



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: MHSA

Target Population: Adult/Older Adult

Agency: Richmond Area Multi-Services, Inc.

Site Visit Date: July 17, 2023

Program Reviewed: RAMS Wellness in the Streets (WITS)

Report Date: August 28, 2023

Program Code(s): TBD

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

Site Address: 1282 Market St., San Francisco, CA 94102

Finalized Date:

CID/MOU#: 20708 **Appendix #:** A-6

Funding Source(s): MHSA

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

Program/Contractor Representatives: Richard Zevin, Angela Tang, Michele Alexia, Sonja Scott

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	2	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 Wellness in the Streets (WITS)

- Findings/Summary:**
- The services provided by this program were funded by the Sources listed on page 1.
 - The program met 100.0 percent of its contracted performance objectives.
 - The program met 57.7 percent of its contracted units of service target.
 - A review of the administrative binder evidenced 100.0 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.

This program is administered under the Behavioral Health System (BHS) system of care. Program seeks to test new ways of service delivery and engagement with unhoused residents and to help participants transition along the stages of change until they are able to engage in services. Program staff work in coordination with BHS staff and RAMS peers to follow up with client appointments, resources, and linkages to services in order to support unhoused individuals.

Due to the COVID-19 pandemic, Wellness in the Streets (WITS) program staff were deployed as Disaster Service Workers (DSW) to focus on providing peer support and resource linkage to guests in the Shelter-in-Place (SIP) hotels. MHSa approved the pivot of services, as it was still consistent with providing services to and collecting relevant program-development information from the unhoused community in San Francisco. The deployment started in FY20-21 and continued through FY21-22.

Program successfully worked in tandem with providers and staff from multiple agencies and systems of care. With the closure of many SIP sites, program focused efforts to help support clients navigate through the transition and uncertainty.

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

If "Yes", describe program's implementation.

FY21-22 Plan of Action required? **Yes** **No**

Signature of Author of This Report

DocuSigned by:

Melissa Ta

Name and Title: Melissa Ta, Business Office Contract Compliance Manager

Signature of Authorizing Departmental Reviewer

DocuSigned by:

Jerna Reyes

Name and Title: Jerna Reyes, BOCC Director

Signature of Authorizing System of Care Reviewer

DocuSigned by:

Jessica Brown

Name and Title: SOC Director

PROVIDER RESPONSE: (please check one and sign below)

- I have reviewed the Monitoring Report, acknowledge findings, no further action is necessary at this time.
- I have reviewed the Monitoring Report, acknowledge findings, and attached a Plan of Action in response to deficiencies and recommendations with issues addresses and timelines for correction stated.
- I have reviewed the Monitoring Report, disagree with findings, response to recommendations attached.

DocuSigned by:

Angela Tang

2/6/24

Signature of Authorized Contract Signatory (Service Provider)

Date

Angela Tang, CEO

Print Name and Title

RESPONSE TO THIS REPORT DUE:	February 6, 2024
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If applicable, please submit any supplemental materials by clicking on the attachment icon below.

Program Performance & Compliance Findings

Rating Criteria:

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

Overall Score:

Total Points Given:	77/85=91%
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1. Program Performance (30 points possible):

Achievement of Performance Objectives (0-30 pts):	30	15 total points out of 15 points (from 3 Objectives) = 100%
Program Performance Points:	30	
Points Given:	30/30	Category Score: 100%
		Performance Rating: Commendable/ Exceeds Standards

Performance Objectives and Findings with Points

O.1	By June 30th, 2022, 75% of individuals who identified an immediate need reported that their need was addressed by a WITS team member, as evidenced by the WITS 'in the moment' feedback tool.	According to the Year-End Program Narrative report, 92% of clients (139 of 151) reported that their need was addressed by a WITS team member.	Points: 5
O.2	By June 30th, 2022, 75% of individuals who engaged with the WITS team reported that they felt supported by the WITS team member, as evidenced by the WITS 'in the moment' feedback tool.	According to the Year-End Program Narrative report, 88% of clients (84 of 95) who responded to this question reported feeling supported by the WITS team member.	Points: 5
P.1	By June 30th, 2022, the WITS team will have collectively engaged in outreach activities to 150 unboxed individuals in San Francisco. This will be documented in program reports.	According to p Year-End Program Narrative report, 166 unduplicated individuals were engaged by the WITS team during outreach activities.	Points: 5

Commendations/Comments:

Performance objectives findings were provided by the Mental Health Services Act (MHSA) Year-End Program Narrative report. The program is commended for exceeding all three performance objective targets.

Identified Problems, Recommendations and Timelines:

None noted.

2. Program Deliverables (20 points possible):

Units of Service Deliverables (0-20 pts):		12	58% of Contracted Units of Service		
Program Deliverables Points:		12			
Points Given:	12/20	Category Score:	60%	Performance Rating:	Improvement Needed/ Below Standards

Units of Service Delivered

Program Code	Service Description	Contracted/Actual
RAMS WITS	10/30-39 DS-Vocational	1,620 934

Unduplicated Clients by Program Code

Program Code	Contracted/Actual
RAMS WITS	50 166

Commendations/Comments:

Based on the final cost reimbursement invoice M74JU22SUP, program delivered 57.7% of its contracted units of service. The UDC was obtained from MHSA Year-End Demographic Report.

Identified Problems, Recommendations and Timelines:

None noted.

3. Program Compliance (40 points possible):

A. Declaration of Compliance Score (5 pts):	5	Submitted Declaration
B. Administrative Binder Complete (0-10 pts):	10	100% of items in compliance
C. Site/Premises Compliance (0-10 pts):	10	100% items in compliance
D. Chart Documentation Compliance (0-10 pts):	N/A	
E. Plan of Action (if applicable) (5 pts):	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
Program Compliance Points:	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:

When staff training was reviewed, some certificates (aerosol transmittable disease, site specific emergency response plan, exposure to blood borne pathogens, and harm reduction) were unavailable or missing. BOCC recommends for the program to develop a process or tracking mechanism to maintain a training log. BOCC provided technical assistance for the Harm Reduction Training Institute and BHS online training websites.

BOCC also reviewed the emergency response plan with the program and advised the to program identify an address for its alternate site of operations.

No plans of action are required; BOCC will follow-up on these items during the next monitoring cycle.

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

Scoring Category	Scoring Criteria	Points
Completed Program Specific Survey	Yes = 2, No = 0	2
Results Analyzed	Yes = 3, No = 0	3
Program Performance as Rated by Clients	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
Client Satisfaction Points:		5

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

Program used an in-the-moment feedback model, where the peer counselor and the client first review what they worked on and determine whether it met the client's goal. The peer counselor then asks two questions:

1. Did you feel supported today?
2. What was most helpful about the WITS service?

The response was recorded in the daily service log in Salesforce database for data collection.

Results were positive given the difficult client population. 92% (139/151) of clients felt their needs were met. 88% (84/95) felt supported by the WITS peer counselor. Verbal feedback was also collected and supported the positive satisfaction rate.

- "Stopping by and talking, letting me know I'm not forgotten."
- "I don't think I could get through this without your calls."

Findings were reviewed by RAMS Division of Peer-Based Services leadership, in collaboration with the BHS Quality Management team, who assisted in building out tools. It was also discussed with program staff in team meetings to identify any emerging themes, challenges, and successes with client support.

Based on the consistent theme from the feedback, program doubled its efforts to ensure clients have a working relationship with multiple members of the team for continuity of care and maintaining established trust.

Identified Problems, Recommendations and Timelines:

None noted.