

## Home and Community-Based Services (HCBS) Rules CONCEPT FORM

Vendor name	Hope Services
Vendor number(s)	H75572 (Diversified Networks; Tailored Day Service); H90945, HS0270 (Senior Centers); HS0271 (Mobile Work Group, Watsonville); HS0272 (Pajaro Valley Training Center, Watsonville); HS0847 (Day Training Activity Center); HS1049, HS1050, ZS0998, ZS0999, ZS1014, ZS1020, ZS1021, ZS1031 (Employment, Media and Community Connections); ZS0615 (Mtn View CAN); ZS1021 (Salinas CAN); ZS0581 (Whittier CAN)
Primary regional center	San Andreas Regional Center
Service type(s)	Community Integration Training Program; Activity Center; Adult Day Program; Adult Development Center; Behavior Management Program
Service code(s)	055, 55-04, 55-08, 505, 510, 515
Number of consumers currently serving and current staff to consumer ratio.	850+; 1:3 (Community-Based Settings); 1:8 (Site-Based Settings)
Have you or the organization you work with been a past recipient of HCBS Funding?	Yes
Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided; include barriers to compliance with the HCBS rules.	<p>Services/settings include day programs (9 a.m.-3 p.m. weekdays), which are hybrid site- &amp; community-based programs, community employment programs, etc. Participating clients perform paid work, receive employment skills training, volunteer in their communities, attend outings to local sites of interest, etc., primarily in small group settings. Paid work is performed both individually and in groups.</p> <p>The program services/settings listed are out of compliance with HCBS Federal Requirement #4 with respect to the need for PCT/PCP to become more a pervasive part of the agency's culture through training of all staff working in the programs listed above in PCT/PCP principles and practices. A few scattered staff are already somewhat well-versed in PCT/PCP principles and practices; also, they have not received the formal training and certification as PCT/PCP Trainers in order to be able to train all other Hope staff working in the programs listed above on this topic.</p>

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<p>Identify which HCBS federal requirements this concept addresses that are currently out of compliance.</p>	<p>Federal Requirement #4: Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</p>
<p>Narrative/description of the concept; include justification for the funding request and explain how the concept would achieve proposed outcomes.</p>	<p>PCT/PCP staff training module will consist of six (6) 2-hour weekly on-site trainings after clients leave program for the day. Training will include all aspects of PCT/PCP, and will fully, thoroughly, and seamlessly embed PCT/PCP principles, policies, and practices throughout all aspects of the agency culture. Ongoing coaching and mentoring of staff in daily application of PCT/PCP will ensure that all agency programming is marked and characterized by PCT/PCP.</p>
<p>Please describe your person-centered approach<sup>1</sup> in the concept development process; how did you involve the individuals for whom you provide services?</p>	<p>The need for a well-developed plan to infuse a person-centered approach in the concept development process for this proposal points to the crux of the issue we are seeking to address through this concept and proposal: we need to further develop and expand our person-centered practices and ensure that all staff working in the programs listed above have a solid foundation about the process and understand the use of the tools that will lead to the best outcomes for the individual receiving services and to enable it to become more fully disseminated throughout the agency's culture.</p> <p>Also, Hope utilizes Client Satisfaction Surveys, Quality of Life Surveys, etc. which address issues of concern to program participants. Feedback received via these Surveys, as well as communication with staff, enables program participants to voice concerns and requests for additional services. Consumer/participant feedback is also an important component of the IPP process in which Hope engages with respect to all participants. Through feedback Hope staff has received from program participants, it has been made clear that we do need a greater focus on person centered planning and person centered thinking.</p>
<p>Does the concept address unmet service needs or service disparities? If so, how?</p>	<p>Yes, the concept addresses the need for further development and expansion of the person-centered approach to all staff working in the programs listed above, which is, to a large degree, currently unmet, through a comprehensive and detailed training module that will</p>

<sup>1</sup> A person-centered approach emphasizes what is important to the individual who receives services and focuses on personal preferences, satisfaction, and choice of supports in accessing the full benefits of community living. For more information regarding person-centered practices, please visit [www.nasdds.org/resource-library/person-centered-practices](http://www.nasdds.org/resource-library/person-centered-practices).

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	address all aspects of PCT/PCP principles, policies, and practices in a variety of programming contexts/scenarios.
Estimated budget and timeline; identify all major costs and benchmarks — attachments are acceptable.	<p>\$30,000 for ongoing on-site PCT/PCP training, coaching, and mentoring of all staff initially identified to receive this training in our previously funded application, working in the programs listed above (approximately 200, including 150 full-time, part-time, and temporary direct service staff, and 50 managers), to include coverage of such costs as: copies, training binders, trainers' and/or staff's travel to/from trainings, etc., to ensure that PCT/PCP tools and practices are fully implemented throughout all departments.</p> <p>\$22,000 for on-site PCT/PCP training of an additional 300 direct service staff working in the programs listed above, to ensure that PCT/PCP tools and practices are fully implemented throughout all departments.</p> <p>\$22,000 for ongoing on-site PCT/PCP training of all new direct service staff to be hired during the year-long grant period, as part of their orientation and on-boarding process, to ensure that PCT/PCP tools and practices are fully implemented throughout all departments.</p> <p>\$10,000 for one of Hope Services' District Directors, who has very strong and long-standing interest in PCT/PCP, to oversee, facilitate, and administer the PCT/PCP training initiative. This will involve making PCT/PCP "second nature" throughout the agency, as well as extensive redesign of systems, paperwork, meeting structures, etc.</p> <p>\$10,000 for Hope Services' Manager of Media and Assistive Technology to assist with development and delivery of PCT/PCP training module(s) for staff; this individual has expertise in training in order to bring about cultural paradigm shifts in organizations with many staff</p> <p>Total: \$94,000 over one (1) year</p>
Total requested amount.	\$ 94,000
What is your plan for sustaining the benefits, value, and success of your project at the conclusion of 2018-19 HCBS Funding?	Once the module is developed and has been delivered to staff described above, it will be able to be used repeatedly with additional staff in subsequent years. Hope will also seek external funding from private sources to cover costs associated with training delivery in subsequent years.