



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

Programmatic and Fiscal Monitoring Report FY 22-23
General Fund Services
HIV Health Services

Agency: Catholic Charities CYO

Site Visit Date: November 28, 2023

Program Reviewed: CYO Assisted Housing

Report Date: January 24, 2024

Site Address: 990 Eddy Street, San Francisco, CA 94109

CID/MOU: 20913 **Funding Source(s):** GF

Review Period: General Fund: July 1, 2022 - June 30, 2023

On-Site Monitoring Team Member(s): September Rose

Program/Contractor Representatives: Lucia Lopez, Erick Brown, Stephanie Godt, Ellen Hammerle, Cheryl Ewers, Michelle Pommier

Overall Program Rating: 4 - Commendable/Exceeds Standards

4 = Commendable/Exceeds Standards	3 = Acceptable/Meets Standards
2 = Improvement Needed/Below Standards	1 = Unacceptable

Category Ratings:

4	Program Performance	3	Program Deliverables	4	Program Compliance	4	Client Satisfaction
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Sub-Categories Reviewed:

Program Performance	Program Deliverables/Fiscal	Program Compliance	Client Satisfaction
Achievement of Performance Objectives	Units of Service Delivered Unduplicated Client Count Delivered	Declaration of Compliance Invoice vs. ARIES Analysis Administrative Binder Site/Premise Compliance Plan of Action (if applicable)	Satisfaction Survey Completed and Analyzed

MONITORING REPORT SUMMARY

Agency/Program: Catholic Charities CYO/CYO Assisted Housing

Findings/Summary: At the time of the site visit, the program did not have a waitlist.

The program met 100.0 percent of its contracted performance objectives.

The program met 77.8 percent of its contracted units of service target.

The program met 100.0 percent of its contracted unduplicated client target.

Client file review evidenced 100.0 percent files in compliance.

The program received 5 points from Declaration of Compliance.

A review of the administrative binder evidenced 100.0 percent of required compliance items.

A review of site premises evidenced 100.0 percent of required items.

The program conducted a client satisfaction process during the review period.

Client satisfaction results were reviewed, analyzed and discussed with program staff.

This program is administered under the HIV Health Services (HHS) System of Care (SOC). The goal of Assisted Housing and Health Program [AHHP] partial rent subsidy is to stabilize the precarious housing situations of severe need individuals living with HIV/AIDS through the provision of partial rent subsidies, and short-term housing advocacy that supports clients to access and remain in care. Catholic Charities will service all ethnicities and populations within San Francisco with focused expertise to meet the unique need of low-income HIV+ clients living in San Francisco, many who are seniors, and includes those who are multiply diagnosed with co-occurring Hep C, mental health, and/or substance use issues. Catholic Charities (CC) assures that all HIV Health Services (HHS) funds are only used to pay for services that are not reimbursed by any other funding source. Client enrollment priority is reserved for San Francisco residents who have low incomes and are uninsured. Secondary enrollment is reserved for SF residents who have low incomes and are underinsured. Low Income status is equal to 500% of the Federal Poverty Level (FPL) as defined by the US Department of Health and Human Services. Client HIV diagnosis is confirmed at intake. Client eligibility determination for residency, low-income, and insurance status is confirmed at intake and at 12-month intervals thereafter. Six-month, interim eligibility confirmation may be obtained by client self-attestation but must be documented in the client file or in ARIES.

As of the time of monitoring of this program, there was a continuing delay in importing data from Epic to ARIES. Per the HHS SOC, calculation of the program's achievement of Performance Objectives for this monitoring period was gathered from the 2022 calendar year in lieu of the FY22-23 fiscal year.

Monitoring of this program was conducted in person on 11/28/23. A follow-up virtual meeting was held on 1/24/24 with Human Resources to review employee files.

Previous Year Plan of Action required? Yes No

If "Yes", describe program's implementation.

Current Year Plan of Action required? Yes No

Signature of Author of This Report

DocuSigned by:

[Handwritten Signature]

Name and Title: September Rose, 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:

Bill Blum

Name and Title Bill Blum, HIV Health Services Administrator

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:

Ellen Hammerle

July 28, 2024

Signature of Authorized Contract Signatory (Service Provider)

Date

Ellen Hammerle, CEO

Print Name and Title

RESPONSE TO THIS REPORT DUE:	July 29, 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	90% - 71% = Acceptable/Meets Standards	70% - 51% = Improvement Needed/ Below Standards	Below 51% = Unacceptable

Overall Score:

Total Points Given: 93/95=98%

1. Program Performance (40 points possible):

Achievement of Performance Objectives	40	25 points out of 25 total points (from 5 Objectives) = 100%
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Total Points:	40
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Points Given:	40/40	Category Score:	100%	Performance Rating:	Commendable/ Exceeds Standards
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Performance Objectives and Findings with Points

