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 <a href="https://www.dds.ca.gov/HCBS">www.dds.ca.gov/HCBS</a>.

Questions may be directed to <a href="https://example.com/HCBSregs@dds.ca.gov">HCBSregs@dds.ca.gov</a>.

Date(s) of Evaluation: 11/1/19-11/15/19	Completed by: Necole Vano				
Vendor Name, Address, Contact: Community Interface Services, 2621 Roosevelt Street,					
Carlsbad, CA 92008. Necole Vano					
Vendor Number: H39507, H39534, HQ0412					
Service Type and Code: Supported Employment – Group (SE-GP) / Code: 950; Community Integration Training (CIT-ADC) / Code: 510					

#### **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? $\Box$ Yes $\boxtimes$ No

Please explain: Community Interface Services (CIS) has long been philosophically aligned with the HCBS rules and the concept that people with disabilities should have full access to and enjoy the benefits of community living through long-term services and supports in the most inclusive settings of their choosing. Community Interface provides direct services for people with intellectual/developmental disabilities in the communities of San Diego County and supports each participant to fully be included in their own community based on their needs, preferences, and abilities. While efforts are made to ensure that people served have opportunities to seek employment and work in competitive integrated settings, as well as control their personal resources to the same degree of access as individuals not receiving Medicaid HCBS, aspects of the current service settings make it such that the services are not currently meeting these portions of the HCBS requirement. High-quality paid employment in fields of interest to individuals continues to be guite limited. In Supported Employment - Group (SE-GP), all participants are working, but because they require 100% support, their options for jobs are limited to employers who are willing and able to hire a group of at least three people. For years, the only two employers CIS has found willing and able have been Walmart and Job Options for work in the mess halls on Camp Pendleton. While the jobs pay at least minimum wage and offer the number of hours that participants are interested in, they are not necessarily the exact type of work that each person would choose to do if they did not need the level of support they do. One of the primary SE-GP employers has been deemed to not meet the HCBS requirements for integration due to their remote and isolated geographic location and their practice of intentionally hiring people with barriers to employment as a large portion of their workforce. Alternate employment options will need to be explored for the people working at that location. Additionally, many people served have a belief that they cannot or should not work to their fullest potential because of fear of the impact of employment on public benefits such as Social Security and MediCal. Participants and their families are lacking the knowledge and support to successfully and comfortably navigate their benefits, and participants are scared to seek paid employment. Community Interfaces Services' most recent award of HCBS Compliance Funding will focus on credentialing staff in Benefits Planning to assist

participants in understanding and navigating their benefits, particularly in regard to the impact of work, so that individuals have the information needed to control their own personal resources and make informed choices when pursuing employment. The agency's SE-GP and CIT services are funded at a minimum 1:3 staff to participant ratio. Participants in SE-GP and CIT receive supports along with small groups of people. The participants in SE-GP work at paid jobs and CIT participants work together for 5-6 hours a day, five days a week. Each CIT group has options for community integration and takes advantage of opportunities for using generic resources available in each community in lieu of onsite services. The participants regularly attend, volunteer, and participate in community activities, and actively participate in the planning of each day. Support is provided so that each group has the most positive community access experiences possible, and each person is supported to control their personal resources to the degree he or she chooses. While options for community integration and utilization of community services during everyone's day are provided, they are within the constraints of a small group rather than one-on-one. As such, Community Interface Services' SE and CIT services do not meet the part of the Federal Requirement that the setting supports full access of individuals receiving Medicaid HCB Services to the greater community, including opportunities to seek employment and work in competitive integrated settings... to the same degree of access as individuals not receiving Medicaid HCB Services. With HCBS Compliance Funding received in FY 16-17, Community Interface Services hired Person-Centered Planning Facilitators who developed and implemented an enhanced Person-Centered Planning (PCP) process for individuals served in the CIT program. As a result, all agency staff members were trained on the PCP process and it has been implemented with all individuals served as part of annual goal setting to direct their services. Despite this enhanced effort, in the small group setting of Community Interface's CIT and SE services, the opportunity for the individual time and focus required for true person-centered planning is a challenge. Additionally, once an individual's goal(s) are identified through the PCP process, the opportunity to provide needed individual support to pursue expressed goals is hampered within the group setting; with a staff to participant ratio of 1:3, it is not to the same degree of access as individuals not receiving Medicaid HCB Services. Specifically, successfully seeking employment and working in competitive integrative settings requires a very individualized approach and match for each person. It is not common that three people that happen to be in the same group have the same hopes, dreams, goals, and abilities for the same type of job, and it is even more infrequent that an employer can be located who meets those criteria and happens to have work available for three people to work the same hours. Thus, the employment search activities and job opportunities possible in the agency's group employment services fall short of meeting the Federal requirements, and each person's individual opportunities for competitive integrated employment are constrained by the opportunities available to the group as a whole.

