

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

The Home and Community-Based Services (HCBS) rules ensure that people with disabilities have full access to, and enjoy the benefits of, community living through long-term services and supports in the most integrated settings of their choosing. In order to assist in determining eligibility for compliance funding, providers must complete this evaluation. Both “Yes” and “No” answers require an explanation. A “No” response *could* mean a service setting is out of compliance with the HCBS rules and is potentially eligible for funding to make necessary adjustments. Once this evaluation is completed, it should act as a guide for filling out the provider compliance funding concept, which is required for any provider to be eligible for compliance funding. **Completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules. Only providers requesting compliance funding need to complete this evaluation.**

Federal Requirements #1-5 apply to providers of all services, including residential and non-residential settings. Federal Requirements #6-10 are additional requirements that apply only to provider-owned or controlled residential settings.

The column labeled “Guidance” contains a series of questions intended to help identify compliance or non-compliance with each requirement as it relates to the HCBS rules. While responses to these questions can help in the determination of whether or not a particular requirement is met, these responses may not be the sole factor in this determination.

More information on the HCBS rules and this form can be found at [www.dds.ca.gov/HCBS](http://www.dds.ca.gov/HCBS).

Questions may be directed to [HCBSregs@dds.ca.gov](mailto:HCBSregs@dds.ca.gov).

|   |   |
|---|---|
| Date(s) of Evaluation: <a href="#">11/19/2019</a>   | Completed by: <a href="#">Saanen Kerson, Licensed Administrator</a> |
| Vendor Name, Address, Contact: <a href="#">Vine Village; 4059 Old Sonoma Road Napa, CA 94559 707-255-4006</a> |   |
| Vendor Number: <a href="#">HN0362</a>   |   |
| Service Type and Code: <a href="#">915 - Residential Services, Level 3 Staff-Operated</a>                     |   |

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| <p><b><u>Federal Requirement #1:</u></b><br/> <i>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.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals receive services in the community based on their needs, preferences and abilities?<br/> <b>YES</b></li> <li>• Does the individual participate in outings and activities in the community as part of his or her plan for services?<br/> <b>YES. Each client's IPP includes this.</b></li> <li>• If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?<br/> <b>YES, we work closely with North Bay regional Center case managers to honor requests for paid employment.</b></li> <li>• Do individuals have the option to control their personal resources, as appropriate? <b>YES.</b></li> </ul> |
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**Does the service and/or program meet this requirement?**  **Yes**  **No**

Please explain: [Click or tap here to enter text.](#)

This Concept Proposal is for accommodations to allow our clients to Age In Place. This questionnaire does not address this concept, but it is now an acceptable category for funding under HCBS guidelines.

The Baby Boomer generation of consumers, who have defied previous models by living to ripe old ages, has arrived, and the services are not there for them. At the time most of these folks were born, their lifespans were predicted to range from early childhood to young adulthood. Vine Village was created in the early 1970's, right after the enactment of the Lanterman Act, to serve these folks who, thanks in large part to improvements in antibiotics, general medical care, and improved child development and educational programs, arrived at young adulthood in good health.

Now this generation is reaching their senior years. They want to slow down, to retire, and to age comfortably in their homes. However, there are few options for seniors who have a developmental disability.

This Concept Proposal is more architectural modifications that will allow senior consumers to age in place.

Many of our residents, who have lived at Vine Village since they were young adults, are reaching retirement age, and are experiencing physical decline. Additionally many of our younger residents have difficulty navigating stairs, stepping over tub walls in the

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bathroom, etc. It can be cruel and wrenching to force these people from the only home they have known for their adult lives. It may take a year or more to find a suitable placement, and this placement is usually far from the friends and community the client knows. Usually these consumers want to stay in their home, but in order to do that, we need some site improvements such as ADA-compliant ramps, decking, grab bars, and walk-in showers. Additionally, in order to most optimally support our residents, we are applying for funding to provide staff training in Person-Centered-Thinking, especially as it applies to the ageing process.

**Federal Requirement #2:**

*The setting is selected by the individual from among setting options, including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.*

**Guidance:**

- Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals?  
**YES**
- Does each individuals' IPP document the different setting options that were considered prior to selecting this setting?  
**NO – IPP's are prepared by the individual's Case Manager for North Bay Regional Center. We can start asking them to include this information.**

**Does the service and/or program meet this requirement?**   Yes   No

Please explain: **We will start asking NBRC to include documentation for the different settings options they might have offered our clients before this program was chosen.**

**Federal Requirement #3:**

*Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.*

**Guidance:**

- Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?  
**YES.**
- Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?  
**YES.**
- Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology,

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|  | <p>Braille, large font print, sign language, participants' language, etc.)?<br/>                 We serve clients who can speak and understand speech in English or Spanish. Those who can benefit from large font print are provided such materials.</p> |
|--|---|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: We serve clients who can speak and understand speech in English or Spanish. Those who can benefit from large font print are provided such materials. Many residents also use computers, digital tablets, and smartphones.

