client satisfaction survey. Survey data is reviewed by each program and agency wide on a regular basis to inform the planning and implantation of services.

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Contractor: Larkin Street Youth Services Program: Routz TAY Wellness Program

City Fiscal Year: 2015-16

CMS#: 6997

1. Program Name: Routz TAY Wellness Services

501 Ellis Street

San Francisco, CA 94109

(415) 673-0911 (415) 749-3838 FAX

Program Code:

38IXIN

Mode/SFC:

45/20-29

2. Nature of Document

☐ New

Renewal

X Modification

3. Goal Statement

The goal of Routz TAY Wellness Services is to provide homeless, marginally-housed and at-risk transitional age youth (ages 16-24) who have serious emotional disorders or serious mental illness with drop-in programming that promotes peer support, youth empowerment, and youth engagement. Activities will promote pro-social peer interaction, youth development (including educational, training and job options), resiliency and recovery. The vision is to tap into the innate resilience of youth and use the power of community connection to build the support homeless young people need to transform their lives for the better.

4. Target Population

Routz TAY Wellness Services targets transition aged youth (ages 16 through 24) in San Francisco who have serious emotional disorders or serious mental illness and are in need of daily, structured, drop-in activities. Services are provided primarily in the 94109 zip code, with some activities to take place in the 94117 zip code. The primary, secondary, and tertiary target populations for this project are:

- Age: Transition Aged Youth ages 16 through 24
- Homeless Status: homeless, living on the streets or in shelters, marginally housed, or at imminent risk of homelessness
- Other target factors: youth who are currently not served or underserved, youth leaving foster care, youth exposed to violence, immigrants, youth who are aging out of the child and youth mental health, child welfare and/or juvenile justice systems, youth at risk of involuntary hospitalization or institutionalization, youth who are African American, Latino/a, Asian/Pacific Islander, and youth who identify as LGBT, youth with co-occurring substance abuse disorder.

5. Modality(ies)/Interventions

The primary modality will be Mode 45, Service Function Code 20-29 (recovery supports and drop-in peer-based services with a mental health focus). Routz TAY Wellness Services will provide 300 unduplicated youth with Serious Emotional Disorders (SED) and Serious Mental Illness (SMI) with daily milieu activities that promote peer support, youth empowerment, and youth engagement. Milieu activities will include group and individual counseling in mental health and substance abuse issues and wellness promotion activities. Services will also include, or provide linkages to, activities to promote life skills, vocational and educational skills, and artistic enrichment. One Unit of Service (UOS) is equal to one hour of Larkin Street staff time.

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Appendix A-1b

Contract Term: 7/1/15-6/30/16

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Contractor: Larkin Street Youth Services **Program:** Routz TAY Wellness Program

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Units of Service (UOS) Description	Units of Service (hours)	Undupli- cated Clients (UDC)
MHSA Modality: Group Therapeutic Services		
MHSA Modality: Wellness Promotion		
MHSA Modality: Individual Therapeutic Services		
Peer Counselors lead therapeutic groups (approx. 7 hours per week) and wellness		
promotion activities (approx. 5 hours per wk) for youth in Routz TAY Wellness Services.		
They also provide individual counseling (approx. 20 hrs per wk per counselor) to youth in		
Routz TAY Wellness Services.		
Peer Counselor	100	
2.00 FTE x 40 hrs/wk x 48 wks x 80% level of effort = 3072 hours	3072	300
MHSA Modality: Individual Therapeutic Services		
(Clinical Case Management)		
Case Manager		
0.90 FTE x 40 hrs/wk x 48 wks x 80% level of effort = 1382 hours	1382	100
MHSA Modality: Workforce Development		
Workforce Development Services are provided to Routz TAY Wellness Services youth by		(4) 新社教的
a Peer Vocational Specialist and/or the YouthForce Counselor (YouthForce is a low-		
threshold subsidized transitional employment program for youth)		
Education Specialist Liaison		
.34 FTE x 40 hrs/wk x 48 wks x 80% level of effort = 522 hours		
	522	150
Peer Vocational Specialist		
.94 FTE x 40 hrs/wk x 48 wks x 80% level of effort = 1444 hours		1.344
	1444	
YouthForce Counselor	NOWARY OF AN AREA	
.26 FTE x 40 hrs/wk x 48 wks x 80% level of effort = 399 hours		
	399	
Total UOS Delivered	6819	
Total UDC Served		300

6. Methodology

Larkin Street will submit a monthly encounter log to the CBHS Program Manager with the number of unduplicated clients, number of group hours offered each week, wellness activities, individual counseling, and Units of Service (UOS) broken out for groups, wellness activities, individual counseling, and case management.

A. Program outreach, recruitment, promotion, and advertisement.

Larkin Street will coordinate with Community Behavioral Health Services to identify eligible TAY for services. Homeless youth will be recruited through a variety of strategies in accordance with the "any door is the right door" approach to accessing services. The program manager outreaches to community agencies, including agencies within the CBHS system of care, through meetings with program managers, presentations to staff and distribution of flyers and other promotional materials to educate and inform providers about services available.

Daily peer-based services are provided at the Aarti Hotel and at three point-of-entry sites (our Larkin Street Drop-In Center; Haight Street Referral Center; Lark Inn emergency shelter for TAY) through 0.90 FTE case manager, 2.0 FTE peer counselors, 0.94 FTE Peer Vocational Specialist, and 0.26 FTE YouthForce Counselor. Also included are 1 to 5 hours each week of clinical mental health services to TAY through our consulting psychiatrist. The Peer Counselors have office space at the Aarti, and the Case Manager splits her time between the Aarti and the Lark Inn Shelter for youth.

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The use of peer counselors at Larkin Street's three point-of-entry drop-in sites is critical to the engagement process with this extremely hard-to-reach and isolated population of homeless TAY. The Drop-In Center, Lark-Inn and Haight Street Referral Center are, for many youth, their first introduction to Larkin Street.

Peer-based services at the point of entry are critical to establishing relationships with youth based on trust and safety. Because of past and ongoing trauma in their lives, and the common histories of abuse and neglect, these youth are typically extremely distrustful of adults. Peer counselors create a welcoming, youth-friendly atmosphere that facilitates initial engagement into services and, over time, access to deeper levels of care. Peer-based support is a proven method of reaching isolated populations, promoting prosocial behaviors, and creating positive role models for the youth we serve.

Peer Staff also model the transformational power of engagement in Larkin services, and of building community in which Larkin clients support each other in their efforts to grow and improve their lives.

- B. Participant engagement in the development, implementation and evaluation of programs.

 Youth are equal partners in our work. They engage with Larkin Street's staff and leadership to help identify service gaps, develop programs, and ensure that we are always responsive to their evolving needs. We make sure that youth find valuable, meaningful opportunities within our continuum to make a difference. Key youth-led programs at Larkin Street include:
 - Youth Advisory Board: The Youth Advisory Board is a group of youth leaders appointed by their peers to "better the lives of their fellow clients, the wellbeing of homeless youth throughout San Francisco, and to challenge the current social views on homeless youth." According to their mission statement, the Youth Advisory Board's goal is to provide transparency and youth involvement in Larkin Street's administrative policies, to help overcome common myths surrounding marginally housed and homeless youth, and to assist other youth in identifying and overcoming barriers to exit street life.
 - Fruity Wednesdays: This weekly community-building night for homeless LGBTQ youth at Larkin Street's Drop-In Center was entirely conceived, planned, and launched by youth. Each Wednesday evening, the Drop-In Center offers a safe, affirming and 100% youth-led opportunity for LGBTQ youth to support each other, access basic needs including food and showers, and participate in programming including HIV prevention, art therapy, and counseling. Fruity Wednesdays is included in the Routz TAY Wellness Services offerings as a Wellness Promotion activity.

