



Civil SERVICE COMMISSION CITY AND COUNTY OF SAN FRANCISCO

CIVIL SERVICE COMMISSION REPORT TRANSMITTAL (FORM 22)

Refer to Civil Service Commission Procedure Number Two for Instructions on
Completing and Processing this Form

1. Civil Service Commission Register Number: _____ - _____ -
2. For Civil Service Commission Meeting of: October 5, 2026
3. Check One:
Ratification Agenda
Consent Agenda
☒ Regular Agenda
Human Resources Director's Report
4. Subject: Personal Services Contract DHRPSC0006041– Request for additional information
5. Recommendation: Adopt the report
6. Report prepared by: Mirna Palma Telephone number: 415-416-7256
7. Notifications: see next page
8. Reviewed and approved for Civil Service Commission Agenda:

Human Resources Director:

Date:

9. Submit the original time-stamped copy of this form and person(s) to be notified
(see Item 7 above) along with the required copies of the report to:

**Executive Officer
Civil Service Commission
25 Van Ness Avenue, Suite 720
San Francisco, CA 94102**

10. Receipt-stamp this form in the ACSC RECEIPT STAMP≡
box to the right using the time-stamp in the CSC Office.

Attachment

CSC RECEIPT STAMP

Contact information for notifications:

1. Human Services Agency, Trent Rhorer, trent.rhorer@sfgov.org
2. Department of Human Resources, Carol Isen, carol.isen@sfgov.org
3. Human Services Agency, Daniel Kaplan, daniel.kaplan@sfgov.org
4. Human Services Agency, Joan Miller, joan.h.miller@sfgov.org
5. Human Services Agency, Katrina Williams, katrina.williams@sfgov.org
6. SEIU 1021, Najuawanda Daniels, najuawanda.daniels@seiu1021.org



SAN FRANCISCO HUMAN SERVICES AGENCY

Department of Benefits
and Family Support

Department of Disability
and Aging Services

P.O. Box 7988
San Francisco, CA
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www.SFHSA.org

Date: September 1, 2026

To: Kate Favetti, President, Civil Service Commission
Sandra Eng, Executive Director, Civil Service Commission
Members of the Civil Service Commission

From: Mirna E. Palma, Talent Acquisition, Assessments and
Classification Manager

RE: Request for Information Regarding Personnel Services Contract
0006041

Background

On February 11, 2026, the San Francisco Human Services Agency (SFHSA or HSA) met with SEIU 1021 (the union) to discuss this contract. During the meeting, it was confirmed that the union does not object to this contract. They stated that their original objection was based on a belief that this contract may just exist due to staffing issues and with sufficient staff, this work could be performed in-house; however, upon further review and discussion with Family and Children's Services (FCS) union members, the union recognized that these functions support homeless prenatal programs and substance-use services which are areas that fall outside FCS's expertise and scope. The union's closing remarks during the brief meeting highlighted their support of the community-based partners providing these specialized services.



Daniel Lurie
Mayor

Trent Rhorer
Executive Director

On March 2, 2026, during the Civil Service Commission (CSC) meeting, this contract was severed from the ratification agenda and approved subject to a staffing report within six (6) months of approval of this contract. This report provides the requested information as well as additional insight regarding this contract and the services it provides.



Scope of Work

In accordance with Assembly Bill No. 153 (Chapter 86, Statutes of 2021)¹, California has formally opted into the Title IV-E prevention services program under the federal Family First Prevention Services Act (FFPSA)². To qualify for federal funding, counties must provide comprehensive services including substance abuse prevention and treatment, in-home parent skill-based programs, and targeted support for children identified as candidates for foster care. These child welfare services may encompass case management, counseling, parent training, and specialized permanency services. Compliance with these requirements is essential to securing federal Title IV-E funds and advancing California's commitment to reducing foster care entries, improving family outcomes, and promoting equity across the child welfare system.

To clarify how the contracted services fit within this mandate, Attachment A illustrates the workflow FCS follows when supporting families impacted by substance use, trauma, and other high-risk factors. The chart shows that City classifications, particularly 2940 Protective Services Workers, are already integrated in this process through assessment, oversight, and coordination. However, it also underscores that the specialized, clinical services required under FFPSA are delivered by community-based organizations with the expertise, training, and capacity needed to meet families where they are and to satisfy federal service requirements.