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| <p><b><u>Federal Requirement #4:</u></b><br/> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider offer daily activities that are based on the individuals' needs and preferences?<br/>                     YES.</li> <li>• Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings?<br/>                     YES.</li> <li>• Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?<br/>                     YES.</li> </ul> |
|--|---|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: Vine Village believes in supporting each client's individual interests and activities. In order to continue to update and improve our supports to our consumers, we would like to obtain training in Person-Centered-Thinking for our staff.

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| <p><b><u>Federal Requirement #5:</u></b><br/><i>Facilitates individual choice regarding services and supports, and who provides them.</i></p>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?<br/><b>YES.</b></li> <li>• Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?<br/><b>YES.</b></li> </ul> |
| <p><b>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</b></p> <p>Please explain: <i>We encourage communication between our residents and staff. Residents are welcome to discuss concerns they might have with our administrators. When needs or preferences change, we modify our consumers' services and supports as needed, not just at periodically scheduled meetings.</i></p> |  |

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Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

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| <p><b><u>Federal Requirement #6:</u></b></p> <p><i>The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?<br/><b>Each resident has an Admission Agreement</b></li> <li>Are individuals informed about how to relocate and request new housing?<br/><b>YES.</b></li> </ul>  |
| <p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b></p> <p>Please explain: <a href="#">Click or tap here to enter text.</a></p>  |  |
| <p><b><u>Federal Requirement #7:</u></b></p> <p><i>Each individual has privacy in his/her sleeping or living unit:</i></p> <ul style="list-style-type: none"> <li><i>Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.</i></li> <li><i>Individuals sharing units have a choice of roommates in that setting.</i></li> <li><i>Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i></li> </ul>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>Do individuals have a choice regarding roommates or private accommodations?<br/><b>YES, although, due to architectural realities, it is not always possible to grant requests for changes immediately.</b></li> <li>Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences?<br/><b>YES</b></li> <li>Do individuals have the ability to lock their bedroom doors when they</li> </ul> |

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|  | choose?<br>YES. |
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**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: We support rights to privacy.

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| <p><b><u>Federal Requirement #8:</u></b><br/> <i>Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have access to food at any time?<br/>                     YES.</li> <li>• Does the home allow individuals to set their own daily schedules?<br/>                     YES. Residents have free time after work, in the evening, and on weekends, to do what they choose.</li> <li>• Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?<br/>                     YES.</li> </ul> |
|---|--|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: We encourage each resident to choose their day program, whether a paid job or another option, and we offer weekend activities, which a person may choose to participate in or not. Individual interests and desires are accommodated when feasible. Clients who are able to independently access the community services and activities that they choose, do so by using taxi services, public transportation, and those who have the capability may drive their own car, walk or ride a bike. However, we are currently less able to accommodate the individual preferences of folks who are not able to interact within the community without supports. Included in this proposal is training in Person-Centered-Thinking, Train the Trainer certification, to improve our supports to our residents in accessing community access for our their personal preferences and interests.

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| <p><b><u>Federal Requirement #9:</u></b><br/><i>Individuals are able to have visitors of their choosing at any time.</i></p>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Are visitors welcome to visit the home at any time?<br/>Yes, so long as the visit also accommodates the rights of other clients.</li> <li>• Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?<br/>Yes, if the visitor is known to us. As a licensed facility, we are responsible for the care and safety of our residents while in our care.</li> </ul>   |
| <p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b><br/>Please explain: <a href="#">Click or tap here to enter text.</a></p> |  |
| <p><b><u>Federal Requirement #10:</u></b><br/><i>The setting is physically accessible to the individual.</i></p>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have the freedom to move about inside and outside the home <b>YES</b> or are they primarily restricted to one room or area? <b>NO</b><br/>If “Freedom to move about inside and outside” means the right to free movement, then <b>YES</b>, our residents do have those freedoms. Residents are never restricted to one room.</li> </ul> <p>If, however, this freedom of movement is defined as feeling comfortable and safe in doing so, in some cases the answer is <b>NO</b>, because the person is afraid of slipping and falling on the stairs, and the person experiences pain to knees, hips, feet, etc. while negotiating the stairs, and thus they avoid going in and out except when necessary, such as to go to work. Adding ADA-compliant ramps and decks to allow easier, safer access to the outdoors and to close by buildings,</p> |

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|  | <p>will encourage our residents to continue to lead active, sociable lives.</p> <ul style="list-style-type: none"> <li>• Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move about the setting as they choose?<br/>No. We have installed grab bars in some of the bathrooms, but we need to remove the bathtubs and replace them with walk-in showers. We need ADA ramps and connecting decks, and need more grab bars and other modifications - hence this Concept Proposal.</li> <li>• Are appliances and furniture accessible to every individual?<br/>Yes.</li> </ul> |
|--|--|

**Does the service and/or program meet this requirement?**    Yes    No

Please explain: Our Proposal includes funding to install ADA-compliant ramps with adjoining single level decking, grab bars, and walk-in showers, to accommodate clients who need them. As our residents age, we are seeing more and more people needing these supports, in order to remain in the home they have known for many years – in many cases, for all of their adult lives.

**CONTACT INFORMATION**

Contact Name: Saenen Kerson

Contact Phone Number: 707-255-4006

Email Address: skerson@vinevillage.org

**ACKNOWLEDGEMENT**

By checking the box below, I acknowledge that completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules.

