

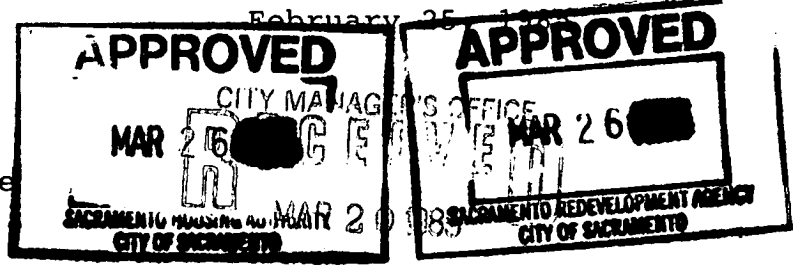


**SACRAMENTO  
HOUSING AND REDEVELOPMENT  
AGENCY**



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Housing Authority  
and  
Redevelopment Agency of the  
City of Sacramento  
Sacramento, California



Honorable Members in Session:

**SUBJECT:** Housing Development Action Grant For Frail Elderly  
Project Request For Proposals For Social Services  
Linkages

**SUMMARY**

Attached is a resolution authorizing the Acting Executive Director to request proposals (RFP) from public and private service providers to formulate working agreements with the Agency in order to coordinate essential services for residents.

**BACKGROUND**

On August 7, 1984, authorization was granted by the Agency Commission and City Council (Resolution Nos. 84-026 and 84-683, respectively) to submit an application in connection with the new Federal Housing Development Action Grant (HoDAG) Program, administered by the Department of Housing and Urban Development. (DHUD). The purpose of the application was to provide partial funding for the development of the subject facility. The application was submitted to DHUD on April 13, 1984 and on November 29, 1984 notification was received by the City of Sacramento for preliminary funding approval. Final funding approval is contingent on meeting all program criteria and starting construction not later than November 29, 1986. Staff has therefore begun developing the program design criteria and preliminary schedules necessary for final design and construction. The Housing Production Division has been designated the lead division to organize and supervise all phases of the proposed program. Additional support will be provided by Housing Management. The Community Services Division has the responsibility of developing the facility's "operational program" and Community Development will provide all financing and bonding requirements.

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# SACRAMENTO HOUSING AND REDEVELOPMENT AGENCY

Housing Authority  
and  
Redevelopment Agency of the  
City of Sacramento  
Page 2

The Community Services Division in response to the development of the operational program for the facility realizes that in order to enhance the quality of life for elderly and handicapped residents as well as adding to the years of independence it must be assured that there is the availability of essential supportive services:

1. Nutritional
2. Housekeeping
3. Personal
4. Transportation/Escort
5. Socio-Recreative
6. Information and Referral Advocacy
7. Medical/Health
8. Personal Counseling/Emotional Support
9. Professional Assessment

There are existing Community-based programs in Sacramento which provide these services and the Agency will forward a Request For Proposal (Attachment A) to appropriate service providers (Attachment B) in order to identify services providers specifically interested in developing social service linkages with the Sacramento Housing and Redevelopment Agency in the provision of services identified.

A request will be submitted to the Adult Day Health Planning Council (Attachment C) to secure their assistance in reviewing proposal and advising the Agency as to their findings and recommendations. The Committee is well represented by public and private health and social service providers and community representatives which include representatives from the Area 4 Agency on Aging and Sacramento County Commission on Aging.

The review body will screen the proposal and advise the Agency as to their findings and recommendations. The Executive Director will then make the final selection of which agencies' and Memorandums of Agreement will be executed subject to the approval of the governing bodies.

A tentative schedule for the RFP process begins with a distribution of packets on February 20, 1985 and final documents of Providers Linkages on May 1, 1985, (Attachment D).

# SACRAMENTO HOUSING AND REDEVELOPMENT AGENCY

Housing Authority  
and  
Redevelopment Agency of the  
City of Sacramento  
Page 3

## FINANCIAL DATA

The Request For Proposal involves no Agency funding but rather utilization of existing Community resources and a consideration of a proposed resident fee scale. The fees proposed by providers are to be reasonable and shall not exceed the cost of providing the services. They shall be calculated on a sliding scale related to the income which permits the provision of services to each participant who cannot afford the fees.

## POLICY IMPLICATIONS

The action(s) proposed in this staff report are consistent with previously approved policy and there are no policy changes being recommended.