This collaborative structure reflects how child welfare is designed to function. While City classifications play an essential part in the workflow, the best outcomes are achieved when FCS assesses safety, makes referrals, and oversees progress, and community partners deliver the intensive, therapeutic, and recovery-oriented services families need. The services provided through this contract address complex realities such as substance-use disorder, trauma, mental health needs, and the challenges of

¹ "Bill Text - AB-153 Public Social Services.." 2021. Ca.Gov.

https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202120220AB153.

² "FFPSA Part I." 2018. Ca.Gov. <https://cdss.ca.gov/inforesources/cdss-programs/ffpsa-part-iv/ffpsa-part-i>.



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pregnancy and parenthood—needs that require targeted partnerships with providers who are trained to deliver those interventions.

Family and Children Services (FCS), San Francisco's child protective services department, is legally mandated to ensure the safety, permanency, and wellbeing of children. Its structure, staffing, and daily operations are designed to fulfill that mandate through assessment, coordination, and oversight. The families FCS serves often face simultaneous, interconnected challenges including substance-use disorders, high-risk pregnancies, trauma histories, mental health needs, domestic violence, and homelessness. These are not isolated issues; they are layered and require sustained, specialized intervention that extends beyond CPS's statutory role.

2940 Protective Services Workers carry critical responsibilities such as ensuring safety, developing and monitoring case plans, coordinating services, and guiding parents toward reunification. They partner closely with community-based organizations that provide intensive, parent-centered supports aimed at stabilization, healing, and long-term wellbeing. These partnerships ensure families receive the full continuum of care needed to achieve safety and stability.

Programs supported through this contract including New Beginnings, Keeping Families Together (KFT), and Family Treatment Court (FTC) case management exist precisely to fill gaps that FCS cannot address directly.

New Beginnings supports pregnant parents facing high risk pregnancies while involved with Child Welfare. These parents need comprehensive, client centered support that addresses substance use, trauma, depression, anxiety, housing instability, parenting challenges, and the stress of Child Welfare involvement. New Beginnings case managers provide psychotherapy; children's playgroups; domestic violence support; housing navigation; budgeting assistance; and family centered counseling. They attend medical appointments, court hearings, and meetings. They conduct home visits, build protective factors, and provide continuous advocacy. These supports directly influence positive birth outcomes and long-term family stability.

Keeping Families Together (KFT) provides intensive, focused support to families involved with, or on the brink of involvement



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with, the Child Welfare system. KFT responds to crises as they arise: substance use relapses, domestic violence, mental health concerns, parenting struggles, and housing emergencies. The program delivers psychotherapy, individualized counseling, fatherhood and parenting groups, wellness groups, crisis intervention, and comprehensive housing guidance. KFT case managers stabilize families, remove barriers, and create the conditions necessary for reunification and prevention of further system involvement.

Family Treatment Court case management integrates multiple disciplines (DPH, FTC and FCS) and community partners into one collaborative model. It provides ongoing assessment, treatment planning, and recovery maintenance for families impacted by parental substance use. The model includes court monitored progress, frequent communication with attorneys and judges, and structured, evidence-based incentive systems. This requires an integrated approach that cannot be duplicated within our existing Child Welfare staffing structure.

Requested Information

Per our review, the City classifications that most closely align with the services provided through this contract are the 2940 Protective Services Worker and the 2916 Social Work Specialist classifications. Both classifications already participate in the workflow outlined in Attachment A. Accordingly, the requested staffing data focuses on 2940s and 2916s in FCS.

Budgeted Job Classes

Row Labels	Count of Budgeted Job Class
2916	8
2940	142
Grand Total	150

Allocated Job Classes



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Row Labels	Count of Allocated Job Class
2916	15
2940	135
Grand Total	150

Breakdown of Allocated Job Classes (including vacancies)

Row Labels	Count of Allocated Job Class
2916	15
Filled	15
2940	135
Filled	99
Filled by Exempt	5
Future vacancy	1
Vacant	30
Grand Total	150

Assessment

The services provided through this contract require deep expertise in trauma-informed care, substance-use treatment, clinical counseling, child development, mental health, and family systems. These interventions involve high-engagement activities such as regular home visits, crisis response, psychotherapy, group facilitation, court advocacy, and ongoing recovery



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maintenance. They are intensive, clinically oriented, and must be delivered by trained professionals who specialize in therapeutic and substance-use treatment services.

