

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.

Questions may be directed to HCBSregs@dds.ca.gov.

Date(s) of Evaluation: November 20, 2019	Completed by: Rebecca Lienhard
Vendor Name, Address, Contact: Tierra del Sol Foundation, 9919 Sunland Blvd., Sunland, CA 91040	
Vendor Number: <u>HL0035/H17633</u> .	
Service Type and Code: <u>Behavior Management Program 515/ Adult Development Center 510</u>	

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

Federal Requirement #1:

The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

Guidance:

- Do individuals receive services in the community based on their needs, preferences and abilities?
- Does the individual participate in outings and activities in the community as part of his or her plan for services?
- If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?
- Do individuals have the option to control their personal resources, as appropriate?

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

Please explain: Although many choices are offered, due to the relationship between the significance of disability and the staff/client ratio (1:3;1:4), not all individuals receiving workforce development services who exhibit extreme interfering conduct, or those with significant and pervasive challenges due to aging or their life-long disabilities are provided with options that specifically meet their needs and preferences. Approximately 16% of the population we serve are impacted by these challenges in service provision. Additionally, due to limited funding and current restrictive coaching timelines, both job development and intensive job coaching strategies are focused on those who demonstrate the ability to fade job coaching within specific timelines, leading to successful retention of the job. Therefore, if clients are not earning a paycheck, then there are no resources to control.

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?
- Does each individuals' IPP document the different setting options that were considered prior to selecting this setting?

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

Please explain: We work within PATH and Person-Centered Planning practices throughout our services; therefore, each individual absolutely consents to receive services in the settings we currently provide. However, when working with ratios of 1:3/1:4, compromises in individual choice are necessary. Our practices attempt to mitigate this by providing options and a logical rationale for the suggested compromise; however, it is certainly less than reflective of each person's individual needs and preferences.

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

<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint? • Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?
	<ul style="list-style-type: none"> • Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?
<p>Does the service and/or program meet this requirement? X Yes <input type="checkbox"/> No Please explain: This area is thoroughly covered during our initial interview, intake, and 30-day, as well as annual review process.</p>	

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

Federal Requirement #4:

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.

Guidance:

- Does the provider offer daily activities that are based on the individuals' needs and preferences?
- 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?
- 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?

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

Please explain: Only 15.6% (130), which is a reduction of over 50% since 2015, of the individuals participating in services that Tierra del Sol provides, organization-wide, are represented on the Sunland Campus.

These individuals are the most significantly challenged due to their life-long disability, whether it be significant Cerebral Palsy requiring assistance in toileting and specialized protocols and assistance at meal time, developmental disabilities requiring pervasive supports and impacting areas of safety and judgment, or challenges associated with aging impacting mobility and safety, or individuals who have extreme interfering conduct, i.e. aggression, self-injury, and property destruction. Many options are offered, including opportunities for community-based volunteerism at other not-for-profit organizations, as well as wrap-around life-long learning classes. However, due to the pervasiveness of many of the individuals' disabilities and the limited staff/client ratios, these 130 individuals are receiving workforce development services that do not include options that specifically meet their unique needs and preferences. As a result, these individuals remain isolated from the community at large.

Federal Requirement #5:

Facilitates individual choice regarding services and supports, and who provides them.

Guidance:

- Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?
- Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?

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

Please explain: Empowerment is a core value and core strategy of our mission. This value is put into action via person-centered planning as well as scheduled and impromptu check-ins with each individual. However, due to the significance of disability in relation to staff/client ratios, opportunities to modify services are negatively impacted.

