



**City and County of San Francisco**  
**London N. Breed, Mayor**  
**Department of Public Health**

**Business Office Contract Compliance**  
**1380 Howard Street**  
**San Francisco, CA 94103**

## Monitoring Report Fiscal Year 21-22 Behavioral Health Services

**Section: BHS-MH**

**Target Population: Adult/Older Adult**

**Agency:** Richmond Area Multi-Services, Inc.

**Site Visit Date:** July 13, 2023

**Program Reviewed:** RAMS CAAP PAES Counseling Pre-Vocational

**Report Date:** November 17, 2023

**Program Code(s):** 38C63

**Review Period:** July 1, 2021-  
June 30, 2022

**Site Address:** 1235 Mission Street, San Francisco, CA 94103

**Finalized Date:**

**CID/MOU#:** 17302 **Appendix #:** A-1

**Funding Source(s):** General Fund, MHSA

**On-Site Monitoring Team Member(s):** Michelle O'Neal, Melissa Ta, Denise Williams

**Program/Contractor Representatives:** Angela Tang, Vivian Vong

**Overall Program Rating:** 4 - Commendable/Exceeds Standards

**Category Ratings:**

4 = Commendable/Exceeds Standards		3 = Acceptable/Meets Standards					
2 = Improvement Needed/Below Standards		1 = Unacceptable					
4	Program Performance	4	Program Deliverables	4	Program Compliance	4	Client Satisfaction

**Sub-Categories Reviewed:**

Program Performance	Program Deliverables	Program Compliance	Client Satisfaction
Achievement of Performance Objectives	Units of Service Delivered Unduplicated Clients (Unscored)	Declaration of Compliance Administrative Binder Site/Premise Compliance Chart Documentation Plan of Action (if applicable)	Satisfaction Survey Completed and Analyzed

## **MONITORING REPORT SUMMARY**

**Agency/Program:** Richmond Area Multi-Services, Inc./RAMS CAAP PAES Counseling Pre-Vocational

- Findings/Summary:**
- The services provided by this program were funded by the Sources listed on page 1.
  - The program met 94.3 percent of its contracted performance objectives.
  - The program met 98.8 percent of its contracted units of service target.
  - A review of the administrative binder evidenced 95.5 percent of required compliance items.
  - A review of site premise evidenced 100.0 percent of required items.
  - The program was exempt of Chart Documentation compliance.
  - The program completed its client satisfaction survey.
  - The program analyzed the client satisfaction results.

Richmond Area Multi-Services Inc.'s CAAP PAES Counseling Pre-Vocational program is under the Behavioral Health Services (BHS) Adult and Older Adult (AOA) System of Care (SOC). This program provides culturally competent outpatient behavioral health assessments to determine employability, screenings for unmet health needs, and linkage during the up to 90-120 day program to participants of the San Francisco Human Services Agency (HSA) County Adult Assistance Program (CAAP).

Eligibility is determined by Triage, DHS-Workforce Development and Disability Evaluation and Consultation Unit (DECU) staff. Clients are San Francisco residents (ages 18 and older), who may have a behavioral health condition (mental health and/or substance use disorder) that may create a barrier for employment for the individual and/or other unmet health needs.

Program revamped its program model to adjust for hybrid work due to COVID-19 restrictions. Program is proud how staff adjusted and learned new techniques and pushed for more accessible options. Program continued to advocate for in-person learning as it is more valuable and engaging for clients. At the time of this site visit, program has transitioned back to full-time in person services.

**FY20-21 Plan of Action required?**     **Yes**     **No**

**If "Yes", describe program's implementation.**

**FY21-22 Plan of Action required?**     **Yes**     **No**    **See Section 5: Plan of Action Required Report.**



## Program Performance & Compliance Findings

### Rating Criteria:

4	3	2	1
<b>Over 90% = Commendable/ Exceeds Standards</b>	<b>71% - 90% = Acceptable/Meets Standards</b>	<b>51% - 70% = Improvement Needed/ Below Standards</b>	<b>Below 51% = Unacceptable</b>

### Overall Score:

<b>Total Points Given:</b> 85/85=100%
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### 1. Program Performance (30 points possible):

