

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.

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

Date(s) of Evaluation: 11-02-2019	Completed by: Clare Grey
Vendor Name, Address, Contact: Peak Performance Training Centers Inc. 4859 W Slauson Ave #380 Los Angeles Ca 90056, Contact Clare Grey	
Vendor Number: Hw0481; PW5868	
Service Type and Code: 515 Behavior Management, 110 Additional Support	

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<p><u>Federal Requirement #1:</u></p> <p><i>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: P.P.T.C offers a variety of community based volunteering opportunities however, without effective training in Person Centered Thinking and Planning, staff are not adequately skilled in engaging individuals in an effective way to determine the specific outings and activities the individual truly desires.</p>	
<p><u>Federal Requirement #2:</u></p> <p><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><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: All current program participants have a current I.P.P plan on file but the I.P.P does not indicate the different setting options that were considered prior to placement. Without P.C.T training or communication devices staff can only interpret, assume or guess the needs of individuals with limited means of expression.</p>	

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<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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.)?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: P.P.T.C. informs individuals of their rights to privacy, dignity, respect, and freedom verbally and in written form but for those individuals who cannot speak nor articulate, staff are compelled to make their own judgments about the individual's competence, potential and ability and learn. P.P.T.C lacks sufficient vetted communication devices to assist staff in communicating individual's rights in a manner which is clearly understood..</p>	
<p><u>Federal Requirement #4:</u> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Without P.C.T or communication devices, daily activities can become based upon staff's interpretation of what they think are the individuals' needs and preferences. Structure for adequate support so individuals are able to interact with those they choose to and participate in activities that interest them and that correspond with</p>	

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their I.P.P goals are only assumed and unintentionally taken for granted.

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: Currently P.P.T.C can only rely on substandard supports to assist individuals in choosing which staff they wish to provide their care to the extent that alternative staff members are available. Individuals would be better able to voice their preferences and concerns and /or modify their services with assistive communication technology as needed and facilitation from staff trained in Person Centered Thinking approach.

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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:

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?

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

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 requirement? ☐ Yes ☐ No

Please explain: [Click or tap here to enter text.](#)

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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: [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 requirement? ☐ Yes ☐ No

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 requirement? ☐ Yes ☐ No

Please explain: [Click or tap here to enter text.](#)

**Home and Community-Based Services (HCBS) Rules
CONCEPT FORM****CONTACT INFORMATION**

Contact Name: Clare Grey
Contact Phone Number: 310-809-3551
Email Address: clareg@pptcenters.com

ACKNOWLEDGEMENT

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

☒ I AGREE

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

P.P.T.C	Westside Regional Center
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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.

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Vendor number(s)	Peak Performance Training Center
Primary regional center	HW0481, PW5868
Service type(s)	Westside Regional Center
Service code(s)	515, 110
Number of consumers currently served	55 Behavior Management (10 of which who have additional supports)
Current staff to consumer ratio	1:3 and 2:3 Behavior Management (515) (110)
<p>1. Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.</p> <p>Individuals in this program typically arrive on-site at 9:00 a.m. and participate in a curriculum specifically designed to address activities that promote self-advocacy and self-determination. Individuals are able to choose from a variety of preselected volunteer sites in the community or engage in arts and craft projects on-site. Although staff has received various training programs, no individual staff member is an expert in Person Centered Thinking and Planning. PCP and PCT training will ensure that all individuals are fully engaged in a person centered approach to make their own choices. Currently the schedule of activities is directed by staff with input from the consumers. Communication devices would assist individual's with limited speech to better express their interests.</p>	
Project Narrative Description:	
<p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p> <p>PPTC requests funds to train two key staff to become credentialed Person Centered Thinking and Planning trainers for PPTC. This increased knowledge would greatly improve staff's ability to more effectively and satisfactorily personalize supports and services for the individuals they serve. PPTC would like to have a Certified Professional PCP, PCT trainer come on site to provide a two -day training to ten key management staff. This training will enable management to implement better practices to engage individuals towards a more person centered approach when developing and implementing ISP Goals and objectives. Once the two key staff are fully Certified as Person Centered Thinking and Planning Professionals, PPTC will receive more consistent and reinforced person centered training for its staff where each staff can be monitored and tracked for progress and productivity. In addition, our Certified PCT Trainer could also provide training to care providers, families, and interested community members as needed. Upon completion of the PCT and PCP training for the key managers, PPTC will purchase communication devices such as the 30 pro-lo-quo2go and Ten I-Pads which will be used by individuals to assist them in communicating and articulating their thoughts and desires in a way staff will clearly understand and support</p>	

