

Vendor name	Evergreen Adult Development Center
Vendor number(s)	H10822
Primary regional center	San Andreas Regional Center
Service type(s)	Adult Development Center
Service code(s)	510, 110
Number of consumers currently serving	175 clients. EADC has 5 components: Sensory Stimulation Program, Behavior Management Program, Restricted Health Condition, Senior Program, High Functioning Group. Initially, Evergreen ADC will have 30 clients who will participate in the implementation of HCBS. Each year another 30 consumers will be added to the HCBS program. The requested 15 Program staff (trained with PCP) will be utilized for the next 30 consumers. EADC will request for continuous funding for the following year.
Please describe your person-centered approach ¹ in the concept development process; how did you involve the individuals for whom you provide services?	In the person-centered approach the main focus is the client. - What are the client's needs, preferences, choices and what is important in the client's life and how client integrates in the community, home and others areas of client's choice. - The client will be supported to be able to control or manage his personal resources. - The process is client centered and driven as opposed to being told and done for the client. The client is the focus person to make decision (choices) for his life and not by prescription by others. - It is supporting clients to make choices according to their individual abilities and not according to their disabilities. - "Being sorry for the client attitude" by caregiver is eliminated, but supported/ assisted client to have decisions for their lives. Individual clients upon admission to Evergreen ADC will be the main focus of the ID team meeting where the client's needs preferences, choices and how he/she can utilize the community resources where he/she lives will be discussed. Client will be ask: What is important for her in order to be happy, where does she wants to live, what day program does she wants to attend (assisted to tour day programs in the area), client is provided options/ choices regarding where she wants to live and how she wants to manage and control her financial resources i.e where to shop, shopping centers, how much to spend monthly, deferred expenses. The client is assisted and supported in making choices/ decisions. In order for EADC to achieve all of the above changes, it will need additional staff and training of all staff in all areas in different levels of consumers' cognitive abilities. This also needs purchasing 2 (15) passenger vans for consumers to be able to access the community resources to obtain their needs, preferences

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

	<p>and choices. A Program Facilitator is needed to coordinate all the components of the HCBS program including program evaluation with gathering of feedback info from consumers ie. contents of program and how they are conducted by their preferred staff.</p>
<p>Does the concept address unmet service needs or service disparities? If so, how?</p>	<p>Person-centered approach will address unmet needs or service disparities by: a.) Identifying what is important in the lives of the client according to their level of abilities. b.) The client is supported to make their preferences and choices which can be measured/ evaluated by observed satisfaction, further improvement if needed and adjustment to programming to achieve success. c.) Within the person-centered process the client will be supported to the fulfillment of their life's desire which they have had for the long time that has not been identified. d.) This approach is client driven, as to who they choose to assist and support them, and/or circle of support where they like to live.</p>
<p>Barriers to compliance with the HCBS rules and/or project implementation</p>	<p>Barriers to compliance: Staffing is inadequate and lack of training regarding PCP. a.) Present staff/client ratio 1:2 is preferred. b.) Staff are not trained about Person- Centered approach, thinking skills, cultural values and attitudes towards the disabled and "feel sorry" syndrome must be changed positively making the client to be the doer in the process. c.) Infrequent community outings, identified process of community outings are not person-centered – outings is more social, knowing places to go to, recognition of community resources.</p>
<p>Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request</p>	<p>Federal Requirement #1 a.) Although clients participate in outings and activities in the community as part of their day programming they are not person centered driven- it was to know the different community resources but not how to integrate with it. The clients are trained to acquire pre-employment skills but there was no active seeking of employment initiated due to the identified barriers. A PCP Facilitator is needed to explore this area. Clients did not have the opportunity or options to control their personal resources. There is PCP where client expresses their likes. b.) Although not in clients IPP. Clients and their families visit different day programs and choose which day program they want to attend. Federal Requirement #2 Present setting does not support individuals in choosing which staff they choose to provide for their care. Client's level of functioning is a barrier to satisfying this requirement for no feedback is provided by client regarding who provides for their care the best.</p>

	<p>During progress report meeting, clients do not have opportunities to say about the content of their services or how the service should be provided. Meeting are set up by day program staff without consulting clients on how the review of their service progress is to be conducted and the contents of the topics to be discussed.</p>
<p>Estimated budget; identify all major costs and benchmarks — attachments are acceptable</p>	<p>Estimated budget</p> <ol style="list-style-type: none"> 1. 2 vans (15 passenger) <ul style="list-style-type: none"> 2 x \$55,000/Insurance(\$4,000/year) = \$104,000.00 2. 2 CA licensed drivers <ul style="list-style-type: none"> Per Driver \$15.00/hour x 5.5 hour/day - Wage/Month = \$3,300.00 - Employer Liabilities/Month = \$521.40 - Medical Insurance/Month-\$300/driver(monthly) (50% Employer/50% Employee) = \$300.00 - 24 hours paid sick leave/year- \$60.00 Total = \$4,181.40 x 12 mos = \$50,176.80 3. Program Facilitator <ul style="list-style-type: none"> 1 staff \$17.00/hr x 8 hours/day -Wage/Month = \$2,720.00 - Employer Liabilities/Month = \$429.76 - Medical Insurance/Month- \$300/monthly (50% Employer/ 50% Employee) = \$150.00 - 24 hours paid sick leave/year = \$34.00 Total = \$3,333.76 x 12 mos = \$40,005.12 <p>Job Description</p> <ol style="list-style-type: none"> 1. Implementation of the Person-Centered Planning IPPs as developed by client, members of her/his circle of support, EADC Program Director and IDT-SARC. 2. Identifies Programming issues regarding person centered thinking, behaviors, attitudes and cultural values, program progress notes and other logistics issues. 3. Identifies issues regarding client's needs, preferences, choices/options in the RCF, Day Program and community and discussion of solution of the same. 4. Reports to EADC Program Director client's abilities, choices, needs, preferences, regarding use and control of their finances so that appropriate training will be provided that are aligned to the principles of PCP and practices. <ol style="list-style-type: none"> 4. 15 Program Staff <ul style="list-style-type: none"> 1 Staff \$15.00x5.5 hours/day - Wage/Month = \$24,750.00 - Employer Liabilities/Month = \$3,910.20 -Medical Insurance/Month \$300/staff(monthly)- 50% Employer 50% Employee = \$2,250.00 - 24hours (3 days) paid sick leave = \$450.00 Total = \$31,360.20 x 12 mos = \$376,322.40

	5. Inservice Training to all HCBS staff= 35 hours 15 staff x \$15.00 x 35hrs = \$7,875.00 Total expenses for 1 year: 1. \$104,000.00 2. \$ 50,176.80 3. \$ 40,005.12 4. \$376,322.40 5. \$ <u>7,875.00</u> \$578,379.32
Requested funding for 2017-18	Requested funding \$578,379.32
Estimated timeline for the project	Estimated Timeline: 1 year