C. Staff attitudes, knowledge and skills to understand, communicate with, and effectively serve people across cultures.

Larkin Street maintains a broad emphasis on cultural competency throughout the organization. The staff is racially and culturally diverse, represents various sexual orientations, and receives ongoing training in issues related diversity and cultural competency to ensure effective and responsive service delivery. Positive, youth-focused messages are reinforced continuously through the physical environment, the composition of the staff, services (e.g., we strive to have at least one Spanish-speaking staff member at every program site) and referrals to culturally appropriate services off-site in order to strengthen self-esteem and identity.

Cultural competency is bolstered through our extensive staff training program. We provide extensive opportunities for our staff to access high-quality, relevant trainings internally as well as providing each staff member with training allowance to access external training resources. The internal staff training program is overseen by the Human Resources Department, as well as the Clinical Services Division. All direct service staff are required to take Larkin Street's Core Curriculum, which includes trainings on Creating a Welcoming Environment, Cultural Humility, and other clinical topics with cultural components. Supplemental trainings are also available to all staff, including sessions on Racism, Gangs, Relationship and Rapport Building, and other topics which include cultural components.

Our cultural competency is enhanced by our use of peer staff. Larkin Street has a long history of recruiting, training, and supporting peer staff in our programs. Peer staff is an especially crucial element of Routz TAY Wellness Services, which was previously known as "Peer Based Services." Peer staff act as advocates and counselors, as well as providing valuable guidance from the consumer point of view for

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other program staff. They may share life experiences similar to our client population in terms of experiences of homelessness, being in the TAY age range, being behavioral health consumers, and/or experiencing recovery from substance abuse. Peer staff receives extensive training on topics addressing service provision, professionalism, boundaries, and self care. All staff at Larkin Street receives at least an hour weekly of individual and group supervision and peers receive daily support from their supervisors. Larkin Street considers the expertise that peers bring to our work as critical to optimally serving our client population.

D. Program collaboration with different programs and/or systems to increase participants' opportunities for jobs, education, housing, etc.

All Larkin Street clients are a part of the organization's integrated continuum of care, which includes linkages to employment and education services, housing, etc. Routz TAY Wellness Services overlaps with the MHSA-funded Routz TAY Housing and Supportive Services Program, which provides transitional housing and supportive services to the same population of TAY with mental health challenges. Routz TAY Wellness Services clients also have access to our other transitional housing programs, shelters, and drop in centers. Larkin Street's HIRE Up Education and Employment programming provides youth, including those engaged in Routz, with a range of opportunities including job readiness classes, paid internships, subsidized employment through YouthForce, GED and high school completion courses and tutoring, post-secondary counseling, linkages to services for learning disabled or other special needs clients, technology and other vocational training, and other individualized services.

E. Describe the program's exit criteria and process, e.g. successful completion.

Staff provides aftercare services for up to a year after youth leave services. Aftercare may include follow-up calls and visits from staff as appropriate in order to ensure a successful family reunification, foster home, or alternative living placement. The youth's case is closed only if the youth has stabilized off the streets, as determined by 30-day, 90-day, 6-month, and 1-year follow-ups.

F. Program staff

Associate Director: This position provides senior leadership of the day-to-day operations of the entire program (both modalities), including direct supervision of the Assistant Program Manager, contract oversight and reporting, and coordination with CBHS.

Assistant Program Manager: The primary role of the program manager is to provide oversight of community-based housing and supportive peer-based and wellness services targeting transitional aged homeless youth. This oversight includes all program activities, under both modalities.

Case Manager: The case managers' responsibilities will include identifying TAY in need of peer-based support, including TAY who are on the streets, transitioning from emergency shelter programs, from CBHS system of care, and aging out of the children's system-of-care. Additional job requirements will include intake and assessment; case planning and contracting; individual and group counseling; resource brokerage and referral, case coordination and advocacy; financial assistance services; follow-up and aftercare; and record keeping. The case manager for the Routz Wellness Services modality splits their time between the Aarti and other peer based service sites such as the Lark Inn in order to serve eligible youth throughout the program, whether they are housed through the program or not.

Peer Vocational Specialist: The primary role of the peer vocational specialist is to assist in creating a positive hands-on work environment for transitional-aged youth within the mission and goals of Larkin Street Youth Services. The peer vocational specialist's chief responsibility is to model ideals of professionalism while providing positive reinforcement as well as constructive criticism to the program trainees.

YouthForce Counselor: The YouthForce Counselor will develop employment opportunities for youth, provide on-the-job training and supervision, and work closely with the Peer Vocational Specialist in a collaborative effort to help 16-24 year olds prepare for the pursuit of employment. YouthForce is a low-threshold subsidized employment program in which youth can gain immediate income and build job readiness skills through participation in neighborhood beautification and clean-up projects.

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Peer Counselors: These positions will provide individual peer counseling on issues of drug and alcohol use/abuse; attend Substance Abuse Specialists and ACT (Assertive Community Treatment) team meetings; provide information and referrals to participants, including information regarding Larkin Street's continuum of services, such as shelter, drop-in, education, counseling, HIV and medical care; develop and evaluate groups as needed; be present at program service sites; perform program service related duties; record keeping and weekly statistical reporting on groups.

Education Specialist Liaison: The primary role of the Education Liaison Specialist is to provide educational instruction, career development, counseling and planning to youth living in the Routz program. The Education Liaison Specialist provides youth with daily group and individual instruction in GED preparation, literacy and numeracy. The Education Liaison Specialist will coordinate with Larkin Street's HIRE Up Education and Employment staff to facilitate youth's transition from GED or High School Diploma services to postsecondary education.

Program Manager of Client Services: The role of the Manager of Client Services is to ensure consistent quality care and CQI across all Larkin Street programs, assist program staff and other managers in establishing program guidelines in accordance with best practices and in compliance with licensing/funding regulations, ensuring consistency and completeness of client case files, and consult on programmatic issues, concerns, and changes.

G. Systems Transformation Methodology

MHSA Vision Component: The concepts of recovery and resilience are widely understood and evident in programs and service delivery.

Larkin Street's Response: In all of our programs, including MHSA-funded activities, Larkin Street Youth Services uses a Positive Youth Development framework that builds on the strengths and resiliencies of youth to assist them in working toward recovery and ultimate independence. Staff is trained in wellness and recovery principles, and our program tools (e.g. assessments and service-planning documents) were designed based on research-based recovery-centered best practices.

MHSA Vision Component: Consumers are supported to determine and achieve their own goals and lead fulfilling and productive lives.

Larkin Street's Response: The youth consumers in our MHSA-funded programming are included in every part of their case planning and treatment process, so that they are able to determine their own goals and achieve incremental steps toward ultimate productivity and success. Youth work in our program based on their own specific strengths and interests.

