

**Home and Community-Based Services (HCBS) Rules
CONCEPT PROPOSAL**

Enclosure C

Existing regional center vendors may receive funding to make changes to service settings and/or programs to help them come into compliance with the HCBS rules. To be considered for funding, vendors must complete and submit this form and the Provider Compliance Evaluation form by October 1, 2016, to the regional center with which it has primary vendorization.

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Vendor and vendor number	Futures Explored – Lafayette, Day 1:3 – H70226
Primary regional center	RCEB
Service type and code	Adult Development Program – 510 (1:3)/ Tailored Day Service
Number of consumers currently serving	82
Barriers to compliance with the HCBS rules and/or project implementation	<p>One of the key barriers is the re-training and additional recruitment of staff that are skilled in community supports, the development of job and community placements to provide both employment and opportunities to be active members of their community. This location has good public transit options, but additional sedan type vehicles may be needed to access areas and opportunities that are not accessible by regular public transit.</p> <p>A second key barrier is to replace Community Care Licensing’s Facility based requirements for health and safety and care and supervision with appropriate Community measures and systems to ensure both the health and safety of individuals supported, but quality community outcomes.</p> <p>This will also require a change in communication, data tracking, and information retrieval and support than is currently available.</p>
Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request	<p>To increase access based on individual choice and direction the following would be needed to provide those opportunities:</p> <ul style="list-style-type: none"> • Increased number of small sedans and vehicles that could easily transport between 2 and 4 individuals interested in going to and/or doing activities in the same area. • Provision of community Transit passes for use at all times, so that individuals can use public transit to extend their opportunities and community circle.

	<ul style="list-style-type: none"> The allowance of alternative transportation services, such as Uber and Lyft funded through the system like traditional transit passes <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> This service is primarily provide to ambulatory individuals, so the need for small sedans to transport a support staff and 3 to 4 individuals on a lease basis, so the vehicles can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 12,000 – based on current needs and encouraging the use of public transit, whenever feasible, we would need 2 to 4 vehicles to move to full compliance. Transit passes – Annual cost per consumer regularly using Community Transit \$ 1,200 Alternative transportation options – As this would be a new option, estimated annual costs could be similar to those using Community Transit - \$ 1,200 <p>To assure staff are trained and supported to build and support community options for the folks supported additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> Bring 3 vehicles on line - \$ 36,000 Transit passes for 45 individuals for the year - \$ 54,000 Alternative Transportation options for 10 folks for the year - \$12,000 Training and support for the 22 direct service staff - \$26,400 Currently we have 22 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 33,000 <p>Total for 2016-17 – \$161,400</p>

	<p>These would be on-going annual costs to maintain the operation of this program. Based on the success of increasing the use of Public and Alternative Transportation options, the number of additional vehicles in future years would vary.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • Vehicles take between 1 and 3 months to bring on line depending on availability from the suppliers. • Transit passes could be brought on line quickly with a change in how Regional Centers use and allocate them. As they sometimes require the individual to purchase them and reimburse the individual this often causes hardship for the consumers. Also, while there is some funding for transit to and from program the internal costs of increased community involvement and integration opportunities have never been fully costed. • Not sure how and/or if Regional Centers have come up with a way to deal with alternate transit options to increase community involvement. • Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice. • It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules. • The development of Community Experience Quality indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.

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Vendor and vendor number	Futures Explored – ALIVE Concord – H84803
Primary regional center	RCEB
Service type and code	Adult Development Program - 510
Number of consumers currently serving	36
Barriers to compliance with the HCBS rules and/or project implementation	This program is located in a business park that has poor access to regular public transit, many individuals supported need regular personal care support that requires adult changing tables and lifts. Approximately 1/3 of those supported are in manual wheelchairs and one Mobility Aide for every 10 individuals does not provide enough support for accessing the community. This also requires vehicles that can handle and transport wheelchairs. Access to the cost of public transit is also a key barrier to folks being able to access the community on a regular basis. Finally, a challenge to employment is the need for a longer support period for job development and placement and for support that typically exceeds the 20% currently allowed for long-term individual placement supports.
Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request	To increase access based on individual choice and direction the following would be needed to provide those opportunities: <ul style="list-style-type: none"> • Increased number of wheel chair vehicles that can transport 2 to 3 wheelchairs at a time and look more like typical community vehicles than the large specialized buses that are currently used. • Reduce the Mobility Aide ratio from 1:10 to 1:2, so that appropriate supports can be provided in the community. • Provision of community Transit passes for use at all times, so that individuals can use public transit to extend their

