## COUNTY OF SAN MATEO Departmental Correspondence

AUG 0 8 2001 Hearing date: AUG 2 1 2001

TO: Honorable Board of Supervisors

FROM: Charlene A. Silva, Director, Aging and Adult Services

SUBJECT: Agreements with various Home Health Care Providers for Fiscal Year 2001-2002

## RECOMMENDATION

Adopt a resolution authorizing the President of the Board to execute agreements with At Home Health Care, Medical Care Professionals, Nurse Providers, Inc., Older Adults Care Management and Rainbow Home Care Services for home health care services for FY 2001-2002

#### Background

Aging and Adult Services (AAS) provides protective and supportive services, case management, and conservatorship services to functionally impaired adults and seniors. Funding for these services is a combination of federal, state, and county dollars as well as fees for services. Supportive services provided by AAS include attendant care to individuals living independently. Attendants provide a variety of personal and health-related services that enable clients to remain in their own homes and avoid institutionalization. AAS programs that provide attendant care include Multipurpose Senior Services Program (MSSP), AIDS Case Management and Waiver (AIDS), Linkages/Respite, and Centralized Intake/Adult Protective Services (APS).

MSSP serves persons age 65 or over who are eligible for or are receiving Medi-Cal and who are eligible for placement in a skilled nursing facility. MSSP staff work with physicians, community agencies, families, and the elderly to arrange for a variety of services to help persons having difficulty in caring for themselves to continue to live at home. For the past twelve (12) years AAS has received funds from the California Department of Aging (CDA) to provide MSSP. On June 5, 2001 your board approved an agreement with CDA for MSSP for fiscal year 2001-2002.

The AIDS Case Management Program, including AIDS Waiver, provides services to clients who are at risk due to deterioration in health related to HIV. Through the use of subcontractors this program provides attendant care, homemaker and nursing services, and psychosocial counseling. The program is funded through an intrafund transfer from the AIDS Program and through Medi-Cal.

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The APS staff assess and develop care plans in situations where the elderly or dependent adults have been subjected to or are at-risk of neglect, abandonment, isolation, abduction, or physical, mental, or financial abuse. When needed, the social worker can provide emergency protection such as shelter, food, or attendant care until a longer-term care plan is developed and implemented. Funding for APS is a combination of state and federal revenues paid through the Department of Social Services.

Linkages provides assessment and case management services for the elderly and younger disabled adult population. Through the purchase of services such as in-home chore care and transportation, persons having difficulty caring for themselves can continue to live independently in the community. The Linkages Respite Program is available to purchase respite services for unpaid caregivers who have the responsibility for the primary care of a frail elder or functionally impaired adult. Linkages is funded through the Community-Based Services Program provided by the California Department of Aging.

### Discussion

A Request for Proposals (RFPs) for a four-year cycle starting July 1, 2000 to June 30, 2004, for home health care services for clients in four programs (AIDS, MSSP, Linkages/Respite, and APS) was issued last year. Five organizations submitted proposals in response to the RFP: At Home Health Care, Medical Care Professionals, Inc., Nurse Providers, Older Adults Care Management, and Rainbow Home Care Services. A review committee including representatives from various county departments evaluated all the proposals to assess the applicants' experience and competence in the provision of the services required. Based on the criteria and the committee's evaluations, all five applicants were selected to provide home health care services.

### Performance Measures

Two performance measures were developed last year to help determine MSSP's success at meeting its goal of assisting clients to delay or avoid institutionalization. The first measure looks at the average number of months clients are served by MSSP. This represents the amount of time the program has succeeded in avoiding institutionalization. The second performance measure looks at the number of clients who terminate from the program because of institutionalization. The lower this percentage is, the better the program is doing at meeting its goal of avoiding institutionalization.

Performance Measures	Actual FY 2000-01	Estimated FY 2001-02
Average number of months the provision of case management services prevented institutionalization	39	37
Number and Percent of case terminations due to institutionalization	35 26%	32 25%

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The AIDS Case Management Program is contracted to maintain an active caseload of 30 clients per month. The AIDS Waiver Program allows an additional 25 clients to receive services. Program effectiveness is measured by reviewing the average number of months per client in which the provision of case management services prevented institutionalization.

Year	Ave. Monthly Caseload	New Clients	Total Clients Served	Ave: No. of Mos. Institutionalization Prevented
1999-00 Actuals	62	72	145	19 <sup>°</sup> mos.
2000-01 Actuals	63	70	143	20 mos.
2001-02 Projected	63	71	141	20 mos.

\*Number exceeds 60 clients per month due to mid-month enrollments and terminations.

The agreements have been reviewed and approved by County Counsel, and they meet CDA and the State Department of AIDS requirements for subcontractor agreements.

#### Term and Fiscal Impact

The term of the agreements is July 1, 2001 through June 30, 2002. The maximum the county shall be obligated to pay collectively for these agreements under a single resolution is \$460,000. Funding is a blend of state and federal funds from CDA, Department of Social Services, Department of Health Services, and County's Master State Agreement for AIDS, and all funds are included in AAS's approved budget for 2001-2002. There is no impact on the county General Fund as a result of this action.

RECOMMENDED

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