A thorough review of applicable classifications was conducted to determine whether any City classification could perform this work. As noted by the union during the February 11, 2026, meeting (and as supported by the analysis throughout this report) the homeless prenatal and substance-use treatment services delivered under this contract require clinical, therapeutic, and recovery-oriented expertise that City classifications do not possess. These services fall outside the scope of work that FCS, San Francisco's child protective services department, is responsible for and structured to provide. Although FCS experiences staffing challenges, particularly within the 2940 classification, the inability to perform these services in-house is not a staffing issue. It is an intentional separation of duties; FCS is mandated to oversee safety, case planning, and compliance - not to operate clinical treatment programs.

2940 Protective Services Workers in FCS are designed to coordinate mandated services, monitor progress, collaborate with community providers, and present recommendations to the court. They are not licensed or structured to deliver therapeutic services such as clinical substance-use treatment, ongoing recovery support, or trauma-focused counseling. For this reason, even with full staffing, these services cannot be absorbed into existing City classifications. The distinction between coordination and direct service delivery is foundational; classifications used by FCS cannot clinically or structurally assume responsibility for the specialized services provided through this contract.

2930 Behavioral Health Clinicians from the Department of Public Health are also a part of this workflow. They assess FCS clients via the Substance Use Disorder (SUD) Assessment to determine whether the client requires inpatient or outpatient treatment services. Upon determination that the client meets criteria for outpatient services and has an open child welfare case, the contracted community partner will promptly outreach the client to offer services. While the 2930s perform this assessment, the specialized, intensive, and multi-disciplinary duties of the contracted homeless prenatal and substance use treatment programs are not within the scope of this classification. 2930s do not provide ongoing, intensive parent-centered case management, long-term recovery support, court-monitored progress, home-visiting-based therapeutic engagement, navigation of housing, pregnancy support, domestic violence, and substance-use recovery.



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Community-based organizations, by contrast, are equipped, both practically and relationally, to deliver these trust-based, trauma-informed, and clinically focused services. These interventions are not optional; they are required by state and federal mandate and are central to FFPSA's prevention-services model. Families involved with child welfare often experience highly stressful and emotionally complex circumstances, especially when safety concerns require separation. This dynamic can create barriers to open communication, not because FCS lacks rapport-building skills, but because FCS is responsible for safety decisions, compliance oversight, and recommendations to the court, including removal and reunification determinations. These inherent power dynamics naturally limit parents' ability to safely disclose sensitive issues such as substance use.

Community-based organizations complement this work by providing a neutral, supportive environment where parents can focus on their own treatment needs, ask questions, and engage honestly as they navigate services toward reunification. When specialized partners coordinate the clinical, parent-focused services families require, FCS can remain fully focused on its core responsibilities: ensuring child safety, permanency, and wellbeing. This coordinated model provides families with a balanced, comprehensive system of support.

This partnership also allows the child welfare system to respond to evolving community needs without recreating intensive case-management and clinical treatment programs that already exist, already function effectively, and already align with best practice for California's prevention-services framework. In short, FCS relies on contracted substance-use service providers because this structure reflects how child welfare is intended to function. Specialized providers deliver the depth of support families need, while FCS ensures safety, oversight, and coordination. Together, this partnership creates the conditions for reunification, recovery, and long-term family stability.

Job descriptions used by community-based organizations further illustrate the specialization required. Clinical case managers hired through this contract are master's-level practitioners with targeted experience in substance-use treatment, trauma, mental health, and domestic violence. For example, the job announcement specifies experience providing alcohol and drug counseling, completion of an Alcohol and Other Drug Studies Program or BBS registration, and competencies in psychoeducation related to substance abuse, mental health, domestic violence, and parenting (Attachment B). These qualifications are distinct from the minimum qualifications required



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for 2940 Protective Services Workers, which do not include clinical treatment experience or licensed therapeutic practice.

Additionally, when a CPS case closes, City involvement ends. Community-based organizations, however, can continue providing supportive services beyond the life of a CPS case, ensuring continuity of care and contributing to improved long-term outcomes for families.

Conclusion

The information presented in this report demonstrates that while City classifications play an essential role in assessing safety, coordinating mandated services, and ensuring compliance with court and statutory requirements, they are not structured or equipped to provide the intensive, clinical, and sustained substance-abuse and prenatal support required under state and federal mandates. These specialized services demand clinical expertise, trauma-informed practice, and long-term therapeutic engagement that fall outside the scope of FCS's mission and the responsibilities of 2940 Protective Services Workers and 2916 Social Work Specialists.