### Federal Requirement #2:

The setting is selected by the individual from among setting options, including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.

#### Guidance:

- Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals?
- Does each individuals' IPP document the different setting options that were considered prior to selecting this setting?

### 

Please explain: Community Interface has a current Regional Center IPP for individuals receiving services or is working with Regional Center to attain one. Community Interface encourages and supports individuals to choose their preferred setting options. Community Interface's services are provided on a voluntary basis, and the agency believes it is each individual's choice to receive services. Individuals participate in the development of their goals/objectives and their daily schedules. Participants work together with other individuals in their group and their staff member to choose the sites where they will volunteer, work, or recreate each day in accordance with their personcentered plan.

### Federal Requirement #3:

Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

### **Guidance:**

- Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?
- Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?
- 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.)?

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

Please explain: Community Interface takes all steps to ensure that each individual's rights of privacy, dignity, and respect are upheld and that each person receiving services is free from coercion and restraint. Significant training is provided to all staff members upon hire and throughout employment about each individual's rights as outlined in the

Lanterman Act. Participants are informed of their rights in a manner they can understand based on their needs and preferences. Community Interface's *My CIS Handbook* (participant handbook) outlines each person's rights, in both written and picture form, and how those rights relate to Community Interfaces' services. Training and oversight are provided related to maintaining privacy and confidentiality throughout service delivery and during discussions of personal information.

#### 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?

### 

Please explain: Community Interface values each person's choice in all aspects of their life and service delivery and promotes each person to take initiative and make choices about their daily activities, physical environment, and with whom they would like to interact. Individuals participate and are given the opportunity, but not required, to create their own daily schedules. Each person is encouraged to engage in the activities they choose, participate in activities that correspond with their IPP goals, interact with who they choose, and are provided with options throughout each step of their day.

#### **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? $\ oxtimes$ Yes $\ oxtimes$ No

Please explain: Community Interface not only facilitates individual choice but values those choices. Continuous offerings are made to modify services, voice concerns, or ask questions. Staff members are trained to provide support in a way that leaves people served feeling empowered to make decisions and are evaluated on their ability to do so. Participants are encouraged to informally discuss concerns when they arise, and more

formally at planning team meetings, via surveys, and at site visits from program supervisors. The agency has Advisory meetings open to all participants where there is direct access to staff at all levels, and participant feedback is solicited. People served are asked about preferences in staff and participate in the agency-wide applicant interview process. Their feedback is considered in hiring decisions. With previous HCBS funding, Community Interface has been able to engage in an in-depth Person-Centered Planning process where staff delve into participant's hopes, dreams, goals, and choices, and have discovered preferences that hadn't previously come to light, especially for people who communicate in non-traditional ways. The Person-Centered Planning process was part of the impetus for this proposal due to the expressed desire of participants to have more choices in seeking employment.

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:

#### Federal Requirement #6:

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.

#### Guidance:

- As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?
- Are individuals informed about how to relocate and request new housing?

