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.

Questions may be directed to HCBSregs@dds.ca.gov.

Date(s) of Evaluation: Click or tap here to	Completed by: Andrea Wells and Donna Norum			
enter text.				
Vendor Name, Address, Contact: OPARC,	9029 Vernon Ave., Montclair, CA 91763			
Vendor Number: HP5260				
Service Type and Code: Adult Developmental Centers 510, Behavior Management				
Programs 515, Work Activity Program 954, Supported Employment- Group 950				
Trogramo oro, Work Notivity Program 504,	Supported Employment Group 300			

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? \boxtimes Yes \boxtimes No

Please explain: Most of our programs do not meet the Federal requirements. Currently individuals are participating in community activities and outings. However, the activities and outings are not part of their Person Centered Plans. Person Centered Plans and individual choices/needs/wants need to be developed for meaningful activities/outings. Individuals in our ADCs and Behavioral Programs have limited access to employment opportunities and activities. Resources for employment and activities that meet PCPs and individual choice need to be identified in the areas individuals are being served and/or where they live.

The recent vendorization of OPARC's 055 program, several people in our WAP are transitioning to receiving services in the community. The plan is to have more individuals in the ADCs and Behavioral Programs taking advantage of the 055 program once PCPs and resources are developed.

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?

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

Please explain: OPARC does have systems and procedures in place to both support and ensure the people we serve have the ability to choose the setting. With the 055 program, several have the option to participate in activities in the community. This program is

consistently growing, however, adequate staffing is limiting faster growth.

As mentioned in #1, OPARC does have IPPs in place. However, the IPPs in the ADCs, Behavioral Programs, Supported Employment – Group, and WAP are not Person Centered Plans.

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? $\ \ \, \boxtimes \, \, {\sf Yes} \, \, \, \Box \, \, {\sf No}$

Please explain: OPARC has systems and procedures in place to both support and ensure rights of privacy, dignity, respect, and freedom from coercion and restraint. We have a variety of assistive technology devices available and are in use.

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? $\ oxtimes$ Yes $\ oxtimes$ No

Please explain: OPARC has systems and procedures in place to support those we serve

in making life choices. However, limited staff training in Person Centered Thinking (PCT) results in generic goals and activities that don't achieve skills training and opportunities to maximize initiative, autonomy and independence. Through our current HCBS grant, our senior leadership is in the process of becoming PCT trainers and all current and new employees will begin receiving PCT training around March 2020. OPARC would like to begin the process of having Person Centered Plans in place for our ADC, Behavioral, SE-Group and WAP individuals so that we can begin to implement PCT with individual goals and activities. Meaningful PCPs take 5-10 hours to develop according to The Learning Community. Our current employees do not have the time to transition approximately 700 plans to be Person Centered Plans.

"Individual is able to interact with individuals they choose to interact with ..." – the PCPs need to be developed as well as resources to help facilitate individual choice and development of friends/acquaintances/etc. in the community – beyond family and paid support employees.

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? \boxtimes Yes \boxtimes No

Please explain: OPARC has processes and procedures to support individuals' continuous opportunities to modify their services, access new services, and voice their concerns or ask questions regarding the services they receive. However, with the staffs' current limited training in PCT, there are, in turn, limitations to the support available. In addition, OPARC does support individuals in choosing which staff provides their care. However, staff shortages, transportation routes, activities, etc. can impact the ability to accommodate the choice.

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.	 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 Please explain: Click or tap here to enter text.	-

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

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 Please explain: Click or tap here to enter text.	-
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 Please explain: Click or tap here to enter text.	-
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 so that individuals who need those supports can move about the setting as they choose? Are appliances and furniture accessible to every individual?
Does the service and/or program meet this Please explain: Click or tap here to enter text.	

CONTACT INFORMATION

Contact Name: Andrea Wells or Donna Norum

Contact Phone Number: 909- 982-4090, ext.156 or 909-285-6326

Email Address: awells@oparc.org or dnorum@oparc.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

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

Vendor name OPARC	
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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 number(s)	HP5260
Primary regional center	San Gabriel Pomona Regional Center
Service type(s)	Adult Developmental Centers, Behavior Management Programs, Work Activity Program, Supported Employment-Group
Service code(s)	510, 515, 954, 950
Number of consumers currently served	769
Current staff to consumer ratio	510- 1:4, 515- 1:4, 1:1; 954 1:18; 950 1:3, 1:4

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.

