

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

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

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

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

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

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

Date(s) of Evaluation: <a href="#">Click or tap here to enter text.</a>	Completed by: Cynthia Hill, Program Director
Vendor Name, Address, Contact: <a href="#">Life Services Alternatives Inc, 1922 The Alameda, San Jose CA</a>	
Vendor Number: HS0370, HS0322, HS0321, H80863, HS0948, HS0482, HS0483, HS0484, HS0485, HS0486, ZS0809	
Service Type and Code: <a href="#">113-Residential 962 Homes; 113 &amp; 113 STS-Rivermark Homes; 915-ARF Homes; 55-CITP day activity services; 880-Transportation Services</a>	

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<p><b><u>Federal Requirement #1:</u></b> <i>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</i></p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals receive services in the community based on their needs, preferences and abilities?</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>
<p><b>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</b></p> <p>Please explain: The individuals living in ARFPSHN homes use wheelchairs and require total staff assistance to move about in the home and in the community. The people living ARF and RCFE homes and those who participate in our Community Integration Program require assistance in the form of staff supervision and transportation to go to places of their choosing. All homes and the training program schedule regular community outings and activities, but are limited in the number of people who can go due to the need for additional accessible vans/cars. In the ARFPSHN and ARF/RCFE homes, vehicle usage is often necessarily scheduled for routine or emergency medical appointments, which interferes with small group outings based on individual preferences. Additionally, several individuals residing in ARFPSHN homes cannot participate in preferred community activities without additional respiratory support.</p>	
<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: Each individual has a current IPP on file that addresses if their needs and preferences will be met in their current living situation. Prior to moving into the home, the individual and the family visit and meet staff and other house mates. Private rooms are offered to almost all individuals living in the homes.</p>	

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<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?</b>   <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p> <p>Please explain: We review, describe and discuss rights upon admission, every year, and as needed, communicating this information both verbally and in writing. Individuals who would benefit from the use of assistive technology to better understand often do not have the funds for the equipment, and our staff lack training to fully develop their skills to utilize many alternative methods of communication, to include the use of assistive technology and sign language. Staff communicate with individuals to the best of their knowledge and ability, but staff would benefit from training in the use of assistive communication technology in order to interpret the preferences of individuals who do not communicate with words. Some individuals would also benefit from an assessment from a speech pathologist and, if then recommended, the purchase of assistive technology in the form of iPads and/or communication devices and training for staff in how to best implement the technology.</p>	
<p><b><u>Federal Requirement #4:</u></b> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider offer daily activities that are based on the individuals' needs and preferences?</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>

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

Please explain: Activities are structured to meet the individual's needs and preferences and IPP goals. Different activities are offered, and individuals choose to participate. Community involvement in the home and the CIP is limited due to transportation choices. Staff are not familiar with the person centered service plan/ new HCBS rules and do not have the skills to find community activities that would promote true community integration. Staff are not always aware of all options available in the community that may be of benefit to the individuals in the home and in the community integration training program. Two key staff are scheduled to begin Person Centered Thinking Train the Trainer training in February 2020 in order to train other LSA staff ongoing. Having an additional two staff trained would enable LSA to increase the amount of training available to LSA staff and would make it possible to offer Person Centered Thinking training to other agencies.

**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: If the individual expresses or demonstrates a preference for certain staff, we make every effort to schedule that staff to work with them. Individuals are free to voice any concern about services and staff will work with them to modify or change the service.

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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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</b></p> <p>Please explain: Each person has an admission agreement. Each person has the right to request to relocate which is explained upon admission or when an individual or family member request a change in location.</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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</b></p>	

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Please explain: Almost all individuals moving into the LSA homes have a private room. All people living in the homes are encouraged and supported to decorate their rooms and participate in decisions about furnishing for the shared areas in the homes. Every individual has the ability to lock his or her room for privacy.

**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: People living in the LSA homes participate in the menu planning, shopping and cooking, laundry task and household task to the extent possible. All common rooms are open. Snacks are available. Individuals are encouraged to participate in planning their schedule, to include attending a day program, weekend activities and vacations.