I AGREE

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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 as one packet to the regional center with which it has primary vendorization.

### Instructions:

- The concept form on the next page must be used, may not exceed four pages plus the budget worksheet and any cost back up, and must be kept in Arial 12-point font. Submit the form in Microsoft Word or PDF format. An extra half page is permitted to answer questions about prior funding, but the rest of the concept must be within the standard page requirements.
- There has been a significant change in the form and process compared to prior years. **In order to receive funding, this 2019-20 form must be used.**
- For providers that operate programs with several vendor numbers involved in one concept, one evaluation and concept form should be submitted and should list all vendor numbers for related/included programs. If multiple programs owned by the same parent company have different compliance evaluations or concepts, additional applications can be submitted but should be attached in the same document as the other owned programs so they can be reviewed together.
- The results of the evaluation should be clearly laid out in the section referring to identification of federal requirements that are currently out of compliance, which the concept will address.
- The concept form includes detailed information that describes the funding requests and supports how the requests will assist the provider to come into compliance.
- There should be a clear link between what is being requested and the federal requirement currently out of compliance.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in offering more choices or opportunities in the community.

### Strengths of previously funded concepts:

- Identified the need as well as proposed a plan to provide outreach and information regarding the HCBS rules to individuals served and members of their support teams.
- Discussed the need for additional funds in order to effectively support individuals served on a more individualized basis in overcoming barriers to community integration and employment, as appropriate.
- Prioritized the preferences of individuals served and utilized their feedback in the development of the concept.
- Implemented train-the-trainer certification for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

More information on the HCBS rules and this form can be found at [www.dds.ca.gov/HCBS](http://www.dds.ca.gov/HCBS).

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| Vendor name  | Vine Village                         |
| Vendor number(s)   | HN0362                               |
| Primary regional center  | NBRC                                 |
| Service type(s)  | Level 3 Residential – Staff Operated |
| Service code(s)  | 915                                  |
| Number of consumers currently served   | Currently 4. Licensed for 9.         |
| Current staff to consumer ratio  | 1:4                                  |
| <p>1. Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.</p>  |                                      |
| <p>On weekdays, starting at around 6:00 AM, residents get up, shower, dress, groom, help prepare and/or serve and eat breakfast, help clean up after breakfast, and then go to their work or day program. Transportation for most residents is by Vine Village staff in one of our 7-passenger minivans. They are picked up between 1:30 and 3:00 PM, depending on their individual program. After arriving home they may do laundry or other chores, watch TV, listen to music, or socialize. Some residents like to assist staff with meal preparation. Meals are at about 5 PM, and for the rest of the evening residents may pursue individual interests, social activities, or personal chores. Residents have the opportunity to go shopping and other activities in town.</p> |                                      |
| <p><b>Project Narrative Description:</b></p>   |                                      |
| <p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p>   |                                      |
| <p>We are requesting funding for architectural modifications that will allow our residents to age in place. Such modifications include ADA-Compliant ramps, connecting decks, and a bathroom remodel to include walk-in showers and grab bars. Additionally, we are requesting training in Person Centered Thinking for our staff.</p>   |                                      |
| <p>3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.</p>   |                                      |
| <p>1___ 2___ 3___ 4___ 5___ 6___ 7___ 8___ 9___ 10_X___</p>  |                                      |
| <p>This Concept Proposal is for accommodations to allow our clients to Age In Place. This questionnaire does not address this concept, but it is now an acceptable category for funding under HCBS guidelines.</p>   |                                      |

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The Baby Boomer generation of consumers, who have defied previous models by living to ripe old ages, has arrived. At the time most of these folks were born, their lifespans were predicted to range from early childhood to young adulthood. Vine Village was created in the early 1970's, right after the enactment of the Lanterman Act, to serve these folks who arrived at young adulthood in good health.

Now this generation is reaching their senior years. They want to slow down, to retire, and to age comfortably in their homes. This Concept Proposal is for architectural modifications that will allow senior consumers to age in place.

Many of our residents, who have lived at Vine Village since they were young adults, are reaching retirement age, and are experiencing physical decline. Additionally many of our younger residents have difficulty navigating stairs, stepping over tub walls in the bathroom, etc. It may take a year or more to find a suitable placement, and this placement is usually far from the friends and community the client knows. Usually these consumers prefer to stay in their home, but in order to do that, we need some site improvements such as ramps, decking, grab bars, and walk-in showers. Additionally, in order to most optimally support our residents, we are applying for funding to provide staff training in Person-Centered-Thinking, especially as it applies to the ageing process.

4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.

Our only out-of-compliance item is # 10, physically accessible setting. Adding ADA-compliant ramps, and remodeling the bathrooms to include grab bars, and walk-in showers, will allow our residents to age in place safely and comfortably. Additionally, in order to most optimally support our residents, we are applying for funding to provide staff training in Person-Centered Thinking, especially as it applies to the ageing process.

5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance.

Modifications to the home to improve the ease and safety of going in and out, and to improve the safety of residents in caring for their hygiene needs in the bathroom, will allow them to Age In Place, and to enjoy greater autonomy.

