

## 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: November 18, 2019	Completed by: Juliana U. Taburaza
Vendor Name, Address, Contact: Universal Family Care Corporation dba New Bellevue Manor 3056 Randall Way Hayward, CA 94541 Telephone: (510) 673-1785	
Vendor Number: HB0393	
Service Type and Code: Adult Residential Facility (Level 3-S) Code 915	

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### **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: The individuals receive services in the community based on their needs, preferences, and abilities.

New Bellevue is a 6 bedroom home on Randall Way nestled in a cozy neighborhood. The home provides individuals the opportunity to make good choices based on their needs, preferences, and abilities.

On a monthly basis, we ask individuals their interests, discuss together what activities they enjoy, activities and events that are offered by the community, and then create a monthly activity schedule. With every activity, we ask for feedback and explore other options. The activity schedule gives the individuals an opportunity to choose the activities they want to participate in, whether it is in the home or in the community. All activities are based on the individuals interests and capabilities.

We serve individuals who desire to work, and we support and work closely with the care team, work programs, and other teams to coordinate the interviews and their schedules.

At admission, the individual and their representative have the option to manage their own money resources. The individuals' relatives also have the option to manage their personal resources when needed.

However, there is some difficulty with transporting residents to their desired activities, appointments, and outings with their friends or relatives. The home needs a van that is more easily accessible to non ambulatory residents. The size and limitations of the current vehicle from the 1990s causes current residents stress when riding with several other consumers. Residents in the home complain that the van is too high to get into, needing extensive assistance to get into the vehicle. Due to these complications, this limits the access to daily community activities and outings. In order to meet HCBS requirement, the home would like to purchase a smaller wheelchair accessible van allowing residents both ambulatory and non-ambulatory to meet their daily community activities of their choice. We would bring residents to the dealership to help pick out color, to seek out their desired options and incorporate them to the vehicle.

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<p><b><u>Federal Requirement #2:</u></b> <i>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.</i></p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <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>
<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: The home has the current regional center Individual Program Plans on their records. The annual reviews and IPPs are reviewed and revised annually participated with the care team and the day program.</p> <p>Prior to admission, the case manager and/or representative seeks out a home for the respective resident. During this phase, they visit several other homes that best fit their needs and services. They visit homes within the RCEB community and are offered other locations (Palm Tree or Royal Colony View Place). There is an assessment process and meeting to ensure that resident and family needs and preferences can be met prior to admission. After this meeting, the resident and their representative choose to live in the home.</p>	
<p><b><u>Federal Requirement #3:</u></b> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <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>
<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: Upon admission, individuals and their families or representatives are provided information verbally and in writing regarding their needs and preferences, their rights, and the house rules. Alternative methods of communication are offered if needed, such as visual pictures, physical gestures, role playing, large font print, individual's</p>	

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language.

**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: The home offers choices of individualized activities and outings based on resident's skills, capabilities, and goals. Weekly and daily activities and outings are scheduled and posted in the home. They are allowed to spend time with any visitor and are offered a ride if needed depending on the activity.

**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: Residents are given the opportunity to voice their thoughts or concerns outside of the scheduled quarterly, semi and annual meetings. The home supports and offers opportunities in making changes to needs and services at any time. Residents have the right to receive care and services from the staff of their choice. There is continuous open communication between residents and the care team, care providers, the staff, and family members.

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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></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?</li> <li>● Are individuals informed about how to relocate and request new housing?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Please explain: Upon admission, each resident and their representative sign an admission agreement and are reviewed/updated every five years and if any changes occur. If a resident wishes to relocate, the care team coordinates with the resident representative in finding a place that is fit for the resident. The care team assists with the relocation until the process is complete.</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> <p><i>Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.</i></p> <p><i>Individuals sharing units have a choice of roommates in that setting.</i></p> <p><i>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?</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>
<p><b>Does the service and/or program meet this requirement?</b> <input type="checkbox"/>Yes <input checked="" type="checkbox"/>No</p>	

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Please explain: Partially the home meets this requirement. Each individual has privacy in her sleeping unit. Residents have a choice of their roommate based on availability. However, the home does not offer private accommodations. All rooms accommodate two residents. Residents are able to decorate or furnish their own living units based on their preferences. Currently all restrooms have locks, but not the bedroom doors. New Bellevue Manor will install locks to all doors. Each resident will be given a key to their bedroom door. We will provide them a keychain so they can secure it safely. Staff and resident training will be conducted regarding the use of the locks and we will redesign new house rule.