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through PCPT.
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 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input checked="" type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>
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.
<p>1: P.P.T.C offers a variety of community based volunteering or employment opportunities however, without effective training in Person Centered Thinking and Planning, staff is not adequately skilled in engaging individuals in an effective way to determine the specific outings and activities the individual truly desires.</p> <p>2: All current program participants have a current I.P.P plan on file but the I.P.P does not indicate the different setting options that were considered prior to placement. Without P.C.T training or communication devices staff can only interpret, assume or guess the needs of individuals with limited means of expression.</p> <p>3: P.P.T.C. informs individuals of their rights to privacy, dignity, respect, and freedom verbally and in written form but for those individuals who cannot speak nor articulate, staff are compelled to make their own judgments about the individual's competence, potential and ability to learn. P.P.T.C lacks sufficient vetted communication devices to assist staff in communicating individual's rights in a manner which is clearly understood.</p> <p>4: Without P.C.T or communication devices, daily activities can become based upon staff's interpretation of what they think are the individuals' needs and preferences. Structure for adequate support so individuals are able to interact with those they choose to and participate in activities that interest them and that correspond with their I.P.P goals are only assumed and unintentionally taken for granted.</p> <p>5: Currently P.P.T.C can only rely on substandard supports to assist individuals in choosing which staff they wish to provide their care to the extent that alternative staff members are available. Individuals would be better able to voice their preferences and concerns and /or modify their services with assistive communication technology as needed and facilitation from staff trained in Person Centered Thinking approach.</p>
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.
<p>PCT and PCP training and communication devices will ensure that; Reg1. Staff will be adequately trained to provide services in the community based on individual's needs, preferences and abilities and with the option to control their personal resources. Reg. 2 That all setting options are explained and considered prior to placement Reg. 3 Individuals rights to privacy, dignity and respect are communicated clearly and without coercion and restraint. Reg. 4 Will allow staff to offer more effective daily activities based on the individuals' needs and preferences. Thus, allowing them to interact with individuals they choose to both at home and in the community setting in alignment with their IPP</p>

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goals. **Reg. 5** Will ensure that staff is versed in strategies and techniques that enable individuals to have opportunities to modify their services and or voice their concerns of the scheduled review of services and better able to voice their preferences

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

1) Certify two staff as Credentialed PCT trainers and be able to demonstrate an understanding of a person centered approach, measured by following up with individual satisfaction. **2)** Upon funding, train ten key staff on PCT to enable them to promote individual initiative and independence in making life choices demonstrated by data collection, pre- and-post tests, and progress notes towards IPP Objectives. **3)** five families and care providers will receive more consistent person centered approach to service delivery. **4)** One key staff person will be designated to learn how to operate all communication devices and will be responsible to train the persons served and their assigned staff member, measured by Retention increased by 10%, staff job satisfaction, and degree to which objectives are reached.

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 from the persons served as well as their families was gathered throughout the year through briefings, team meetings, discussions with professionals, research, and satisfaction surveys. Results showed the need for better ways to communicate with individuals and training staff on how to listen more and how to best meet the needs of the individuals served in regards to full access to the community with greater satisfaction.

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

By having two Certified PCT Trainers, having ten staff attend a two- day training, and acquiring communication devices will ensure staff fully enable all individuals to express their own preferences, needs, and goals, while assuring privacy, dignity, and respect.

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

Having two Certified trainers will allow PPTC to provide continuous supports for several years beyond the funding years of the grant by providing ongoing training to all staff members as well as to their families and care providers which will ensure a consistent person centered environment with both the home and day services. By the conclusion of 2019-20 HCBS Funding, **1)** Over 75 percent of all staff will receive two day trainings on PCP that will in turn ensure that all individuals served will be supported by staff through PCP planning, and implementation. **2)** Two PPTC staff members will be half way through their 18 month training to become Person Centered Thinking trainers that will end by 2021. **3)** Over 10 individuals will be able to construct over 10 meaningful expressions, while another 15 will be able to identify a minimum of 5 concepts, and 5

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will be able to be fully engaged in using communication devices to express more intricate conversations.

