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

Vendor number(s)	HS0383; HS0968; HS0685
Primary regional center	San Andreas Regional Center
Service type(s)	Behavior Day Program
Service code(s)	<mark>515 03</mark>
Number of consumers currently serving and current staff to consumer ratio.	HS0383 (177 consumers) HS0968 (100 consumers) HS0685 (135 consumers)
Have you or the organization you work with been a past recipient of HCBS Funding?	Yes, in Fiscal Year 2017-2018
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.	Some of the individuals that we support desire transportation to and from program. Others arrange for outside transportation. A variety of on-site and community-based activities and programs are made available to each participant, within the context of his/her group. Barriers to fully carrying out the person-centered descriptions that we are developing include funding for activities and expenses; lack of current structure to engage in spontaneous choices of activity; lack of staff and consumer training in person-centered thinking, and lack of overall staff and consumer support in implementing the specifics of the HCBS Final Rule. Our previously-funded activities have helped us to identify additional areas of support and requested change.
Identify which HCBS federal requirements this concept addresses that are currently out of compliance.	The current proposal seeks to remedy each "No" answer in items 1-5 and to revamp our program into a more dynamic, individualized, and also HCBS-compliant program.
Narrative/description of the concept; include justification for the funding request and explain how the concept would achieve proposed outcomes.	We have two major categories of needs – training and activities/supplies. The grant application herein provides a model not just for <i>staff</i> training, but also for <i>participant and circle of support</i> training in the areas of person-centered thinking and in offering display and presentation accommodations for learner needs and preferences. We have also obtained information from a local training resource to offer ongoing, online training on HCBS-friendly topics. Lastly, we have proposed activity and supplies funding to further enrich the programs available to our participants, and to help them explore what they are interested in. Many of our participants have histories of living in developmental centers, and do not yet know what they like. This makes choices harder to make, and we

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

	would like to remedy that. As we do that, we hope to offer additional support in the area of <i>healthy lifestyles</i> , including food intake and preparation. For those individuals who prefer more community integration to site-based learning, we have included a request for expenses so that we can gain entrance to highly-reinforcing community locations.
Please describe your person- centered approach ¹ in the concept development process; how did you involve the individuals for whom you provide services?	Our person-centered approach has improved in just the last six months. Many of our consumers have benefited from person-centered thinktanks and the development of brief person-centered descriptions. We have held stakeholder meetings for consumers and their circles of support, asked for feedback on individualized programs, and have begun to summarize our collaboration into person-centered descriptions. We have identified additional training and support needs, and look forward to carrying these out as we further revise our program and practices.
Does the concept address unmet service needs or service disparities? If so, how?	Yes. Providing more authentic person-centered supports will help us to boost quality of life in ways that we could not previously meet. In addition, having more informed staff who benefit from updated training will help us to narrow service disparities.
Estimated budget and timeline; identify all major costs and benchmarks — attachments are acceptable.	 Training and Accommodations Provision of ongoing, online and/or live training subscriptions (payable to Essential CEU Institute) on HCBS-friendly and person-centered topics for up to 9 Administrative-level staff and 200+ direct support staff: \$2500 per month x 24 months = \$60,000 16 hours of live person-centered thinking training, conducted by Essential CEU Institute: \$175 per staff x 220 staff (including projected new hires); \$175 per consumer x 450 current or prospective consumers; \$175 per invited member of individual's circle of support x 600. Total PCT training expense: \$222,250 Provision of ordered lunch and beverages for 1270 participants on two live training days: \$25 each x 1270 participants on two days = \$63,500 Copies and training material reproduction for all person-centered thinking and other applicable training, payable to Essential CEU Institute. \$18 x 1270 attendees = \$22,860

¹ 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.nasddds.org/resource-library/person-centered-practices.

	 Mobile training tablets to check out to training attendees for use/accommodation with live or online courses: \$1100 x 50 = \$55,000 (includes warranties for damage/replacement) Wall-Mounted Displays for Training and AV Equipment: \$20,000 x three sites = \$60,000 Participant Activities and Supplies Mobile interactive tablets to be used in participant rights training, choice and schedule selections, activities, etc. \$1100 x 300 (includes warranty) = \$330,000 Tuition and enrollment fees for music, fitness and art activities at the Evergreen School of Music and the Arts: 800 session fees per month x \$55 per session x 24 months = \$1,056,000 Dietician training and demonstration for staff and participant education in health lifestyles. \$100 per week x 10 groups at each of three sites. Yields 120 groups per month x 24 months = \$288,000 Community integration expenses: Using our grantfunded and existing vehicles to explore the community, learn and engage in enriching experiences. Examples include aquarium, zoo and movie passes; annual passes to State Parks; field trips and related expenses (e.g., public transit training; gas, snacks, staff entrance, etc.). \$11000 per month x 24 months = \$264,000
Total requested amount.	\$ 2,398,750
What is your plan for sustaining the benefits, value, and success of your project at the conclusion of 2018-19 HCBS Funding?	Our grant proposal includes activities to be completed within a two-year period, and this will enable us to offer both initial and ongoing training, support and activities to both staff and consumers alike. We believe that this momentum will be effective in sustaining us at the conclusion of the funding cycle.