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 nonresidential 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:	Completed by:
11/21/19	Keith Nauman and Susie Passeggi
Vendor Name, Address, Contact:	
Castro Valley Adult & Career Education/Str	ides Program
4400 Alma Avenue, Castro Valley, CA, 945	46
Contact: Keith Nauman	
Vendor Number:	
HB0933	
Service Type and Code:	
Activity Center (505)	

<b>Federal Requirement #1:</b> 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.	<ul> <li><u>Guidance:</u></li> <li>Do individuals receive services in the community based on their needs, preferences and abilities?</li> <li>Does the individual participate in outings and activities in the community as part of his or her plan for services?</li> <li>If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?</li> <li>Do individuals have the option to control their personal resources, as appropriate?</li> </ul>
Does the service and/or program meet this Please explain: Students in the Strides progra review his or her IPP goals and discuss which and not want to take the following school year would like to see in the program. School admi and makes every effort to give students their p class they did not want to take. The Strides p offerings, 15 of which are in the local commun dedicates two and a half days per week to pro coaching and travel training for students who	in work with a staff member in the spring to a current class offerings they would want f. Students can also suggest classes they nistration then creates a master schedule preferred choices and not be assigned to a rogram currently has 40 different class hity. There is a fulltime staff member that priding job development, placement,
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.	<ul> <li><u>Guidance:</u></li> <li>Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals?</li> <li>Does each individuals' IPP document the different setting options that were considered prior to selecting this setting?</li> </ul>

Does the service and/or program meet this requirement?  $\square$  Yes  $\square$  No

Please explain: All Strides students have a current IPP on file, which typically includes the student's desire to enroll in or continue in the program. Additionally, the program application process includes an intake interview with a question on the potential student's desire to enroll in the program.

Federal Requirement #3:	Guidance:
Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	<ul> <li>Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?</li> <li>Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?</li> <li>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.)?</li> </ul>
Does the service and/or program meet this Please explain: At the start of each school ye of Individuals with Intellectual Disabilities form statements, and students read (if able) and si signatures if the student is conserved. Studer importance. A part of annual staff training incl both verbal and what is communicated throug students based on their needs, including usin students have a better understanding of class	ar, staff verbally read to students the Rights n, further explain the meaning of the ign the form. The paper is sent home for nt privacy and confidentiality is of the utmost ludes a discussion around student privacy, gh writing. The staff does communicate with g a class catalog that contains pictures, so
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.	<ul> <li><u>Guidance:</u></li> <li>Does the provider offer daily activities that are based on the individuals' needs and preferences?</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?</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?</li> </ul>
Does the service and/or program meet this Please explain: The Strides program creates goals, and students do have a choice in cours	classes based on student interest and IPP

based on majority interest, and some individual student interest is not always represented. Additionally, because of various constraints, students do not necessarily have the opportunity to interact in classes with individuals of their choosing.

Federal Requirement #5:	<u>Guidance:</u>
Facilitates individual choice regarding services and supports, and who provides them.	<ul> <li>Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?</li> <li>Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?</li> </ul>

#### Does the service and/or program meet this requirement? $\Box$ Yes $\boxtimes$ No

**Please explain:** The Strides program is part of an adult school, which is part of a K-12 school district, thus teaching staff must be credentialed through the California Commission on Teacher Credentialing. Teachers are assigned to classes after determining what students want to take the next school year; thus, students do not necessarily know who will be teaching the class for the upcoming school year. Students do have the opportunity to switch to a different course if they do not end up enjoying their time in a given class.

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:

<b>Federal Requirement #6:</b> 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.	<ul> <li><u>Guidance:</u></li> <li>As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?</li> <li>Are individuals informed about how to relocate and request new housing?</li> </ul>
Does the service and/or program meet this Please explain: <u>Click or tap here to enter text</u> .	
Federal Requirement #7: 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.	<ul> <li><u>Guidance:</u></li> <li>Do individuals have a choice regarding roommates or private accommodations?</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?</li> <li>Do individuals have the ability to lock their bedroom doors when they choose?</li> </ul>
Does the service and/or program meet this Please explain: <u>Click or tap here to enter text</u> .	