## VOTE AND RECOMMENDATION OF COMMISSION

At its regular meeting of March 18, 1985, the Sacramento Housing and Redevelopment Commission adopted a motion recommending adoption of the attached resolution. The votes were as follows:

AYES: Amundson, Luttrell, Moose, Pettit, Teramoto,  
Walton, Wooley, Angelides

NOES: None

ABSENT: Lopez, Ose, Sanchez

46

**SACRAMENTO HOUSING AND REDEVELOPMENT AGENCY**

Housing Authority  
and  
Redevelopment Agency of the  
City of Sacramento  
Page 4

**RECOMMENDATION**

The staff recommends adoption of the attached resolution authorizing the Acting Executive Director to solicit proposals from public and private agencies in an effort to establish linkages for the provision of support services to residents in the proposed Independent Living Facility to be located at 600 "J" Street, Sacramento, California.

Respectfully submitted,



ANDREW J. PLESCIA  
Acting Executive Director

Transmittal to Council:



WALTER J. SLUPE  
City Manager

Contact Person: Natalie D'Agostini

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# RESOLUTION NO. 85-071

ADOPTED BY THE REDEVELOPMENT AGENCY OF THE CITY OF SACRAMENTO

ON DATE OF

March 26, 1985

REQUEST FOR PROPOSAL FOR THE DEVELOPMENT OF  
SOCIAL SERVICES LINKAGES FOR THE FRAIL ELDERLY  
FACILITY LOCATED AT 600 "I" STREET

BE IT RESOLVED BY THE REDEVELOPMENT AGENCY OF THE CITY  
OF SACRAMENTO:

Section 1: The Executive Director is authorized to solicit proposals from public and private agencies for the establishment of linkages for the provision of social services for the Independent Living Facility to be located at 600 "I" Street.

Section 2: The Executive Director is authorized to execute Memorandum of Agreement with the selected agencies, upon approval by the Sacramento Housing and Redevelopment Commission.

\_\_\_\_\_  
CHAIR

ATTEST:

\_\_\_\_\_  
SECRETARY



48

**RESOLUTION NO. 85-014**

ADOPTED BY THE HOUSING AUTHORITY OF THE CITY OF SACRAMENTO  
ON DATE OF

March 26, 1985

REQUEST FOR PROPOSAL FOR THE DEVELOPMENT OF  
SOCIAL SERVICES LINKAGES FOR THE FRAIL ELDERLY  
FACILITY LOCATED AT 600 "I" STREET

BE IT RESOLVED BY THE HOUSING AUTHORITY OF THE CITY OF  
SACRAMENTO:

Section 1: The Executive Director is authorized to solicit proposals from public and private agencies for the establishment of linkages for the provision of social services for the Independent Living Facility to be located at 600 "I" Street.

Section 2: The Executive Director is authorized to execute Memorandum of Agreement with the selected agencies, upon approval by the Sacramento Housing and Redevelopment Commission.

\_\_\_\_\_  
CHAIR

ATTEST:

\_\_\_\_\_  
SECRETARY

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**APPROVED**  
MAR 26 1985  
SACRAMENTO HOUSING AUTHORITY  
CITY OF SACRAMENTO

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# SACRAMENTO HOUSING AND REDEVELOPMENT AGENCY

## MEMORANDUM

**TO:** Interested Agencies, Organizations and Individuals **DATE** February 1, 1985

**FROM:** Andrew J. Plescia, Acting Executive Director

**SUBJECT:** Request For Proposal for Social Service Linkages for the Proposed Independent Living Facility (Riverview Plaza)

A Request for Proposal is being distributed to determine agencies or individuals specifically interested in developing social service linkages with the Sacramento Housing and Redevelopment Agency in provision of social services for Riverview Plaza. (600 "I" Street).

Submission of proposals is not binding upon the applicant organization, but rather is a mechanism to begin planning coordinating and developing activities.

For your information we are endorsing a statement of categorical needs.

For further information you may contact Natalie D'Agostini, Chief, Community Services Division, (916) 440-1344.

Return Request For Proposal To: Sacramento Housing and Redevelopment Agency  
Community Services Division  
P.O. Box 2834  
Sacramento, CA 95809  
Attn: Natalie D'Agostini

Thank you for your assistance.

ANDREW J. PLESCIA  
Acting Executive Director

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SACRAMENTO HOUSING AND REDEVELOPMENT AGENCY  
INDEPENDENT LIVING FACILITY

Request For Proposal

STATEMENT OF INTENT

The purpose of this request for proposal is to formulate working agreements with public and private services providers in order to coordinate essential services for the elderly residents.

