



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: Curry Senior Center (North of Market)

Program Reviewed: Curry Senior Center - Drop-In Center for Older Adults (MHSA) **Report Date:** August 31, 2023

Program Code(s): **Review Period:** July 1, 2021-
 June 30, 2022

Site Address: 333 Turk Street, San Francisco, CA 94102 **Finalized Date:**

CID/MOU#: 10972 **Appendix #:** A-3

Funding Source(s): MHSA

On-Site Monitoring Team Member(s): Desk Audit Conducted in Lieu of Site Visit

Program/Contractor Representatives: Rashaad Bess

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	3	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: Curry Senior Center (North of Market)/Curry Senior Center - Drop-In Center for Older Adults (MHSA)

- Findings/Summary:**
- The services provided by this program were funded by the Sources listed on page 1.
 - The program met 90.0 percent of its contracted performance objectives.
 - The program met 73.7 percent of its contracted units of service target.
 - Due to desk audit, administrative binder, site premise, and client charts were not examined.
 - The program completed its client satisfaction survey.
 - The program analyzed the client satisfaction results.

The Curry Senior Center - Drop-In Center for Older Adults program is under the Behavioral Health Services (BHS) System of Care (SOC) and is funded through the Mental Health Services Act (MHSA).

The program engages homeless and low-income seniors in wellness and recovery activities in a peer-based supportive environment. It also refers and links seniors to wrap-around services including primary care, behavioral health, case management, and social opportunities.

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.**

Signature of Author of This Report

DocuSigned by:

Michelle O'Neal

Name and Title: Michelle O'Neal, 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:

David Knego

2/09/2024

Signature of Authorized Contract Signatory (Service Provider)

Date

David Knego Executive Director

Print Name and Title

RESPONSE TO THIS REPORT DUE:	February 8, 2024
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A Plan of Action (POA) is required. Please attach by clicking on the attachment icon below:



BOCC monitor approves POA

BOCC Monitor does not approve POA

BOCC Monitor Comments (If Applicable)

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: 61/65=94%

1. Program Performance (30 points possible):

Achievement of Performance Objectives (0-30 pts):	30	27 total points out of 30 points (from 6 Objectives) = 90%			
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 30, 2022, 20% of seniors who will be informally assessed for non-behavioral health needs, will be referred to services as evidenced by referral/linkage participating log provided and collected by Program Manager and peer staff.	According to the Year-End Program Narrative Report, it referred 100% of seniors.	Points: 5
O.2	By June 30, 2022, 20% of limited English-speaking seniors who will be informally assessed for non-behavioral health needs, will be referred to services as evidenced by referral/linkage participating log provided and collected by Program Manager and peer staff.	According to the Year-End Program Narrative Report, it referred 100% of limited English-speaking seniors.	Points: 5
O.3	By June 30, 2022, 70% of participants attending 3 activities or more will report an increase in socialization as measured by client participation surveys administered by Program Manager and Peer staff on a quarterly basis and tracked by data analyst.	According to the Year-End Program Narrative Report, 66 out of 82 or 80% of assessed clients reported an increase in socialization.	Points: 5
P.1	By June 30, 2022, 25 seniors will be informally assessed for non-behavioral health services as evidenced by referral/linkage participating log provided and collected by Program Manager and peer staff.	According to the Year-End Program Narrative Report, it assessed 43 seniors.	Points: 5
P.2	By June 30, 2022, 20 limited English-speaking seniors will be informally assessed for non-behavioral health services needs as evidenced by referral/linkage participating log provided and collected by Program Manager and peer staff.	According to the Year-End Program Narrative Report, it assessed 13 out of 20 limited English-speaking seniors. It achieved 65% of the goal.	Points: 2
P.3	By June 30, 2022, 100 seniors will attend wellness-based activities offered by peer staff as evidenced by the peer-staff administered participant log. Examples of activities are: tournaments of games, exercise, and discussion groups.	According to the Year-End Program Narrative Report, 134 seniors attended wellness-based activities.	Points: 5

Commendations/Comments:

The program met 90% of its contracted performance objectives according to its MHSA FY21-22 Year-End Program Narrative Report.