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

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><u>Federal Requirement #6:</u> <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><u>Guidance:</u></p> <ul style="list-style-type: none"> • As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement? • Are individuals informed about how to relocate and request new housing?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: <u>NA</u></p>	
<p><u>Federal Requirement #7:</u> <i>Each individual has privacy in his/her sleeping or living unit: Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed. Individuals sharing units have a choice of roommates in that setting. Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have a choice regarding roommates or private accommodations? • 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? • Do individuals have the ability to lock their bedroom doors when they choose?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: <u>NA</u></p>	

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

<p><u>Federal Requirement #8:</u> <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><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have access to food at any time? • Does the home allow individuals to set their own daily schedules? • Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: <u>NA</u></p>	
<p><u>Federal Requirement #9:</u> <i>Individuals are able to have visitors of their choosing at any time.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Are visitors welcome to visit the home at any time? • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: <u>NA</u></p>	
<p><u>Federal Requirement #10:</u> <i>The setting is physically accessible to the individual.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area? • 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? • Are appliances and furniture accessible to every individual?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: <u>NA</u></p>	

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

CONTACT INFORMATION

Contact Name: Rebecca Lienhard
Contact Phone Number: 818-540-5276
Email Address: rlienhard@tierradelsol.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.

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

Vendor name	Tierra del Sol Foundation
Vendor number(s)	HL0035/H17633
Primary regional center	North Los Angeles County Regional Center
Service type(s)	Behavior Management Program / Adult Development Center
Service code(s)	515/510
Number of consumers currently served	130
Current staff to consumer ratio	1:3, 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>By the end of 2015 Tierra had developed and launched its new strategic priorities to achieve Excellence for all those we serve. More specifically, we took a hard look at the time each person spent within our services and committed to ensuring that each moment met our criteria of excellence, including being fully engaged to the maximum potential of each person served in valued work – whether paid or unpaid. In so doing, over the course of the last three years, each person's services have been evaluated against our standards of Excellence. And each, in his/her own way, has made painstaking changes to his/her life in order to achieve a life of quality, meaning and value based on his/her unique contributions to the economic, cultural, civic and spiritual affairs of the community.</p> <p>Currently, 130 individuals are still receiving services on the Sunland campus with limited access to volunteer jobs in the community. Each of the individuals noted meets with his/her Direct Support Professional (DSP) at the Sunland Campus, which is used as a launching point into a workforce development lifestyle. Following is one example of a Person-Centered Plan, as well as the steps needed to move an individual with significant health and safety issues into the community. Upon arriving at the campus, each DSP will review a daily checklist to ensure that each individual is equipped for the day, both emotionally and physically. This checklist also includes the aspect of choice, ensuring that the daily routines are still desired upon arriving to work/program (attached). From that point forward, individuals access volunteer jobs, general community locations such as food and shopping locations, as well as campus-based vocational and/or quality of life opportunities such as healthy lifestyle classes, farm management, creative art classes, swim safety, gardening, Mile Walking Club, etc. Each day is predesigned with each group of 3 or 4 individuals on a weekly basis. We have estimated that most people's pre-grant integration levels range from .04% to 65% with an average across a sample of 24 individuals of 39%.</p>	
Project Narrative Description:	
<p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p>	

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

The overarching objective of this grant is to transition 40 of the remaining 130 individuals, who participate in day services entirely on the Sunland Campus of the Tierra del Sol Foundation into integrated community-based lifestyles; based on Person-Centered practices including Individual Choice, identified Hopes/Dreams, and Unique Strengths/Capacities. Tierra del Sol has identified the 40 individuals who require full Person-Centered Plans to achieve this transition.

To this end, Tierra del Sol needs to hire one Person-Centered Life Planner, maintain current person-centered practices through annual training, add three vehicles to our fleet and cover the rising costs of utilizing alternative transportation sources, such as Lyft for business. Documentation for both the hiring of the Life Planner, as well as PCP Training, including sign-in sheet and copies of training materials, invoices for three vehicles, and Lyft Ridership reports will be provided to substantiate all costs within this grant.

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.

1 X 2 X 3 4 X 5 6 7 8 9 10

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.