6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

All of our current residents at Vine Village currently have trouble lifting their legs high enough to easily climb stairs or climb into a bathtub. All have at least some degree of balance problems, and/or joint pains. These problems are increasing as they age. The installation of the proposed modifications will allow them to age in place in safety and comfort, while retaining personal freedom to move about and attend to their individual needs and preferences.

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7. Please describe how and/or what was done to include input from the individuals served in developing this concept? Discuss not only the development of the concept, but also what steps were taken to identify the interests and desires of the individuals and who was involved in that process.

As part of daily life, we maintain open lines of communication with our residents. Residents have expressed clearly that they prefer to stay in their current home as they grow older. In order to do this, it is becoming necessary to replace current stairs with ramps and single-level decking to adjoin outdoor entrance/exits and nearby buildings. Several residents have asked for, and demonstrated the need for, walk in showers with grab bars and shower seats. Stepping over the tub wall to enter a shower with a tub is increasingly difficult.

8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.

People with developmental disabilities have a right to age in place, just as anyone else does. These accommodations will allow consumers the same level of person choice and autonomy as they age, that the rest of our society enjoys.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2019-20 HCBS Funding.

Once installed, these physical accommodations will only require occasional maintenance and repair, which can be absorbed through normal operating expenses.

10. Write a brief narrative below explaining each major cost category and timeline. Complete the budget template at the end of the concept sheet. An excel version with formulas is available. When applicable, budgets should include personnel/benefits, operating costs such as consultants or training, administrative expenses/indirect costs, and capital costs (assets lasting more than 2 years). If project spans 2 years or occurs in phases, budget should be separated by phase/year.

Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs).

[http://leginfo.legislature.ca.gov/faces/codes\\_displaySection.xhtml?sectionNum=4629.7&lawCode=WIC](http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=4629.7&lawCode=WIC)

Capital Costs: ADA-Compliant ramps with decks to create single-level connectivity to the home and nearby cottage, modify one bathroom to replace tubs with walk in showers, grab bars for all showers and toilets = \$103,000.

Staff:/Consultant in PTP = \$5,000

Administrative Overhead \$750

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the time frame of the requested grant, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program time frame.

N/A

12. Have you or the organization you work

HCBS Funding  No  Yes. If Yes, FY(s) \_\_\_\_\_

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| <p>with been a past recipient of DDS funding? If yes, what fiscal year(s)?</p>  | <p>Disparity Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.      If Yes, FY(s) _____<br/>         CPP Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.      If Yes FY(s) _____</p> <p>If yes to any question be sure to answer questions 13 and 14.</p> |
| <p><b>For providers who have received prior HCBS, Disparity or CPP Funding from DDS</b></p>   |   |
| <p>13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.</p> |   |
| <p>N/A</p>  |   |
| <p>14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.</p>            |   |
| <p>N/A</p>  |   |

| HCBS CONCEPT BUDGET                          |                     |               |             |               |             |            |
|--|---------------------|---------------|-------------|---------------|-------------|------------|
| Vendor Name                                  |                     | Vine Village  |             |               |             |            |
| Vendor Number(s)                             |                     | HN0362        |             |               |             |            |
|  | Salary and Benefits | Year 1 Budget |             | Year 2 Budget |             | Total      |
|  |                     | FTE           | Annual Cost | FTE           | Annual Cost | Cost       |
| <b>Personnel (salary + benefits)</b>         |                     |               |             |               |             |            |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Consultant/Trainer: Person-Centered Thinking | 5,000               | 1.00          | \$ 5,000    |               | \$ -        | \$ 5,000   |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Position Description                         |                     |               | \$ -        |               | \$ -        | \$ -       |
| Personnel Subtotal                           |                     |               | \$ 5,000    |               | \$ -        | \$ 5,000   |
| <b>Operating expenses</b>                    |                     |               |             |               |             |            |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
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|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
| Operating Subtotal                           |                     |               | \$ -        |               | \$ -        | \$ -       |
| <b>Administrative Expenses</b>               |                     |               |             |               |             |            |
| 15% of Personnel Costs                       |                     |               | \$ 750      |               |             | \$ 750     |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
| Administrative Subtotal                      |                     |               | \$ 750      |               | \$ -        | \$ 750     |
| <b>Capital expenses</b>                      |                     |               |             |               |             |            |
| ADA-Compliant Ramps and connecting Decks     |                     |               | \$ 88,000   |               |             | \$ 88,000  |
| Modify 1 bathroom                            |                     |               | \$ 15,000   |               |             | \$ 15,000  |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
|  |                     |               |             |               |             | \$ -       |
| Capital Subtotal                             |                     |               | \$ 103,000  |               | \$ -        | \$ 103,000 |
| <b>Total Concept Cost</b>                    |                     |               | \$ 108,750  |               | \$ -        | \$ 108,750 |

See Attachment F for budget details and restrictions

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

The Home and Community-Based Services (HCBS) rules ensure that people with disabilities have full access to, and enjoy the benefits of, community living through long-term services and supports in the most integrated settings of their choosing. In order to assist in determining eligibility for compliance funding, providers must complete this evaluation. Both “Yes” and “No” answers require an explanation. A “No” response *could* mean a service setting is out of compliance with the HCBS rules and is potentially eligible for funding to make necessary adjustments. Once this evaluation is completed, it should act as a guide for filling out the provider compliance funding concept, which is required for any provider to be eligible for compliance funding. **Completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules. Only providers requesting compliance funding need to complete this evaluation.**

Federal Requirements #1-5 apply to providers of all services, including residential and non-residential settings. Federal Requirements #6-10 are additional requirements that apply only to provider-owned or controlled residential settings.