MHSA Vision Component: Efforts to improve service coordination result in a seamless experience for clients.

Larkin Street's Response: Larkin Street's MHSA-funded programming is provided as part of a larger coordinated continuum of care including housing, supportive services, peer-based services, counseling and case management, mental health consultation, medical care, vocational and educational services, and enrichment activities. The intended result is a seamless experience for our youth clients, in which they can access all needed services from multiple points of entry according to their own individual capacities, situations, and needs.

7. Objectives and Measurements

All objectives, and descriptions of how objectives will be measured, are contained in the MHSA document entitled MHSA POP Focused Performance Objectives FY15-16.

8. Continuous Quality Assurance and Improvement

By monitoring and evaluating the comprehensive services Larkin Street provides to homeless and runaway youth, the agency ensures high quality service delivery that is innovative, responsive, and cost-effective. Larkin Street maintains case files on each youth receiving services. Records are kept on the number of times each youth visits each Larkin Street site and the services received. All data is entered into a computerized database and outcomes of all clients and their demographic representation are calculated. The Data Reporting Manager compiles program statistics including number of youth served, fulfilling treatment plans, and leaving street life.

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Larkin Street engages in ongoing qualitative and quantitative program evaluations. Staff from each program attends a weekly Team Meeting to discuss client cases and determine how the program is meeting clients' needs. Annually, there is a quantitative evaluation of services through a review of units of service provided. All evaluations are used in assessing progress towards goals, developing new services, planning programs, determining staffing patterns, and creating staff trainings.

Specific contract performance objectives are tracked monthly on a grants dashboard produced by the R&E Department and distributed to each program manager, the Division Directors, and the Director of Public Funding. Any shortfalls or repeated deviations from the expected objectives and outcomes are discussed by all relevant staff in order to identify and address challenges, or make changes to service delivery to improve performance. Program managers also provide a monthly narrative report on the trends, successes, and challenges in their programs. These monthly reports are used by senior staff to stay apprised of program developments and needs, and the Director of Public Funding draws from this information in order to report on performance and provide context on each program's progress toward its contracted goals.

Larkin Street agrees to abide by the most current policies and requirements established by the Health Commission, CBHS, and the funding source for this contract regarding Client Satisfaction and Cultural Competency:

<u>Cultural Competency:</u> Larkin Street complies with all DPH cultural competency requirements, including the submission of staff demographic information and the annual cultural competency report as required. We maintain a broad emphasis on cultural competency throughout the organization. The staff is racially and culturally diverse, represents various sexual orientations, and receives ongoing training in issues related diversity and cultural competency to ensure effective and responsive service delivery. Positive, youth-focused messages are reinforced continuously through the physical environment, the composition of the staff, services (e.g., we strive to have at least one Spanish-speaking staff member at every program site) and referrals to culturally appropriate services off-site in order to strengthen self-esteem and identity.

<u>Client Satisfaction:</u> Larkin Street is committed to involving youth in program evaluation and incorporating their feedback into future program design. Youth are asked on a regular basis to comment on the effectiveness of individual and group interventions and make suggestions for improvement. Additionally, all youth are given the opportunity to complete an anonymous client satisfaction survey. Survey data is reviewed by each program and agency wide on a regular basis to inform the planning and implantation of services.

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Contractor: Larkin Street Youth Services
Program: Homeless Youth Outreach Project

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Appendix A-2 Contract Term: 7/1/15–6/30/16

1. Program Name: Homeless Youth Outreach Project

Haight Street Referral Center

1317 Haight Street

San Francisco, CA 94117

(415) 673-0911 (415) 749-3838 FAX

Program Code:

383821

Modality:

SecPrev-21

2. Nature of Document (check one)

☐ New

Renewal

⊠ Modification

3. Goal Statement

The goal of the Homeless Youth Outreach Project is to reach homeless and runaway youth by conducting comprehensive community and street outreach, as well as providing harm reduction focused, trauma informed group counseling and assessment services to encourage homeless young people to engage more deeply in Larkin Street's continuum of services when they are ready to move beyond the street.

4. Target Population

The Homeless Youth Substance Abuse Project targets runaway and homeless youth ages 12 through 24.

5. Modality(ies)/Interventions

Two modalities are included: Street outreach and services based at our Haight Street Referral Center. The HSRC-based services include assessments, peer-based support groups, opportunities for socializing and community-building, and referrals/linkages to other programming within the Larkin Street continuum of care.

Units of Service (UOS) are defined as:

- One UOS for Street Based Outreach is equal to one (1) hour Larkin Street staff time to
 obtain brief street outreach assessment and/or distribute survival supplies with an
 outreach contact, as recorded in the Larkin Street database (approx. 5.2 contacts/hour);
- One UOS for HSRC Service Hour is equal to one (1) hour Larkin Street staff time performing general intake/assessment at the Haight Street Referral Center

Units of Service (UOS) Description	Units of	Number of	Unduplicated
	Service	Contacts	Clients (UDC)
Street Based Outreach Hour (Outreach Counselor) 1.00 FTE x 40 hrs/wk x 48 wks x 40% level of effort	768	4,000*	8 - 17
HSRC Service Hour (Outreach Counselor) 1.00 FTE x 40 hrs/wk x 48 wks x 40% level of effort	768		525
Total UOS Delivered	1536		
Total UDC Served			750

^{*}Street Outreach contacts are NOT unduplicated, and may include multiple contacts with the same youth. The target number is based on historical data and internally set program goals.

Contractor: Larkin Street Youth Services

Appendix A-2
Program: Homeless Youth Outreach Project

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6. Methodology

A. Program outreach, recruitment, promotion, and advertisement.

Street outreach workers make individual contacts with youth and will conduct informal street-based intervention. Street outreach efforts are currently focused upon the Polk Gulch, Tenderloin, Civic Center, Mission, Castro, and Haight Ashbury neighborhoods, and other neighborhoods are added to this list as need arises. Outreach staff and volunteers provide information, referral, and crisis counseling; distribute HIV prevention supplies, personal hygiene necessities, food vouchers and other incentives to encourage youth to seek services; develop street referral networks; and work with area police, merchants and members of the community to refer youth to services. The Street Outreach staff also participates in outreach events such as Project Homeless Connect, and outreach at other events or gatherings that tend to include homeless youth. Also, Larkin Street's Outreach Program makes approximately 30 presentations or visits to community groups and other social service agencies to promote services and to solicit referrals.

Street Outreach encourages youth to access the Haight Street Referral Center for the site based services; other youth drop into the center on their own based on word of mouth from other youth or community members.

B. Program admission, enrollment and intake criteria

Street outreach workers provide brief assessments and encourage youth to access early intervention services, medical care, shelter, and other programs at local service sites. When a young person accesses Haight Street Referral Center, staff conducts a general intake, either upon their arrival or in the course of an individual counseling session or other service. The intake process records client demographic data and assesses a young person's basic family history, current living situation, service needs, mental health and substance abuse issues, and risk for HIV. Appropriate services and referrals are then provided based upon this and future assessments.

C. Program service delivery model

Street Outreach service delivery is described above in the section on outreach and recruitment. Street-based outreach activities include HIV prevention and education, and health education groups in both English and Spanish. Printed information is available in English and Spanish. Outreach workers distribute HIV prevention supplies and personal hygiene necessities, street "survival kits," and referral cards to link them with onsite services. They inform youth about services available at other agencies as well as within Larkin Street's continuum, such as services at our Medical Clinic, including free TB screenings and comprehensive gynecological care.

