Programmatic and Fiscal Monitoring Report FY 22-23

Ryan White Funded Services: Part A HIV Health Services

Agency: Shanti Project Site Visit Date: December 5, 2023

Program Reviewed: Shanti Emotional and Practical Support Services/Senior Report Date: December 8, 2023

Survivor Support Program

Site Address: 730 Polk Street, Third Floor, San Francisco, CA 94109

CID/MOU: 02517/24 Funding Source(s): RWPA

Review Period: Part A: March 1, 2022 - February 28, 2023

On-Site Monitoring Team Member(s): Michelle O'Neal, Andy Scheer and Maria Lacayo (HHS)

Program/Contractor Representatives: Liz Stumm, Lorena Jimenez, and Shannon Bourne (Personnel)

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	4	Program Deliverables	4	Program Compliance	4	Client Satisfaction
---	---------------------	---	----------------------	---	--------------------	---	---------------------

Sub-Categories Reviewed:

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

MONITORING REPORT SUMMARY

Agency/Program: Shanti Project/Shanti Emotional and Practical Support Services/Senior Survivor Support Program

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 91.9 percent of its contracted units of service target.

The program met 208.3 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.

Shanti's Senior Survivor Support program is under the administration of HIV Health Services (HHS).

The program addresses the service needs and improves the quality of life of long-term survivors of the AIDS epidemic in San Francisco, through group-level and individualized supportive programming. It is designed to affirm and strengthen the clients' ability to make empowering, health-enhancing personal choices and aimed at easing the burdens and improving the well-being of long-term survivors. Additionally, this intervention will seek to increase the social engagement and community connectedness of the target population through the provision of care navigation, emotional support, practical assistance, and support groups.

Shanti serves all ethnicities and populations within San Francisco, with focused expertise to meet the unique needs of long-term survivors of the AIDS epidemic, defined as people over the age of 50, including gay, bisexual, heterosexual, and transgender, men, and women, and people of color.

BOCC and HHS met with this program in person and completed this report utilizing a virtual meeting platform as well as telephone and email to gather data. The site visit date reflects the last contact regarding program data.

The program is proud of its very skilled facilitator and co-facilitator as they get clients out of their homes and create new opportunities for them.

Previous Year Plan of Action required?	[]	Yes	[X]	No
If "Yes", describe program's implementa	tion.	The	e progra	ım obtained a San Francisco Fire Department Fire Clearance
Current Year Plan of Action required?	[]	Yes	[X] N	No

⁵ ฟิลักษ์ Title: Michelle O'Neal, Business Office Contract Compliance	Manager
Signature of Authorizing Departmental Reviewer DocuSigned by:	
erna Reyes	
ଂName and Title: Jerna Reyes, BOCC Director	
Signature of Authorizing System of Care Reviewer	
DocuSigned by:	
till Blum	
BN Affile Bill Blum, HIV Health Services Administrator	
PROVIDER RESPONSE: (please check one and sign below)	
I have reviewed the Monitoring Report, acknowledge findings, no furt	her action is necessary at this time.
I have reviewed the Monitoring Report, acknowledge findings, and att	•
and recommendations with issues addresses and timelines for correction	
I have reviewed the Monitoring Report, disagree with findings, respon	
I have reviewed the Monitoring Report, disagree with findings, respon	
I have reviewed the Monitoring Report, disagree with findings, respondence by:	
	ise to recommendations attached.
I have reviewed the Monitoring Report, disagree with findings, response on Stumm The Stumm of t	se to recommendations attached. 7/9/2024
I have reviewed the Monitoring Report, disagree with findings, response Docusigned by: The Docusigned by:	se to recommendations attached. 7/9/2024
I have reviewed the Monitoring Report, disagree with findings, response on Stumm The Stumm of t	se to recommendations attached. 7/9/2024

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:	95/95=100%

1. Program Performance (40 points possible):

Achievement of Performance Objectives				40	15 points out of 15 t	otal points (from 3 Objectives) = 100%
Total Point			l Points:	40		
Points Given: 40/40 Category Score: 100%		100%	Perfo	ormance Rating:	Commendable/ Exceeds Standards	
Parformanca (Thiactives o	and Findings with P	ointe			