<b>Achievement of Performance Objectives (0-30 pts):</b>	30	33 total points out of 35 points (from 7 Objectives) = 94%			
<b>Program Performance Points:</b>	30				
Points Given:	30/30	Category Score:	100%	Performance Rating:	Commendable/ Exceeds Standards

**Performance Objectives and Findings with Points**

Ind.1	Provide services to 200 unduplicated clients for CCS.	According to program data, services were provided to 193 clients for CCS. Program met 96.5% of target goal.	Points: 5
Ind.2	1,960 total hours of direct Outpatient Behavioral Health Services shall be provided.	According to program data, 1,928 total hours of direct Outpatient Behavioral Health Services were provided. Program met 98% of target goal.	Points: 5
Ind.3	65 total units of indirect/Outreach Services shall be provided.	According to program data, 59 total units of indirect/Outreach Services were provided. Program met 90.7% of target goal.	Points: 5
Ind.4	150 total units of consultation and training hours to the DHS staff and management shall be provided.	According to program data, 108 total units of consultation and training hours to DHS staff and management were provided. Program met 72% of target goal.	Points: 3
Ind.5	80% of clients responding to the Client Satisfaction Survey will report satisfaction with the overall quality of services.	According to program data, 100% (2 out of 2) of clients responded to the Client Satisfaction Survey reported satisfaction (91%) with overall quality of service.	Points: 5
Ind.6	80% of discharged clients will have successfully completed assessment and/or linkage activities as defined in their individualized plans or will have left before completion with satisfactory progress.	According to program data, 92% (131 out of 142) of discharged clients successfully completed an assessment and/or linkage activity as defined in their individualized plan or will have left before completion with satisfactory progress.	Points: 5
Ind.7	CCS will achieve an average "intake show rate" of 60%.	According to program data, CCS achieved an average "intake show rate" of 68% (118 out of 173).	Points: 5
Ind.8	90% of the clients will be screened for cognitive impairments and intellectual disabilities, and the result will be included in the assessment, formulation and next steps planning.	SOC waived this objective for the monitoring period.	Points:
Ind.9	Ninety percent (90%) of the clients who are referred to RAMS-CCS beginning will have their first meeting with the assigned counselor no more than 5 weeks from the date of attending Screening Group.	SOC waived this objective for the monitoring period.	Points:
Ind.10	Ninety percent (90%) of the client status reports will be completed accurately and distributed to CAAP and Workforce Development staff.	SOC waived this objective for the monitoring period.	Points:

**Commendations/Comments:**

The contract states that all objectives and description of how objectives will be measured are contained in the FY21-22 BHS document for performance objectives, however, there are no published performance objectives for this program on the CDTA website. Objectives and findings are based on program report.

SOC ewaiived individualized objectives #8-10 for the monitoring period. These objectives utilize tools that need to be done in person. Due to the shift to a remote model, these assessments and referrals could not be completed.

**Identified Problems, Recommendations and Timelines:**

BOCC recommends the program work with SOC to ensure performance objectives are published on the CDTA website.

**2. Program Deliverables (20 points possible):**

<b>Units of Service Deliverables (0-20 pts):</b>		20	99% of Contracted Units of Service		
<b>Program Deliverables Points:</b>		20			
Points Given:	20/20	Category Score:	100%	Performance Rating:	Commendable/ Exceeds Standards

**Units of Service Delivered**

<b>Program Code</b>	<b>Service Description</b>	<b>Contracted/Actual</b>	
38C63	15/ 01 - 09 OP - Case Mgt Brokerage	31,380	47,001
38C63	15/ 10 - 57, 59 OP - MH Svcs	83,955	67,833
38C63	15/ 60 - 69 OP Medication Support	2,076	1,418
38C63	15/ 70 - 79 OP - Crisis Intervention	200	0
38C63	45/ 10 - 19 OS - MH Promotion	65	105
38C63	45/ 20 - 29 OS - Cmnty Client Svcs	150	43

**Unduplicated Clients by Program Code**

<b>Program Code</b>	<b>Contracted/Actual</b>	
38C63	200	193

**Commendations/Comments:**

Based on the final cost reimbursement invoice, #M14JU22 Supplemental, program delivered 98.8% of contracted units of service (UOS). UOS is reflective of funding spending, not the number of services provided to clients.