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

1) An 18 month ending in 2022 Certified PCT Training through Helen Sanderson and Associates for two key staff, plus two laptops, projector, microphone system for the trainings. **Proposal 2) Two days within the first 90 days of funding received.** **Proposed cost for both types of training is \$40,788**, plus an additional staff cost at .5 FTE \$31,200.00.

3) Communication Devices (Purchase 20 Proloquo2go, 10 Tobii Dynavoice Communicator 5 communicated devices, two IPADs, microphone, overhead projector, and two computers) which will be used for trainings and for those individuals who are nonverbal who wish to use communication devices within the **first six months upon receipt of funding**. Estimated cost is \$24,712. Total HCBS Proposal Cost **\$96,700**.

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.

N/A

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) _____
 Disparity Funding ____ X No ____ Yes. If Yes, FY(s) _____
 CPP Funding ____ X No ____ Yes. If Yes FY(s) _____

 If yes to any question be sure to answer questions 13 and 14.

For providers who have received prior HCBS, Disparity or CPP Funding from DDS

13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.

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Peak Performance Training Centers, Inc. is an adult day service that offers a comprehensive evaluation and assessment system that measures individuals diagnosed with intellectual disabilities. The Assessment Coordinator, who was solely hired to fulfill the requirements of the grant, was responsible for conducting the entire assessment system to all of the individuals were served. The Assessment Coordinator implemented the Assessment System that was comprised of the following: Personal Profile, Employability Scale, Ideal Work, environments, Career Interest, Work Recommendations, Potential Employers, Action Checklist, and Self-Discovery

RESULTS.....

	Assessments	Completion	Placement	CIE	PIP	Pending
PTI	23	22	13	7	5	1

	Assessments	Completion	Placement	CIE	PIP	Pending
Percentage	100%	96%	59%	53%	38%	8%

	Assessments	Completion	Placement	CIE	PIP	Pending
SCLARC	24	3	1		1	3

	Assessments	Completion	Placement	CIE	PIP	Pending
Percentage	100%	12.5%	0%	0%	.04%%	23%

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 new request for funding is not redundant in that because PPTC does not have a Certified Person Centered Thinking and Planning Trainer. Nor does PPTC have any communication device to assist our staff in individuals express their desires, needs, and preferences.

HCBS CONCEPT BUDGET							
Vendor Name		Peak Performance training Centers Inc.					
Vendor Number(s)		HW0481;PW5868					
		Salary and Benefits	Year 1 Budget		Year 2 Budget		Total
			FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (salary + benefits)							
Trainer Travel expenses & accomodations		62400	0.50	\$ 31,200		\$ -	\$ 31,200
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Personnel Subtotal				\$ 31,200		\$ -	\$ 31,200
Operating expenses							
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
Operating Subtotal				\$ -		\$ -	\$ -
Administrative Expenses							
PCT 2 day training x 30 staff 2 x in one year							\$ -
PCT trainer certification x 2 staff 18 month				\$ 40,788			\$ 40,788
							\$ -
							\$ -
				\$ -			\$ -
							\$ -
							\$ -
							\$ -
Administrative Subtotal				\$ 40,788		\$ -	\$ 40,788
Capital expenses							
20 Proloquo2go @ 799.99				\$ 8,000			\$ 8,000
2 IPADS = 1800, plus tax				\$ 3,636			\$ 3,636
Overhead projector				\$ 2,000			\$ 2,000
10 Tobii Dynavox Communicator 5 @ 699.00 each				\$ 6,990			\$ 6,990
Microphone				\$ 450			\$ 450
two computers				\$ 3,636			\$ 3,636
							\$ -
							\$ -
							\$ -
Capital Subtotal				\$ 24,712		\$ -	\$ 24,712
Total Concept Cost				\$ 96,700		\$ -	\$ 96,700