#1: Although many choices are offered, due to the relationship between the significance of disability and the staff/client ratio (1:3;1:4), not all individuals receiving workforce development services who exhibit extreme interfering conduct, or those with significant and pervasive challenges due to aging or their life-long disabilities are provided with options that specifically meet their needs and preferences. Approximately 16% of the population we serve is impacted by these challenges in service provision. Additionally, due to limited funding and current restrictive coaching timelines, both job development and intensive job coaching strategies are focused on those who demonstrate the ability to fade job coaching within specific timelines, leading to successful retention of the job. Therefore, if clients are not earning a paycheck, then there are no resources to control.

#2: We work within PATH and Person-Centered Planning practices throughout our services; therefore, each individual absolutely consents to receive services in the settings we currently provide. However, when working with ratios of 1:3/1:4, compromises in individual choice are necessary. Our practices attempt to mitigate this by providing options and a logical rationale for the suggested compromise; however, it is certainly less than reflective of each person's individual needs and preferences.

#4: Only 15.6% (130), which is a reduction of over 50% since 2015, of the individuals participating in services that Tierra del Sol provides organization-wide are represented on the Sunland Campus. Yet these individuals are the most significantly challenged due to their life-long disability, whether it be significant Cerebral Palsy requiring assistance in toileting and specialized protocols and assistance at meal time, developmental disabilities requiring pervasive supports and impacting areas of safety and judgment, or challenges associated with aging impacting mobility and safety, or individuals who have extreme interfering conduct, i.e. aggression, self-injury, and property destruction. Many options are offered, including opportunities for community-based volunteerism at other not-for-profit organizations, as well as wrap-around life-long learning classes. However due to the pervasiveness of many of the individuals' disabilities and the limited staff/client ratios, these 130 individuals are receiving workforce development services that do not include options that specifically meet their unique needs and preferences. As a result, these individuals remain isolated from the community at large.

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

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.

Although known for very innovative services on the Sunland Campus, Tierra's supports have been primarily agency-led rather than person-led. A dedicated Life Planner will help to mitigate group think and focus critical time and opportunities on individual choice, based on the Person-Centered Plan. Navigating to this plan, as well as having physical access through additional vehicles and/or Lyft, will enhance personal autonomy and individual initiative while seeking or maintaining vocational work in integrated settings.

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

The outcome for this grant will be to see an increase in inclusion/integration in the community for the 40 individuals identified. Areas that will be tracked pre and post grant are: How are choices in daily routine being made, pre-grant integration opportunities in %, post-grant integration opportunities in %, Integration Narrative, Frequency of work/volunteer opportunities, Days per week of fully integrated, pre-grant hours of volunteerism, post-grant hours of volunteerism, # of PCP planning sessions to achieve post-grant levels of integration, Percent of Goals met in ISP, and Total # of Sessions with staff, families and others in circle of support.

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.

Since 2015 the individuals we serve have been acknowledging this to themselves the value of the work they do and the acceptance from the larger community that this brings to their lives. They are feeling empowered to fulfill their potential and have a desire to become productive citizens who are accepted, included and valued for the contributions they make. We hear their requests for more, both within teams of current peers and individually, in their annual IPP meetings, and during conversations with their support staff and their Client Services Managers. They are asking and we are listening.

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

Tierra has been using the PATH or Futures Planning model for almost 20 years. We have found that with a well-detailed PATH or PCP plan which takes into account hopes/dreams of the future as well as strengths, skills and gap areas, an individual is more likely to drive his/her set of supports and design services based on unique interests and abilities. Without a well-developed plan, agencies such as Tierra can perpetuate a deficit-based cycle of services, rather than focusing on the whole person.