**Federal Requirement #8:**

*Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.*

**Guidance:**

- 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?

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

Please explain: Yes, residents have 24 hours access to fridges, freezers, pantry, and meals to their individualized schedules. All areas of the home are accessible to all residents to perform any activity or chores of their choosing. All residents are able to set their own daily schedules; however, during the week, most of the residents attend day program. For those who attend the day programs, morning routines are scheduled to ensure these residents are on time for their transportation. Once they return home and on weekends, they have the freedom to control their own schedule and activities.

**Federal Requirement #9:**

*Individuals are able to have visitors of their choosing at any time.*

**Guidance:**

- 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?

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

Please explain: The home partially meets this requirement. In accordance with our house rules visitors are allowed to visit during visiting hours. Visiting hours are followed to ensure a comfortable and safe living space for other residents that live in our home. Visitors are allowed to come at any time and residents are given the opportunity for longer visits outside the home.

**Federal Requirement #10:**

*The setting is physically accessible to the*

**Guidance:**

- Do individuals have the freedom to

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<i>individual.</i>	<p>move about inside and outside the home or are they primarily restricted to one room or area?</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?</li> <li>● Are appliances and furniture accessible to every individual?</li> </ul>
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**Does the service and/or program meet this requirement?** Yes No

Please explain: The home does not meet this requirement. All residents IPPs are reviewed annually or as needed. Our residents are progressively aging and are requiring more assistance with their ADLs. We have 3 non-ambulatory residents using wheelchairs and requiring 1-2 staff assist to shower. We have one consumer with poor eyesight who needs stand by assistance in the shower.

New Bellevue currently has two bathrooms of concern. One bathroom contains a tub and a shower. The tub has not been in use since owning the facility. The bathroom's configuration is very narrow for wheelchair access. Renovating and opening up the space to allow installation of a large non ambulatory shower room will allow consumers to safely and independently perform ADLS.

The second shower room is for non-ambulatory residents and offers an open shower (no tub) space. The redesign needed for this shower is to ensure safety and increase accessibility.

We have several residents who need to use the non-ambulatory bathroom. During the peak time schedule of 6am-7:30am, using the ambulatory bathroom/bathtub. All the residents try to follow a schedule so that there is adequate time to perform ADLs before their transportation arrives. Often, residents need staff assistance. The bathroom layout is narrow and does not allow adequate space for staff and residents. As our residents age, the movement of getting into and out of a bathtub is more challenging. Staff assistance is more frequent to ensure the safety of our residents. Providing accessible bathing quarters will ensure safety for residents to independently perform ADLs. The adjacent shower close to the bathtub is not very wheelchair accessible due to the old and obsolete design of the shower, the glass doors are hard to open and close, and the location of the toilet is very close to the shower making it difficult for residents and staff to move around. In order to meet this HCBS requirement, the home requests funding for the following: 1) convert the ambulatory bathroom with the tub into a non-ambulatory shower room 2) install grab bars for safety 3) The adjacent shower needs modification for better wheelchair accessibility due to its obsolete shower pad flooring layout and the sliding doors are non functional. 4) The existing non-ambulatory bathroom needs remodeling for better wheelchair accessibility and change the design for better safety.

Also, the ramp to the front door main entrance is old and worn down, slippery when wet, and the handrails needs reinforcement for safety. Often times, our independent residents need assistance from staff to carefully wheel down ramp. In order to meet the

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HCBS requirement of residential setting for the non-ambulatory consumers, the home is requesting for funds to modify/remodel the existing ramp for better and safer mobility access. Using sustainable materials that will withstand wear and tear will improve access and will aide in their independence as it requires minimal assistance using ramp for non ambulatory residents.

