

Vendor name	Hope Services
Vendor number(s)	HS1049 (EMCC-Whittier); HS1050 (EMCC-Gilroy); ZS0998 (EMCC-Hollister); ZS0999 (EMCC-Santa Cruz); ZS1014 (EMCC-Mountain View); ZS1031 (EMCC-Alfred); ZS1021 (EMCC-Salinas); ZS1020 (EMCC-Seaside); HS0847 (Day Training Activity Center); H75572 (Mountain View Diversified Network; Silicon Valley Diversified Network); ZS0444 (Portola CIT Program); HS0272 (Pajaro Valley Training Center); HS0271 (Mobile Work Group)
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, 510, 515
Number of consumers currently serving	Community Integration Training Programs: 526; Adult Development Center: 35; Activity Center: 68; Adult Day Programs: 128; Behavior Management Program: 30; Overall Total: 787
Please describe your person-centered approach ¹ in the concept development process; how did you involve the individuals for whom you provide services?	Each client has an Individualized Program Plan which includes his or her preferences and choices for the types of programming in which he or she would like to participate, and the types of services that he or she would like to receive. EMCC participants, and those in the other day and specialized programs listed above, have identified in their Individualized Program Plans that they would like to participate in the respective programs in which they are enrolled.
Does the concept address unmet service needs or service disparities? If so, how?	The concept addresses unmet service needs because, after the current DDS HCBS grant is fully expended, unless a new DDS HCBS grant is issued for job development, Hope Services will not be able to continue to provide job development services to the 473 clients who are enrolled in the EMCC program, in order to help them to be able to access community-based employment opportunities. Also, we would like to assist an additional 314 clients who are enrolled in the various types of day programs and other specialized programs listed above who are not currently served with job development services.
Barriers to compliance with the HCBS rules and/or project implementation	Hope Services' Community Integration Training Program and the other listed programs are adversely affected by barriers to compliance with Federal Requirement #1 (please see accompanying Compliance Evaluation Form). While Hope Services' new Employment, Media and Community Connections ("EMCC") community integration training program, launched July 1, 2016,

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>affords significantly increased and improved opportunities for individuals with developmental disabilities to access opportunities for community-based competitive integrated employment (“CIE”) when contrasted with that formerly afforded by the work activity centers which EMCC replaces, not all participants will have the same degree of access to CIE as individuals not receiving HCB Services after the current DDS HCBS compliance grant is fully expended, due to inadequate funding for job development staffing within the EMCC program after the current grant is fully expended. Also, the 314 clients in the other types of programs listed currently have no job development services available to them.</p> <p>In order to be compliant with HCBS site-based requirements, Hope Services must continue to provide community-based employment for the 473 or so clients who previously performed site-based work at one of our former work activity centers. Although we have made significant strides in providing community-based employment for these individuals over the past six months as a result of a DDS HCBS compliance grant for job development, we anticipate that we will be unable to continue to provide community integrated employment for all of these clients after the current grant is fully expended because we will lack the necessary funding to cover the costs of the specialized staffing necessary to locate and develop the employment opportunities available in the community; therefore, we need additional funding after the current grant is expended in order to continue to provide job development services in order to be able to meet this need. We also want to expand our job development services to clients in the day and other specialized types of programs listed above.</p>
<p>Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request</p>	<p>On July 1, 2016, Hope Services launched its brand new Employment, Media and Community Connections (“EMCC”) community integration training program. EMCC replaces our former work activity centers, where we had been providing site-based employment opportunities for about 450 (at that time) of our clients (as of June 2016). We are requesting DDS HCBS compliance funding in an amount sufficient to continue to support the employment of four (4) full-time Employment Sales Representatives (“ESR”s) (also known as Job Developers) for two years after the current DDS HCBS compliance grant authorized for this purpose is fully expended. Each of these 4 ESR’s (job developers) are assigned to one of our four (4) unique geographic communities/environments within our service area (San Jose/central Santa Clara County, Monterey County-Gilroy-Hollister, Santa Cruz County, and northern Santa Clara County), and are focused on developing community-based CIE opportunities for former work activity center/current EMCC participants within their respective geographically assigned</p>