The Sacramento Housing and Redevelopment Agency realizes that in order to enhance the quality of life for residents as well as adding to their years of independence, it must be insured that specific and essential support services must be available: nutrition, housekeeping, personal, transportation, socio-recreative, information and referral advocacy, medical and health services, counseling and emotional support services, and, professional assessment. These services are directed towards a level of intervention which is appropriate for residents typically housed in Independent Living Facilities. There is a desire to develop on-site services in such a way as to complement existing community resources rather than duplicate or overlap what is available. It is also desirable that these services be internally incorporated and provided by professionally qualified staff.

Determination of which providers are most appropriate will depend on a number of factors, chief among them the availability of services, access to these resources, and the financial wherewith of the residents and the services providers. Of particular importance is the availability of existing funding to meet resident needs as well as the availability of third party reimbursement payment for social and health maintenance services. The Agency will work with interested parties in designing adequate space for such services. Commercial space will be available in the building for agencies desiring space rental (i.e. medical clinics, adult day health care facilities). Community space will also be available for the provision of meals, recreational activities or counselling services.

Although the supportive services are intended to assist the resident population, they should be extended to elderly persons in the community, thus reducing costs to residents and maximizing service potential for elderly persons in nearby housing developments.

A fee-for-services plan will be instituted that reinforces the residents sense of self-determination and contributes towards assuring the overall economic feasibility of the services program. In establishing fee-for-services schedules providers be encouraged to initiate a sliding scale whenever feasible allowing residents to pay in proportion to their incomes.



BACKGROUND

The Sacramento Housing and Redevelopment Agency has been awarded a grant from the Department of Housing and Urban Development to develop a 124 unit Independent Living Facility (ILF) which will begin being constructed in June 1985, adjacent to the 630 "I" Street headquarters.

The facility is designed to afford an assisted independent living environment that offers the senior citizen or handicapped person who may be functionally impaired, but in good health (not physically ill), the residential accommodations, central dining facilities and supportive services required to achieve, maintain, or return to a semi-independent lifestyle and prevent premature or unnecessary institutionalization as they grow older.

Forty percent of the elderly and handicapped residents, selected will be provided subsidized housing units with the remaining sixty percent paying market rates.

DISCUSSION OF SERVICE LEVEL IN RELATION TO ACTIVITIES OF DAILY LIVING (ADL)

Three general categories of functional ability related to potential service needs have been identified as well as percentage of persons to be selected falling into these categories.

Category I

Minimum Services: Those who may only need the meal service (although they may cook for themselves some of the time), but otherwise (with the exception of heavy housekeeping chores) are mostly independent and can care for all other activities of daily living. From this category some 75 percent might be selected at initial rent-up. These tenants will be active and interested in project programs and activities in the community. They will be the "backbone" of the development. Those who have skills and desire may have paid employment in some aspect of the service delivery plan.

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Category II

Moderate Services: This group will need both the food program and regular assistance with housekeeping, and more persons may be expected to need some personal help in the activities of daily living. They will, however, be involved in the general activities of the development and the community. About 20 percent of those persons selected might be in this category.

Category III

Maximum Services: The third and smallest category is the more frail or more seriously impaired who need all of the services all of the time, but who, with these services, can be expected to live semi-independent lives over an extended span of time, although medical care in a health facility will probably be needed more quickly than in the first two categories. This group may also include some older persons who are able to leave nursing homes and live a more normal life in an assisted residential facility. In Category III the possibility of more rapid tenant turnover and the risk of vacancies might be expected to be highest and must be taken into account. If this group is kept small, it also will help to retain the residential character of the development and widen its appeal. This is a five percent category.

Older people with varying levels of functional capacity will be integrated. The more frail or impaired will not be segregated. The facility is to be designed for physically disabled persons. However, the integration of young disabled persons has not proved to be successful. Studies have indicated that the mayor disadvantages to intergeneration mixes indicated incompatibility are to (1) lack of common interests, (2) restrictive and sheltered environments, and (3) disfunctionality for social interaction combining the non-elderly with the elderly creates potential conflict of lifestyles. The social and psychological needs of the younger disabled are generally not met by the programs and services designed for residents in congregate housing settings. Such as the one proposed. It is also the experience of housing authorities throughout the county that the chronically mentally ill can not be well served in congregate housing of the assisted residential type, and should not be considered for residency.\*

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\* International Center for Social Gerontology, Washington, D.C. 1980. P9-10. Thompson, Marie and Donahue, Wilma Planning and Implementing Congregate Housing for Older Adults.

SERVICE SYSTEM PACKAGE

A Service System Package (SSP) will be offered to residents and will be based on consumer needs and preferences, while at the same time being financially feasible.

Requests for Proposal are for the following service areas and will be incorporated in the Service Package.