Services that are based within our Haight Street Referral Center include support groups, assessments (more detailed than the basic outreach encounter form and obtains each youth's demographic information, name, place of origin, family history, substance abuse history, educational level, the client's short- and long-term goals, and current needs), crisis intervention, referrals and linkages to additional support services (including shelter, housing, case management, mental health care, medical care, and employment and educational services), and community building activities such as outings or social events. The program sponsors formal peer support sessions that has a pre-arranged meeting time and focus which meet weekly to discuss such issues as health, safety, harm reduction,

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abuse, violence and sexual assault. As the direct link to youth on the streets for Larkin Street's support services, outreach provides follow-up to locate particular youth and to remind them of appointments.

The Haight Street Referral Center is open during the afternoons and evenings Monday through Saturdays (specific hours are posted on a weekly basis). The Street Outreach is conducted Monday through Sunday during varying shifts depending on seasonal changes among the homeless youth population.

Individual Service Records, including utilization, referrals, individual service plans, assessments and reassessments, accomplishment of short, medium, and long-term goals, program enrollment status, etc. are mainly tracked through Larkin Street's ETO (Efforts to Outcomes) client management database. ETO is a cloud-based system which functions as a sort of electronic service record, providing real-time tracking of each client's activities and outcomes.

D. Program exit criteria and discharge planning

For youth who have engaged in services beyond street outreach and therefore have general intakes on file and individual case files, staff provide aftercare services for up to a year after youth leave services. Aftercare may include follow-up calls and visits from staff as appropriate in order to ensure a successful family reunification, foster home, or alternative living placement. The youth's case is closed only if the youth has stabilized off the streets, as determined by 30-day, 90-day, 6-month, and 1-year follow-ups.

7. Objectives and Measurements

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Adult & Older Adult Performance Objectives FY15–16

8. Continuous Quality Improvement

By monitoring and evaluating the comprehensive services Larkin Street provides to homeless and runaway youth, the agency ensures high quality service delivery that is innovative, responsive, and cost-effective. Larkin Street maintains case files on each youth receiving services. Records are kept on the number of times each youth visits each Larkin Street site and the services received. All data is entered into a computerized database and outcomes of all clients and their demographic representation are calculated. The Data Reporting Manager compiles program statistics including number of youth served, fulfilling treatment plans, and leaving street life. Larkin Street engages in ongoing qualitative and quantitative program evaluations. Staff from each program attends a weekly Team Meeting to discuss client cases and determine how the program is meeting clients' needs. Annually, there is a quantitative evaluation of services through a review of units of service provided. All evaluations are used in assessing progress towards goals, developing new services, planning programs, determining staffing patterns, and creating staff trainings.

Specific contract performance objectives are tracked monthly on a grants dashboard produced by the R&E Department and distributed to each program manager, the Division Directors, and the Director of Public Funding. Any shortfalls or repeated deviations from the expected objectives and outcomes are discussed by all relevant staff in order to identify and address challenges, or make changes to service delivery to improve performance. Program managers also provide a monthly narrative report on the trends, successes, and challenges in their programs. These monthly reports are used by senior staff to stay apprised of program

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developments and needs, and the Director of Public Funding draws from this information in order to report on performance and provide context on each program's progress toward its contracted goals.

Larkin Street agrees to abide by the most current policies and requirements established by the Health Commission, CBHS, and the funding source for this contract regarding Client Satisfaction and Cultural Competency:

<u>Cultural Competency:</u> Larkin Street complies with all DPH cultural competency requirements, including the submission of staff demographic information and the annual cultural competency report as required. We maintain a broad emphasis on cultural competency throughout the organization. The staff is racially and culturally diverse, represents various sexual orientations, and receives ongoing training in issues related diversity and cultural competency to ensure effective and responsive service delivery. Positive, youth-focused messages are reinforced continuously through the physical environment, the composition of the staff, services (e.g., we strive to have at least one Spanish-speaking staff member at every program site) and referrals to culturally appropriate services off-site in order to strengthen self-esteem and identity.

<u>Client Satisfaction</u>: Larkin Street is committed to involving youth in program evaluation and incorporating their feedback into future program design. Youth are asked on a regular basis to comment on the effectiveness of individual and group interventions and make suggestions for improvement. Additionally, all youth are given the opportunity to complete an anonymous client satisfaction survey. Survey data is reviewed by each program and agency wide on a regular basis to inform the planning and implantation of services.

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Appendix B Calculation of Charges

1. Method of Payment

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 5, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds. "General Fund Appendices" shall mean all those appendices which include General Fund monies.

(1) Fee For Service (Monthly Reimbursement by Certified Units at Budgeted Unit Rates)

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice

(1) Fee For Service Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year 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 be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

- C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."
- D. Upon the effective date of this Agreement, contingent upon prior approval by the CITY'S Department of Public Health of an invoice or claim submitted by Contractor, and of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR

not to exceed twenty-five per cent (25%) of the General Fund and MHSA Fund portion of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of October 1 through March 31 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the CITY all or part of the initial payment for that fiscal year. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Budget Summary

CRDC B-1a, B-1b, and B-2

Appendix B-1a Routz TAY Housing Support Services

Appendix B-1b Routz TAY Wellness Services

Appendix B-2 Homeless Youth Outreach Project

B. Compensation

Compensation shall be made in monthly payments on or before the 30th day after the DIRECTOR, in his or her sole discretion, has approved the invoice submitted by CONTRACTOR. The breakdown of costs and sources of revenue associated with this Agreement appears in Appendix B, Cost Reporting/Data Collection (CR/DC) and Program Budget, attached hereto and incorporated by reference as though fully set forth herein. The maximum dollar obligation of the CITY under the terms of this Agreement shall not exceed Eleven Million Eight Hundred Two Thousand Six Hundred Twenty-Nine Dollars (\$11,802,629) for the period of July 1, 2010 through December 31, 2017.

CONTRACTOR understands that, of this maximum dollar obligation, \$395,708 is included as a contingency amount and is neither to be used in Appendix B, Budget, or available to CONTRACTOR without a modification to this Agreement executed in the same manner as this Agreement or a revision to Appendix B, Budget, which has been approved by the Director of Health. 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 Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by the Controller. CONTRACTOR agrees to fully comply with these laws, regulations, and policies/procedures.