The column labeled “Guidance” contains a series of questions intended to help identify compliance or non-compliance with each requirement as it relates to the HCBS rules. While responses to these questions can help in the determination of whether or not a particular requirement is met, these responses may not be the sole factor in this determination.

More information on the HCBS rules and this form can be found at [www.dds.ca.gov/HCBS](http://www.dds.ca.gov/HCBS).

Questions may be directed to [HCBSregs@dds.ca.gov](mailto:HCBSregs@dds.ca.gov).

|  |   |
|--|---|
| Date(s) of Evaluation: 11/19/2019  | Completed by: Saanen Kerson, Licensed Administrator |
| Vendor Name, Address, Contact: Vine Village Two, 1047 Congress Valley Road, Napa, CA 94558; Contact: Saanen Kerson, 707-255-4006 |   |
| Vendor Number: HN0363  |   |
| Service Type and Code: 915 Residential, Level 3 – Staff Operated   |   |

**Home and Community-Based Services (HCBS) Rules  
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| <p><b><u>Federal Requirement #1:</u></b><br/> <i>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.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals receive services in the community based on their needs, preferences and abilities?<br/> <b>YES</b></li> <li>• Does the individual participate in outings and activities in the community as part of his or her plan for services?<br/> <b>YES. Each client's IPP includes this.</b></li> <li>• If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?<br/> <b>YES, we work closely with North Bay regional Center case managers to honor requests for paid employment.</b></li> <li>• Do individuals have the option to control their personal resources, as appropriate? <b>YES.</b></li> </ul> |
|--|---|

**Does the service and/or program meet this requirement?**  **Yes**  **No**

Please explain: [Click or tap here to enter text.](#)

This Concept Proposal is for accommodations to allow our clients to Age In Place. This questionnaire does not address this concept, but it is now an acceptable category for funding under HCBS guidelines.

The Baby Boomer generation of consumers, who have defied previous models by living to ripe old ages, has arrived, and the services are not there for them. At the time most of these folks were born, their lifespans were predicted to range from early childhood to young adulthood. Vine Village was created in the early 1970's, right after the enactment of the Lanterman Act, to serve these folks who, thanks in large part to improvements in antibiotics, general medical care, and improved child development and educational programs, arrived at young adulthood in good health.

Now this generation is reaching their senior years. They want to slow down, to retire, and to age comfortably in their homes. However, there are few options for seniors who have a developmental disability.

This Concept Proposal is for architectural modifications that will allow senior consumers to age in place.

Many of our residents, who have lived at Vine Village since they were young adults, are reaching retirement age, and are experiencing physical decline. Additionally, many of our younger residents have difficulty navigating stairs, stepping over tub walls in the

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

bathroom, etc. It can be cruel and wrenching to force these people from the only home they have known for their adult lives. It may take a year or more to find a suitable placement, and this placement is usually far from the friends and community the client knows. Usually these consumers want to stay in their home, but in order to do that, we need some site improvements such as ADA-compliant ramps, decking, grab bars, and walk-in showers. Additionally, in order to most optimally support our residents, we are applying for funding to provide staff training in Person-Centered-Thinking, especially as it applies to the ageing process.

**Federal Requirement #2:**

*The setting is selected by the individual from among setting options, including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.*

**Guidance:**

- Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals? **YES**
- Does each individuals' IPP document the different setting options that were considered prior to selecting this setting? **NO – IPP's are prepared by the individual's Case Manager for North Bay Regional Center. We can start asking them to include this information.**

**Does the service and/or program meet this requirement?** Yes No

Please explain: **We will start asking NBRC to include documentation for the different settings options they might have offered our clients before this program was chosen.**

**Federal Requirement #3:**

*Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.*

**Guidance:**

- Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint? **YES.**
- Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality? **YES.**
- Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology,

**Home and Community-Based Services (HCBS) Rules  
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|  | <p>Braille, large font print, sign language, participants' language, etc.)?<br/>                 We serve clients who can speak and understand speech in English or Spanish. Those who can benefit from large font print are provided such materials.</p> |
|--|---|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: We serve clients who can speak and understand speech in English or Spanish. Those who can benefit from large font print are provided such materials. Many residents also use computers, digital tablets, and smartphones.

|  |   |
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| <p><b><u>Federal Requirement #4:</u></b><br/> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider offer daily activities that are based on the individuals' needs and preferences?<br/>                     YES.</li> <li>• Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings?<br/>                     YES.</li> <li>• Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?<br/>                     YES.</li> </ul> |
|--|---|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: Vine Village believes in supporting each client's individual interests and activities. In order to continue to update and improve our supports to our consumers, we would like to obtain training in Person-Centered-Thinking for our staff.