Program utilized 61 units of ADM services, 0.05% of total. Delivered UDC was gathered from Avatar.

**Identified Problems, Recommendations and Timelines:**

None noted.

**3. Program Compliance (40 points possible):**

<b>A. Declaration of Compliance Score (5 pts):</b>	5	Submitted Declaration			
<b>B. Administrative Binder Complete (0-10 pts):</b>	10	95% of items in compliance			
<b>C. Site/Premises Compliance (0-10 pts):</b>	10	100% items in compliance			
<b>D. Chart Documentation Compliance (0-10 pts):</b>	N/A				
<b>E. Plan of Action (if applicable) (5 pts):</b>	5	<input checked="" type="checkbox"/> No FY20-21 POA was required <input type="checkbox"/> FY20-21 POA was submitted, accepted and implemented <input type="checkbox"/> FY20-21 POA submitted, not fully implemented <input type="checkbox"/> FY20-21 POA required, not submitted			
<b>Program Compliance Points:</b>		30			
Points Given:	30/30	Category Score:	100%	Compliance Rating:	Commendable/ Exceeds Standards

**Commendations/Comments:**

Program is commended for maintaining an organized administrative binder.

**Identified Problems, Recommendations and Timelines:**

In addition to the missing items outlined below, program is also missing the following staff training documentation: ATD, BBP, Harm Reduction, ANSA, and ERP. BOCC recommends that the program develop a process or tracking mechanism to maintain a training log. BOCC provided technical assistance and information regarding the Harm Reduction Training Institute and the online BHS training website.

The following required item(s) were not located in the program's Administrative Binder:

- Fire Clearance - Current/Valid

**4. Client Satisfaction (10 points possible): Program-Specific Client Satisfaction Survey**

Scoring Category	Scoring Criteria	Points
<b>Completed Program Specific Survey</b>	Yes = 2, No = 0	2
<b>Results Analyzed</b>	Yes = 3, No = 0	3
<b>Program Performance as Rated by Clients</b>	50-59% of clients satisfied = 1 60-69% of clients satisfied = 2 70-79% of clients satisfied = 3 80-89% of clients satisfied = 4 90-100% of clients satisfied = 5	N/A
<b>Client Satisfaction Points:</b>		5

Points Given:	5/5	Category Score:	100%	Client Satisfaction Rating:	Commendable/ Exceeds Standards
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**Commendations/Comments:**

Program conducted a client satisfaction survey with 9 questions between 9/2021 - 12/2021. There were 2 respondents. Results show 91% (10 out of 11) satisfaction with the program based on applicable questions.

**Identified Problems, Recommendations and Timelines:**

BOCC recommends that the program document when results were shared with staff.

## 5. Plan Of Action Required Report

**Attach your Plan Of Action to the signed Monitoring Report for submission to DPH within the deadline on page 3.**

Other Deficiencies	
Administrative Binder	Program shall provide a plan of how it will obtain a fire clearance inspection and submit proof of valid fire clearance to BOCC before the next program monitoring.





richmond area multi-services, inc.

November 22, 2023

Melissa Ta  
SF Department of Public Health - Business Office Contract Compliance  
1380 Howard Street, San Francisco, CA 94107

Re: Plan of Action, RAMS CAAP Counseling & Pre-Vocational Services Monitoring Report

Dear Melissa,

On behalf of Richmond Area Multi-Services, Inc. (RAMS) - CAAP Counseling & Pre-Vocational Services program, I am writing in regards to the FY 2021-22 Monitoring Report results. RAMS is proud of FY 2021-22 Monitoring Report ratings indicating that the program achieved an overall score of 100%, especially during a time when there were substantial adaptations due to COVID-19 public health emergency. We very much value your feedback and collaboration.

FY 2021-22 Plan of Action:

In obtaining a valid fire clearance, RAMS CAAP program will collaborate and gain approval by SF Human Services Agency (HSA) because the building is controlled/operated by SF HSA. RAMS aims to complete this during the current fiscal year.

RAMS appreciates your time and support during the program review process.

Respectfully Submitted,

Angela Tang, LCSW  
Chief Executive Officer