Identified Problems, Recommendations and Timelines:

The program failed to assess 20 limited English-speaking seniors for non-behavioral health services needs for the second year in a row. The program is gradually improving its performance on this objective, however, a plan of action is requested for the program to document how it is planning to achieve this objective for FY23-24.

BOCC advises the program to indicate whether the participants in the numerator for Objective O.3 attended 3 or more activities in its FY 23-24 Year-End Report.

BOCC also advises the program to include the raw data (numerator and denominator) for the percentage achievement reported for Objectives O.1 and O.2.

2. Program Deliverables (20 points possible):

Units of Service Deliverables (0-20 pts):		16	74% of Contracted Units of Service		
Program Deliverables Points:		16			
Points Given:	16/20	Category Score:	80%	Performance Rating:	Acceptable/ Meets Standards

Units of Service Delivered

Program Code	Service Description	Contracted/Actual	
8923DC	60/ 60 - 69 SS - Case Mgt Support-OA: #M17	5,341	3,934
8923DC	60/ 60 - 69 SS - Case Mgt Support-PEI: #M15	587	432

Unduplicated Clients by Program Code

Program Code	Contracted/Actual	
8923DC	150	195

Commendations/Comments:

The program met 73.7% of its contracted UOS based on the final June invoices (Inv# M15JU22 and M17JU22). According to the Year-End Demographic Data Program Report, it served 195 unduplicated clients.

Identified Problems, Recommendations and Timelines:

None identified.

3. Program Compliance (40 points possible):

A. Declaration of Compliance Score (5 pts):	5	Submitted Declaration			
B. Administrative Binder Complete (0-10 pts):	N/A				
C. Site/Premises Compliance (0-10 pts):	N/A				
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:	10				
Points Given:	10/10	Category Score:	100%	Compliance Rating:	Commendable/ Exceeds Standards

Commendations/Comments:

The administrative binder, site/premise, and chart documentation files are not required during this monitoring cycle due to this desk audit.

Identified Problems, Recommendations and Timelines:

None identified.

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:

According to the Year-End Program Narrative Report, it collected feedback from program participants based a four-question client satisfaction survey. Drop-In Center Peer Outreach specialist distributed the surveys to new clients to reflect a baseline and to clients who had participated in 3 or more programs in the Drop-In Center.

The 88 people who were surveyed attended three or more activities or were new clients and 66 of those clients reported an increase in socialization.

From the client feedback, the program learned that clients feel safe and comfortable with the environment and staff in the Drop-In Center. Also, when it provides more essential items/prizes, it enhances socialization, mental health, and wellness for the BINGO program.

The program read out loud among staff the results of surveys and client feedback. It will conduct a survey of the types of BINGO prizes that clients deem as essential and monthly staff will begin making trips to acquire chosen items that clients feel enhance their mental health and wellness.

Identified Problems, Recommendations and Timelines:

BOCC recommends that the program include more of its survey findings regarding client feedback in its Year-End Program Narrative Report.

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

Specific Objective. O.1	The program must submit a POA indicating its plan to access 20 limited English-speaking seniors for non-behavioral health services needs during FY 23-24.
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Curry Senior Center - Senior Drop-In Center Plan of Correction:

The Senior Drop-In Center has acquired a Cantonese-Mandarin speaking Drop-In Center Specialist as of Sept. 5, 2023, to address both behavioral and non-behavioral needs of limited English-speaking participants. The program specialist will provide and facilitate daily, weekly and monthly programs and services to identify and address these needs to meet Curry's 2023-2024 Program Objectives:

By June 30, 2024, 20 limited English-speaking seniors will be informally assessed for non-behavioral health services needs as evidenced by referral/linkage participating log provided and collected by Program Manager and Peer staff.