**Home and Community-Based Services (HCBS) Rules  
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| <p><b><u>Federal Requirement #5:</u></b><br/><i>Facilitates individual choice regarding services and supports, and who provides them.</i></p>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?<br/><b>YES.</b></li> <li>• Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?<br/><b>YES.</b></li> </ul> |
| <p><b>Does the service and/or program meet this requirement?</b>   <input checked="" type="checkbox"/> <b>Yes</b>   <input type="checkbox"/> <b>No</b></p> <p>Please explain: <i>We encourage communication between our residents and staff. Residents are welcome to discuss concerns they might have with our administrators. When needs or preferences change, we modify our consumers' services and supports as needed, not just at periodically scheduled meetings.</i></p> |  |

**Home and Community-Based Services (HCBS) Rules  
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Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

|   |   |
|---|---|
| <p><b><u>Federal Requirement #6:</u></b><br/> <i>The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?<br/> <a href="#">Each resident has an Admission Agreement</a></li> <li>Are individuals informed about how to relocate and request new housing?<br/> <a href="#">YES.</a></li> </ul>   |
| <p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b><br/>                 Please explain: <a href="#">Click or tap here to enter text.</a></p>  |   |
| <p><b><u>Federal Requirement #7:</u></b><br/> <i>Each individual has privacy in his/her sleeping or living unit:<br/>                 Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.<br/>                 Individuals sharing units have a choice of roommates in that setting.<br/>                 Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i></p>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>Do individuals have a choice regarding roommates or private accommodations?<br/> <a href="#">YES, although, due to architectural realities, it is not always possible to grant requests for changes immediately.</a></li> <li>Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences?<br/> <a href="#">Yes.</a></li> <li>Do individuals have the ability to lock their bedroom doors when they</li> </ul> |

**Home and Community-Based Services (HCBS) Rules  
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|  | <p>choose?<br/>Yes.</p> |
|--|-------------------------|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: We support rights to privacy.

|   |  |
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| <p><b><u>Federal Requirement #8:</u></b><br/> <i>Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.</i></p> | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have access to food at any time?<br/>YES.</li> <li>• Does the home allow individuals to set their own daily schedules?<br/>YES. Residents have free time after work, in the evening, and on weekends, to do what they choose.<br/>Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?<br/>YES.</li> </ul> |
|---|--|

**Does the service and/or program meet this requirement?**  **Yes**  **No**  
 Please explain: We encourage each resident to choose their day program, whether a paid job or another option, and we offer weekend activities, which a person may choose to participate in or not. Individual interests and desires are accommodated when feasible. Clients who are able to independently access the community services and activities that they choose, do so by using taxi services, public transportation, and those who have the capability may drive their own car, walk or ride a bike. However, we are currently less able to accommodate the individual preferences of folks who are not able to interact within the community without supports. Included in this proposal is training in Person-Centered-Thinking, Train the Trainer certification, to improve our supports to our residents in accessing community access for our their personal preferences and interests.

**Home and Community-Based Services (HCBS) Rules  
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| <p><b><u>Federal Requirement #9:</u></b><br/><i>Individuals are able to have visitors of their choosing at any time.</i></p>  | <p><b><u>Guidance:</u></b><br/>Are visitors welcome to visit the home at any time?<br/>YES, so long as the visit also accommodates the rights of other clients.</p> <ul style="list-style-type: none"> <li>• Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?<br/>YES, if the visitor is known to us. As a licensed facility, we are responsible for the care and safety of our residents while in our care.</li> </ul>  |
| <p><b>Does the service and/or program meet this requirement?</b>    <input checked="" type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b><br/>Please explain: <a href="#">Click or tap here to enter text.</a></p> |  |
| <p><b><u>Federal Requirement #10:</u></b><br/><i>The setting is physically accessible to the individual.</i></p>  | <p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have the freedom to move about inside and outside the home YES or are they primarily restricted to one room or area? NO<br/>If “Freedom to move about inside and outside” means the right to free movement, then YES, our residents do have those freedoms. Residents are never restricted to one room.</li> </ul> <p>If, however, this freedom of movement is defined as feeling comfortable and safe in doing so, in some cases the answer is NO, because the person is afraid of slipping and falling on the stairs, and the person experiences pain to knees, hips, feet, etc. while negotiating the stairs, and thus they avoid going in and out except when necessary, such as to go to work. Adding ADA-compliant ramps and decks to allow easier, safer access to the outdoors and to close by buildings,</p> |

**Home and Community-Based Services (HCBS) Rules  
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|  | <p>will encourage our residents to continue to lead active, sociable lives.</p> <ul style="list-style-type: none"> <li>• Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move about the setting as they choose?<br/>No. We have installed grab bars in some of the bathrooms, but we need to remove the bathtubs and replace them with walk-in showers. We need ADA ramps and connecting decks, and need more grab bars and other modifications - hence this Concept Proposal.</li> <li>• Are appliances and furniture accessible to every individual?<br/>YES.</li> </ul> |
|--|--|

**Does the service and/or program meet this requirement?**    Yes    No

Please explain: Our Proposal includes funding to install ADA-compliant ramps with adjoining single level decking, grab bars, and walk-in showers, to accommodate clients who need them. As our residents age, we are seeing more and more people needing these supports, in order to remain in the home they have known for many years – in many cases, for all of their adult lives.