- (1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.
 - (2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, not withstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and a Appendix B, Program Budget and Cost Reporting Data Collection form, as

approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

July 1, 2010 through December 31, 2010	\$700,000	(BPHM07000077)
July 1, 2010 through December 31, 2010	\$46,492	(BPHM05000076)
July 1, 2010 through June 30, 2011	\$560,118	
July 1, 2011 through June 30, 2012	\$1,484,212	
July 1, 2012 through June 30, 2013	\$1,492,993	
July 1, 2013 through June 30, 2014	\$1,516,567	
July 1, 2014 through June 30, 2015	\$1,539,316	
July 1, 2015 through June 30, 2016	\$1,539,316	
July 1, 2016 through June 30, 2017	\$1,706,766	
July 1, 2017 through December 31, 2017	<u>\$821,141</u>	
Sub. Total of July 1, 2010 through December 31, 2017	\$11,406,921	
Contingency Available	<u>\$395,708</u>	
Total of July 1, 2010 through December 31, 2017	\$11,802,629	

- (3) CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.
 - (4) CONTRACTOR further understands that, \$746,492 of the period from July 1, 2010 through December 31, 2010 in the Contract Numbers BPHM07000077(\$700,000) and BPHM05000076 (\$46,492) are included with this Agreement. Upon execution of this Agreement, all the terms under this Agreement will supersede the Contract Numbers BPHM07000077 and BPHM05000076 for the Fiscal Year 2010-11.
- CONTRACTOR agrees to comply with its Budget as shown in Appendix B in the provision of SERVICES. Changes to the budget that do not increase or reduce the maximum dollar obligation of the CITY are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. CONTRACTOR agrees to comply fully with that policy/procedure.
- D. No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.
 - E. In no event shall the CITY be liable for interest or late charges for any late payments.
- F. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.

* <u>#</u> (A)

DPH 1: Department of Public Health Contract Budget Summary

DHCS Legal Entity Number:			pared By/Phone #:	Cassie Harris 415-6	73-0911 x307	Fiscal Year:	2015-16
Contractor Name:	Larkin Street Y	outh Services				Document Date:	7/1/15
CMS #:	6997						
Contract Appendix Number:	B-1a	B-1b	B-2				
	Routz	Routz	Homeless				
	TAY Housing	TAY	Youth				
	& Supportive	Wellness	Outreach				
Appendix A/Program Name:	Services	Services	Project	7			
Provider Number:	38IX	38IX	383821				
Program Code:	38IXHS	38IXIN	N/A				
FUNDING TERM:	7/1/15-6/30/16	7/1/15-6/30/16	7/1/15-6/30/16				TOTAL
FUNDING USES				525.5		* * *	
Salaries & Employee Benefits:	241,964	230,286	56,668				528,918
Operating Expenses:	719,608	63,371	27,004				809,983
Capital Expenses:	201						
Subtotal Direct Expenses:	961,572	293,657	83,672	-	-		1,338,901
Indirect Expenses:	144,235	44,048	12,132				200,415
Indirect %:	15.00%	15.00%	14.50%				14.97%
TOTAL FUNDING USES	1,105,807	337,705	95,804	The state of the same of the s	•	-	1,539,316
						Fringe Benefits %:	25.719
BHS MENTAL HEALTH FUNDING SOURCES			Market Committee				
MH STATE - MHSA (CSS)	1,105,807						1,105,807
MH STATE - MHSA (PEI)		337,705					337,705
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	1,105,807	337,705		<u> </u>			1,443,512
BHS SUBSTANCE ABUSE FUNDING SOURGES	193 (1867-6) (1868-194)	007,700	The transfer		1 May or many		411111111111111111111111111111111111111
SA COUNTY - General Fund			95,804				95,804
TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES			95,804				95.804
OTHER DPH FUNDING SOURCES			95,004		S and the state of		
OTHER DELL'ENDING SOURGES							
TOTAL OTHER DPH FUNDING SOURCES							
TOTAL OTHER DPH FUNDING SOURCES	1,105,807	337,705	95,804	 			1,539,310
NON-DPH FUNDING SOURCES							1,009,0 N
TOTAL NON-DPH FUNDING SOURCES		-	_	-	-	-	
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	1,105,807	337,705	95,804		-	-	1,539,310

			d	
	*			
		8.		

DPH 2: Department of Public Heath Cost Reporting/Data Collection (CRDC)

		Larkin Street You	th Services			Appendix/Page #:	B-1a & B-1b
		Larkin Street You	th Services			Document Date:	7/1/15
	Provider Number:					Fiscal Year:	2015-16
		B-1a	B-1b				
		Routz	Routz				
		TAY Housing	TAY				
		& Supportive	Wellness				
	Program Name:	Services	Services				
14 1 /050 (44	Program Code:	38IXHS	38IXIN				
Mode/SFC (MI	H) or Modality (SA):	60/78 Other Non-MediCal	45/20-29				
	Service Description:	Client Support Exp	Cmmty Client Svcs				TOTAL
	FUNDING TERM:	7/1/15-6/30/16	7/1/15-6/30/16				TOTAL
FUNDING USES	CARRY OF THE PROPERTY	71110-0/30/10	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		Jan State Committee Committee		Q 2. 258.00.00
	Employee Benefits:	241.964	230,286				472,250
	perating Expenses:	719,608	63,371				782,979
	Capital Expenses:	110,000	00,071				102,919
Suhtota	Direct Expenses:	961,572	293,657				1,255,229
- Outston	Indirect Expenses:	144,235	44,048			-	188,283
TOTA	L FUNDING USES:		337,705	-	•	-	1,443,512
BHS MENTAL HEALTH FUNDING SOURCES	Index Code	Strain Control	STATE AND LONG	50 Km + 1 1 2 CC			
	HMHMPROP63	A CONTRACTOR OF THE CONTRACTOR	The same of the sa				
MH STATE - MHSA (CSS)	PMHS63-1504	1,105,807					1,105,807
	HMHMPROP63						
MH STATE - MHSA (PEI)	PMHS63-1510		337,705				337,705
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		1,105,807	337,705		•	-	1,443,512
BHS SUBSTANCE ABUSE FUNDING SOURCES	Part of the second	and the state of		AND CARREST			
							-
TATAL BUS BUS BUS BUS BUS BUS BUS BOLLDONS							•
TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES	t av a sa talan a sa t	-		***************************************	-	-	-
OTHER DPH FUNDING SOURCES		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
TOTAL OTHER DPH FUNDING SOURCES							
TOTAL OTHER DPH FONDING SOURCES	 	1,105,807	337,705	·			1,443,512
NON-DPH FUNDING SOURCES		1,103,007		A3.4 74	ACAGIN ANNIAS PRO	Service - Servic	1,443,312
MUN-UFFI FORDING SCORGES	3 () () () () () () () () () (
	 	 		 			
TOTAL NON-DPH FUNDING SOURCES	 	-	-	-	-	-	
TOTAL FUNDING SOURCES (DPH AND NON-DPH)		1,105,807	337,705				1,443,512
BHS UNITS OF SERVICE AND UNIT COST	* 3800 (0000)			(COSE*) 45 * 45 C	TARRAGE TUR	ATTENDED	
Number of Beds Purchased (if applicable):				1			
SA Only - Non-Res 33 - ODF # of Group							
SA Only - Licensed Capacity for Medi-Cal Provider with N							
Cost Reimbursement (CR) or Fe		CR					
D	PH Units of Service:	15,513	6,819				
	Unit Type		Staff Hour				
Cost Per Unit - DPH Rate (DPH FUNDIN							1
Cost Per Unit - Contract Rate (DPH & Non-DPH FU			49.53				
Published Rate (Medi-							Total UDC:
Undupli	cated Clients (UDC)	: 60	300				360

DPH 3: Salaries & Benefits Detail

Contractor Name: Larkin Street Youth Services
Program Name: Routz TAY Housing and Supportive Services & Routz TAY Wellness Services

