

## 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 12, 2019	Completed by: Pedro V Travieso, CEO
Vendor Name, Address, Contact: Mariro, LLC (dba Casa Rio Hondo, Casa Cecilia, Casa Fatima, Casa Gregorio, and Casa Barbara) 11010 Rio Hondo Drive, Downey, CA 90241 Pedro V. Travieso, CEO; cell: (562) 682-9667; e-mail: <a href="mailto:pvtravieso@yahoo.com">pvtravieso@yahoo.com</a>	
Vendor Number: HX0492, HX0616, HX0721, HX0747, HX0899	
Service Type and Code: Residential Care, 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: While individuals residing at each of Mariro, LLC's (Mariro) five (5) currently vendored facilities receive services in the community, based on their purported needs and preferences, as detailed in their Individualized Program Plans (IPP), these are often developed in large part by Regional Center Service Coordinators with little exploration for what is Good **to** --rather than **for**-- their respective clients. Most residents at each of Mariro's vendored facilities are willing and able to express their preferences and show their respective ability to make choices, and while they do make choices their preferences and ability to express these are not consistently or fully considered under the *status quo* model of looking after what is Good **for** them as clients.

All residents at each of the Mariro vendored facilities participate in a wide array of weekly outings and activities, in various degrees, depending on their expressed ability to participate. The answer as to whether or not the needs of each of these residents is being **fully** catered to based on their respective IPP expressed preferences and abilities, would however likely require the implementation of Person Centered Planning, developed under a person-centered philosophical model.

Currently two (2) of the nineteen (19) residents at Mariro vendored facilities are participating in a Regional Center sponsored paid employment program. If an individual at any of these facilities would like to seek paid employment in a competitive integrated setting (i.e. Ross Stores) her/his staff at the facility currently do not have the necessary training to be able to refer her/him to the most appropriate agency/resource available. While at this time the facility staff, along with the Service Coordinator, would make a concerted effort to meet the desire for employment by the individual, she would be unable to determine if she provided **full** access to the best available opportunities that matches with client choice.

While most residents at each of the Mariro vendored facilities exercise control over their personal financing, as appropriate, the manner in which appropriateness is evaluated may not always adequately address if a resident has **clear** options or not.

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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?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Please explain: Most current residents at each of the Mariro vendored facilities were provided with a full pre-placement description of the available living arrangement at the facility where they reside. Some residents even toured the facility, along with someone in their circle of support prior to placement. Others did not do any of that. While the IPP of most residents does not clearly show all or any other alternative settings that may have been available to them prior to placement, or even whether non-disability specific settings may have been an option, residents' needs and preferences are considered and noted on the IPP which is always kept at and utilized by the facility staff in guiding their direct work with residents.</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?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Mariro staff always intend to inform residents of their rights to privacy, dignity, respect, and freedom from coercion and restraint in a manner and to the extent that they are able to understand, while communicating this verbally, in writing or through</p>	

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sign language, while ensuring for privacy and confidentiality.

Resident rights and values are not only posted for all to see, but also discussed with residents during ongoing resident councils, and from time to time on an as needed basis. Perhaps through the use of person centered thinking and planning by staff would work to aid them in becoming most effective in providing clients better methods of individualized communication, leading them to a greater exercise of their rights and choices.

### **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: While the staff at all Mariro vendored facilities strive to accommodate for the initiative and individual choice of all residents in their day to day decision-making, it is only by way of creative and flexible scheduling that this is accomplished. The goals expressed in the IPP and the individuals identified as important members of the residents' close circle of support, are considered by staff in their support of choice making by residents. The use of person centered thinking and planning would however lend better tools to the process of facilitating general life choices among all residents of the facilities.

### **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: It has long been the policy of all Mariro vendored facilities to allow for individual resident choice in their decision of what available staff provides direct care services and supports on a day to day and shift to shift basis, to whatever extent

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possible. Residents at all Mariro vendored facilities are continuously voicing their changing needs and desires to the direct care staff, including facility Administrators who make themselves available to all residents on a day to day basis.

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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>  <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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Please explain: Under current rules, all Mariro vendored facilities are leased by Mariro, LLC for the sole purpose of providing residential care services to South Central Los Angeles Regional Center clients. Nonetheless, all of these facilities offer the same or more protections to its residents, under their existing Admission Agreement, as would be afforded them under any other standard lease or rental agreement. While the topic of ongoing facility appropriateness is raised with each resident by the Regional Center Service Coordinators during their quarterly case evaluations, facility Administrators at all Mariro vendored facilities include ongoing, in council and personal discussions about their respective likes and dislikes of their living situations, as well as inform them about how to go about relocating if they so wish.</p>	

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### **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.*

### **Guidance:**

- Do individuals have a choice regarding roommates or private accommodations?
- Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences?
- Do individuals have the ability to lock their bedroom doors when they choose?