Federal Requirement #8: Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.	<ul> <li><u>Guidance:</u></li> <li>Do individuals have access to food at any time?</li> <li>Does the home allow individuals to set their own daily schedules?</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?</li> </ul>
Does the service and/or program meet this Please explain: Click or tap here to enter text	
Federal Requirement #9: Individuals are able to have visitors of their choosing at any time.	<ul> <li><u>Guidance:</u></li> <li>Are visitors welcome to visit the home at any time?</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?</li> </ul>
Does the service and/or program meet this Please explain: <u>Click or tap here to enter text</u>	
Federal Requirement #10: The setting is physically accessible to the individual.	<ul> <li><u>Guidance:</u></li> <li>Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area?</li> <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?</li> <li>Are appliances and furniture accessible to every individual?</li> </ul>
Does the service and/or program meet this Please explain: Click or tap here to enter text.	-

Contact Name:	Keith Nauman
Contact Phone Number:	510-886-1000
Email Address:	knauman@cv.k12.ca.us

#### 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

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 <u>www.dds.ca.gov/HCBS.</u>

Vendor name	Castro Valley Adult and Career Education/Strides Program
Vendor number(s)	HB0933
Primary regional center	Regional Center of the East Bay
Service type(s)	Activity Center
Service code(s)	505
Number of consumers currently served	78
Current staff to consumer ratio	5.37:1

# 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.

In the Strides program, classes are offered in the areas of functional academics, community independence, independent living skills and work readiness skills. Classes are held both at the adult school, an integrated campus with neuro-typical adult students, and in natural environments whenever possible, including in the community. Each year, students choose 8-10 classes that they will take each week, according to their IPP goals and individual preferences. Students who have obtained a part-time job may choose to attend the program part-time. See details in Evaluation section, federal requirement #1.

#### **Project Narrative Description**

2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.

Our goal is to empower individuals we serve to exercise more choices for work, independence, and leisure by developing their skills in self-determination, and supporting those choices through a Bilingual Self-Determination Coach/Job Developer. This fulltime position would coach students in the skills needed to independently access and engage in community resources of their choosing, with people of their choosing. A bilingual coach would ensure equitable access to our Spanish-speaking individuals, would work with caregivers in order to obtain their continued support, and more effectively connect individuals with employment opportunities in Spanish-speaking businesses.

The highly individualized nature of this new service would be a key differentiator for our program and our students. The coach would work one-on-one with students to build their awareness of their own preferences and desires in order to choose social, leisure, and employment in the community. The coach would then work with the student to develop

skills in the natural environment including travel training, community awareness and access, money management, and safety aligned with their interests and/or goals. Individuals would be able to identify and be accompanied by other students of their choice, enriching this experience. If an individual is interested in obtaining a job in a Spanish-speaking business, the Coach would facilitate job development, placement, travel training, and coaching.

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\_yes 2\_yes 3\_yes 4\_not in compliance 5\_not in compliance 6\_n/a 7\_n/a 8\_n/a 9\_n/a 10\_n/a

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.

**Requirement 4:** Students pick the majority of the classes they want to be in based on interest and IPP goals; however, the courses offered do not always represent every student's interest and skill development need (eg, travel training a student from their home to a community activity) and they cannot necessarily choose which peers are accompanying them in the activity.

**Requirement 5:** Students currently do not have the opportunity to choose which friends they take their classes with. In addition, Spanish-speaking students seeking employment do not have the opportunity to work with a staff member who speaks their preferred language or has specific connections to the Spanish-speaking community.

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.

#### **Requirement 4:**

This concept brings Requirement 4 into compliance by enabling students to make choices about their leisure/social/work activities, gain supports needed to participate in those activities independently, choose the people they will do those activities with, and potentially make a greater connection to their culture.

#### **Requirement 5:**

This new Coach would directly facilitate individual choice by enabling students to identify and voice their preferences in social, leisure and employment opportunities in the community, and provide the one-on-one support needed for them to achieve this. Having a bilingual coach would enable linkages with Spanish-speaking businesses, community activities, and people that reflect the student's own culture.

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

**Outcomes and Methods (#1):** Students would develop self-determination skills and learn how to make choices for work, independence, and leisure. The coach would meet individually with students to determine their hopes and dreams, including what they would want to do in the community if they had the support and/or what type of job they would

like to obtain. Tracking would include the number of Self-Determination Plans developed annually. The plans are a roadmap for students to be able to complete the same type of activity with minimal assistance eventually. The coach will work with students to break down their goals into reasonable steps. For example, if the student's goal is to visit a museum in San Francisco, the coach would work with the student to determine what they need to do for travel, budget, and safety.

**Outcomes and Methods (#2):** Students will learn how to access and engage in community resources of their choosing independently. The coach will work one-on-one with students to develop skills aligned with their interests and/or goals in natural environments. The coach will track the individual activities and write progress notes and include them in the students' Individual Service Plan Progress Report. We will measure this outcome by showing an increased number of students accessing and engaging in quality community resources.