OPARC ADCs and Behavior Mod programs are at community sites. Our internal standard for community access is 80% of the program day. Typically participants meet at their site & then leave for pre-determined activities including volunteer work & paid employment. However, the majority of the activities/ employment are not tied to PCPs/Goals. Many of our participants choose to stay on-site. As well as many of the families requesting that individuals stay on-site. OPARC has 21 SE groups working performing a variety of tasks. Over the last 2 yrs, we've transitioned/started 11 Groups that earn minimum wage. With the start-up of our 055 program, we have 42 enrolled (31 from WAP). We are encouraging participants in WAP to access the community-based option. Daily, there are substitute opportunities available to cover absences with SE Groups. Job Developers increased efforts to secure IPs, adding 52 since June 2018. We believe the people we support receive very good services but with proper staff training & additional positions to assist in developing PCP's, there will be a greater emphasis on the needs/desires of each person. A more personalized approach will lead to activities/services/creative options that challenge/enhance their ability to achieve & for OPARC to come into HCBS compliance.

Project Narrative Description:

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

OPARC is requesting an individual to lead the transition to Person Centered Plans /Thinking & Community Integration at SS-Walnut – a PCP & Integration Facilitator. The employee will begin working with participants, employees, CSCs, caregivers, and families to develop PCPs that reflect the participant's choices/goals. OPARC has over 700 participants. The transition of all these plans is Herculean. The PCP & Integration Facilitator will be a key player in outreach and education with participants and other stakeholders to ensure they understand why PCPs are being developed and addressing fears of change - encouraging participants and families, while reassuring them of safety. In addition, employees would be getting role modeling/ training on the development of PCPs/participant goals/needs/etc. Case Managers, Assistant Managers and Program

Managers would begin to develop PCPs with the oversight of this individual, until ready to complete on their own. Developing PCPs/goals are wonderful. However, resources/opportunities/transportation need to be found and coordinated to implement these PCPs/goals – so that they meet the individual choice and lessen saturation of participants at one location in the community. OPARC would the PCP & Integration Facilitator to develop and find resources for participants that meet their goals/PCPs in the areas that they receive services and/or live.

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_X__ 3___ 4__X_ 5_X__ 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.
- #1, 2, 4 & 5. Current plans are not truly person-centered. PCPs are time consuming for current employees to develop and they are often working with the individuals to ensure ratios. The Learning Community recommends 5 to 10 hours to develop a PCP. All of our participants in the WAP are not able to transition at once, due to lack of ability to plan quality activities for so many. Participants in the Day Programs have limited choice due to not having PCPs and resources to work towards those goals. Having the PCP & Integration Facilitator will speed up the process for getting meaningful PCPs in place/identifying goals/choice, and in finding resources and coordinating activities for individuals with similar desires/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.
- #1, 2, 4 & 5. The PCP & Integration Facilitator will allow OPARC to create PCPs in a more timely fashion and as a result we will be able to pinpoint desired and appropriate community activities, resources and coordinate schedules/transportation among all programs to ensure that we don't saturate destinations. Individual goals and choice/preference will be acted upon more meaningfully. While we have transitioned individuals to the 055 program, we have many more to go. The Learning Community recommends 5-10 hours per PCP. Our current employees do not have the time or skill with their current duties and knowledge to accommodate this great need. The PCP & Integration Facilitator will be responsible for the transitioning of IPPs to PCPs, role modeling and overseeing managers as they begin to develop PCPs, and finally reviewing PCPs as they are developed and revised making sure managers and stakeholders truly understand the importance of individual choice and preferences supporting individuals in meeting their goals. Helping them to transition out of "the old way of thinking" into the "new".
 - 6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

Currently we have developed 0 PCP's. Once the PCP & Integration Facilitator is hired and trained, at the onset of the grant, we anticipate beginning to develop PCPs.

Develop 3 PCP's 1st qtr, 5 2nd qtr, 9 3rd & 4th qtr, and 3mthly thereafter for a total period of 2 yrs. (The thought being that they will be showing employees how to facilitate PCPs and eventually oversee the employees developing PCPs as well). Transition 2-3 people from the WAP to 055 program per month. Integration activities would begin by developing resources for individual PCPs and coordinating individuals with same interests/goals/desires. Integration activities - develop 5 resources 1st qtr, 10 2nd qtr, 15 3rd qtr, 20 4th qtr and 5 mthly thereafter for a total of 2 yrs. Unmeasurable, is the reviewing of goals in PCPs, talking to individuals about goals as needed/the resources found – if they are working/liked/etc., coordinating like-minded/interested individuals at resources, communicating with managers, families, caregivers, etc.