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

Tierra del Sol fully embraces the Person-centered planning philosophy. However, tight funding constraints and ratio-based services hamper our efforts to make revolutionary changes in the service delivery system. Yet we do not let that stop us from delivering positive incremental progress forward for each person served. Tierra has designed a complex, yet user friendly, accountability matrix that tracks progress on a monthly basis across all systems. Additionally, since 2015, we have held 3-4 leadership-wide accountability meetings annually to publicly report our progress towards full inclusion in the community. This information is then presented to the Board each year in March at its annual retreat and strategic planning meeting. And finally, each year, we retain the services of leading experts to team with key players across the agency to evaluate efforts across

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

domains such as Systems Reform, Culture Building, Empowerment and Mentoring, and Full Engagement.

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

Tierra del Sol is requesting funds to hire one Person-Centered Life Planner, maintain current person-centered practices through annual training with leading experts, add three vehicles to our fleet and cover the rising costs of utilizing alternative transportation sources, such as Lyft for Business. Documentation for both the hiring of the Life Planner, as well as PCP Training including sign-in sheet and copies of training materials, invoices for three vehicles, and Lyft Ridership reports will be provided to substantiate all costs within this grant.

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.

Tierra has an experienced grant writer who will seek additional funding to sustain the Life Planner and the Lyft for Business expenses. Vehicles are a one-time expense with a life expectancy of at least 5-7 years.

12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?

HCBS Funding ___ No X Yes. If Yes, FY(s) 18-19
Disparity Funding ___ No ___ Yes. If Yes, FY(s) _____
CPP Funding ___ No ___ Yes. If Yes FY(s) _____

If yes to any question be sure to answer questions 13 and 14.

For providers who have received prior HCBS, Disparity or CPP Funding from DDS

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.

PROGRESS ON PL1717:

1. Pictures or copies of the PCP for the 16 individuals identified in this project
 - a. Please see attached Plans with current life schedules.
 - b. Additionally, since the receipt of award notification of this grant, 17 more individuals have been launched into full integration in the community. They are Ethan Deane, Jesse Sales, Ryan Lewis, Amanda Jarvis, Jordan Banks, Atzin Martinez, Germaine Goldberg, Kurt Freidenberger, Natalie Loera, Charles Michael Singleton, Evan Hernandez, Jorge Castro, Salvador Flores, Moises Benitez, Maria Ortiz, Michael

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

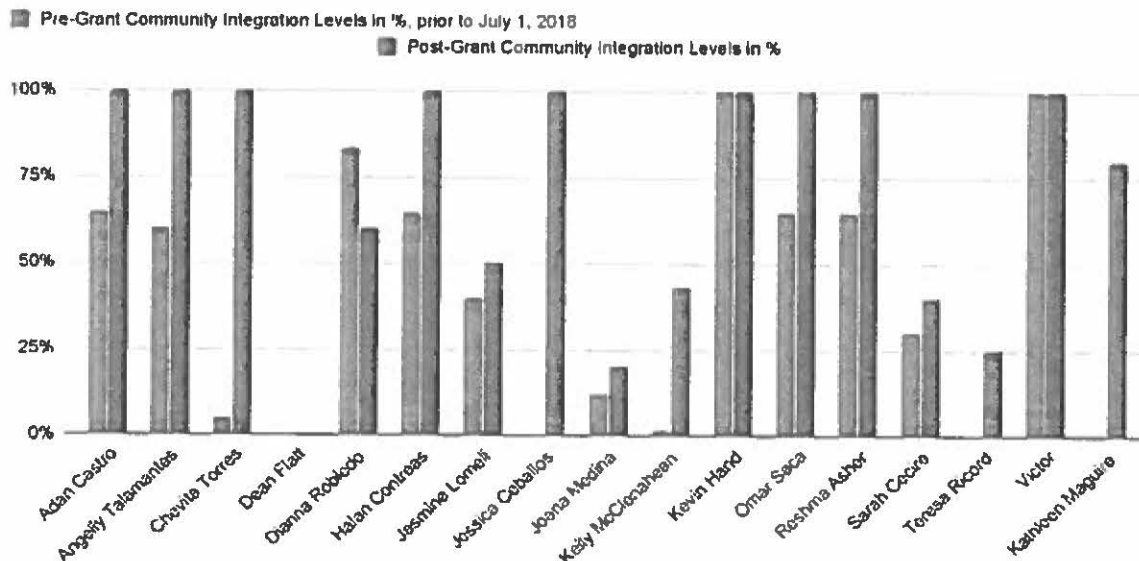
Mihranian and Nicole Von Ende. Please see the attached article about Ryan as well as Kurt Freidenberger.