**Outcomes and Methods (#3):** There are currently 14 students in the Strides program that are either Spanish-speaking or are from Spanish-speaking families. Two of the 14 students are presently employed and receive support from a non-Spanish speaking staff member. There are an additional five students who have expressed interest in obtaining a paid job. With the new position, there could be at least five new job placements in Spanish-speaking businesses within the first year. The coach will facilitate job development/placement, travel training, and coaching in Spanish-speaking companies with them as desired. The coach would provide job training in the student's native language as needed. Additionally, the coach will work with the families to elicit support for community integrated employment. The coach could support at least seven current students. The coach will track the job placement and coaching and write progress notes that will be included in their Individual Service Plan Progress Report.

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.

Individual conversations with students provided input that was instrumental in developing this concept. Typically, course development is based on the majority of students' interests, which results in some individual student interests not being included. Some students expressed frustration with this. We also have had students who are interested in learning how to travel independently from their home to a community-based activity, which is problematic. Recently a student obtained a job at a local market primarily serving the Spanish-speaking community and expressed great joy in working with people that spoke his own language. That conversation was the spark that made us realize how important this was to our students and initiated this concept.

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

Our concept includes coaching students in self-awareness and self-determination skills and will provide person-centered coaching to support students in engaging in those chosen activities. It will also provide an opportunity for students to choose those individuals they want to accompany them.

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

We plan to apply for additional vendorization in service code 063 and negotiate with regional center for a rate that will enable us to sustain the position. Our California Adult Education Programs funding will be able to sustain the cost of gas/car maintenance.

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

The personnel costs include one full time (30 hours per week) Self Determination Coach/Job Developer at the top step and column rate of \$52.14/hour (per union contract), burdens and health and welfare benefits, based on current rates. Costs may be reduced if the person hired does not qualify for the top step/column. The activity stipend is designated for county integration costs such as public transportation and activity costs (e.g., fees for museums, community classes, recreational activities, etc.) for both the coach and students. Vehicle costs (car purchase, registration fees, sales tax, and gas) are included in order for the coach to transport students to activities, interviews, work, and/or the start/end point for travel training (e.g. their home). 5% administrative overhead is included for indirect costs.

Total Concept Cost: \$209763

Personnel Subtotal: \$165078

Operating Subtotal: \$5,000 (Activity Stipend)

Administrative Subtotal: \$14,275 (Registration, Tax, Gas)

Capital Subtotal: \$25,410 (Vehicle)

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.

See	#9.

12. Have you or the	HCBS Funding	x No _Yes.	If Yes, FY(s)
organization you work	Disparity Funding	x No _Yes.	If Yes, FY(s)
with been a past	CPP Funding	x NoYes.	If Yes FY(s)
recipient of DDS funding? If yes, what fiscal year(s)?	If yes to any question	on be sure to a	nswer 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.

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			10					
Vendor Name								
Vendor Number(s)	HB0933							
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	Salary and Benefits	FTE	Annual Cost	FTE	1 10	Annual Cost		Cos
Personnel (salary + benefits)				1	-		111	211- 2-11-
Self-Determination Coach/Job Developer	82539	1.00 \$	82,539	1.00	\$	82,539	\$	165,078
Position Description		\$	· · · · ·		\$		\$	
Position Description		\$	-		\$	•	\$	-
Position Description		\$			\$		\$	
Position Description		\$			\$		\$	
Position Description		\$	•		\$	-	\$	
Position Description		\$			\$		\$	
Position Description		\$			\$		\$	•
Position Description		\$			\$		\$	
Personnel Subtotal		\$	82,539		\$	82,539	\$	165,078
Operating expenses								
							\$	-
Activity Stiped (\$30 x 85)	1. 1. 1. 1. 1.	\$	2,500		\$	2,500	\$	5,000
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					_		\$	
Operating Subtotal		\$	2,500	_	\$	2,500	\$	5,000
Administrative Expenses		- DOM:	No. of Concession, Name					
							\$	
Initial Auto Registration Fee		\$	405				\$	405
Auto Registration Renewal				10 e e (	\$	150	\$	150
Auto: Total Use/Sales Tax		\$	2,350				\$	2,350
Gas (500 miles per month)		\$	720		\$	720	\$	1,440
Administrative Overhead (5%)		\$	5,000		\$	4,930	\$	9,930
				1			\$	-
Administrative Subtotal	and the state of	\$	8,475	Ĩ	\$	5,800	\$	14,275
Capital expenses			and a constant		-		and an and a second	
	No. of Concession, Name						\$	
Vehicle (2020 Toyota Prius)		\$	12,705		\$	12,705	\$	25,410
Venicie (2020 Toyota Prids)		-	12,705		Ş	12,703	\$	23,410
							\$	
		10.9		1				-
					-		\$	
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Capital Subtotal		\$	12,705		\$	12,705	\$	25,410
Total Concept Cost		Ş	106,219		\$	103,544	5	209,763