	<p>opportunities and community circle.</p> <ul style="list-style-type: none"> The allowance of alternative transportation services, such as Uber and Lyft funded through the system like traditional transit passes <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> The need is to transport/support individuals who are wheel chair users {many of which are power chairs that increase their personal mobility}, lease vehicles so they can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 25,000 – based on current needs and encouraging the use of public transit, whenever feasible, we would need 3 to 4 vehicles to move to full compliance. Reduce the Mobility Aide ratio from 1:10 to 1:2 for those using manual chairs - \$ 9,252 per participant Transit passes – Annual cost per consumer regularly using Community Transit \$ 1,200 Alternative transportation options – As this would be a new option, estimated annual costs could be similar to those using Community Transit - \$ 1,200 <p>To assure staff are trained and supported to build and support community options for the folks supported additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> Bring 3 vehicles on line - \$ 75,000 Reduce Mobility Aide ratio to 1:2 - \$ 111,000 Transit passes for 25 individuals for the year - \$ 30,000 Alternative Transportation options for 2 folks for the year - \$2,400 Training and support for the 12 direct service staff - \$ 14,400 Currently we have 12 staff who would need to receive

	<p>upgraded technology and training to effectively and safely use the new technology - \$ 18,000</p> <p>Total for 2016-17 – \$ 250,800</p> <p>These would be on-going annual costs to maintain the operation of this program. Based on the success of increasing the use of Public and Alternative Transportation options, the number of additional vehicles in future years would vary.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • Vehicles take between 3 and 6 months to bring on line depending on availability from the suppliers. • There would need to be a statutory change to modify the Mobility Aide ratio and corresponding rate set by the State. • Transit passes could be brought on line quickly with a change in how Regional Centers use and allocate them. As they sometimes require the individual to purchase them and reimburse the individual this often causes hardship for the consumers. Also, while there is some funding for transit to and from program the internal costs of increased community involvement and integration opportunities have never been fully costed. • Not sure how and/or if Regional Centers have come up with a way to deal with alternate transit options to increase community involvement. • Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice. • It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules. • The development of Community Experience Quality Indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.

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Vendor and vendor number	Futures Explored – Go-Group – PB1612
Primary regional center	RCEB
Service type and code	Community Integrated Training - 055
Number of consumers currently serving	55
Barriers to compliance with the HCBS rules and/or project implementation	Due to the lack of public transportation in the suburban/rural area that the individuals we support live in they have limited access to their communities without some sort of planned/supported transportation. So, in order to help individuals make choices and actually be able to go to locations and opportunities they are interested in more flexible access will be required.
Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request	To increase access based on individual choice and direction the following would be needed to provide those opportunities: <ul style="list-style-type: none"> • Increased number of small sedans and vehicles that could easily transport between 2 and 4 individuals interested in going to and/or doing activities in the same area. • Provision of community Transit passes for use at all times, so that individuals can use public transit to extend their opportunities and community circle. • The allowance of alternative transportation services, such as Uber and Lyft funded through the system like traditional transit passes To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.

<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> • This service is primarily provide to ambulatory individuals, so the need for small sedans to transport a support staff and 3 to 4 individuals on a lease basis, so the vehicles can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 12,000 – based on current needs and encouraging the use of public transit, whenever feasible, we would need 8 to 10 vehicles to move to full compliance. • Transit passes – Annual cost per consumer regularly using Community Transit \$ 1,200 • Alternative transportation options – As this would be a new option, estimated annual costs could be similar to those using Community Transit - \$ 1,200 <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year. Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Bring 5 vehicles on line - \$ 60,000 • Transit passes for 30 individuals for the year - \$ 36,000 • Alternative Transportation options for 10 folks for the year - \$12,000 • Currently we have 16 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 24,000 <p>Total for 2016-17 – 132,000</p> <p>These would be on-going annual costs to maintain the operation of this program. Based on the success of increasing the use of Public and Alternative Transportation options, the number of additional vehicles in future years would vary.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • Vehicles take between 1 and 3 months to bring on line depending on availability from the suppliers. • Transit passes could be brought on line quickly with a change in how Regional Centers use and allocate them. As they sometimes require the individual to purchase them and