- c. This is a total of 33 individuals impacted by this grant.

2. Documentation of schedule that demonstrate integration into the community for the 15 individuals identified in this project

- a. On average, participants in this grant process moved from 42% integration in the community to 72% integration. Here is a breakdown of Pre and Post Integration Levels per Person.

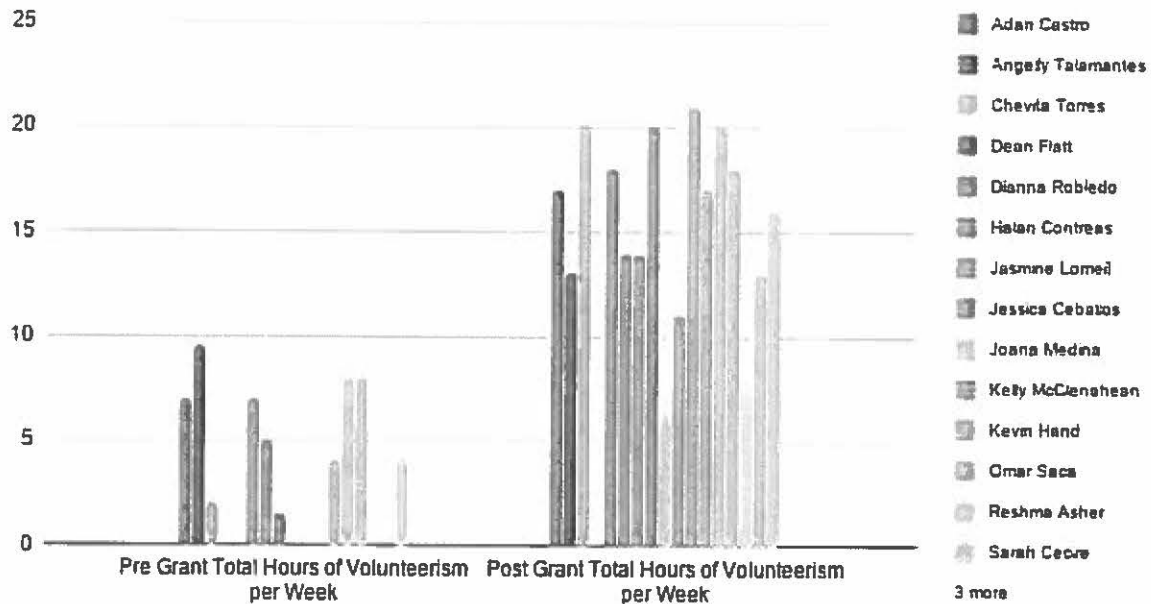
Pre-Grant Community Integration Levels in %, prior to July 1, 2018 and Post-Grant Community Integration Levels in %



- b. Additionally, each participant spend on average 4.29 days out of 5 in the community providing 246 hours per week of professional volunteerism to other not for profit industries of choice. This translates to over a 400% increase of professional volunteerism.

