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

Vendor name	Cedars Main Campus
Vendor number(s)	H00366
Primary regional center	Golden Gate Regional Center
Service type(s)	Adult Residential Facility – Staff Operated
Service code(s)	915
Number of consumers currently serving	47 (licensed for 55)
Please describe your person-centered approach ¹ in the concept development process; how did you involve the individuals for whom you provide services?	The idea to use Person Centered Thinking (PCT) as a way to inform program operations came from the natural, but informal way in which residents' preferences are included in decision making now. Staff met with several residents to introduce the idea of a more formal and extensive PCT process that would contribute to the operation of their home and the development of new individual plans. All those we spoke with felt that having more input in how things operate and how staff support them would be very beneficial. Several residents listed what they like about their living environment now, but also noted some things that they'd like to have change such as increased access to certain types of community activities, more opportunities to spend time with friends outside of the home, help with addressing both loneliness and "too much drama" and increased training for staff on how to be more patient and better problem solvers. One person suggested that it would be good to have someone make sure that resident ideas are written down so staff could remember them.
Does the concept address unmet service needs or service disparities? If so, how?	Addressing unmet service needs is at the core of this concept. By using PCT concepts to develop a process that is designed to include the individual preferences of the residents in decisions about facility operations as well as individual planning, unmet needs will be identified and met.
Barriers to compliance with the HCBS rules and/or project implementation	The primary barriers to compliance are the absence of a formal person centered planning process and the lack of trained staff who are able to develop and implement a PCT process. Current residential staff and managers are fully engaged in the daily operations of the home with little to no time for project development and implementation. Current funding does not support the hiring of additional staff. Cedars needs a position dedicated to the development, training, implementation, monitoring, and evaluation of this concept. Creating experienced-based best practices would be extremely helpful for ensuring Cedars Main Campus compliance with HCBS rules and could be shared with other service providers as a model.

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 <u>http://www.nasddds.org/resource-library/person-centered-practices/</u>

	Additional barriers include lack of funds for appropriate locks, the need for consultation on the development of an admissions/lease document and training for key staff on PCT and HCBS principles. Cedars Main Campus is a Level 3 Adult Residential Facility that supports 47 residents in four separate homes, which offer private bedrooms for most residents. The facility was rebuilt thanks to a successful capital campaign undertaken between 2000-2009, which
Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request	included downsizing funds from GGRC. At that time the facility was evaluated by the State due to the large capacity and was granted a waiver to be vendored by GGRC because it met HCBS guidelines at the time. While Main Campus is the most sought after residential setting at Cedars, we are aware that there are several areas of operations which are in need of correction to be fully compliant with new HCBS guidelines. Also, we assume that the size of the facility will likely trigger heightened scrutiny by evaluators.
	The concept for this project is to develop a PCT based planning process that will be used to develop individual plans for all residents and an organizational plan that will address necessary changes to the operations of the facility including changes related to HCBS guidelines. What better way to ensure that the residents' living environment reflects how best they'd like to live their lives at home and in the community. Currently, there is no formal process at Cedars Main Campus that documents resident input for the purpose of ensuring their satisfaction with the residential services that they receive. The project will be managed by a new staff position that will be funded by the grant – Cedars Person Centered Planning Coordinator. Goals of the project will include: 1) the development of a PCT planning process and related documents; 2) the creation and implementation of a PCT plans for all residents; 3) the implementation of programmatic changes based on the individual's preferences and HCBS guidelines; 4) the development of related staff training; and 5) the sharing of best practices with other service providers and regional center staff via a "white paper" that could be shared through presentations or trainings. In addition, the Coordinator will assist Cedars staff in ensuring that all HCBS compliance issues are resolved.
	Federal Requirement #2: The new individual planning model developed by this project will include a description of other residential settings available to the individual and will document a plan to address their preferences.

	Federal Requirement #3: The project will address this requirement through the development of a formal communication process for residents that ensures their knowledge of these rights and will assess any needs or concerns they have in this area. The information gathered will be used to modify individual services, as well as any programmatic practices that may emerge as problematic. Staff training will be provided to ensure that all Cedars Main Campus staff are aware of and understand the application of the HCBS guidelines, as well as individual preferences.
	Federal Requirement #4: The new person centered planning process will give residents a chance to include their preferences in their individual plan allowing staff to structure supports and activities accordingly. This, we hope, will result in a more self-directed culture for residents. A focus on autonomy and independence will guide the process and the implementation of the plans with the goal of improving resident satisfaction.
	Federal Requirement #5: By eliciting input from residents more formally and systematically through the new PCT planning process, managers will be able to include resident input about preferred staffing and the manner of service provision in the operational planning of the home.
	Federal Requirement #6: The Coordinator will work with Cedars staff and board to develop a lease/admission agreement that meets the HCBS guidelines. The Coordinator will also ensure that the document is shared with residents.
	Federal Requirement #7 : As part of the new individual planning process, residents will be offered a lockable door if they don't already have one. Cedars will cover the cost of the locks.
	The implementation of this project will ensure not only that Cedars Main Campus is compliant with HCBS rules, but that the supports offered are based on the way in which each resident chooses to live their life at home and in the community.
Estimated budget; identify all major costs and benchmarks — attachments are acceptable	Please see attachment
Requested funding for 2017-18	\$84,040
Estimated timeline for the project	One year from grant award date

Cedars HCBS Compliance Activities Budget 2018

Person Centered Thinking Planning Coordinator FTE for one year	\$68,000
Benefits @ 28%	\$9,040
Total Compensation	\$77,040
PCT Training & Travel for Coordinator	\$2,000
Training Materials and Project Supplies	\$2,500
Equipment/computer	\$2,500
Total for Training, Supplies & Equipment	\$7,000
Total Funding Request	\$84,040

Project Benchmarks

Months 1-2: hire/train coordinator

Months 3-6: develop and pilot PCT based planning process and documents, train staff on PCT principles and HCBS guidelines, initiate individual planning for residents

Months 6-9: complete all individual plans, assess and implement organizational changes necessary based on input from individual plans in context of HCBS guidelines, provide staff training on all individual plans and organizational plan

Months 9-12: develop and share lease agreement, coordinate additional PCT planning follow-up regarding individual and organizational planning, assess need for and implement any additional staff training to ensure sustainability of project, draft white paper describing best practices and any challenges/opportunities to share with regional center and provider community.