Please explain: Click or tap here to enter text.	
Federal Requirement #7:  Each individual has privacy in his/her sleeping or living unit:  Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.  Individuals sharing units have a choice of roommates in that setting.  Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.	<ul> <li>Guidance:</li> <li>Do individuals have a choice regarding roommates or private accommodations?</li> <li>Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences?</li> <li>Do individuals have the ability to lock their bedroom doors when they choose?</li> </ul>
Does the service and/or program meet this Please explain: Click or tap here to enter text.	-

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

Federal Requirement #8: Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.	<ul> <li>Guidance:</li> <li>Do individuals have access to food at any time?</li> <li>Does the home allow individuals to set their own daily schedules?</li> <li>Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?</li> </ul>
Does the service and/or program meet this Please explain: Click or tap here to enter text.	
Federal Requirement #9: Individuals are able to have visitors of their choosing at any time.	<ul> <li>Guidance:</li> <li>Are visitors welcome to visit the home at any time?</li> <li>Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?</li> </ul>
Does the service and/or program meet this Please explain: Click or tap here to enter text.	
Federal Requirement #10: The setting is physically accessible to the individual.	<ul> <li>Guidance:</li> <li>Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area?</li> <li>Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move about the setting as they choose?</li> <li>Are appliances and furniture accessible to every individual?</li> </ul>
Does the service and/or program meet this Please explain: Click or tap here to enter text.	-

#### **CONTACT INFORMATION**

Contact Name: Necole Vano
Contact Phone Number: (760) 729-3866

Email Address: nvano@communityinterfaceservices.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.

**⊠ IAGREE** 

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.

Vendor name	Community Interface Services (CIS)			
Vendor number(s)	H39507, H39534, HQ0412			
Primary regional center	San Diego			
Service type(s)	Supported Employment – Group (SE-GP); Community Integration Training (CIT-ADC)			
Service code(s)	950; 510			
Number of consumers currently served	-11 people currently served in SE-GP, 1:3 ratio -169 people currently served in CIT-ADC, 1:3 ratio -Approximately 1950 individuals served agency-wide			
Current staff to consumer ratio	1:3			

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.

SE-GP services are provided at the employer's work site, and CIT services are provided at work, volunteer, and community sites. Work sites are limited to those employers that can employ at least three individuals in close proximity to each other at the same time. GP participants currently work 16-24 hours per week at a competitive wage, with the same or similar schedules at Walmart and mess halls on the Camp Pendleton Military Base. CIT participants typically attend program 5-6 hours per day, 2-5 days per week. Currently 19 participants in CIT are competitively employed for some portion of their day program hours. Supports are provided in an average 1:3 staff-to-participant ratios with staff time apportioned across the participants based on the needs of the participants and the employer/ volunteer site coordinator. The staff person is always present at the site.

#### **Project Narrative Description:**

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

This project is an over-arching capstone project that will bring together all of CIS' previous and current efforts to come into compliance with the HCBS rules, bring the agency's group services into full compliance by March 2022, and set the stage for sustaining that progress moving forward. The project consists of building an Employment First team consisting of a Project Supervisor, a Certified Benefits Counselor, and two Employment Specialists. Project staff will be selected from the certified staff currently receiving customized employment and benefits counseling training under our FY18-19 HCBS grant. The Employment Team will be pivotal in overseeing organizational transformation and staff development to further develop person-centered, inclusionary services with a focus on choice, employment, and participant control and provide HCBS relevant training to participants and staff. Project

staff will work individually with SE-GP and CIT participants and staff on identifying and creating blueprints toward employment related goals.

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\_\_\_ 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.

Group services inherently limit individual ability to pursue employment in terms of hours, schedule, location, and type of work, limiting "opportunities to seek employment and work in competitive integrated settings...to the same degree of access as individuals not receiving Medicaid HCBS." In addition, many participants and their families have concerns about the impact paid work might have on their public benefits. There is a lack of awareness about the array of incentives to work that allow people to earn money in addition to their public benefits. Because of the knowledge gap and the fears, many people choose not to pursue work, or limit their work hours. As such, their level of access to employment is limited, and the opportunity to seek work in competitive integrated settings and to control their own personal resources is not to the same degree of access as individuals not receiving Medicaid HCBS. Likewise, staff need the opportunity to develop the competencies and knowledge needed to become adept at counseling participants and families and become valuable resources for people seeking to increase their community participation and make informed choices about their employment goals.

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.