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

Pre Grant Total Hours of Volunteerism per Week and Post Grant Total Hours of Volunteerism per Week

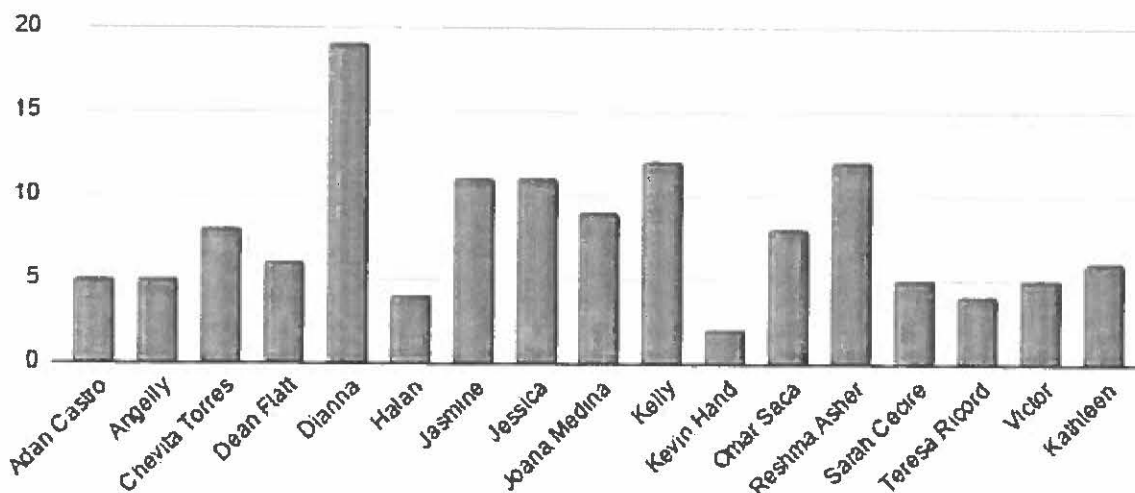


Combined Total of Person-Centered Planning Meetings and Individualized Work with Families and Support Staff

Combined Total of Person-Centered Planning Sessions and Individualized Work with Families and Support Staff

■ Total # of Sessions of staff and/or families trained, if applicable

■ # of PCP planning sessions



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

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.

This request builds on the success of prior funding. A set-aside Life Planner was instrumental in creating individualized plans for the 33 individuals impacted by the previous grant. Additionally, ongoing and unduplicated training in person-centered planning models to further embed the person-centered philosophy across all systems, supports and services is an instrumental key to long-term success. As people have moved further into integration and inclusion, the need for vehicles and alternative transportation grew. For example, in November 2018, Tierra expensed 282 rides, totaling \$3,500 for the month. In October 2019, Tierra expensed \$5,155 covering the cost of 423 rides in the month. It is clear these expenses are increasing as part of the effort to assist people with intellectual disabilities achieve integration and inclusion in their communities.

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

HCBS CONCEPT BUDGET		212,641				
Vendor Name		Tierra del Sol Foundation				
Vendor Number(s)		HL0035.H17633				
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total Cost
		FTE	Annual Cost	FTE	Annual Cost	
Personnel (salary + benefits)						
Life Planner	65,977		\$ -		\$ -	\$65,977 -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ -		\$ -	\$ -
Operating expenses						
Lift Ridership for 40 new riders						\$26664
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Operating Subtotal			\$ -		\$ -	\$ -
Administrative Expenses						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
Capital expenses						
3 passenger vans			120,000			\$120,000-
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Capital Subtotal			\$ -		\$ -	\$ -
Total Concept Cost			\$ -		\$ -	\$212,641

See Attachment F for budget details and restrictions

Liberty Plan for Lupe Nunez

October 28th, 2019



Who Attended

Lupe Nunez, Rose Ochoa, Rosalie Lewendowski, Lori Kosor, Michaela Sanchez, Julie Snyder, Yolanda

My Gifts and Contributions

I am loyal, determined, funny, I love my teacher Wendy, I love Michael Jackson, I love to work, I care about others, I am Sandy's favorite!! I am a good friend, I love time with my family, I love to do puzzles and I love to shop.