	<p>reimburse the individual this often causes hardship for the consumers. Also, while there is some funding for transit to and from program the internal costs of increased community involvement and integration opportunities have never been fully costed.</p> <ul style="list-style-type: none">• Not sure how and/or if Regional Centers have come up with a way to deal with alternate transit options to increase community involvement.• It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules.
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Vendor and vendor number	Futures Explored – Lafayette Day 1:6 – H70227
Primary regional center	RCEB
Service type and code	Activity Center - 505
Number of consumers currently serving	14
Barriers to compliance with the HCBS rules and/or project implementation	<p>The initial barrier is that individualized supports in the community are impossible to achieve at a 1:6 ratio, so the conversion of individuals to our 1:3 Adult Development Program would immediately improve the opportunities to be better integrated in the community.</p> <p>The second barrier is the re-training and additional recruitment of staff that are skilled in community supports, the development of job and community placements to provide both employment and opportunities to be active members of their community. This location has good public transit options, but additional sedan type vehicles may be needed to access areas and opportunities that are not accessible by regular public transit.</p> <p>A third key barrier is to replace Community Care Licensing's Facility based requirements for health and safety and care and supervision with appropriate Community measures and systems to ensure both the health and safety of individuals supported, but quality community outcomes.</p> <p>There will also need to be a change in communication, data tracking, information retrieval and support than is currently available.</p>
Narrative/description of the project. Identify which HCBS federal requirements are	<p>To increase access based on individual choice and direction the following would be needed to provide those opportunities:</p> <ul style="list-style-type: none"> • Transition individuals from the 1:6 DTAC service to our 1:3 ADC service.

<p>currently out of compliance; include justification for funding request</p>	<ul style="list-style-type: none"> • Increased number of small sedans and vehicles that could easily transport between 2 and 4 individuals interested in going to and/or doing activities in the same area. • Provision of community Transit passes for use at all times, so that individuals can use public transit to extend their opportunities and community circle. • The allowance of alternative transportation services, such as Uber and Lyft funded through the system like traditional transit passes <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> • This service is primarily provide to ambulatory individuals, so the need for small sedans to transport a support staff and 3 to 4 individuals on a leased basis, so the vehicles can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 12,000 – based on current needs and encouraging the use of public transit, whenever feasible, we would need 2 to 4 vehicles to move to full compliance. • Transit passes – Annual cost per consumer regularly using Community Transit \$ 1,200 • Alternative transportation options – As this would be a new option, estimated annual costs could be similar to those using Community Transit - \$ 1,200 <p>To assure staff are trained and supported to build and support community options for the folks supported additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Change ratios from 1:6 to 1:3 - \$ 60,000 • Bring 2 vehicles on line - \$ 24,000 • Transit passes for 6 individuals for the year - \$ 7,200 • Alternative Transportation options for 2 folks for the year -

	<p>\$2,400</p> <ul style="list-style-type: none"> • Training and support for the 2 direct service staff - \$ 2,400 • Currently we have 2 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 3,000 <p>Total for 2016-17 – \$ 96,600</p> <p>These would be on-going annual costs to maintain the operation of this program. Based on the success of increasing the use of Public and Alternative Transportation options, the number of additional vehicles in future years would vary.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • To do a person-centered transition typically takes 3 to 6 months to transition individuals, unless 1:6 programs are no longer offered. • Vehicles take between 1 and 3 months to bring on line depending on availability from the suppliers. • Transit passes could be brought on line quickly with a change in how Regional Centers use and allocate them. As they sometimes require the individual to purchase them and reimburse the individual this often causes hardship for the consumers. Also, while there is some funding for transit to and from program the internal costs of increased community involvement and integration opportunities have never been fully costed. • Not sure how and/or if Regional Centers have come up with a way to deal with alternate transit options to increase community involvement. • Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice. • It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules. • The development of Community Experience Quality indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.

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Vendor and vendor number	Futures Explored – ALIVE Concord – PB0008
Primary regional center	RCEB
Service type and code	Supplemental Support - 111
Number of consumers currently serving	6
Barriers to compliance with the HCBS rules and/or project implementation	These are individuals who receive supplemental supports while attending our ALIVE Concord program (H84803) to reduce the ratio from 1:3 to 1:2 due to either Restricted Health Care Conditions or the need for Total Care (all personal care needs require support). The major barriers here are often developing/getting clear communication and direction from the participants, as well as having appropriate locations in the community to get their Personal Care needs met. We have included these individuals in our H84803 request related to community access, staff training and supports and are limiting this to the additional barriers faced by these individuals.
Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request	To increase access based on individual choice and direction the following would be needed to provide those opportunities: <ul style="list-style-type: none"> • Development and support for a Person Centered plan that includes the development of a consistent communication system for the individual to make their wishes known - \$15,000 per participant • Access to personal support locations thru out the community – unknown cost at this point • Additional training for support staff in the use of any communication system and/or devices to insure that the individuals needs can be met - \$ 2,400 per individual.