Performance Objectives and Findings with Points

O.1	≥ 60% of clients report a decreased level of stress since engaging with the program.	According to program data, 62 out of 72 (86%) clients reported a decreased level of stress since being connected with Shanti HIV Services staff or volunteers.	Points: 5
O.2	≥ 70% of clients report a decreased level of isolation since being connected with program.	According to program data, 60 out of 72 (83%) clients reported a decreased level of isolation since being connected with Shanti HIV Services staff or volunteers.	Points: 5
O.3	≥ 60% of clients report an increased sense of community since being connected with program.	According to program data, 58 out of 72 (80%) clients reported an increased level of sense of community since being connected with Shanti HIV Services staff or volunteers.	Points: 5

Commendations/Comments:

The program is commended for achieving all Objectives.

Identified Problems, Recommendations and Timelines:

None identified.

Docusign Envelope ID: 0AF6B169-CDF7-421E-AC59-2CD040BB3EF9

2.Program Deliverables (20 points possible):

A. Units of Service Deliverables (0-10 pts):				10	92% (of Contracted Units of Service.	
B. Unduplicate	d Client Co	unt (0-10 pts):			10	208%	of Target
			Total Poin	ts:	20		
Points Given:	20/20	Category Score:	100%	Per	formance Ra	ating:	Commendable/ Exceeds Standards

A. Units of Service Delivered

Units of Service Delivered Service Description

Contracted/Actual

LTS-Senior Psychosocial Support Staff Hours: 385323083AJUN23	2,813	2,524	
SSS-Senior Psychosocial Support Staff Hours: 385322082FEB23	1,100	1,083	
SSS-Weekly Support Group Hours: 385322082FEB23	72	57	

B. Unduplicated Client Count

Actual UDC: 125 /**Targeted UDC:** 60 = 208%

Commendations/Comments:

The reported units of service (UOS) are based on funding and services provided for Shanti's:

- 1. Senior Survivor Support program (SSS): invoice # 385322082FEB23.
- 2. Psychosocial Support Services for People Living with HIV/Long-Term Survivors of HIV program (LTS): invoice # 385323083AJUN23. The LTS services were the result of advocacy for the LTS community to receive mental health support. Staff and volunteers provided psychosocial support to the LTS community.

The program achieved 91.9% of the contracted UOS according to the final invoices.

Identified Problems, Recommendations and Timelines:

BOCC used the SSS UDC supplied from program data because the UDC on its final invoice #385322082FEB23 did not match program data.

The LTS UDC identified on invoice #385323083AJUN23 is also incorrect due to the overlap of services. According to the program, clients can be billed to both funding sources.

The program reported having worked with DPH to correct a UDC calculation discrepancy that it discovered on its invoices. This issue has been resolved and will not be present for FY 23-24.

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	[X] No previous FY POA was required [] Previous FY POA was submitted, accepted and implemented [] Previous FY POA submitted, not implemented [] Previous YR POA required, not submitted
Total Points:	25	

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

Commendations/Comments:

The program shares the same Administrative Binder for all of HHS programs and is commended for meeting 100% of all compliance requirements.

Identified Problems, Recommendations and Timelines:

None identified.

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
---------------	-------	-----------------	------	-----------------------------	--------------------------------

Commendations/Comments:

The results of its client satisfaction surveys are for three of its HHS programs:

- Emotional and Practical Support Services / Psychosocial Support and Client Advocacy Program
- Emotional and Practical Support Services / Senior Survivor Support Program
- Integrated Medical Case Management

The program obtained 72 completed surveys. It indicated that it hired a consultant to conduct the survey to get more meaningful information. The responses were reported as strongly agree, agree, neutral, disagree, and strongly disagree. Listed below are some of the strongly agree and agree responses:

- I have gained a better understanding of issues related to my health: 75% (43.1% and 31.9%)
- I have been able to make my own decisions about my health or care with support from staff when needed: 75% (44.4% and 30.6%)
- The services that I receive at Shanti have helped me to reduce stress in my day-to-day life: 86.1% (45.8% and 40.3%)
- The services that I receive at Shanti have helped me feel less socially isolated: 83.3% (45.8% and 37.5%)
- The services that I receive at Shanti make me feel like I'm part of a community: 80.6% (43.1% and 37.5%).

Identified Problems, Recommendations and Timelines:

BOCC recommends that the program obtain specific client satisfaction information about each program listed above.