	<p>areas. We also seek to expand our job development services to day and other specialized types of programs. These programs are currently out of compliance with Federal Requirement #1: "The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS." It is anticipated that with continued grant funding for these four (4) full-time job developers, we could approximate full employment for people served in this market after the current grant is fully expended.</p>
<p>Estimated budget; identify all major costs and benchmarks — attachments are acceptable</p>	<p>First Year: \$56,160 Annual Salary per Employment Sales Representative ("ESR") + Fringe Benefits @35% (\$19,656) = Total Salary & Benefits: \$75,816 x 4 ESR's = \$303,264</p> <p>Second Year: \$58,406 (4% COLA increase) Annual Salary per Employment Sales Representative ("ESR") + Fringe Benefits @35% (\$20,442) = Total Salary & Benefits: \$78,848 x 4 ESR's = \$315,392</p>
<p>Requested funding for 2017-18</p>	<p>\$618,656 for job development expenses</p>
<p>Estimated timeline for the project</p>	<p>January 2018 through December 2019: Job development expenses would continue to take place throughout this period.</p>

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); ZS0444 (Portola Community Integration Training Program)
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	871
Please describe your person-centered approach ¹ in the concept development process; how did you involve the individuals for whom you provide services?	<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>
Does the concept address unmet service needs or service disparities? If so, how?	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.

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<p>Barriers to compliance with the HCBS rules and/or project implementation</p>	<p>Hope Services lacks the necessary funding resources to pursue training of all staff working in the programs listed above in Person Centered Thinking/Person Centered Planning. Funding is also currently unavailable to pay for four (4) staff (one (1) from each of Hope Services' four (4) geographic districts) to receive training and certification as Person Centered Thinking Trainers. (These four (4) staff would then train all other staff working in the programs listed above throughout the agency in Person Centered Thinking/Person Centered Planning.)</p>
<p>Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request</p>	<p>The application of Person Centered Thinking/Person Centered Planning principles and practices is needed by all staff working in the programs listed above because our clients need to have ongoing positive control over their own lives and to continue to develop their ability to advocate for themselves and their own rights as they become fully integrated into the community. PCT/PCP primarily addresses two (2) of Hope's quality of life indicators tied to our mission: self-determination, and rights. PCT/PCP will enable our clients to enjoy a greater degree of self-determination, and to have greater awareness of, and thereby greater ability to fully access, utilize, and exercise, their personal rights. Improvement in these two (2) quality of life indicators will enhance and positively influence other of our quality of life indicators in clients' lives, thereby dramatically improving our clients' overall quality of life.</p> <p>HCBS Federal Requirement #4 is currently out of compliance with respect to the need for Person Centered Thinking/Person Centered Planning to become more a part of the agency's culture of Hope Services through training of all staff working in the programs listed above in PCT/PCP principles and practices. Specifically, the current status of Hope staff's knowledge and adoption of PCT/PCP principles and practices in everyday program operations and services does not "optimize...individual initiative, autonomy, and independence in making life choices" for the approximately 871 clients participating in the programs listed above. Some staff are already somewhat well-versed in PCT/PCP principles and practices, but they are relatively few, and scattered throughout the agency; also, they have not received the formal training and certification as PCT Trainers in order to be able to train all other Hope staff working in the programs listed above on this topic.</p>
<p>Estimated budget; identify all major costs and benchmarks — attachments are acceptable</p>	<p>\$50,000 for Training and Certification of four (4) Hope staff (one (1) for each of Hope's four (4) geographic Districts) as a Person Centered Thinking ("PCT") Trainer which is offered by the Learning Community for person centered practices. This will enable those staff to train all staff working in the programs listed above in their respective districts in Person Centered Thinking/Person Centered Planning ("PCP") over a two (2)-year period.</p>

	<p>\$22,000 for PCT training of all staff working in the programs listed above (approximately 200, including full-time, part-time, and temporary staff) in PCT/PCP, to include coverage of such costs as: copies, training binders, trainers' and/or staff's travel to/from trainings, etc.</p> <p>Total: \$72,000 over two (2) years</p>
Requested funding for 2017-18	\$72,000
Estimated timeline for the project	January 2018 – December 2019