I. Nutrition Services

The provision of a full meal service and group dining is a central feature of Independent Living Facilities. It is considered to be a basic service to residents who may be unable to shop and cook all of their meals or who may desire to socialize while dining. In addition, it provides balanced and nutritious meals necessary to maintain optimum health and energy.

The provision of a full meal service (defined by HUD as two (2) meals per day with one (1) meal hot); seven days a week, that provide 80 percent of the tenants' daily requirements. In addition to planning the meal services, a number of factors need to be considered. These factors include: the cost and type of meal service to be provided (seated/cafeteria style), hours of services, how the meals will be provided (on site/catered); and whether participation is to be partially/totally mandatory or optional.

Objective - to provide 80 percent of the daily recommended dietary allowance, consisting of two (2) meals per day (one hot meal) seven days a week, one mandatory and one optional.

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II. Housekeeping Services

Many older people have indicated that household help with heavier chores is the first need for assistance they experience.

The housekeeping service may include a range of services from occasional assistance with lighter housework, to periodic heavy housekeeping of washing walls and windows, to full-on-going assistance with all housekeeping activities.

The housekeeping services should include the complete range of services to adequately meet resident needs. (Attachment "A").

In planning the housekeeping service programs, the level of each residents competencies will determine the amount and type of assistance that will be required. For the impaired residents (Category III), it is expedient to plan on all impaired residents needing help with the heavy household tasks in a once or twice-a-month basis. Light housekeeping help may be required on a daily basis by some, (Category II), while others may need such help on a weekly or intermittent basis (Category I). Residents eligible for medical aid and/or SSI may be eligible for homemaker services, those paying market rate may need the additional supports.

Objective - to provide three levels of service involving homemakers chore services at an average of 8 hours per resident per month.

III. Personal Services

Some personal service may be performed by tenants as the inevitable "buddy system" develops. Volunteers from the community may also be called upon to help with these chores. However, there are personal services that are better discharged by staff or community agencies. For example, a visiting nurse may provide help with health, supervise the taking of medication, take blood pressure, or recommend appropriate medical assistance.

Personal service is to assist persons with their tasks of daily living and may include:

- getting in and out of bathtubs/showers
- providing assistance with grooming, bathing, eating, transferring
- shopping for personal needs.
- correspondence
- removing trash
- arranging for medical services.
- laundry, caring for clothing.

The specific needs for personal service would be determined as the resident is assessed for the Independent Living Facility.

As a rule, a smaller portion of the impaired residents who need or want personal services than will want the meal and housekeeping services. Overtime, however, the need for such assistance will generally increase as the resident grows more frail with increasing age.

Objective - to provide not less than four hours or more than 20 hours per week of personal services for residents requiring such support to live in a dignified and independent manner and preventing unnecessary institutionalization. (Category II and III).

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IV. Transportation Services/Escort Services

Transportation and/or personal escort services should be available for residents who require help with access to needed services when it is extremely inconvenient for them to do so, or when their mobility is impaired.

Some residents will require escort services in addition to transportation, escort services refers to an activity which is designed to assist those who are physically handicapped and require some personal assistance and special modes of transportation (i.e. barriers-free). This type of services entails more than provision of transportation, it is equally a companion service.

Objective - to provide transportation services for medical care, and shopping assistance at an average of 12 trips per resident requiring needed services (Category II, III).

V. Socio-Recreative Services

Social and recreation programs should be organized by trained personnel knowledgeable about adapting activities to handicapped persons. Activities are intended to stimulate social interaction through personal contacts in a supportive atmosphere while affording enjoyable activities, mental stimulation, and physical activity. While the activities program is developed by staff, residents should be involved not only as participants but also as initiators. Efforts should be encouraged to include volunteers to maximize social and activity potential.

Objective - to provide, on the average, two activities per day with categories such as education, cultural, music, creative, artistic, nature, gardening, and volunteers opportunities, and community trips.

VI. Information and Referral Advocacy

Information and referral service has been shown to be one of the most critical needs of older persons.

Information and Referral services are designed to provide older individuals with current information on and referral to all appropriate services to meet their needs. Such services must have adequate staff knowledgeable and skilled in dealing with, and assessing the needs of older persons, and assisting to obtain needed services. Information and referral should be accessible to other persons by phone or person-to-person contact, and there should be follow-ups on the referrals made.

Objective - to provide 124 new home visits, 285 units of information and referral and 150 units of follow-up, (including home visit follow-up) annually for persons residing in Independent Living Facilities.

VII. Medical and Health Services

Undoubtedly, residents of the elderly congregate housing operation would have an increasing sense of security if medical services were available but not intrusive in their security. Health care will be viewed as a community and individual responsibility.