Appendix/Page #: B-1a & B-1b
Document Date: 7/1/15

		TOTAL	& Sup M HN	outz TAY Housing portive Services IHSA (CSS) IHMPROP63 IHMS63-1504	Well M HM	b Routz TAY ness Services IHSA (PEI) IHMPROP63 IHS63-1510					3.	
	Term:	7/1/15-6/30/16	Term:	7/1/15-6/30/16	Term:	7/1/15-6/30/16	Term:		Term:		Term:	
Position Title	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
Associate Director	0.46	31,280	0.29	19,720	0.17	11,560					-	
Case Manager	1.00	42,212	1.00	42,212							-	
Case Manager	1.00	42,212	1.00	42,212							 	
Case Manager	0.50	21,106	0.50	21,106							<u> </u>	
Case Manager	0.90	36,000			0.90	36,000					<u> </u>	
Peer Vocational Specialist	0.94	31,960			0.94	31,960						
Youth Force Counselor	0.26	9,556			0.26	9,556						
Peer Counselor	1.00	32,318			1.00	32,318						
Peer Counselor	1.00	32,317			1.00	32,317						
Director of Facilities & Housing	0.09	6,120	0.09	6,120			8					
Front Desk Clerk	1.00	27,000	1.00	27,000								
Education Specialist Liaison (GED)	0.46	16,100	0.12	4,200	0.34	11,900						
Program Manager of Client Services	0.25	13,862	0.07	3,962	0.18	9,900						
Assistant Program Manager	1.00	33,000	0.87	28,600	0.13	4,400						
						·						
	_											
	_	_		-								
SF												N
							·					
	_					15.7						
	-			s:							1	
Totals:	9.86	375,043	4.94	195,132	4.92	179,911		-				
				,								,
Employee Fringe Benefits:	25.92%	97,207	24.00%	46,832	28.00%	50,375					T	
TOTAL SALARIES & BENEFITS		472,250		241,964		230,286					_]	

DPH 4: Operating Expenses Detail

Contractor Name: Larkin Street Youth Services
Program Name: Routz TAY Housing and Supportive Services & Routz TAY Wellness Services

782,979

TOTAL OPERATING EXPENSE

Appendix/Page #: _ Document Date: _ B-1a & B-1b 7/1/15

Expenditure Category	TOTAL	B-1a Routz TAY Housing & Supportive Services MHSA (CSS) HMHMPROP63 PMHS63-1504	B-1b Routz TAY Wellness Services MHSA (PEI) HMHMPROP63 PMHS63-1510			
	Term: 7/1/15-6/30/16	Term: 7/1/15-6/30/16	Term: 7/1/15-6/30/16	Term:	Term:	Term:
Occupancy:						
Rent	-					
Utilities (telephone, electricity, water, gas)	12,413	10,340	2,073			
Building Repair/Maintenance						
Materials & Supplies:						
Office Supplies	1,650	1,300	350			
Photocopying						
Printing						
Program Supplies	4,050	3,800	250			
Computer hardware/software						
General Operating:						
Training/Staff Development	2,350	1,670	680			
Insurance	1,806	848	958			
Professional License	•					
Permits						
Equipment Lease & Maintenance	3,600	3,600				
Staff Travel:						
Local & Out-of-Town Travel	1,518	1,005	513			
Field Expenses	•					
Consultant/Subcontractor:						
345 hrs	34,500		34,500			
	<u> </u>			>		
Other:				,	+	
Rental Subsidies	595,464	595,464				
Utilities Subsidies	44,520	44,520				
Repair & Maintenance Subsidies	10,000	10,000				
Food & Food Vouchers	21,000	21,000			- T	
Client Travel	28,190	24,060	4,130			
Client Activities	15,718	2,001	13,717			
Youth Intern Stipends	4,800		4,800			
Awards & Incentives	1,400		1,400			
			1,100		- 	

719,608

63,371

DPH 2: Department of Public Heath Cost Reporting/Data Collection (CRDC)

		Larkin Street You	th Services		-	Appendix/Page #:	B-2, Page 1
	Larkin Street You	th Services			Document Date:	7/1/15	
	Provider Number: 38					Fiscal Year:	2015-16
	D	Homeless Youth					
	Program Name:						
Mada/000 (A	Program Code: IH) or Modality (SA):	N/A SecPrev-21					
Mode/SFC (M	in) or wodality (SA):			4	<i>.</i>	<u> </u>	
		SA-Sec Prev Referrals/Screening/					
	Service Description:	Intake			· ·		TOTAL
	FUNDING TERM:						
FUNDING USES			Carrier State of the		经实际证据 医检查		
Salaries 8	Employee Benefits:	56,668					56,668
	Operating Expenses:	27,004			-		27,004
	Capital Expenses:			· · · · · · · · · · · · · · · · · · ·			-
Subtot	al Direct Expenses:	83,672		-	-	-	83,672
	Indirect Expenses:						12,132
TOTA	AL FUNDING USES:	95,804				-	95,804
BHS MENTAL HEALTH FUNDING SOURCES							
							-
							-
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		-	-	-		-	-
BHS SUBSTANCE ABUSE FUNDING SOURCES	Index Gode	A PROPERTY.		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
SA COUNTY - General Fund	HMHSCCRES227	95,804					95,804
					<u></u>		-
TOTAL BUO CUBSTANCE ABUSE SUNDING SOURCES		05.004					05.904
TOTAL BHS SUBSTANCE ABUSE FUNDING SOURCES		95,804	•	-	•	-	95,804
OTHER DPH FUNDING SOURCES							
							-
TOTAL OTHER DPH FUNDING SOURCES				_		-	-
TOTAL DPH FUNDING SOURCES		95,804		_	-	 	95,804
NON-DPH FUNDING SOURCES	52 C. 27 S. 15 S. 20 C. 15 S. 20	20,004					50,004
HON-DITTI OND ING GGONGES		Section 1	And the second of the second o	1.5.500 Tube 1.5.5 1.5.5 1.5.5			-
TOTAL NON-DPH FUNDING SOURCES		-					-
TOTAL FUNDING SOURCES (DPH AND NON-DPH)		95,804	-	-	-		95,804
BHS UNITS OF SERVICE AND UNIT COST						The companies with the	Conservation of the S
Number of Beds Purc					Table 1	44.21.40223	
SA Only - Non-Res 33 - ODF # of Grou						TELLINITE CONTES	
SA Only - Licensed Capacity for Medi-Cal Provider with							
Cost Reimbursement (CR) or Fe	FFS						
	Staff Hour						
Cost Per Unit - DPH Rate (DPH FUNDI)	NG SOURCES Only):	62.38					
Cost Per Unit - Contract Rate (DPH & Non-DPH FL	INDING SOURCES)	62.38			0		
Published Rate (Medi	-Cal Providers Only)	750	,				Total UDC:
Undupl	Unduplicated Clients (UDC):						750

DPH 3: Salaries & Benefits Detail

Contractor Name: Larkin Street Youth Services
Program Name: Homeless Youth Outreach Project