**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: Visitors are welcome at LSA homes and individuals can and do go with visitors outside the home. However, the individuals served have no training or experience in choosing healthy relationships and have made some questionable choices. Three individuals have fallen victim to online relationship scams, resulting in one case of losing thousands of dollars. LSA residents would benefit from healthy relationship and sexuality training to protect themselves from an every-growing threat to their physical and financial safety.

**Federal Requirement #10:**

*The setting is physically accessible to the individual.*

**Guidance:**

- 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

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	<p>so that individuals who need those supports can move about the setting as they choose?</p> <ul style="list-style-type: none"> <li>• Are appliances and furniture accessible to every individual?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b></p> <p>Please explain: Individuals are able to freely move about the home and outside. Staff provide assistance to those individuals who are in wheelchairs and not able to self-propel. Homes for individuals who are in wheelchairs meet all ADA requirements, and all rooms and back-yard patio are accessible.</p>	

### CONTACT INFORMATION

Contact Name: Dana Hooper, Executive Director

Contact Phone Number: 650-533-6556

Email Address: dhooper@lsahomes.org

### ACKNOWLEDGEMENT

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

I AGREE

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Existing regional center vendors may receive funding to make changes to service settings and/or programs to help them come into compliance with the HCBS rules. To be considered for funding, vendors must complete and submit this form and the provider compliance evaluation form as one packet to the regional center with which it has primary vendorization.

### Instructions:

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

### Strengths of previously funded concepts:

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

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



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Vendor name	<u>Life Services Alternatives Inc.</u>
Vendor number(s)	HS0370, HS0322, HS0321, H80863, HS0948, HS0482, HS0483, HS0484, HS0485, HS0486, ZS0809
Primary regional center	SAN ANDREAS REGIONAL CENTER
Service type(s)	<u>ARFPSHN Residential, ARF Residential, Community Integration Training Program</u>
Service code(s)	<u>113-Residential 962 Homes; 113 &amp; 113 STS-Rivermark Homes; 915-ARF Homes; 55-CITP day activity services; 880-Transportation Services</u>
Number of consumers currently served	25 live in ARFPSHN Homes 5 live in RCFE Homes 31 live in ARF Homes 14 individuals participate in our Community Integration Training Programs
Current staff to consumer ratio	ARFPSHN—2:4 or 3:4 based on individual needs RCFE & ARF—2:4 during active times, 1:4 at night CITP—1:3 or 1:1
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.	
<p>The individuals living in our ARFPSHN, RCFE and ARF homes, and their families have expressed a desire to be more involved in community activities of their choice. During IPP meetings, staff training, and resident council meetings, we have discussed the new HCBS rules and how to implement changes to provide better services for our individuals. As a result of these meetings, we have identified areas that we need to improve, including staff and administrative understanding of person centered planning and HCBS rules, how to implement identified service needs and how to develop more connections with the community.</p>	
<b>Project Narrative Description:</b>	
2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.	
<p>Person-centered thinking needs to be fully integrated into everything that LSA does. Staff who have not been trained in PCT concepts tend to think that their jobs consist only of care-giving and ensuring the health and safety of the individuals that LSA serves. Extensive, ongoing training is necessary to educate staff to understand how to move past these basic goals to help individuals realize fully actualized lives. We are also looking at the needs of our more medically fragile individuals during this grant period. These individuals need additional consultant support to venture into the community and participate in preferred activities. We feel that we can make a huge difference in these individuals' lives by giving them this opportunity to explore.</p>	
3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.	

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1 X 2 \_\_\_ 3 X 4 X 5 \_\_\_ 6 \_\_\_ 7 \_\_\_ 8 \_\_\_ 9 X 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—Transportation limitations affect staff ability to take individuals to preferred community activities. When outings are scheduled, planned or emergency medical appointments often take precedence regarding vehicle usage. In our ARFPSHN homes, several individuals are greatly limited in outings based on their need for respiratory therapy at all times.

#3—Many individuals served by LSA have difficulty communicating their choices verbally. Lack of assessment, technology and training for staff hinder individuals we serve from fully making choices and expressing their preferences.

#4—Individuals cannot always access individualized activities of choice because all individuals living in the home need to share a vehicle. Staff need additional training in Person Centered Thinking to plan individualized community-based activities.

#9—Individuals struggle with desires to have healthy relationships of choice while maintaining personal physical and financial safety. Several individuals have fallen prey to online dating scams, losing, in one case, thousands of dollars.