**CONTACT INFORMATION**

Contact Name: Saenen Kerson

Contact Phone Number: 707-255-4006

Email Address: skerson@vinevillage.org

**ACKNOWLEDGEMENT**

By checking the box below, I acknowledge that completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules.

I AGREE

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

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 as one packet to the regional center with which it has primary vendorization.

### Instructions:

- The concept form on the next page must be used, may not exceed four pages plus the budget worksheet and any cost back up, and must be kept in Arial 12-point font. Submit the form in Microsoft Word or PDF format. An extra half page is permitted to answer questions about prior funding, but the rest of the concept must be within the standard page requirements.
- There has been a significant change in the form and process compared to prior years. **In order to receive funding, this 2019-20 form must be used.**
- For providers that operate programs with several vendor numbers involved in one concept, one evaluation and concept form should be submitted and should list all vendor numbers for related/included programs. If multiple programs owned by the same parent company have different compliance evaluations or concepts, additional applications can be submitted but should be attached in the same document as the other owned programs so they can be reviewed together.
- The results of the evaluation should be clearly laid out in the section referring to identification of federal requirements that are currently out of compliance, which the concept will address.
- The concept form includes detailed information that describes the funding requests and supports how the requests will assist the provider to come into compliance.
- There should be a clear link between what is being requested and the federal requirement currently out of compliance.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in offering more choices or opportunities in the community.

### Strengths of previously funded concepts:

- Identified the need as well as proposed a plan to provide outreach and information regarding the HCBS rules to individuals served and members of their support teams.
- Discussed the need for additional funds in order to effectively support individuals served on a more individualized basis in overcoming barriers to community integration and employment, as appropriate.
- Prioritized the preferences of individuals served and utilized their feedback in the development of the concept.
- Implemented train-the-trainer certification for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

More information on the HCBS rules and this form can be found at [www.dds.ca.gov/HCBS](http://www.dds.ca.gov/HCBS).

**Home and Community-Based Services (HCBS) Rules  
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|--|--|
| Vendor name  | Vine Village Two   |
| Vendor number(s)   | HN0363   |
| Primary regional center  | NBRC   |
| Service type(s)  | Level 3 Residential – Staff Operated                                 |
| Service code(s)  | 915  |
| Number of consumers currently served   | Currently 7. Licensed for 10.  |
| Current staff to consumer ratio  | Varies throughout the day, depending on how many residents are home. |
| <p>1. Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.</p> <p>On weekdays starting at around 6:00 AM, residents get up, shower, dress, groom, help prepare and/or serve and eat breakfast, help clean up after breakfast, and then go to their work or day program. Transportation for most residents is by Vine Village staff in one of our 7-passenger minivans. They are picked up between 1:30 and 3:00, depending on their individual program. After arriving home they may do laundry or other chores, watch TV, listen to music, or socialize. Some residents like to assist staff with meal preparation. Meals are at about 5 PM, and for the rest of the evening residents may pursue individual interests, social activities, or personal chores. They have the opportunity to go shopping in town or other community activities.</p> |  |
| <b>Project Narrative Description:</b>  |  |
| <p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p> <p>We are requesting funding for architectural modifications that will allow our residents to age in place. Such modifications include ramps, connecting decks, walk-in showers, and grab bars. Additionally, we are requesting funding for Person Centered Thinking for our staff.</p>   |  |
| <p>3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.</p> <p>1___ 2___ 3___ 4___ 5___ 6___ 7___ 8___ 9___ 10_X___</p>   |  |
| <p>This Concept Proposal is for accommodations to allow our clients to Age In Place. This questionnaire does not address this concept, but it is now an acceptable category for funding under HCBS guidelines.</p>   |  |

**Home and Community-Based Services (HCBS) Rules  
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| <p>The Baby Boomer generation of consumers, who have defied previous models by living to ripe old ages, has arrived, and the services are not there for them. At the time most of these folks were born, their lifespans were predicted to range from early childhood to young adulthood. Vine Village was created in the early 1970's, right after the enactment of the Lanterman Act, to serve these folks who arrived at young adulthood in good health.</p> <p>Now this generation is reaching their senior years. They want to slow down, to retire, and to age comfortably in their homes. However, there are few options for seniors who have a developmental disability.</p> <p>This Concept Proposal is more architectural modifications that will allow senior consumers to age in place.</p> <p>Many of our residents, who have lived at Vine Village since they were young adults, are reaching retirement age, and are experiencing physical decline. Many of our younger residents, too, have difficulty navigating stairs, stepping over tub walls in the bathroom, etc. It may take a year or more to find a suitable placement, and this placement is usually far from the friends and community the client knows. Most consumers want to stay in their home as long as possible. Adding ADA-compliant ramps, and remodeling the bathrooms to include grab bars, and walk-in showers, will allow our residents to age in place safely and comfortably. Additionally, in order to most optimally support our residents, we are applying for funding to provide staff training in Person-Centered Thinking, especially as it applies to the ageing process.</p> |
| <p>4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.</p>   |
| <p>Our only out-of-compliance item is # 10, physically accessible setting. Adding ADA-compliant ramps, and remodeling the bathrooms to include grab bars and walk-in showers, will allow our residents to age in place safely and comfortably. Additionally, in order to most optimally support our residents, we are applying for funding to provide staff training in Person-Centered Thinking, especially as it applies to the ageing process.</p>  |
| <p>5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance.</p>  |
| <p>Modifications to the home to improve the ease and safety of going in and out, and to improve the safety of residents in caring for their hygiene needs in the bathroom, will allow them to Age In Place, and to enjoy greater autonomy.</p>   |
| <p>6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?</p>   |
| <p>All of our current residents currently have trouble lifting their legs high enough to easily climb stairs or climb into a bathtub. All have at least some degree of balance problems, and/or joint pains. These problems are increasing as they age. The installation of the</p>  |