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<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Ultimately, some of these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Identify, develop and implement person centered plan and communication system - \$ 90,000 • Additional Staff training - \$ 14,400 <p>Total for 2016-17 – \$ 104,400</p> <p>These would be the initial costs additional costs would be identified in the process to ensure that once a communication system was developed it could be used through-out the individual's support system.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • It will take between 6 to 18 months to really understand the communication abilities and options and develop the system and then systematically train everyone to use it.

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Vendor and vendor number	Futures Explored – ALIVE East County II (GARDEN Antioch) – HB0263
Primary regional center	RCEB
Service type and code	Adult Development Program - 510
Number of consumers currently serving	33
Barriers to compliance with the HCBS rules and/or project implementation	These individuals who receive services have significant challenges in communication, mobility, and making their needs known to their support staff and family. The major barriers here are often developing/getting clear communication and direction from the participants. 29 of the individuals supported have significant personal care and health needs, as well as the majority of them are in manual wheelchairs, which limit their ability to access the community, based on their overall health. The need for personal care support locations in the community also limits the opportunities for integration. While a supplemental rate reduces the ratio to 1:2 (PB0546) that does not provide opportunity to access the community due the need for assistance to move, reducing the Mobility Aide ratio from 1:10 to 1:2 would allow small groups to go into the community for partial days. Staff training would be necessary to help move staff from assumption of care to one of support of the individual's desires, while meeting their health and personal care needs.
Narrative/description of the project. Identify which HCBS federal requirements are currently out of	To increase access based on individual choice and direction the following would be needed to provide those opportunities: <ul style="list-style-type: none"> Increased number of wheel chair vehicles that can transport 2 to 3 wheelchairs at a time and look more like typical community vehicles than the large specialized buses that are

<p>compliance; include justification for funding request</p>	<p>currently used.</p> <ul style="list-style-type: none"> • Reduce the Mobility Aide ratio from 1:10 to 1:2, so that appropriate supports can be provided in the community. • Additional Staff training to help develop community locations to engage the participants with others. <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> • The need is to transport/support individuals who are wheel chair, so lease vehicles so they can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 25,000 – based on current needs, we would need 3 to 4 vehicles to move to full compliance. • Reduce the Mobility Aide ratio from 1:10 to 1:2 for those using manual chairs - \$ 9,252/participant a year <p>To assure staff are trained and supported to build and support community options for the folks supported additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Bring 5 vehicles on line - \$ 125,000 • Increase the number of Mobility Aides – \$ 269,000 • Training and support for the 16 direct service staff - \$ 19,200 • Currently we have 16 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 24,000 <p>Total for 2016-17 – \$ 437,200</p> <p>These would be on-going annual costs to maintain the operation of this program.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • Vehicles take between 3 and 6 months to bring on line

	<p>depending on availability from the suppliers.</p> <ul style="list-style-type: none">• There would need to be a statutory change to modify the Mobility Aide ratio and corresponding rate set by the State.• Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice.• It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules.• The development of Community Experience Quality indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.
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Vendor and vendor number	Futures Explored – ALIVE East – H54615
Primary regional center	RCEB
Service type and code	Adult Development Program - 510
Number of consumers currently serving	59
Barriers to compliance with the HCBS rules and/or project implementation	This program while located in a city center it does not have strong Public Transit and many of the individuals live in rural communities and need regular supported transportation to get in and around their community. 12 individuals supported in the program need regular personal care support that requires adult changing tables and lifts. 8 of the individuals supported are in manual wheelchairs and one Mobility Aide for every 10 individuals does not provide enough support for accessing the community. This also requires vehicles that can handle and transport wheelchairs. Access to the cost of public transit is also a key barrier to folks being able to access the community on a regular basis. Finally, a challenge to employment is the need for a longer support period for job development and placement and for support that typically exceeds the 20% currently allowed for long-term individual placement supports.
Narrative/description of the project. Identify which HCBS federal requirements are currently out of compliance; include justification for funding request	To increase access based on individual choice and direction the following would be needed to provide those opportunities: <ul style="list-style-type: none"> • Increased number of wheel chair vehicles that can transport 2 to 3 wheelchairs at a time and look more like typical community vehicles than the large specialized buses that are currently used. • Reduce the Mobility Aide ratio from 1:10 to 1:2, so that appropriate supports can be provided in the community.