Project staff will be well versed in person-centered planning (PCP), HCBS final rule, customized employment, benefits counseling, and generic/Regional Center funded employment supports. Project staff will work with SE-GP/CIT participants on an individual basis and develop outcomes based plans to assist participants in pursuing/securing competitive integrated employment in their areas of interest and ability, and work with planning teams to access both generic and Regional Center funded services to provide support with developing and maintaining employment. By increasing the ability to focus on the quality of the individuals' experiences, services will meet or exceed the HCBS requirements even while participants are in a small group setting, providing participants the opportunity to pursue employment to the same degree of access as individuals not receiving Medicaid HCBS.

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

The project outcomes are as follows:

A. Project staff will increase staff competency in the areas of employment best practices, work incentives, and person-centered thinking to increase overall agency capacity to provide quality, person-centered services in compliance with the HCBS Final Rule:

- Modify recruitment criteria and update staff Job Descriptions to focus on the competencies need to achieve community employment and inclusion.
- Develop and/or implement training components for staff and participants such as customized employment, Person-centered thinking/planning, choice, rights, privacy, dignity, respect, risk mitigation, benefits counseling, work incentives, community inclusion, meaningful day activities, and HCBS/other regulatory required and best practices training.
- B. The quality of the individuals' experiences will meet or exceed the HCBS requirements even while provided in a small group setting. Services will support full access to the greater community, including opportunities to seek employment, 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:
  - Complete or review PCP with SE-GP and CIT participants to determine if individualized employment goals are desired and/or individualized support to pursue employment goals is needed.
  - Review and update all CIT & SE Group participant's ISPs at the Annual and Semi-annual point to be meaningful, choice-driven, and person-centered.
  - Develop a "Blueprint" (outcomes-based plan) toward employment for the participant and his/her team by providing individualized assistance to explore pathways to employment and serving as a resource/providing counseling regarding work/benefits, to assist participants in pursuing/securing employment.
- C. Participants will be receiving their preferred services and express satisfaction with their services. Individuals who chose to receive SE GP or CIT services will be doing so by choice based on their own needs and preferences.
  - Survey participants for satisfaction/preferences upon the conclusion of the project/services with at least 80% positive ratings.
- 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.

Input on desired supports is gathered during the intake process, service planning and delivery, and formally solicited annually. We completed 120 PCPs with CIT participants to identify their interests and desires in relation to services, community participation, and employment. We also conducted a survey with SE-GP and CIT participants about interest in pursuing paid work and the need for information/ counseling on how work impacts benefits. All of this input helped shape this proposal.

8. Please describe how the concept you propose will enable you to provide more personcentered services to your participants.

Person-centered planning is an integral part of each individual's process in directing their services. Having staff/leadership who are trained in PCP, customized employment, and benefits planning in positions dedicated to focusing on individual's person-centered employment development will provide more person-centered services.

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

The new job descriptions, recruitment practices, and comprehensive employment focused training plan/curricula that includes HCBS concepts developed from this proposal, will be well established and an integral part of the agency's recruitment and initial and ongoing staff development practices which will ensure the sustainability of competent, educated staff trained to provide individualized, HCBS-compliant services. The "Blueprints" for employment will equip participants and their planning teams with the information and knowledge to pursue their employment goals and manage their personal resources going forward.

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).

 $\underline{\text{http://leginfo.legislature.ca.gov/faces/codes\_displaySection.xhtml?sectionNum=4629.7\&lawCode=WIC}$ 

Project personnel includes a full-time Project Supervisor and three .75 FTE positions – a Benefits Counselor and two Employment Specialists. Project personnel will reflect diversity in terms of gender, languages spoken, age, etc. Project personnel salary, taxes, insurance, and benefits are calculated based on 12 months in FY 1 (July 2020–June 2021), and 8 months in FY 2 (July 2021 – February 2022), for a total project length of 20 months. Operating expenses include cellphones, laptops, mileage reimbursement, and office supplies, and space for the Employment First team members. Administrative costs include administrative support personnel such as reception, HR, payroll, and accounting; management support such as director oversight, and other allocated administrative expenses such as insurance, legal, etc.; and are below the required 15% cap.

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.

The project will provide for increased program and staff development. Once developed, we plan to become vendored by SDRC to provide needed services in the areas of benefits counseling and customized employment to broaden our scope of service to continue to support participants in these areas after completion of the project.