O.1	The program will stabilize the housing situation of ≥ 80% of program participants ≤ 6 mos. of receiving the initial subsidy.	According to the program's self-report, the housing situation of 100% (155 out of 155) of participants was stabilized within 6 months of receiving the initial subsidy.	Points: 5
O.2	≥ 80% of subsidy recipients who have secured housing will have maintained housing or moved to a level of care more appropriate to their needs within 1 year.	According to the program's self-report, 100% (155 out of 155) of new subsidy clients had a housing plan in place within 1 month of receiving the subsidy.	Points: 5
O.3	≥ 75% of clients who exit housing will secure housing appropriate to needs (e.g., transition to different level of care, move-in with family or friends, independent or unsubsidized housing, etc..)	According to the program's self-report, 100% (155 out of 155) of clients who exited housing secured housing that was appropriate to their needs.	Points: 5
P.1	100% of new subsidy clients will have a housing plan in place ≤ 1 month of receiving the subsidy.	According to the program's self-report, 100% (155 out of 155) of new subsidy clients had a housing plan in place within 1 month of receiving the subsidy.	Points: 5
P.2	100% of subsidy recipients have their eligibility recertified at least annually.	According to the program's self-report, 100% (155 out of 155) of subsidy recipients had their eligibility recertified at least annually.	Points: 5

Commendations/Comments:

The program is commended for meeting 100% of its program Performance Objectives.

Identified Problems, Recommendations and Timelines:

None noted.

2. Program Deliverables (20 points possible):

A. Units of Service Deliverables (0-10 pts):				8	78% of Contracted Units of Service.
B. Unduplicated Client Count (0-10 pts):				10	100% of Target
Total Points:				18	
Points Given:	18/20	Category Score:	90%	Performance Rating:	Acceptable/ Meets Standards

A. Units of Service Delivered

Units of Service Delivered
Service Description

Contracted/Actual

Rental Subsidy Days	83,220	64,749
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B. Unduplicated Client Count

Actual UDC: 154 /**Targeted UDC:** 154 = 100%

Commendations/Comments:

Based on the final cost reimbursement invoice (#381023131AJUN23), the program met 78% of its contracted units of service and served 154 unduplicated clients UDC.

Identified Problems, Recommendations and Timelines:

The final invoice 381023131AJUN23 reflects a 240 UDC target, which is not aligned with programming based on the amount for housing subsidy. The program has contacted the SOC to modify this number based on the FY21-22 data, and HHS reported approval of the new target of 154 UDC for FY22-23. The program plans to establish closer relationships with MOHCD and SFAF so that timely additional referrals (the other HHS-funded housing subcontractors) can ensure that the new target UDC is achieved.

3. Program Compliance (25 points possible):

A. Declaration of Compliance Score (0-5 pts):	5	Submitted Declaration
B. Client files documentation (0-10 pts):	5	100% compliance achieved.
C. Administrative Binder Complete (0-5 pts):	5	100% of items in compliance
D. Site/Premises Compliance (0-5 pts):	5	100% items in compliance
E. Plan of Action (if applicable) (5 pts):	5	<input type="checkbox"/> No previous FY POA was required <input checked="" type="checkbox"/> Previous FY POA was submitted, accepted and implemented <input type="checkbox"/> Previous FY POA submitted, not implemented <input type="checkbox"/> Previous YR POA required, not submitted
Total Points:	25	

Points Given:	25/25	Category Score:	100%	Compliance Rating:	Commendable/ Exceeds Standards
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Commendations/Comments:

The review of the Administrative Binder, Site/Premises, and staff training requirements found all items present and current.

Identified Problems, Recommendations and Timelines:

The BOCC commends the program for diligently addressing and providing follow-up on the required POA item(s) from the previous fiscal year (FY21-22). All items namely Fire Clearance/Life Safety, Veterans Policy, Training: Emergency Response Plan, and Training: Harm Reduction, are now updated and current for FY22-23.

During the site visit, certain items, including the Harm Reduction Policy, billing and collection policy, and fire clearance, were pending. However, it is noteworthy that all these items were successfully updated and addressed during our monitoring visit, as confirmed via email. The program's commitment to ensuring compliance and addressing outstanding items is commendable.

4. Client Satisfaction (10 points possible): Client Satisfaction Survey

A. Client Satisfaction Completed During Year (0-5 possible)	5
B. Client Satisfaction Survey Results Reviewed, Analyzed and Discussed with Staff (0-5 possible)	5
Total Points:	10

Points Given:	10/10	Category Score:	100%	Client Satisfaction Rating:	Commendable/ Exceeds Standards
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Commendations/Comments:

The program conducted Client Satisfaction Surveys during the fiscal year 22-23, analyzed the collected data, and subsequently shared the findings with staff. Data is gathered both at Intake and on the anniversary date of the client’s enrollment.

According to the administered Client Satisfaction Survey data, 130 out of 155 clients successfully completed the survey, representing an 84% completion rate. Following the analysis of this data, the program shared a comprehensive summary of the results with the staff.

In summary, 95% of respondents (123 out of 130) reported that their housing situation had remained stable over the previous 90 days. Additionally, a significant portion, 89.6% (108 out of 130), indicated that no additional financial assistance was required for necessities such as food, clothing, or housing during the same period.

Identified Problems, Recommendations and Timelines:

BOCC recommends that the program continue efforts to enhance the Client Satisfaction Survey by incorporating one or two questions aimed at assessing clients' satisfaction with their interactions with staff. This may involve incorporating one open-ended question to capture the personal perspective of each respondent.