	<ul style="list-style-type: none"> • Provision of community Transit passes for use at all times, so that individuals can use public transit to extend their opportunities and community circle. • The allowance of alternative transportation services, such as Uber and Lyft funded through the system like traditional transit passes <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> • The need is to transport/support individuals who are wheel chair users {many of which are power chairs that increase their personal mobility}, so the vehicles can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 25,000 – based on current needs and encouraging the use of public transit, whenever feasible, we would need 3 to 4 vehicles to move to full compliance. • Reduce the Mobility Aide ratio from 1:10 to 1:2 for those using manual chairs - \$ 9,252/per individual • Transit passes – Annual cost per consumer regularly using Community Transit \$ 1,200 • Alternative transportation options – As this would be a new option, estimated annual costs could be similar to those using Community Transit - \$ 1,200 <p>To assure staff are trained and supported to build and support community options for the folks supported additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Bring 3 vehicles on line - \$ 75,000 • Reduced Mobility Aide ratio – 111,000 • Transit passes for 25 individuals for the year - \$ 30,000 • Alternative Transportation options for 2 folks for the year - \$2,400 • Training and support for the 20 direct service staff - \$ 24,000

	<ul style="list-style-type: none"> • Currently we have 20 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 30,000 <p>Total for 2016-17 – \$ 272,400</p> <p>These would be on-going annual costs to maintain the operation of this program. Based on the success of increasing the use of Public and Alternative Transportation options, the number of additional vehicles in future years would vary.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • Vehicles take between 3 and 6 months to bring on line depending on availability from the suppliers. • There would need to be a statutory change to modify the Mobility Aide ratio and corresponding rate set by the State. • Transit passes could be brought on line quickly with a change in how Regional Centers use and allocate them. As they sometimes require the individual to purchase them and reimburse the individual this often causes hardship for the consumers. Also, while there is some funding for transit to and from program the internal costs of increased community involvement and integration opportunities have never been fully costed. • Not sure how and/or if Regional Centers have come up with a way to deal with alternate transit options to increase community involvement. • Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice. • It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules. • The development of Community Experience Quality indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.

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Vendor and vendor number	Futures Explored – GARDEN Brentwood – HB0762
Primary regional center	RCEB
Service type and code	Adult Development Program - 510
Number of consumers currently serving	24
Barriers to compliance with the HCBS rules and/or project implementation	<p>These individuals who receive services have significant challenges in communication, mobility, and making their needs known to their support staff and family. The major barriers here are often developing/getting clear communication and direction from the participants. 19 of the individuals supported have significant personal care and health needs, as well as the majority of them are in manual wheelchairs, which limits their ability to access the community, based on their overall health. The need for personal care support locations in the community also limits the opportunities for integration. While a supplemental rate reduces the ratio to 1:2 (PB1273) that does not provide opportunity to access the community due the need for assistance to move, reducing the Mobility Aide ratio from 1:10 to 1:2 would allow small groups to go into the community for partial days. Staff training would be necessary to help move staff from assumption of care to one of support of the individual's desires, while meeting their health and personal care needs.</p>
Narrative/description of the project. Identify which HCBS federal requirements are currently out of	<p>To increase access based on individual choice and direction the following would be needed to provide those opportunities:</p> <ul style="list-style-type: none"> Increased number of wheel chair vehicles that can transport 2 to 3 wheelchairs at a time and look more like typical community vehicles than the large specialized buses that are

<p>compliance; include justification for funding request</p>	<p>currently used.</p> <ul style="list-style-type: none"> • Reduce the Mobility Aide ratio from 1:10 to 1:2, so that appropriate supports can be provided in the community. • Additional Staff training to help develop community locations to engage the participants with others. <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> • The need to transport/support individuals who are wheel chair users, so lease vehicles so they can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 25,000 – based on current needs, we would need 3 to 4 vehicles to move to full compliance. • Reduce the Mobility Aide ratio from 1:10 to 1:2 for those using manual chairs - \$ 9,252/participant a year <p>To assure staff are trained and supported to build and support community options for the folks supported additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with potentially both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Bring 5 vehicles on line - \$ 125,000 • Reduce Mobility Aide ratio to 1:2 - \$ 176,000 • Training and support for the 12 direct service staff - \$ 14,400 • Currently we have 12 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 18,000 <p>Total for 2016-17 – \$ 333,400</p> <p>These would be mostly on-going annual costs to maintain the operation of this program.</p>
<p>Estimated timeline for the project</p>	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none"> • Vehicles take between 3 and 6 months to bring on line