12. Have you or the	HCBS Funding No _X_ Yes. If Yes, FY(s)_16/17, 18/19							
organization you work	Disparity Funding _X_ No Yes. If Yes, FY(s)							
with been a past recipient of DDS funding? If yes,	CPP Funding _X_ No Yes. If Yes FY(s)							
what fiscal year(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.

**2016-17 Person Centered Planning:** completed 120 person-centered plans with CIT participants. Helped participants present them to their planning teams and incorporate their goals and wishes into their IPP/day program Individualized Support Plan (ISP). Approximately 37 CIT participants now have employment related goals in their ISPs. Provided agency wide staff training on PCP and created an internal PCP tool.

**2018-19 Competitive Employment/Benefits Counseling:** Developed project timeline, created Project Facilitator Position Description and hired Project Facilitator. Ten staff members are in the process of completing the ACRE Customized Employment training; coordination of an additional ACRE Customized Employment training for Spring 2020 is underway. Coordination with Cornell University to enroll 5 staff in the Benefits & Work Incentives Practitioner training is also underway with a Spring 2020 target date.

14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.

This project is the culmination of all previous HCBS grants and organizational efforts. It brings together the previous HCBS funded projects, fills in some gaps, and furthers the quest to provide individualized, person-centered services by competent, trained staff to bring Community Interface Service's group services into compliance with the HCBS final rule. In 16/17, our person-centered planning project helped us develop our person-centered planning skills and learn what CIT participants wanted out of their day program services and their employment goals, and where the skill and knowledge gaps were for our staff to help participants achieve their employment goals. Our current project seeks to build staff capacity in the areas of customized employment and benefits planning, so that we can work toward helping participants meet their employment goals. The proposed project broadens the person-centered planning process, dedicates trained employment specialists to assist folks in determining their path to employment, and establishes an initial and ongoing training plan that include relevant HCBS topics and concepts and enables us to sustain the competencies into 2022 and beyond.

HCBS CONCEPT BUDGET									
Vendor Name		unity Interface							
Vendor Number(s)									
		Year	r 1 Bı	udget	Yea	ır 2 B	Budget	Total	
		Salary and							
		Benefits	FTE	А	nnual Cost	FTE	A	Annual Cost	Cost
Personnel (salary + benefits)									
Community Employment Supe	ervisor	72225	1.00	\$	72,225	0.67	\$	48,391	\$ 120,616
Community Employment Facil	litator	51999	0.75	\$	38,999	0.50	\$	26,129	\$ 65,129
Community Employment Facil	litator	51999	0.75	\$	38,999	0.50	\$	26,129	\$ 65,129
Certified Benefits Counselor		59799	0.75	\$	44,849	0.50	\$	30,049	\$ 74,898
				\$	-		\$	-	\$ -
				\$	-		\$	-	\$ -
				\$	-		\$	-	\$ -
				\$	-		\$	-	\$ -
				\$	-		\$	-	\$ -
Personnel Subtotal				\$	195,073		\$	130,699	\$ 325,771
Operating expenses									
Communication				\$	1,755		\$	1,170	\$ 2,925
Mileage				\$	11,310		\$	7,540	\$ 18,850
Facility Rent/Utilities/Mainter	nance			\$	2,535		\$	1,901	\$ 4,436
Office Supplies		1		\$	975		\$	731	\$ 1,706
laptops				\$	975				\$ 975
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
Operating Subtotal				\$	17,550		\$	11,342	\$ 28,892
Administrative Expenses								·	
Administrative Support (recep	tion/accounting)			\$	7,315		\$	5,486	\$ 12,801
Management Expense	·	1		\$	11,705		\$	8,779	\$ 20,484
Accounting & Legal		1		\$	975		\$	731	\$ 1,706
Insurance		1		\$	1,950		\$	1,463	\$ 3,413
		1			,			,	\$ -
		1							\$ -
		1							\$ -
									\$ -
Administrative Subtotal				\$	21,945		\$	16,459	\$ 38,404
Capital expenses								·	
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
Capital Subtotal				\$	-		\$	-	\$ -
Total Concept Cost				\$	234,568		\$	158,500	\$ 393,067