**Home and Community-Based Services (HCBS) Rules  
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proposed modifications will allow them to age in place in safety and comfort, while retaining personal freedom to move about and attend to their individual needs and preferences.

7. Please describe how and/or what was done to include input from the individuals served in developing this concept? Discuss not only the development of the concept, but also what steps were taken to identify the interests and desires of the individuals and who was involved in that process.

As part of daily life, we maintain open lines of communication with our residents. Residents have expressed clearly that they prefer to stay in their current home as they grow older. In order to do this, it is becoming necessary to replace current stairs with ramps and single-level decking to adjoin outdoor entrance/exits and nearby buildings. Several residents have asked for, and demonstrated the need for, walk in showers with grab bars and shower seats. Stepping over the tub wall to enter a shower with a tub is increasingly difficult.

8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.

People with developmental disabilities have a right to age in place, just as anyone else does. These accommodations will allow consumers the same level of person choice and autonomy as they age, that the rest of our society enjoys.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2019-20 HCBS Funding.

Once installed, these physical accommodations will only require occasional maintenance and repair, which can be absorbed through normal operating expenses.

10. Write a brief narrative below explaining each major cost category and timeline. Complete the budget template at the end of the concept sheet. An excel version with formulas is available. When applicable, budgets should include personnel/benefits, operating costs such as consultants or training, administrative expenses/indirect costs, and capital costs (assets lasting more than 2 years). If project spans 2 years or occurs in phases, budget should be separated by phase/year.

Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs).

[http://leginfo.legislature.ca.gov/faces/codes\\_displaySection.xhtml?sectionNum=4629.7&lawCode=WIC](http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=4629.7&lawCode=WIC)

Capital Costs: ADA-Compliant ramps \$22,000, 2 bathrooms: replace tub with walk in showers, grab bars for all showers and toilets @ \$15,000 = \$30,000. Training: PTP = \$5,000; Administrative Overhead \$750

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the time frame of the requested grant, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program time frame.

N/A

**Home and Community-Based Services (HCBS) Rules  
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| 12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?  | HCBS Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____<br>Disparity Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____<br>CPP Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes FY(s) _____<br><br>If yes to any question be sure to answer questions 13 and 14. |
| <b>For providers who have received prior HCBS, Disparity or CPP Funding from DDS</b>   |   |
| 13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS. |   |
| N/A  |   |
| 14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.            |   |
| N/A  |   |

| HCBS CONCEPT BUDGET                          |                     |               |                  |               |             |                  |
|--|---------------------|---------------|------------------|---------------|-------------|------------------|
| Vendor Name                                  | Vine Village Two    |               |                  |               |             |                  |
| Vendor Number(s)                             | HI3656              |               |                  |               |             |                  |
|  | Salary and Benefits | Year 1 Budget |                  | Year 2 Budget |             | Total            |
|  |                     | FTE           | Annual Cost      | FTE           | Annual Cost | Cost             |
| <b>Personnel (salary + benefits)</b>         |                     |               |                  |               |             |                  |
| Consultant/Trainer: Person Centered Thinking | 5000                | 1.00          | \$ 5,000         |               | \$ -        | \$ 5,000         |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Position Description                         |                     |               | \$ -             |               | \$ -        | \$ -             |
| Personnel Subtotal                           |                     |               | \$ 5,000         |               | \$ -        | \$ 5,000         |
| <b>Operating expenses</b>                    |                     |               |                  |               |             |                  |
| 15% Admin                                    |                     |               | \$ 750           |               | \$ -        | \$ 750           |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
| Operating Subtotal                           |                     |               | \$ 750           |               | \$ -        | \$ 750           |
| <b>Administrative Expenses</b>               |                     |               |                  |               |             |                  |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
| Administrative Subtotal                      |                     |               | \$ -             |               | \$ -        | \$ -             |
| <b>Capital expenses</b>                      |                     |               |                  |               |             |                  |
| Modify 2 bathrooms @15,000                   |                     |               | \$ 30,000        |               | \$ -        | \$ 30,000        |
| Install ADA Ramps                            |                     |               | \$ 22,000        |               | \$ -        | \$ 22,000        |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
|  |                     |               |                  |               | \$ -        | \$ -             |
| Capital Subtotal                             |                     |               | \$ 52,000        |               | \$ -        | \$ 52,000        |
| <b>Total Concept Cost</b>                    |                     |               | <b>\$ 57,750</b> |               | <b>\$ -</b> | <b>\$ 57,750</b> |

See Attachment F for budget details and restrictions