Appendix/Page #: B-2, Page 2
Document Date: 7/1/15

æ		TOTAL		eneral Fund ISCCRES227								
	Term:	7/1/15-6/30/16	Term:	7/1/15-6/30/16	Term:		Term:		Term:		Term:	
Position Title	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salarles	FTE	Salaries	FTE	Salaries
Program Manager	0.20	10,500	0.20	10,500								
Dutreach Counselor	1.00	32,000	1.00	32,000								
Associate Director	0.05	3,200	0.05	3,200	o/to							
	-	-										
	-											
		-										
		_										
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Total	1.25	45,700	1.25	45,700	-				-	<u></u>	-	
Employee Fringe Benefit	s: 24.00%	10,968	24.00%	10,968				F				
Employee i ringe benefit	2.7.0070	.0,300	27.0070	10,000						 .		·
			1		1				_		_	
TOTAL SALARIES & BENEFIT	5	56,668		56,668	_		-		•		<u>-</u> -	

DPH 4: Operating Expenses Detail

Contractor Name: Larkin Street Youth Services
Program Name: Homeless Youth Outreach Project

Appendix/Page #: B-2, Page 3
Document Date: 7/1/15

Expenditure Category	TOTAL	General Fund HMHSCCRES227			*	
	Term: 7/1/15-6/30/16	Term: 7/1/15-6/30/16	Term:	Term:	Term:	Term:
Occupancy:						
Rent	12,200	12,200				,
Utilities (telephone, electricity, water, gas)	4,700	4,700				8
Building Repair/Maintenance	980	. 980				
Materials & Supplies:						
Office Supplies	146	146				
Photocopying	-					
Printing	-					
Program/Medical Supplies	917	917				
Computer hardware/software	-					
General Operating:						
Training/Staff Development	240	240				
Insurance	486	486				
Professional License	•					
Permits						
Equipment Lease & Maintenance	•					
Staff Travel:						
Local & Out-of-Town Travel	218	218				
Field Expenses	-					
Consultant/Subcontractor:						
	-		, "			
Other:						
Food for Youth	5,977	5,977				
Laundry & Linen Service	800	800				
Custodian	340	340				
	F					

 TOTAL OPERATING EXPENSE
 27,004
 27,004

DPH 7: Contract-Wide Indirect Detail

Contractor Name Larkin Street Youth Services

Document Date: 7/1/15

Fiscal Year: 2015-16

1. SALARIES & BENEFITS

Position Title	FTE	Salaries
Director of Public Contracts	0.15	\$ 12,000
HR Director	0.10	\$ 8,500
Chief Operating Officer	0.10	\$ 12,080
Controller	0.15	\$ 12,150
IT Manager	0.10	\$ 7,010
GL Accountant	0.12	\$ 8,376
Grants Accountant	0.22	\$ 9,680
Accounts Payable Clerk	0.12	\$ 4,524
Payroll Clerk	0.12	\$ 5,808
Executive Director	0.11	\$ 17,644
Chief of Programs	0.04	\$ 3,210
Chief of Research & Evaluation	0.02	\$ 1,178
EMPLOYEE FRINGE BENEFITS	22.0%	\$ 22,601
TOTAL SALARIES & BENEFITS		\$ 124,761

2. OPERATING COSTS

Expenditure Category	mount
Advertising & Recruitment	\$ 3,697
Audit and Finance Fees	\$ 10,889
Meetings & Conferences	\$ 4,417
Equipment Rental/Lease	\$ 3,272
Insurance	\$ 3,178
Postage/Messenger	\$ 4,969
Office Supplies	\$ 1,770
Rent and Utilities	\$ 19,677
Telecommunications	\$ 3,773
Printing & Copying	\$ 5,683
Computer Hardware & Software	\$ 5,688
Data Archival fees	\$ 539
Staff travel	\$ 2,016
Bank Fees	\$ 2,154
Licenses, Permits & Fees	\$ 3,932
TOTAL OPERATING COSTS	\$ 75,654

TOTAL INDIRECT COSTS

\$ 200,415

(Salaries & Benefits + Operating Costs)

Appendix D Additional Terms

1. PROTECTED HEALTH INFORMATION AND BAA

The parties acknowledge that CITY is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is required to comply with the HIPAA Privacy Rule governing the access, transmission, and storage of health information.

The parties acknowledge that CONTRACTOR is one of the following:

\boxtimes	CONTRACTOR will render services under this contract that include possession or
	knowledge of identifiable Protected Health Information (PHI), such as health status
	health care history, or payment for health care history obtained from CITY.
	Specifically, CONTRACTOR will:

- Create PHI
- Receive PHI
- Maintain PHI
- Transmit PHI and/or
- Access PHI

The Business Associate Agreement (BAA) in Appendix E <u>is required</u>. Please note that BAA requires attachments to be completed.

	CONTRACTOR will not have knowledge of, create, receive, maintain, transmit, or
	have access to any Protected Health Information (PHI), such as health status, health
	care history, or payment for health care history obtained from CITY.

The Business Associate Agreement is not required.

2. THIRD PARTY BENEFICIARIES

No third parties are intended by the parties hereto to be third party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.

	*		

Appendix E



San Francisco Department of Public Health Business Associate Agreement

This Business Associate Agreement ("Agreement") supplements and is made a part of the contract or Memorandum of Understanding ("CONTRACT")] by and between the City and County of San Francisco, Covered Entity ("CE") and Contractor, Business Associate ("BA"). To the extent that the terms of the Contract are inconsistent with the terms of this Agreement, the terms of this Agreement shall control.

In order to access SFDPH Systems, BA must have their employees/agents sign and retain in their files the *User Agreement for Confidentiality, Data Security and Electronic Signature* form located at https://www.sfdph.org/dph/files/HIPAAdocs/2015Revisions/ConfSecElecSigAgr.pdf

During the term of this contract, the BA will be required to complete the SFDPH Privacy, Data Security and Compliance Attestations located at https://www.sfdph.org/dph/files/HIPAAdocs/PDSCAttestations.pdf and the Data Trading Partner Request [to Access SFDPH Systems] located at https://www.sfdph.org/dph/files/HIPAAdocs/DTPAuthorization.pdf

RECITALS

A. CE wishes to disclose certain information to BA pursuant to the terms of the Contract, some of which may constitute Protected Health Information ("PHI") (defined below).

B. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the CONTRACT in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act"), and regulations promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the "California Regulations").

C. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations ("C.F.R.") and contained in this Agreement.

D. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this Agreement to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the HIPAA Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this Agreement, the parties agree as follows:

1. Definitions.

a. Breach means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section

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San Francisco Department of Public Health Business Associate Agreement

17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

b. **Breach Notification Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. Business Associate is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. Covered Entity means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. Data Aggregation means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. Designated Record Set means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. Electronic Protected Health Information means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this Agreement, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. Electronic Health Record means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECT Act, including, but not limited to, 42 U.S.C. Section 17921

i. Health Care Operations means any of the following activities: i) conducting quality assessment and improvement activities; ii) reviewing the competence or qualifications of health care professionals; iii) underwriting, enrollment, premium rating, and other activities related to the creation, renewal, or replacement of a contract of health insurance or health benefits; iv) conducting or arranging for medical review, legal services, and auditing functions; v) business planning development; vi) business management and general administrative activities of the entity. This shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

 Privacy Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

k. Protected Health Information or PHI means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103

Appendix E San Francisco Department of Public Health Business Associate Agreement



and 164.501. For the purposes of this Agreement, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

1. Protected Information shall mean PHI provided by CE to BA or created,

maintained, received or transmitted by BA on CE's behalf.

m. Security Incident means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

n. Security Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R.