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.

OPARC gathers participant input on a regular basis through satisfaction surveys, input meetings, and assessments to make changes/additions to supports provided & culture change. In addition, individuals from WAP, ADC-Montclair & Summit Services-Upland were asked about the concept & if they felt the concept would be beneficial. Individuals were receptive to the idea & felt that it would be helpful to have people in place to develop their plans to be Person Centered & to add community integration activities/work/volunteer opportunities related to their individual goals.

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

Developing PCPs will allow us to work towards PC goals/services with the individuals we support. Educating families about PCT and reassuring them of safety concerns will support moving towards being PC. Integration coordinating will enable us to take our PCP from ideas/goals to implementation of those ideas/goals.

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 end of the funding, we will review the need for the position. We anticipate that we will maintain one PCP Facilitator for the whole agency to oversee new PCPs, continue to develop PCPs, and help facilitate/track revisions as needed/assigned. The goal is to have the PCP Facilitator jump start the PCPs and role model/oversee employees on development of appropriate and meaningful PCPs – so that all managers are able to develop them – not just the PCP Facilitator. The integration piece— we are hoping we will not need to maintain these duties when the two years have expired. The need is great to find and record the community resources. The program can then access the centrally maintained data and add to it as appropriate.

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).

Salary, benefits, supervision of EE, laptop & mthly usage fee for phone & mileage to travel to mtgs and co. sites for integration. Mktg materials for integration education.

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.

We intend to keep a PCP Facilitator after funding stops. We anticipate the need for the duties/position to lessen over time and if we need to continue – the duties/position will be distributed to current positions – as duties change due to HCBS/Day Program changes

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)2016-17, 17-18,18-19				
Disparity Funding	X No Yes. If Yes, FY(s)				
CPP Funding	<u>X</u> No Yes. If Yes FY(s)				
If yes to any question be sure to answer questions 13 & 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 Add 2 Job Developers: i. # with CIE as a vocational objectives 354

- # with exposure to co. employ. including volunteerism, PIP, or ESA 236
- # of CIE placements/PIP's 3 iv. Participation in employment activities/sites 94
- # of participants who have the option for community integration. 431

2017-18 Add work opportunities to Behavior Program: 15 addtl ppl are in volunteer jobs, 5 working in PIP

2018-19 Train 2 Person Centered Thinking Trainers: Trainers have started coaching

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.

PCP Trainers will be training all EE on PCT. The PCP & Integration Facilitator will facilitate/oversee the implementation of PCPs & making the goals possible by finding & coordinating resources. This request is the last piece needed in our 4 yr effort to bring everything together agency wide.

HCBS CONCEPT BUDGET								
Vendor Name								
Vendor Number(s)								
		Yea	ar 1 Bu	ıdget	Ye	ar 2 Budget		Total
	Salary and							
	Benefits	FTE		Annual Cost	FTE	Annual Cos	t	Cost
Personnel (salary + benefits)								
PCP / INTEGRATION FACILITATOR	57789	0.75	\$	43,342	0.75	\$ 43,342	\$	86,684
·			\$	-		\$ -	\$	=
			\$	-		\$ -	\$	-
			\$	-		\$ -	\$	-
			\$	-		\$ -	\$	-
			\$	-		\$ -	\$	1
			\$	-		\$ -	\$	-
			\$	-		\$ -	\$	-
			\$	-		\$ -	\$	-
Personnel Subtotal			\$	43,342		\$ 43,342	\$	86,684
Operating expenses								
STAFF MILEAGE			\$	5,200		\$ 5,300	\$	10,500
STAFF DEVELOPMENT			\$	600		\$ 600	\$	1,200
COMMUNICATION EXPENSE			\$	600		\$ 600	\$	1,200
MARKETING & OUTREACH			\$	1,000		\$ 1,000	\$	2,000
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
Operating Subtotal			\$	7,400		\$ 7,500	\$	14,900
Administrative Expenses		<u>'</u>						
CHIEF PROGRAM OFFICER (SUPERVISION Share Cost	<u>)</u>		\$	3,000		\$ 3,000		6,000
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
Administrative Subtotal			\$	3,000		\$ 3,000	\$	6,000
Capital expenses								
LAPTOPS			\$	800			\$	800
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
							\$	-
Capital Subtotal			\$	800		\$ -	\$	800
Total Concept Cost			\$	54,542		\$ 53,842	\$	108,384

See Attachment F for budget details and restrictions