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

Please explain: Individuals and their circle of support are given a choice by the Regional Center, upon admission to a Mariro vendored facility, to accept an available bed, in a bedroom which may or may not be shared. These bedrooms or bedroom areas are initially provided in a manner that is consistent with current State and Regional Center compliance. Once a resident occupies her/his space she has a choice personalize their space, with their personal items.

Individuals admitted to a Mariro vendored facility who have private bedrooms may lock their door when they choose. Individuals who have a shared bedroom may lock their door when they choose, except that they cannot do so to keep their respective room mates away from their own personal space.

### **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: Individuals at all Mariro vendored facilities have access to food at any time, provided that there are no specified medical restrictions or concerns noted in their respective IPP's that would instruct staff to restrict or monitor access. All of these facilities have a general schedule for the preparation of meals. However, given the varying schedules of residents that are involved in special community activities, a work program, or familial/ circle of support activities, among other reasons, their respective meal consumption schedules often vary, depending on their lifestyles. In any event, individuals at all Mariro vendored facility have full access to all common areas of the home, including comfortable seating in shared areas.

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<p><b><u>Federal Requirement #9:</u></b> <i>Individuals are able to have visitors of their choosing at any time.</i></p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Are visitors welcome to visit the home at any time?</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>
<p><b>Does the service and/or program meet this requirement?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Please explain: All Mariro vendored facilities have posted visiting hours. Visitors are allowed to visit any of the currently vendored Mariro facilities, on any day, for the duration of visiting hours, but not at <b>any</b> time. Visiting hours are intended to discourage visits attempted in the middle of the night, or those that carry on until past the posted 10pm curfew, or those that attempt to turn into overnight stays. All residents and their visitors are otherwise welcome to utilize any common area in the facility, either inside or outside the home to enjoy meals, picnics, or any other celebration they may wish to have.</p>	
<p><b><u>Federal Requirement #10:</u></b> <i>The setting is physically accessible to the individual.</i></p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have the freedom to move about inside and outside the home 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>
<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: All individuals residing in Mariro vendored facilities have the freedom and access to move about and occupy any common area, as well as to use any furniture and serve use of any appliance in their respective homes. While all of these settings are ambulatory settings, these spaces are all intended to be accessible to all current residents. Grab bars in all showers were installed in all client showers for instance to support further accessibility, just as shower chairs are available at facilities where the mobility of their residents has been compromised from time to time.</p> <p>It is easy to predict however that accessibility at one of our current facilities may be compromised in the future, as its residents are quickly moving into an age where their mobility has began begun to wane, and their bathtub showers may need to be converted</p>	

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into a slip in shower.

**CONTACT INFORMATION**

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**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	Mariro, LLC (dba <b>Casa Rio Hondo, Casa Cecilia, Casa Fatima, Casa Gregorio, and Casa Barbara</b> )
Vendor number(s)	HX0492, HX0616, HX0721, HX0747, HX0899
Primary regional center	South Central Los Angeles Regional Center
Service type(s)	Residential Care
Service code(s)	915
Number of consumers currently served	19
Current staff to consumer ratio	All Mariro, LLC facilities have a resident to staff ratio of at least 2:1 during awake hours, except for Casa Fatima (HX0721), where one of the residents is provided 1:1 services.
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>A typical day at any of the Mariro vendored facilities consists of individuals waking up around 6:30am for a shower, washing their teeth, grooming, dressing, making their beds and picking up after themselves (depending on ability), taking medication(s), having breakfast, and then deciding what they will take to Program for Lunch. They then leave in Program Transportation to their respective Day Programs. Some time between 2-3pm all or most residents begin arriving back at the facility. After an initial rest, most residents take a snack and medication(s) for those on PM medication(s). Afternoon activities then begin to take place until about 5:30pm. Some of these activities include, doctor appointment visits, walks around the neighborhood (weather dependent), exercise at the local parks, visits to local convenience stores, and assisting the staff in meals preparation. At around 5:30pm any resident who needs or wants to take a shower can do so. Dinner is then served between 6:00pm and 6:30pm. After dinner most residents watch an array of different cable TV/ Netflix programming until 8:00pm when they receive their bedtime medication(s). After this, most residents go to bed, and some choose instead to stay behind to finish whatever programming they were watching, and then have a snack before going to bed. They are all asked to wash their teeth before going to bed.</p>	
Project Narrative Description:	
2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.	
<p>The staff at all five (5) Mariro vendored adult residential facilities are currently lacking in person-centered thinking/planning knowledge, along with any training regarding the Home and Community-Based rules. We agree however that providing this training now would pay substantial dividends in the adherence of the much needed changes in philosophy of work that have been called upon by the HCBS rules and that are set to become regulations within a short two years. The learning curve at Mariro facilities for</p>	