What I do at Home

I have a personal care attendant at home who supervises what I do and helps me stay safe. As I am aging I am getting confused and I am not remembering steps to routines and normal things I have always done, I am eating slower too, but my toileting habits are the same. My PCA helps with my routines and goes on weekend outings with me. I mostly take it easy at home. I visit my Mom sometimes. I also have 3 brothers and a sister. For some unknown reason, my monthly P&I amount has gone down it went from \$130.00 to \$86.00. I enjoy interacting with my friends at home and I enjoy the food.

My Support and Health Needs

The people that support me see have seen changes in me over the last few years. I need more support and encouragement to participate in my daily activities at program and to participate in my volunteer job. I need close supervision at home and at program. I had a fall in Feb 2019, the fall caused me to fracture my neck and this required surgery and recovery. I wore a brace on my neck and had 12 sessions of Physical Therapy . I have recovered well and do not wear the brace any longer. In order to return to program I needed a Personal Care Attendant (PCA.) Having the PCA has helped me to feel more safe and secure and I am able to participate and handle transitions much better. I am also able to participate more and am open to trying new things in a community setting. I am not sleeping well at night I take Trazodone for a sleep aid it was lowered after my fall from 150mg to 100mg. My health is stable, but my team and my mom feel it is possible that I have symptoms of Alzheimer's/Dementia. Bonnie the Nurse at NLACRC evaluated me and determined that I will continue to need a PCA at home and at program. When walking I need to have someone walking by my side, I don't need someone to hold onto me, when I walk down stairs, it is a good idea to walk in front of me in case I lean to far forward.

Work

With the addition of the PCA, my team reports that I have made improvements in my communication, behavior and my confusion. I have been motivated to do more because having the PCA helps my anxiety and when making transitions. I am happy to go on Tuesdays and Fridays to my volunteer site at Holy Rosary where I pack and hand out food. My schedule includes, gardening, computers and working at the farm.

Upcoming transitions for me are to move to a local Senior Center with my PCA, where I can have a hot lunch, participate in activities offered by the center. My choice however has always been to stay with my teacher of 20 years Wendy. To help me make a transition that would better fit my changing needs, my team at Tierra moved my instructor and my group into the class that has the the group of older adults so that I can can transition smoothly.

Engage Who will do what?

My CSC said that my PCA will continue at Home and at program
Lupe will transition to the Senior group where she can be a part of a senior center
and will also have time with her instructor Wendy and her group, until she can
fully transition.

My CSC talked to my mom about conservatorship, my mom will look into it. Julie
talked to Bet Tzedek and they are available to assist with the conservatorship.
Mom is interested and will put her son on as co/conservator. Michaela is sending
Lupe's mom information on conservatorship
Julie talked to Lupe's mom about preparing a letter of intent.
Julie handed out educational information to the team members on Down
Syndrome and Alzheimer's/Dementia.



Tierra Del Sol Foundation
Dept 6/50C Morning Checklist

✓	Met
X	Not Met
A	Absent
H	Holiday

Client Name: _____

Month: _____ **Year:** _____

Question	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F	M	T	W	T	F
1																									
2																									
3																									
4																									
5																									
6																									

I am showing that I am making informed choices and that I am ready for the day by answering the following questions

1. I have participated in choosing my scheduled activities and I have reviewed my schedule with my DSP.
2. I am emotionally ready for the day and I am able to carry on with the scheduled activities without any issues.
3. I have come prepared for the day with everything I need: such as a bus pass, access card, lunch, water, money, etc.
4. I am aware of all community safety hazards specific to the scheduled activities and I agree to follow all safety procedures.
5. I am physically able to perform today's scheduled activities. I have no sign of illness that may affect my ability to complete the day
6. I am appropriately dressed and I have appropriate hygiene for the scheduled activities

Comment Section:

Date	Comments	Coach's initials

Client Signature: _____ Date: _____

DSP Signature: _____ Date: _____

- I will Initial the check boxes on a daily basis after reading questions 1-6.
- If I have any questions or concerns I will notify my Client Services Manager