

Vendor name	Manor of Choice, Inc.
Vendor number(s)	HV0103; HV0190: HV0256
Primary regional center	Valley Mountain Regional Center
Service type(s)	Adult Residential Facilities- Level 4 and 1 negotiated rate
Service code(s)	915
Number of consumers currently serving	18
Please describe your person-centered approach in the concept development process; how did you involve the individuals for whom you provide services?	The agency decided to develop a supported living services programs for residents who want to live independently. Through our discussions with these residents we researched supported living and learned of the robust person center approach the program entails. Management staff began discussing these concepts in the daily rap sessions to get feedback from residents. During the evaluation phase for this grant additional discussions were held during the rap session to elicit resident feedback.
Does the concept address unmet service needs or service disparities? If so, how?	Our funding request addresses unmet service needs in order to be in compliance with the upcoming HCBS requirements in the following areas: enhanced infrastructure to support the agency in effectively implementing the federal requirements; additional training for staff (direct and administrative, residents); reaching out to volunteers to assist residents in engaging in their community with non disabled peers; enhancing transportation options.
Barriers to compliance with the HCBS rules and/or project implementation	Manor of Choice has to shift from a staff driven organization to a resident driven program this will require an overall revision of how work currently gets done, who does the work, how decisions are made and residents support needs assessed. Barriers include: <ul style="list-style-type: none"> • Change in paradigm for residents, direct support professionals and administrative staff (including training for all) • Lack of transportation in the face of diverse community preferences • Recruiting volunteers to widen the ability of staff to assist residents in meeting their preferences • Staff being trained on how to be community connectors

	<ul style="list-style-type: none"> Using technology to address communication & training
<p>Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request</p>	<p>Manor of Choice is requesting funds to close the gap between current supports and services and required changes to comply with federal requirements to meet the upcoming Home and Community Based Services. Our goals are:</p> <p>Goal #1: Increase residents’ ability to pursue preferences and integrated activities in natural community environments (Requirements #: 1, 4, 5, 8)</p> <p><u>Objectives:</u> - #1 Develop an internal team to ensure the agency is complying with the requirements. The team would consist of a paid resident, clinical staff from the home, the operations manager and a direct support staff. Their role would be to provide feedback on policy and procedure revisions related to the new requirements #2 Recruit and pay an agency resident to become an expert on the federal requirements and self-advocacy activities. This resident would be trained to be “quality assurance” for the shift in paradigm and would provide trainings for residents, direct support staff and administrative staff. They would also participate in rap sessions at each home monthly to keep the other residents up to date with the changes related to the federal requirements; #3 Hire a volunteer coordinator/community connector to develop infrastructure to recruit volunteers who could support resident preferences in the community (identify opportunities for socializing with non disabled peers, identify novel activities and use technology such as social media- to identify appropriate meet up groups) to enhance integrated activities in natural environments.</p> <p>Goal #2 Expand transportation opportunities to enhance community activities (Requirements #1,4)</p> <p><u>Objectives:</u> #1 Purchase two small vehicles (4 or 5 passengers) to assist resident’s in increasing their access to the community #2 Purchase curriculum to enhance the mobility training of the residents/staff #3 Encourage all of the residents to be independent in mobility as much as they can (e.g. sign up for the local Para transit agency, staff accompanying residents on public transportation</p> <p>Goal #3 Review and revise the agencies policies, procedures and infrastructure in order to shift our residential paradigm from staff driven to resident driven (Requirements # 1, 4, 5, 6, 7)</p> <p><u>Objectives:</u> #1 Put together a workgroup that can review the agencies policies and procedures, hiring practices (including residents), and paradigm shift needed to change the residents, staff and administrations from a staff driven to resident driven program #2 Expand the Operations Managers role to full time in order to oversee review and revision of policies and procedures</p>

	<p>#3 Provide training to staff, direct support and residents on the nuances of transitioning from staff driven to resident driven services #4 Expand the clinical staff’s hours to facilitate small group discussions with staff and residents to implement a more person centered approach (including having the residents document their progress towards goals)#5 Expand the online paperless documentation system to include residents in order for them to track their own goals (includes training to let them enter the data) Goal #4 Reconfigure the home to provide a more natural experience for residents (Requirements # 7) <u>Objectives:</u> #1Develop a plan to go from 6 bed homes to 4 bed with private room through attrition (some residents are asking for SLS) #2 Go to a keyless system so residents can lock their room and come and go without having a staff let them into the house Goal #5 Train residents, direct support professionals and management/administrative staff on the person centered resident model (Requirements # 1,4,5,6,7,8) <u>Objective:</u> #1Expand the clinical staff’s time to provide monthly training to residents, direct support professionals and management staff (training topics include: being a community connector, person centered planning, being a good tenant, choosing your support staff, etc.)</p>
<p>Estimated budget; identify all major costs and benchmarks — attachments are acceptable</p>	<p>Please see Attachment A:</p>
<p>Requested funding for 2017-18</p>	<p>Click or tap here to enter text</p>
<p>Estimated timeline for the project</p>	<p>Timeline July 2018- June 2019Quarter #1: Hire and train staff, retreat to review roadmap for the project and share information, implement keyless options for residents, develop the team to provide quality assurance of the process; draft the roadmap to offer private lodging in all of the homes, mobility enhancements (purchase vehicles, train staff and residents on options; get residents signed up for Para transit and begin mobility trainings for residents and staff), volunteer coordinator develop and start executing outreach plan. Quarter #2: Begin weekly self advocacy training with residents; train staff, administration and residents on new policies and procedures, Complete volunteer handbooks begin matching volunteers with residents to enhance integrated activities in natural environments; start small group discussions with the clinical staff; begin training residents to document their progress towards their goals; monthly trainings to enhance staff, resident competency in the areas outlined</p>

	<p>Quarter #3- Continued monthly trainings, matching volunteers with residents to enhance community integration; training on new policies and procedures; training residents on participating in the hiring process Quarter #4- Complete policies and procedure revisions (can be shared with other ARF's; develop a plan to continue volunteer matching now that a volunteer infrastructure has been developed</p>
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	Home and Community Based Services HCBS Rules			
	Attachment A Proposed Budget- Manor of Choice			
	Personnel			
	Operations Manager (.50FTE)	\$36,352.00	\$35 per hour x 20 hours per week x 12 months	
	Volunteer Coordinator (.25FTE)	\$7,794.00	\$15 per hour x 10 hours per week x 12 months	
	Resident Advocate (.25FTE)	\$5,196.00	\$10 per hour x 10 hours per week x 12 months	
	Personnel Subtotal:	\$49,342.00		
	Fringe Benefits @ 23%	\$11,348.66	Futa, FICA, WC, health, dental, etc.	
	Personnel Total:	\$60,690.66		
	Consultant Fees			
	Clinician	\$11,700.00	\$65 per hour x 15 hours per month	
	Outreach Materials	\$1,000.00	Community Outreach for volunteers and partners	
	Program Materials	\$2,500.00	Curriculum for training, videos, etc. ; keyless system for	
	2 Vehicle Leases	\$10,000.00	Two small model vehicles	
	Communication	\$1,000.00	Resident training for Therap documentation system, pad	
	Expense Subtotal	\$26,200.00	payroll, accounting, management, legal	
	Total Budget	\$86,890.66		