Programs will be encouraged which intend to prevent illness and physical decline such as health, security, health education, personal hygiene, and physical therapy or exercise.

Objective - to provide medical and health appointments which may include adult day health care, physical therapy, health screening clinics, dental services, podiatry, and other health maintenance programs. A minimum of 40 percent of the residents are anticipated to utilize on-site medical services.

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VIII. Personal Counseling and Emotional Support Services

Older persons often have need of personal contacts and emotional support services because they are separated from families or are widowed. Independent Living Facilities afford opportunities for interpersonal contact insofar as there are other people in the same setting. However, personal counseling and emotional support services, unless developed and provided on an organized basis will be of little, if any value. Therefore, such supportive services must be delivered by trained personnel.

Personnel Counseling services must be handled by professional trained personnel (i.e. social worker or psychologist) with experience in and understanding of the problems, and needs of older persons.

Objective - to provide 10% of the residents the availability of group or individual counseling services on a long or short term basis.



IX. Professional Assessment:

Assistance will be needed to provide an assessment of resident applicants with respect to functional independence and need for supportive services. The Committee will determine the functional ability of elderly, non-elderly handicapped or temporarily disabled individuals for entry and exit criteria for residence. The PAC will also identify and designate services appropriate to the individuals' needs and abilities.

PAC membership should be comprised of individuals professionally competent to assess the functional abilities of elderly persons in relation to the performance of the normal tasks of everyday living.

Among the PAC duties to be considered, related to entry, termination and extent of participation in the Independent Living Facility are:

1. recommending eligibility for entry to, or termination from, the Independent Living Facility in relation to independent functioning;
2. order or carry out a medical evaluation, if necessary;
3. recommend a service plan for each resident appropriate to his/her needs;
4. be furnished with and retain available information concerning residents;
5. present evaluations to Housing Management;
6. provide residents an appeal process from PAC decisions;

Objective 1: To provide a formal assessment of each application which shall include a review of the adequacy of applicants' informal support networks.

Objective 2: Provide a regular assessment of all residents as deemed appropriate.

It should be noted that procedures should include confidentiality of information related to all individuals examined, as per Privacy Act of 1984.

SELECTION OF LINKAGE SITE

A objective Community Screening Body yet to be determined will review the proposals and advise the Agency to their findings and recommendation. The Executive Director will then make the final selection of which Agencies Memorandums of Agreement will be executed subject to the approval of the Governing Bodies.

FUNDING AND FEES SERVICES

The Request For Proposal involves no identified funding but rather utilization of existing funding resources and a consideration of a proposed resident fee scale. The fees proposed by providers are to be reasonable and shall not exceed the cost of providing the services. They shall be calculated on a sliding scale related to the income which permits the provision of services to each participant who cannot afford the fees.

REQUEST FOR PROPOSAL

AGENCIES INTERESTED IN PARTICIPATING IN THE INDEPENDENT LIVING FACILITIES PROJECT SHOULD SUBMIT A PROPOSAL TO:

SACRAMENTO HOUSING AND REDEVELOPMENT AGENCY  
DEPARTMENT OF HOUSING/COMMUNITY SERVICES DIVISION  
630 "I" STREET  
SACRAMENTO, CA 95814  
ATTN: NATALIE D'AGOSTINI

DEADLINE FOR SUBMISSION IS MARCH 30, 1985.

HOUSEKEEPING PROGRAM

Kitchen Area

- clean stove, lift stove top and clean underneath; clean racks and inside of oven once a week or when needed.
- defrost refrigerator once a month, more often if need; clean tops, racks, and inside of door.
- scrub sink, fixtures, formica tops weekly.
- clean walls in kitchen when needed.
- clean cupboards on top and inside once a month.
- laundry, if done, is to be done during the 1 1/2 hours spent in the apartment.
- deinfestation should be scheduled regularly, and also at the request of the tenant.

Living Room/Bedroom

- clean floors weekly, wax only if resident provides the wax.
- clean radiators, top and front every week.
- vacuum carpets weekly (including under furniture).
- dust furniture, light fixtures and all articles weekly.
- change bed linens weekly (linen provided by resident).
- clean walls as needed.
- clean inside windows monthly, including blinds.
- clean finger prints from all doors.

Bathroom

- clean toilet inside and out, seat and sides weekly.
- clean sink, fixtures, mirrors, medicine cabinet weekly.
- clean shower, tub, fixtures and walls weekly.
- clean floors weekly, and walls as needed.
- dust light fixtures and other items in the bathroom weekly.