**CONTACT INFORMATION**

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Contact Phone Number: (510) 673-1785  
Email Address: jutaburaza@gmail.com

**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).

Vendor name	Universal Family Care Corporation dba New Bellevue Manor
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Vendor number(s)	HB0393
Primary regional center	Regional Center of the East Bay (RCEB)
Service type(s)	Adult Residential Facility ( Level 3 S - All Female)
Service code(s)	915
Number of consumers currently served	11 (licensed bed capacity - 12)
Current staff to consumer ratio	1:3
<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>New Bellevue Manor provides a home for female residents the opportunity to make informed choices. The staff assist with providing the best support for residents in completing their activities of daily living (ADLs) and assist with coordinating activities and community outings of their choice.</p> <p>We provide care and services to three non-ambulatory residents with increasing needs due to their age and ability. The other residents are ambulatory and are able to walk about in and out of the facility, we have aging residents who have called New Bellevue home for over 15 years (there are now five elder residents being served in the home) and also need assistance with ADLs. In the morning, the staff assist residents with their morning shower and ADLs, then directs them to the dining room to have morning medications and breakfast. Some residents join money management in obtaining their personal spending allowance for their day program, other residents are packing their lunches and snacks, other residents are watching current events and doing their own personal tasks. After breakfast, nine residents attend day programs and two other residents stay in the home (one resident declines to go to a day program and the other resident stays at home because no day program is able to meet her needs due to her medical and behavioral issues). Upon arrival to the home after their program, the residents are given the opportunity to choose their activity before dinner, like bringing in their lunch bags in the counter for checking and cleaning, others are helping in setting up the table for dinner. Some residents are watching a movie or television shows or having conversations between residents and staff, getting ready for their medication management, maintaining their hygiene and grooming, preparing for their snacks, and preparing for their relaxation and bedtime schedules.</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>Requirement 1: New Bellevue Manor would like to purchase a van that can safely and fully accommodate consumers who are ambulatory and non-ambulatory.</p> <p>Requirement 10: The program is requesting to modify the front door ramp allowing it to be more safe and easily accessible for the non-ambulatory residents.</p>	

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Requirement 10: New Bellevue Manor would like to (1) modify/remodel one ambulatory bathroom into a non-ambulatory shower room and (2) improve the adjacent shower stall for better wheelchair accessibility and safer design for residents layout for better wheelchair accessibility and safety. This will make the bathrooms safe and user friendly.

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\_\_ 3\_\_ 4\_\_ 5\_\_ 6\_\_ 7\_X\_ 8\_\_ 9\_\_ 10\_X\_

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 1: Difficulty for transportation to pick up and drop off residents due to lack of a good van/vehicle accessible to wheelchair. We currently have a 22 year old van that is too large and difficult to drive. It has a lift that was designed in the 90's and is not resident friendly. The gas mileage is not optimal, the height of the van makes it difficult for residents to get in and out, the entryway is also very narrow. A vehicle that is smaller and easily accessible to both ambulatory and non ambulatory residents can assist to take out residents on more individual outings.

Requirement 10: Main ramp needs remodeling, current ramp makes it difficult for consumers with wheelchairs/walkers to safely maneuver on their own. Without staff assistance, the ramp layout design should be safer for consumers using wheelchairs. Currently the ramp is sloped and at an angle that requires staff assistance. Residents are escorted and brought to the bus. Using sustainable materials that will withstand wear and tear will improve access and will aide in their independence as it requires minimal assistance using ramp for non ambulatory residents.

Requirement 10: Difficulty of some consumers to access the bathrooms due to their physical disabilities. The shower tub needs to be converted into a non-ambulatory shower to assist residents who are slowly aging, frail, and fall risk. The adjacent shower stall needs modification due to make it more wheelchair accessible and safer. One ambulatory bathroom with a tub and shower that is difficult to use and access. One adjacent shower which needs better accessibility for wheelchairs. One non-ambulatory bathroom that needs redesign for better accessibility for wheelchairs.

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 1: Van with lift allow non-ambulatory consumers to attend more activities.  
Requirement 10: Renovated front ramp will allow safer mobility into and out of the house.  
Requirement 10: 1) Remodel of ambulatory bathroom to a non-ambulatory shower room by removing the tub 2) upgrade the adjacent shower room because of the poor layout for wheelchair use. This will create more independence, prevent fall incidents, as well as allow for easier access and use for all members in the home. 3) Modification of the current non-ambulatory shower room wall and floor will allow wheelchairs more room for safer and more hygienic room for their ADLs.

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

A more resident-friendly van will hopefully make the residents feel more comfortable when travelling to outings. Being easier to get in and out of, the residents will hopefully be more open to visiting places, joining activities in the area, and seeing new things.