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.

#1—Transportation limitations—additional vehicles in the LSA fleet would ensure that community outings would not have to be cancelled to accommodate medical emergencies or appointments. In our ARFPSHN homes, additional respiratory therapy hours would allow an RT to accompany medically fragile individuals to attend special outings in the community.

#3—Access to assessments by a speech pathologist to ascertain in individual's needs for assistive communication devices would give individuals who do not communicate verbally the opportunity to make life choices.

#4—Additional vehicles would facilitate more opportunities for individuals to participate in small group activities. Having two additional staff trained as Person Centered Thinking trainers would enable LSA to get all staff trained in PCT faster and would enable us to also train staff for other agencies.

#9—Having two LSA trainers trained in Sexuality and Healthy Relationship practice in order to train individuals we serve would make those individuals stronger, safer, and more able to recognize healthy vs. unhealthy relationships.

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

Federal Requirement #1, #3, #4 and #9 are out of compliance.

LSA would continue to focus on providing training and support to the individuals, families and staff on the concepts of Person Centered Thinking and Planning to address requirements 1, 3 and 4. For the implementation of the new regulations, it is important that everyone involved in the IPP process have a clear understanding of the CMS Final Rule requirements.

To be successful, LSA wants to train two more key staff in the PCT concepts in order to work with staff and families by providing training and support before, during and after the IPP process. These staff would be responsible for increasing community inclusion by training direct support staff to make contacts within the various communities, assisting individuals in finding those activities in which they have expressed interest, to include paid employment, volunteer positions, and leisure activities. The Training Coordinator would also train and assist staff in obtaining equipment and/or training for alternative means of communication. (Requirements #1,3,4) Training will be recorded in each staff's file. Req. # 1 & 3. The addition of Respiratory Therapy and Speech Pathology hours will enable individuals with respiratory illness and individuals who do not communicate verbally to make choices and communicate their desires. Increases in individuals' communication abilities will be recorded in their IPPs.

Req. #1. Two additional vehicles would need to be purchased to allow for an increase in community opportunities. These vehicles would be used by all LSA homes and the CIP so that our individuals are able to make choices about where to go and when they want to

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go. A small mini-van vehicle adapted for wheelchair use would open the program to the possibility of accepting participants with mobility issues.(Requirement 1,4) Increased access to individualized community activities will be recorded and reported quarterly to SARC as part of the HCBS grant process.

Req. #9. The goal is to provide ongoing training to all identified individuals in peril of unsafe relationship scams or live situations. The outcomes of this training will be documented in the individual's consumer record and IPP.

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.

LSA staff facilitate person-centered quarterly meetings for individuals during which their goals and dreams for the future are set. We encourage and invite the individual's family members and circle of support to attend and to participate in this process. The individuals, the people that are important in their lives, and LSA staff were queried as to how LSA can best improve its Person Centered approach and meet the HCBS Final Rule requirements. Those recommendations were incorporated into this proposal.

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

LSA believes that training is at the heart of person-centered services, both for staff and for the individuals that we serve. Training staff so that they understand how to provide services in a person-centered manner and training individuals in how to exercise their rights to make choices and to live fully actualized lives is critical to the success of the HCBS federal mandates. PCT requires a paradigm shift in thinking from care-giving to supporting individuals to realize their life goals. Assistance in the form of communication technology and vehicles will help staff to carry out the person centered plans developed during this process.

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

Training: Two additional PCT trainers will use this opportunity to create a DSS approved Person Centered Thinking/Planning Training that can be used ongoing to train new and existing staff. This creates a small redundancy plan to ensure that training will not stop if LSA loses an existing PCT trainer. We hope it will also enable us to be able to offer PCT classes to other service providers.

Vehicles: After the second year, costs will be absorbed by the LSA operations budget.

Respiratory Therapy: Before HCBS grant funding expires for this goal, LSA will pursue outside grant funding to maintain this benefit for the individuals that benefit from it.

Speech Pathology: Before HCBS grant funding expires for this goal, LSA will pursue outside grant funding to maintain this benefit for the individuals that benefit from it.

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.