Community-based organizations are not an optional complement to this work; they are a core component of the FFPSA and AB 153 prevention services model. Their ability to deliver therapeutic case management and substance-use treatment allows FCS to uphold its statutory role while ensuring families receive the depth of care necessary to achieve safety, stability, and reunification. This established division of responsibilities is intentional, aligned with best practice, and essential to meeting program requirements and securing federal Title IV-E funds.

For these reasons, the services provided through contract DHRPSC0006041 cannot be absorbed into existing Civil Service classifications. The contract reflects a necessary and appropriate partnership model that strengthens outcomes for vulnerable families and supports FCS's mandate to protect children while promoting long-term family wellbeing.



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Attachments:

Attachment A: Family and Children's Services Substance Abuse Services Workflow chart

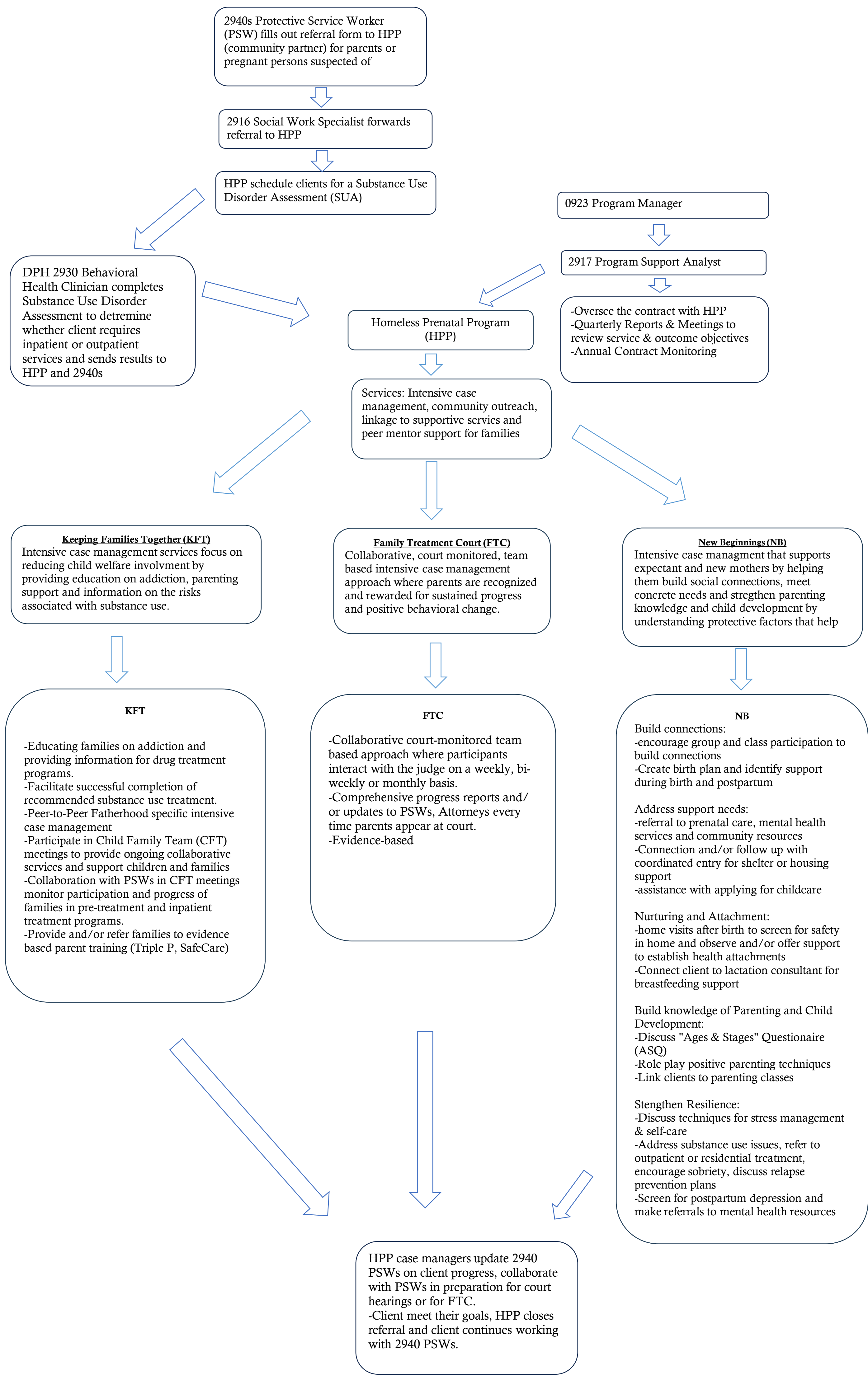
Attachment B: Clinical Case Manager, Keeping Families Together/Family Treatment Court – Job Announcement

References

1. "Bill Text - AB-153 Public Social Services.." 2021. *Ca.Gov*. https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202120220AB153.
2. "FFPSA Part I." 2018. *Ca.Gov*. <https://cdss.ca.gov/inforesources/cdss-programs/ffpsa-part-iv/ffpsa-part-i>.