A renovated ramp will be less steep and therefore allow residents to move about more freely with less assistance and more independence around the home, if desired.

Redesigned bathrooms will allow non-ambulatory residents to be able to use two bathrooms instead of one. The better-designed bathrooms will provide safer/easier movement for residents (especially with walkers or wheelchairs) which will provide for more independence as there will be able to move with less assistance.

To ensure we achieve our objectives or providing more safety, independence, opportunities, etc. for the residents, we will do observations of our residents as they use the new bathrooms, van, and ramp. The staff will continually communicate with the residents and care team to ensure our objectives are being met. If there are better/other ways to achieve our objectives, we will pursue those ideas next. Documentation into daily notes of the residents will be part of our normal observations.

The staff will conduct quarterly meetings with the care team to address changing needs and services of the residents. During these meetings, we will discuss the outcomes and ensure that residents are benefiting from the improvements completed.

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.

The residents and their representatives were interviewed regarding the services provided based on their needs and preferences. As a result, we are asking for these facility modifications to help residents enjoy the full benefits of community living in a more dignified and comfortable manner.

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

In the planning process of the concepts, residents were given opportunities to express their desires on how to improve their home, how to increase their independence, privacy, and activities in the community with individual meetings with the residents and the owner. Their personal rights are protected and proper support is provided so each resident can live the most dignified life they desire.

We believe our concepts provide more independence, more opportunities, and more comfort for our residents. The residents will have more access to bathrooms, easier use of ramps, and feel more comfortable trips to activities. We want our residents to really feel at home in our facility. The staff will continue to conduct quarterly meetings with residents and their representatives to ensure that the concepts meet their wants, needs and service plans.

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

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New Bellevue Manor staff will continue participating in quarterly, semi, and annual meetings with residents and their representatives to ensure all wants, needs and services are being met. During the meetings, staff will be able to assist with organizing, planning outings or activities based on resident preferences.

The HCBS funding will help in making the non-ambulatory residents and residents who have medical and behavioral issues be able to participate and join on outings or her choice to visit the places she likes to see. Once a vehicle with a lift is provided, the lives of our non-ambulatory residents will have more access to the community.

Van - The home will do maintenance and repairs, obtain liability insurance, and the designated drivers has a clean DMV record.

Bathroom - Make sure that bathroom fixtures and grab bars are in good condition and repairs and always safe for consumers to use.

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)

- 1) Modification of front door ramp for easier wheelchair accessibility: \$5,000
- 2) Wheelchair accessible van: \$45,000
- 3) Remodel of ambulatory bathroom to a non-ambulatory bathroom: \$12,000
- 4) Modify the existing bath for better wheelchair access: \$6,000

Total: \$68,000.00

Timeline: Start Date: May 2020 End Date: November 2021

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.

Van - The home will absorb the cost of daily/monthly maintenance, repairs, and liability insurance

Shower room - The home will make sure that bathroom fixtures and grab bars are in good condition and always safe for consumers to use.

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  Yes. If Yes, FY(s) \_\_\_\_\_  
 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**

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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.

Not Applicable

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.

Not Applicable

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HCBS CONCEPT BUDGET						
Vendor Name		New Bellevue Manor				
Vendor Number(s)		HB0393				
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
<b>Personnel (salary + benefits)</b>						
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<b>Personnel Subtotal</b>			<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>
<b>Operating expenses</b>						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
<b>Operating Subtotal</b>			<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>
<b>Administrative Expenses</b>						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
<b>Administrative Subtotal</b>			<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>
<b>Capital expenses</b>						
1) Modification of front ramp for easier wheelchair accessibility			\$ 5,000			\$ 5,000
3) Wheelchair accessible van			\$ 45,000			\$ 45,000
4) Remodel ambulatory bathroom to non-ambulatory			\$ 12,000			\$ 12,000
5) Modify bathroom shower for more wheelchair accesibility			\$ 6,000			\$ 6,000
						\$ -
						\$ -
						\$ -
<b>Capital Subtotal</b>			<b>\$ 68,000</b>		<b>\$ -</b>	<b>\$ 68,000</b>
<b>Total Concept Cost</b>			<b>\$ 68,000</b>		<b>\$ -</b>	<b>\$ 68,000</b>

See Attachment F for budget details and restrictions