See Attachment F for budget details and restrictions

Attachment C

#### Salary Calculator:

Step/Range		B6		B1	2	Ce	3	C	12
Hourly Rate		\$	45.98	\$	50.09	\$		\$	
Work Days		•	180	-	180	-	180	T	180
Hours/Day			6		6		6		6
FTE			1		1		1		1
Subtotal		\$	49,658.40	\$	54,097.20	\$	51,526.80	\$	56,311.20
Additional Weeks			4		4		4		4
Hours/Week			30		30		30		30
Subtotal		\$	5,517.60	\$	6,010.80	\$	5,725.20	\$	6,256.80
Salary Total		\$	55,176.00	\$	60,108.00	\$	57,252.00	\$	62,568.00
Burdens	0.2153	\$	11,879.39	\$	12,941.25	\$	12,3 <mark>26.36</mark>	\$	13,470.89
H & W		\$	6,500.00	\$	6,500.00	\$	6,500.00	\$	6,500.00
Total		\$	73,555.39	\$	79,549.25	\$	76,078.36	\$	82,538.89
Salary Calculato	r:	3%	Increase						
Salary Calculato	r:	3% B6		B1	2	Ce	5	C	12
-	r:			B1 \$	2 51.59	Ce \$	6 49.14	C1 \$	· · · · · · · · · · · · · · · · · · ·
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Step/Range Hourly Rate Work Days Hours/Day	r:	B6	47.36 180 6		51.59 180 6		49.14		53.70 180 6
Step/Range Hourly Rate Work Days Hours/Day FTE	r:	B6 \$	47.36 180 6 1	\$	51.59 180 6 1	\$	49.14 180 6 1	\$	53.70 180 6 1
Step/Range Hourly Rate Work Days Hours/Day	r:	B6 \$	47.36 180 6	\$	51.59 180 6	\$	49.14 180 6	\$	53.70 180 6
Step/Range Hourly Rate Work Days Hours/Day FTE		B6 \$	47.36 180 6 1	\$	51.59 180 6 1	\$	49.14 180 6 1	\$	53.70 180 6 1
Step/Range Hourly Rate Work Days Hours/Day FTE Subtotal		B6 \$	47.36 180 6 1 51,148.15	\$	51.59 180 6 1 55,720.12	\$	49.14 180 6 1 53,072.60	\$	53.70 180 6 1 58,000.54
Step/Range Hourly Rate Work Days Hours/Day FTE Subtotal Additional Weeks		B6 \$	47.36 180 6 1 51,148.15 4 30	\$	51.59 180 6 1 55,720.12 4 30	\$	49.14 180 6 1 53,072.60 4	\$	53.70 180 6 1 58,000.54 4 30
Step/Range Hourly Rate Work Days Hours/Day FTE Subtotal Additional Weeks Hours/Week		B6 \$ \$	47.36 180 6 1 51,148.15 4 30 5,683.13	\$ \$ \$	51.59 180 6 1 55,720.12 4 30 6,191.12	\$ \$ \$	49.14 180 6 1 53,072.60 4 30	\$ \$ \$	53.70 180 6 1 58,000.54 4 30 6,444.50
Step/Range Hourly Rate Work Days Hours/Day FTE Subtotal Additional Weeks Hours/Week Subtotal		B6 \$ \$ \$	47.36 180 6 1 51,148.15 4 30 5,683.13 56,831.28	\$ \$ \$ \$	51.59 180 6 1 55,720.12 4 30 6,191.12 61,911.24	\$ \$ \$	49.14 180 6 1 53,072.60 4 30 5,896.96	\$ \$ \$	53.70 180 6 1 58,000.54 4 30 6,444.50 64,445.04
Step/Range Hourly Rate Work Days Hours/Day FTE Subtotal Additional Weeks Hours/Week Subtotal Salary Total		B6 \$ \$ \$	47.36 180 6 1 51,148.15 4 30 5,683.13 56,831.28	\$ \$ \$ \$	51.59 180 6 1 55,720.12 4 30 6,191.12 61,911.24	\$ \$ \$ \$	49.14 180 6 1 53,072.60 4 30 5,896.96 58,969.56	\$ \$ \$ \$	53.70 180 6 1 58,000.54 4 30 6,444.50 64,445.04