Attachment A

Family & Children's Services - Substance Abuse Services Workflow Chart



Attachment B



Homeless Prenatal Program

Title: Clinical Case Manager, Keeping Families Together/Family Treatment Court

Reports to: Program Manager, Keeping Families Together/Family Treatment Court

Directly Supervises: None

Summary of Job:

The Clinical Case Manager will support Homeless Prenatal Program clients participating in our intensive case management programs. The Clinical Case Manager is responsible for providing guidance, extensive support, and resources to families who are currently dealing with homelessness, substance use, mental health, pregnancy and domestic violence issues. This position will provide intensive case management and on-going assessment for HPP clients receiving services from the Child Welfare System or participating in San Francisco's Family Treatment Court (FTC). The Clinical Case Manager is responsible for completing a psychosocial assessment and further developing an appropriate action plan to support the family in achieving their goals, connecting the clients to needed services, and tracking their progress. The Clinical Case Manager will address client needs by providing necessary referrals, ensuring confidentiality, and providing efficient and client-centered service.

The Clinical Case Manager may also support Homeless Prenatal Program clients participating in our other intensive case management programs on an as needed basis. In this role, the case manager may hold these clients on their caseload on a temporary basis or may provide check-in support during the primary case manager's absence. The Clinical Case Manager is responsible for providing guidance, extensive support, and resources to families who are currently dealing with homelessness, substance use, mental health, pregnancy and domestic violence issues.

As a Clinical Case Manager, this position will work under the supervision of a licensed provider. A year of experience in providing alcohol and/or drug counseling and proof of completion of Alcohol and Other Drug Studies Program or registration with BBS strongly preferred.

Essential Duties and Responsibilities:

- Manage a client caseload that includes Child Welfare and FTC clients.
- Responsible for completing a psychosocial assessment and developing an appropriate individualized action plan to support the family in achieving their goals.
- Provide families with child welfare system advocacy as well as advocacy/referrals to other legal services.

- Work with clients to complete requirements set by Child Welfare Dept., meet with Child Welfare, attorneys, and treatment programs when indicated, and maintain open communication with Child Welfare.
- Provide crisis intervention and support to families and providers through regular home visits, treatment visits, transitional housing visits, and accompanying clients to appointments.
- Attend Child and Family Team (CFT) meetings, provider meetings, and family counseling.
- Complete transitional housing application with client when required.
- Provides psychoeducation to families about substance abuse, domestic violence, mental health and parenting.
- Assist each family to establish and maintain a continuum of services to promote a stable environment for their child/ren.
- Utilize motivational interviewing, counseling, skill building, and strengthening of protective factors to achieve desired client outcomes of increased family functioning, healthy pregnancy and birth, stable housing, increased financial/life skills, and resolution of CPS cases or family reunification.
- Promote a positive, professional attitude towards families and utilize a non-judgmental, client centered approach to case management.
- Collaborate with Mental Health and Substance Use specialists when appropriate.
- Meet or exceed Case Manager agency requirements including standards for client dosage and engagement, case planning and documentation.
- Attend and participate in weekly case conferences.
- Temporarily support Homeless Prenatal Program clients participating in our other intensive case management programs as requested on an as needed basis.

For Family Treatment Court Clients:

- Collaborate with the FTC team and provide intensive case management, counseling, and support to parents in the child welfare system who are moving towards reunification or family maintenance.
- Develop treatment plans and recommendations.
- Submit recommendations to the HSA and FTC team where applicable.
- Sign Treatment & Participation Plan with client.
- Attend FTC Pre-Conference and FTC hearings as scheduled.
- Monitor and Submit regular Treatment Progress reports to court and FTC team regarding treatment participation.
- Attend CFTs.

Administration:

- Inputs all required data into the HPP Salesforce database per agency standards, currently by end of following business day.
- Meet the intensive case management client engagement requirements.
- Complete all Assessments as required.
- Keep accurate, up-to-date, confidential documentation of client contact and activity.
- Assists with the completion of grant reports as needed.
- Schedule and attend weekly individual supervision meetings with supervisor and case conferences.