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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)

Speech pathologist (consultant)-2 hours per week x 56 weeks x 2 years x \$75= \$16,800  
 Respiratory therapist (consultant)-2 hours per week x 56 weeks x 2 years x \$75= \$16,800  
 PCT train the trainer training for 2 key staff-\$6000 x 2=\$12,000  
 Elevatus DD Relationship and Sexuality train the trainer training for 2 key staff (plus travel and lodging)-\$1800 x 2= \$3600  
 W/C accessible full size van for ARFPSHN homes-\$65,000  
 W/C accessible Dodge Caravan minivan for ARF/RCFE homes-\$42,000  
 Communication devices for 14 homes with cases and warrantees-\$15,000

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.

Training: Two additional PCT trainers will use this opportunity to create a DSS approved Person Centered Thinking/Planning Training that can be used ongoing to train new and existing staff. This creates a small redundancy plan to ensure that training will not stop if LSA loses an existing PCT trainer. We hope it will also enable us to be able to offer PCT classes to other providers.

Vehicles: After the second year, costs will be absorbed by the LSA operations budget.

Respiratory Therapy: Before HCBS grant funding expires for this goal, LSA will pursue outside grant funding to maintain this benefit for the individuals that benefit from it.

Speech Pathology: Before HCBS grant funding expires for this goal, LSA will pursue outside grant funding to maintain this benefit for the individuals that benefit from it.

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) 2018-19  
 Disparity Funding X No \_\_\_ Yes. If Yes, FY(s) \_\_\_\_\_  
 CPP Funding        X 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.

A 2019 Dodge Caravan w/c accessible vehicle was purchased. All LSA homes have been given access to the use of this vehicle for 1:1 individualized outings of their choice. LSA secured two spots for key staff to receive PCT train the trainer training from Parents Helping Parents. They requested a \$1000.00 deposit to hold our spots.

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.

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The current funding request builds on the last received funding in that it would improve our ability to meet our goals more quickly and to add redundancy so that we do not lose the ability to provide PCT training in case we lose one or more staff for any reason. By adding consultant assessment and training hours, we would expand to include medically fragile individuals to experience the benefits of increased choice and community involvement.

HCBS CONCEPT BUDGET							
Vendor Name		Life Services Alternatives, Inc.					
Vendor Number(s)		HS0321, H80863, HS0948, HS0482, HS0483, HS0484, HS0485					
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total	
		FTE	Annual Cost	FTE	Annual Cost	Cost	
<b>Personnel (salary + benefits)</b>							
Speech pathologist consultant 2 hours per week	8400	1.00	\$ 8,400	1.00	\$ 8,400	\$ 16,800	
for 2 years=\$75 per hour x 2 x 56= 8400			\$ -		\$ -	\$ -	
Respiratory therapist consultant 2 hours per wk	8400	1.00	\$ 8,400	1.00	\$ 8,400	\$ 16,800	
for 2 years=\$75 per hour x 2 x 56= 8400			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
<b>Personnel Subtotal</b>			<b>\$ 16,800</b>		<b>\$ 16,800</b>	<b>\$ 33,600</b>	
<b>Operating expenses</b>							
Person-centered Thinking train the trainer			\$ 12,000			\$ 12,000	
for 2 key staff=\$6000 x 2						\$ -	
Elevatus Developmental Disability & Sexuality			\$ 3,600			\$ 3,600	
train the trainer for 2 key staff + travel and						\$ -	
accomodations for 2 key staff=\$1800 x 2						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
<b>Operating Subtotal</b>			<b>\$ 15,600</b>		<b>\$ -</b>	<b>\$ 15,600</b>	
<b>Administrative Expenses</b>							
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
<b>Administrative Subtotal</b>			<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Capital expenses</b>							
W/C accessible full size van			\$ 65,000			\$ 65,000	
W/C accessible Dodge Caravan minivan			\$ 42,000			\$ 42,000	
iPads for communication + cases + 2-year			\$ 15,000			\$ 15,000	
warranty x 14 homes=\$15,000						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
<b>Capital Subtotal</b>			<b>\$ 122,000</b>		<b>\$ -</b>	<b>\$ 122,000</b>	
<b>Total Concept Cost</b>			<b>\$ 154,400</b>		<b>\$ 16,800</b>	<b>\$ 171,200</b>	

See Attachment F for budget details and restrictions