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what is essentially a fully bilingual English/Spanish staff of primarily Latino individuals is a matter of concern for what may get lost in translation or else for the cultural nuances that require specific re-training. Doing this now would also help in allowing Mariro staff to become ambassadors of HCBS' upcoming rules with community stakeholders, as well as with each of the individual residents' circle of support. Given the onerous cost of providing re-training to 32 line staff members and four Administrators, including two vendors, we would like to request funding to implement train-the-trainer certification for person-centered planning and person centered training for the four (4) Administrators of Mariro facilities. (To help in meeting federal Requirement #1)

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  2  3 \_\_\_ 4 \_\_\_ 5 \_\_\_ 6 \_\_\_ 7 \_\_\_ 8 \_\_\_ 9  10 \_\_\_

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

The HCBS federal requirement #1 which has been identified here as being out of compliance presents a barrier to compliance as a result of the onerous cost of providing re-training to 32 line staff members and four Administrators, at all Mariro vendored facilities, in person-centered planning and person-centered training, within the scope of HCBS rules. This concept is necessary now because Mariro staff will need to begin incorporating and then fully implementing HCBS early enough that further cultural and language barriers at these facilities may be overcome in due time.

The HCBS federal requirements #2 and #9 which have been identified here as being out of compliance, present a barrier to compliance as a result of the fact that all direct care staff at Mariro LLC facilities lack the knowledge necessary to identify individualized needs and preferences in the living environment for each of the facilities' residents, as well as in their respective use of personal and shared spaces from a person centered thinking perspective.

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.

With respect HCBS requirement #1, #2 and #9 receiving early training in person-centered training and person centered planning by the staff of all Mariro vendored facilities will allow for the implementation of all concepts of HCBS early enough that further cultural and language barriers at these facilities may be easily overcome by March of 2022, thereby allowing for the vendors here to achieve full compliance.

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

The objective is to ensure that all Mariro staff is fully trained on all aspects of HCBS by March, 2022. Trained trainers, who will also be Administrators, will in turn track and monitor the compliance of staff in their assigned facilities.

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

All verbal residents at all Mariro vendored facilities were asked open ended questions about their ideas and wishes for their future employment, occupation, education as well as about their personal use common inside/outside spaces in the facility. Nonverbal residents, all of whom have resided at Mariro vendored facilities for a number of years have expressed a liking for different colors as well as outside activities. Members of the circle of support of each resident will be included in any decisions that are made about changes --structural or otherwise-- in the facilities, both inside and outside.

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

All of the changes that have been proposed here have been intended to create a direct impact, from a person-centered planning and thinking perspective, in the lives of the residents of Mariro vendored facilities going forward. Once all Mariro staff have been fully trained in person-centered planning/ thinking, the intended person centered driven results should follow, as a result of ushering in a new philosophy of work.

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

At the conclusion of this project the benefits of this project will continue to be felt everyday by clients who have, through their self-determination, re-created their own and shared spaces to establish a new norm. The job of the facilities' management is to maintain and support the environments in which residents live and thrive. The continued value of the living environments re-imagined here, both from a staff support and at the physical plant level will be monitored both by facilities' Administration as well as through each residents' IPP. The success of person centered planning/thinking at all Mariro facilities shall be self evident as positive developments in all or most facets of each of the resident's lives shall be positively affected in the process.

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)

Major Cost Category #1:

Person Centered Training/ Person Centered Planning = \$30,000 for all staff at all five Mariro, LLC facilities

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.

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This is "not applicable" here as all costs would be incurred within a given time frame.	
<p>12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?</p>	<p>HCBS Funding    <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____</p> <p>Disparity Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____</p> <p>CPP Funding        <input checked="" type="checkbox"/> No ___ Yes. If Yes FY(s) _____</p> <p>If yes to any question be sure to answer questions 13 and 14.</p>
<b>For providers who have received prior HCBS, Disparity or CPP Funding from DDS</b>	
<p>13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.</p>	
<p>14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.</p>	

HCBS CONCEPT BUDGET						
Vendor Name		o Hondo, Casa Cecilia, Casa Fatima, Casa Gregorio and Casa [				
Vendor Number(s)		HX0492, HX0616, HX0721, HX0747, HX0899				
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
<b>Personnel (salary + benefits)</b>						
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ -		\$ -	\$ -
<b>Operating expenses</b>						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Operating Subtotal			\$ -		\$ -	\$ -
<b>Administrative Expenses</b>						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
<b>Capital expenses</b>						
Person Centered Training/ Person Centered Planning			\$ 15,000		\$ 15,000	\$ 30,000
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Capital Subtotal			\$ 15,000		\$ 15,000	\$ 30,000
Total Concept Cost			\$ 15,000		\$ 15,000	\$ 30,000

See Attachment F for budget details and restrictions