Parts 160 and 164, Subparts A and C.

o. Unsecured PHI means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

2. Obligations of Business Associate.

a. Permitted Uses. BA may use, access, and/or disclose PHI only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. Further, BA shall not use PHI in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2). and

164.504(e)(4)(i)].

b. Permitted Disclosures. BA shall disclose Protected Information only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this Agreement and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2. k. of the Agreement, to the extent it has obtained knowledge of such occurrences [42] U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains

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satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

c. Prohibited Uses and Disclosures. BA shall not use or disclose PHI other than as permitted or required by the Contract and Agreement, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the PHI solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Contract.

d. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Contract or this Agreement, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

e. Business Associate's Subcontractors and Agents. BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.d. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least six (6) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and

Appendix E San Francisco Department of Public Health



Business Associate Agreement

(iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall

forward the request to CE in writing within five (5) calendar days.

g. Access to Protected Information. BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

h. Amendment of Protected Information. Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

i. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the

Secretary.

j. Minimum Necessary. BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

k. Data Ownership. BA acknowledges that BA has no ownership rights with

respect to the Protected Information.

Notification of Breach. BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the Agreement; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been,

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Business Associate Agreement

or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

m. Breach Pattern or Practice by Business Associate's Subcontractors and Agents. Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this Agreement within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

- a. Material Breach. A breach by BA of any provision of this Agreement, as determined by CE, shall constitute a material breach of the CONTRACT and this Agreement and shall provide grounds for immediate termination of the CONTRACT and this Agreement, any provision in the CONTRACT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii)].
- b. Judicial or Administrative Proceedings. CE may terminate the CONTRACT and this Agreement, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.
- c. Effect of Termination. Upon termination of the CONTRACT and this Agreement for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this Agreement to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.

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San Francisco Department of Public Health Business Associate Agreement

d. Civil and Criminal Penalties. BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure or Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

e. Disclaimer. CE makes no warranty or representation that compliance by BA with this Agreement, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the CONTRACT or this Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Contract upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the CONTRACT or this Agreement when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Contract or this Agreement providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

5. Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days.

Attachments (links)

- Privacy, Data Security, and Compliance Attestations_located at https://www.sfdph.org/dph/files/HIPAAdocs/PDSCAttestations.pdf
- Data Trading Partner Request to Access SFDPH Systems and Notice of Authorizer located at https://www.sfdph.org/dph/files/HIPAAdocs/DTPAuthorization.pdf
- User Agreement for Confidentiality, Data Security and Electronic Signature Form located at https://www.sfdph.org/dph/files/HIPAAdocs/2015Revisions/ConfSecElecSigAgr.pdf

Appendix E San Francisco Department of Public Health **Business Associate Agreement**



Office of Compliance and Privacy Affairs San Francisco Department of Public Health 101 Grove Street, Room 330, San Francisco, CA 94102

Office email: compliance.privacy@sfdph.org
Office telephone: 415-554-2787

Confidential Privacy Hotline (Toll-Free): 1-855-729-6040 Confidential Compliance Hotline: 415-642-5790

LARKSTR-02

HRCTOR

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/26/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS

CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). PRODUCER License # 0564249 PHONE (A/C, No, Ext): 1 (650) 842-5200 Heffernan Insurance Brokers FAX (A/C. No): 1 (650) 842-5201 1460B O'Brien Drive Menio Park, CA 94025 ADDRESS: NAICE INSURER(S) AFFORDING COVERAGE INSURER A: Nonprofits Insurance Alliance of California 01184 INSURED INSURER B : Cypress Insurance Company INSURER C: **Larkin Street Youth Services** 701 Sutter Street, 3rd Floor INSURER D: San Francisco, CA 94109 MSURER E MSURER F: **CERTIFICATE NUMBER:** COVERAGES REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. NSD WYD POLICY EFF POLICY EXP TYPE OF INSURANCE **POLICY NUMBER** COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Es occurrence) X CLAIMS-MADE 201506803NPO 07/01/2015 07/01/2016 500,000 X OCCUR \$ 20,000 MED EXP (Any one person) \$ 1,000,000 PERSONAL & ADV INJURY \$ 3,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: **GENERAL AGGREGATE** 3 X POLICY 3,000,000 JECT PRODUCTS - COMP/OP AGG \$ \$ OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY \$ 1,000,000 07/01/2015 07/01/2018 X 201506803NPO BODILY INJURY (Per person) \$ ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS ALL OWNED AUTOS BODILY INJURY (Par accident) \$ PROPERTY DAMAGE (Per accident) \$ **HIRED AUTOS** \$ X UMBRELLA LIAS 5.000.000 EACH OCCURRENCE 07/01/2015 07/01/2016 EXCESS LIAB 201506803UMB AGGREGATE CLAIMS-MADE \$ 10,000 DED X RETENTIONS \$ 5.000,000 X PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY LAWC602293 07/01/2015 07/01/2016 1,000,000 R ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT NIA 1.000.000 E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT | \$ CWB000109410 07/01/2015 07/01/2016 Limit 500,000 **Employee Dishonesty** CWB000109410 07/01/2015 07/01/2016 Deductible Employee Dishonesty 1,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Re: As Per Contract or Agreement on File with insured. City and County of San Francisco, its officers, agents, employees and members of commissions are included as an additional insured on General Liability policy per the attached endorsement, if required by written contract. General Liability insurance is primary, if required. The Primary endorsement has been requested to the insurance company for the General Liability policy and will be forwarded when received CANCELLATION **CERTIFICATE HOLDER** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN City & County of San Francisco ACCORDANCE WITH THE POLICY PROVISIONS. Commnucity Behavior Health Services 1380 Howard Street, 4th Floor AUTHORIZED REPRESENTATIVE San Francisco, CA 94103

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COMMERCIAL GENERAL LIABILITY CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s) Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy, and for which a certificate of insurance naming such person or organization as additional insured has been issued, but only with respect to their liability arising out of their requirements for certain performance placed upon you, as a nonprofit organization, in consideration for funding or financial contributions you receive from them. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE ONLY

In consideration of the premium charged, it is understood and agreed that the following is added as an additional insured:

City and County of SF, its officers, employees and agents

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

But only as respects a legally enforceable contractual agreement with the Named Insured and only for liability arising out of the Named Insured's negligence and only for occurrences of coverages not otherwise excluded in the policy to which this endorsement applies.

It is further understood and agreed that irrespective of the number of entities named as insureds under this policy, in no event shall the company's limits of liability exceed the occurrence or aggregate limits as applicable by policy definition or endorsement.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT - CALIFORNIA

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be 5% of the applicable manual premium otherwise due on such remuneration subject to a policy maximum charge for all such waivers of 5% of total manual premium.

The minimum premium for this endorsement is \$350.

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Specific Waiver

Person/Organization:

City and County of SFDPH,25 Van Ness Ave.S.F.CA.94102

Job Description:

Larkin Street Youth Services-#LAWC602293

Waiver Premium:

350.00

Payroll Subject

Class

State

to Waiver

8804 CA 1.00

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective: 07/01/2015

Policy No.: LAWC602293

Endorsement No.:

Insured:

Premium \$

Insurance Company: Cypress Insurance Company

WC 99 04 02C

Countersigned by _

(Ed. 9-14)