- Co-facilitate support groups for program participants as needed.
- Prefer enrolled, willing to enroll, or have completed, the Drug and Alcohol certificate program at SF City College or comparable educational program.

Core Competencies:

All HPP Staff are expected to meet the expectations of our Core Competencies:

- **Accountability and Reliability:** Shows up for the team, the clients, and the organization; takes responsibility for actions, and follows through on tasks and projects.
- **Collaboration:** Helps colleagues as needed, views responsibilities as shared; Actively participates in agency-wide initiatives/ efforts.
- **Communication:** Uses effective written and oral communication with coworkers and community served; understands emotions of self and others, and responds with empathy.
- **Continuous Learning:** Demonstrates curiosity and eagerness to learn and develop professionally.
- **Equity Mindset:** Understands and is committed to goals of diversity, equity, and inclusion and fostering an inclusive environment; consistently centers equity in the organization's work both internally and externally.
- **Proficiency in area of focus:** Has skills and knowledge in role and area of focus.

Qualifications:

- Master's degree in a related field required with clinical supervision or BBS licensing hours available for MSW's.
- A year of experience in providing alcohol and/or drug counseling and proof of completion of Alcohol and Other Drug Studies Program or registration with BBS preferred.
- 3 years of case management/supportive counseling experience preferred.
- Experience working with Child Welfare/Child Protective Services preferred.
- Bilingual Spanish/English welcomed.
- Capacity to ensure culturally appropriate treatment.
- Experience working with homeless/at risk families, substance use, mental health issues, and/or domestic violence.
- Skilled in crisis intervention and conflict resolution.
- Demonstrated understanding of the intersection of racism and poverty.
- Understanding of, and commitment to, social justice, anti-racism, and HPP's mission and organizational values.
- Ability to maintain appropriate professional and personal boundaries with high integrity.
- Experience in, and knowledge of, working with diverse communities.
- Able to communicate effectively both verbally and in writing
- Understanding of how race, ethnicity, culture, language, poverty, sexual and gender identity, age, education, housing insecurity, and systemic oppressions impact a person's mental health.

HPP recognizes the value of having a staff that brings a wide range of

perspectives to this work based on language, ethnicity, race, gender, socio-economic background, political beliefs, sexual orientation, and disability. We are committed to maintaining a diverse, multicultural working environment and particularly encourage applications from candidates with lived experience in the communities we seek to serve.

Physical Requirements: This position requires the ability to work under stress and handle multiple project deadlines. This position requires an annual tuberculosis test and may require moderate lifting.

Certificates, Licenses, Registrations: California Driver's license and insurance preferred, not required.

Work Environment: Fast-paced, multi-cultural, collaborative work environment

Hours: \$73,968 + excellent benefits package

Salary: Full time - 39 hours/week.

FLSA Status: Non-exempt

Please send a cover letter and resume to jobs@homelessprenatal.org with Clinical Case Manager, KFTC as the subject line. Applications must have the job title in the description to be accepted.

About HPP



Founded in 1989, the Homeless Prenatal Program (HPP) is a nationally recognized family resource center in San Francisco that empowers homeless and low-income families, particularly mothers motivated by pregnancy and parenthood, to find within themselves the strength and confidence they need to transform their lives.

HPP helps families become healthy, stable and self-sufficient. We focus on the social determinants of health, supporting both parents and children in order to

strengthen the whole family. With services ranging from emergency support to intensive case management, the agency partners with parents to address family needs during the critical years from pregnancy through kindergarten.

The first agency in San Francisco to hire former clients as staff, HPP's evolution has been guided by the community it serves. More than half of HPP's immensely talented staff of 125+ come from the community and/or are graduates of the agency's Community Health Worker Apprenticeship Program, which trains individuals for careers in the nonprofit sector.

Over the years, HPP has received considerable recognition for its service to the community. In 2022, we were named "Nonprofit of the Year" by the San Francisco Chamber of Commerce, and our work has been highlighted by The New York Times, CNN, KQED, The Huffington Post, People and The San Francisco Chronicle. Additionally, HPP receives consistently high ratings by leading philanthropic evaluators such as Guidestar and Charity Navigator.

The Homeless Prenatal Program is an Equal Opportunity Employer and provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. Pursuant to the San Francisco Fair Chance Ordinance, we will consider for employment qualified applicants with arrest and conviction records.