	<p>depending on availability from the suppliers.</p> <ul style="list-style-type: none">• There would need to be a statutory change to modify the Mobility Aide ratio and corresponding rate set by the State.• Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice.• It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules.• The development of Community Experience Quality indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.
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**Home and Community-Based Services (HCBS) Rules
CONCEPT PROPOSAL**

Enclosure C

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Vendor and vendor number	Futures Explored – GARDEN Tri-Valley – PB0939
Primary regional center	RCEB
Service type and code	Community Integration Training - 055
Number of consumers currently serving	16
Barriers to compliance with the HCBS rules and/or project implementation	This service was started in conjunction with the closure of Agnews Development Center to provide day services to those with significant health issues and/or total care needs. The major barriers here are often developing/getting clear communication and direction from the participants. The individuals supported have significant personal care and health needs, as well as the majority of them are in manual wheelchairs, which limit their ability to access the community, based on their overall health and need for specialized nursing supports. The need for personal care support locations in the community also limits the opportunities for integration. Currently, this service is staffed at 1:2, without the option for mobility aides, so the addition of Mobility Aides at a 1:2 ratio would allow for greater opportunity for community involvement. Staff training would be necessary to help move staff from assumption of care to one of support of the individual's desires, while meeting their health and personal care needs.
Narrative/description of the project. Identify which HCBS federal requirements are currently out of	To increase access based on individual choice and direction the following would be needed to provide those opportunities: <ul style="list-style-type: none"> Increased number of wheel chair vehicles that can transport 2 to 3 wheelchairs at a time and look more like typical community vehicles than the large specialized buses that are

<p>compliance; include justification for funding request</p>	<p>currently used.</p> <ul style="list-style-type: none"> • Development and support for a Person Centered plan that includes the development of a consistent communication system for the individual to make their wishes known - \$15,000 per participant • Provide additional Mobility Aides at a 1:2 ratio, so that appropriate supports can be provided in the community. • Additional Staff training to help develop community locations to engage the participants with others. <p>To ensure appropriate support and communication regarding community situations, health and safety issues, additional communication and portable technology would need to be used to facilitate choice and communication in the community.</p>
<p>Estimated budget; identify all major costs and benchmarks— attachments are acceptable</p>	<p>Increased access:</p> <ul style="list-style-type: none"> • The need to transport/support individuals who are wheel chair users, so lease vehicles so they can be kept in good and safe operational condition (change out every 4 years) – Estimated Annual cost per vehicle (lease, maintenance, fuel, and Insurance) - \$ 25,000 – based on current needs we would need 3 to 4 vehicles to move to full compliance. • Provide mobility aides at a 1:2 ratio - \$ 11,500/participant a year <p>To assure staff are trained and supported to build and support community options for the participants additional training and resources would need to be provided - \$ 1,200 a year/staff.</p> <p>To assure appropriate communication and resources to support individuals in the community the need to outfit staff with both smart phones and tablets, in order to do research, have access to consumer information for emergencies, etc. – Annual cost \$ 1,500 a year.</p> <p>Ultimately, these costs need to be rolled into the on-going funding rate as these were not included in the original program designs and support requests.</p>
<p>Requested funding for 2016-17</p>	<p>To achieve compliance by March 2019, would need the following budget for 2016-17:</p> <ul style="list-style-type: none"> • Bring 3 vehicles on line - \$ 75,000 • Development of Person Centered plans and communication supports - \$ 240,000 • Provide Mobility Aides – \$ 184,000 • Training and support for the 8 direct service staff - \$ 9,600 • Currently we have 8 staff who would need to receive upgraded technology and training to effectively and safely use the new technology - \$ 12,000 <p>Total for 2016-17 – \$ 520,600</p>

	<p>These would be mostly on-going annual costs to maintain the operation of this program.</p>
Estimated timeline for the project	<p>The following are the timelines for the various items:</p> <ul style="list-style-type: none">• Vehicles take between 3 and 6 months to bring on line depending on availability from the suppliers.• There would need to be a statutory change to modify the Mobility Aide ratio and corresponding rate set by the State.• The development of the person centered plan and communication system would take 6 to 18 months.• Staff training would start immediately and take 12 months to complete and then regular updates and discussions as we become more sophisticated in supporting individual choice.• It would take us 6 months to get all staff fully trained and using the new tablets and phones to ensure they are being used safely, in compliance with all HIPPA and other rules.• The development of Community Experience Quality indicators will probably take several years of trial, testing and revising to get to a solid set of indicators.