See Attachment F for budget details and restrictions

PHASE 1: Leadership Alignment	HOURS	DAYS	RATE	CONSULTANT	MATERIALS	TRAVEL	ADMIN 10%	TOTAL
Executive Leadership Session (2 days over time to reflect on role of leadership and org i	2		\$ 1,500.00	\$ 3,000.00	\$ 300.00	\$ 3,000.00	\$ 630.00	\$ 6,930.00
PHASE 2: Credentialing 4 PCT Trainers								
Orientation - PCT Trainer Candidate - using Zoom	3		\$ 200.00	\$ 600.00	\$ 360.00		\$ 96.00	\$ 1,056.00
Attend PCT Training - participant (outside of this contract)							\$ -	\$ -
Elearning - PCT for Everyone w/ Top Tips Booklet					\$ 300.00		\$ 30.00	\$ 330.00
Trainer Candidate observes with manual - Date/location TBD		2	1500	\$ 3,000.00	\$ 288.00	\$ 1,500.00	\$ 478.80	\$ 5,266.80
Coaching by Mentor Trainer 16 hrs per candidate	64.00		\$ 200.00	\$ 12,800.00			\$ 1,280.00	\$ 14,080.00
PCT Training Demonstration 1 - 24 ppl - location TBD		4	1500	\$ 6,000.00	\$ 576.00	\$ 3,000.00	\$ 957.60	\$ 10,533.60
PCT Training Demonstration 2 - 24 ppl - location TBD		4	1500	\$ 6,000.00	\$ 576.00	\$ 3,000.00	\$ 957.60	\$ 10,533.60
PCT Training Demonstration 3 - 24 ppl - location TBD		4	1500	\$ 6,000.00	\$ 576.00	\$ 3,000.00	\$ 957.60	\$ 10,533.60
TOTAL	67.00	14.00		\$ 34,400.00	\$ 2,676.00	\$ 10,500.00	\$ 4,757.60	\$ 52,333.60
Cost per Trainer Candidate (4)	4.00							\$ 13,083.40
PHASE 3: Implementing Person Centered Person Centered Approaches								
Group Coaching with Team 15 - remote coaching for program manager	12.00		\$ 200.00	\$ 2,400.00	\$ 150.00	\$ -	\$ 255.00	\$ 2,805.00
Coaching/Leaders Follow up Support		5	\$ 1,500.00	\$ 7,500.00	\$ 300.00	\$ 7,500.00	\$ 15,300.00	\$ 30,600.00
PHASE 4: Person Centered Plan Facilitation - in person								
Two day overview of plan facilitation with 12 program managers		2	\$ 1,500.00	\$ 3,000.00	\$ 960.00	\$ 1,500.00	\$ 546.00	\$ 6,006.00
Facilitating One Page Profiles and Person Centered Reviews per person		1	\$ 3,625.00	\$ 3,625.00			\$ 362.50	\$ 3,987.50
PHASE 5: Other training and coaching resources								
MENU of Optional Follow Up Support and Training								
Individual HCBS coaching with site visit (cost is per 2 program sites per visit)		1	\$ 1,500.00	\$ 1,500.00	\$ 1,200.00	\$ 1,500.00	\$ 420.00	\$ 4,620.00
Personalizing support with person centered approaches - Webinar & per person		1	\$ 1,200.00	\$ 1,200.00	\$ 325.00		\$ 152.50	\$ 1,677.50
Five 2-hour webinars plus elearning and weekly zoom coaching support over six months								
1. One Page Profiles to Person Centered Support Plans								
2. Person Centered Approach to Risk								
3. Community Mapping								
4. Employment Planning through Person Centered Discovery								
5. Just Enough Support - Using Support Sequence and Integrated Star								
6. Progress for Providers								
Building Person Centered Teams and Organizations - Webinar & Coac per person		1	\$ 1,200.00	\$ 1,200.00	\$ 325.00		\$ 152.50	\$ 1,677.50
Five 2-hour webinars plus elearning and weekly zoom coaching support over six months								
1. Person Centered Teams								
2. Positive and Productive Meetings								
3. Person Centered Supervision								
4. Coaching to support a person centered team culture								
5. Working Together for Change								

6. What else is Possible? Exploring Innovation

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visit hsaonlinelearning.org for more information

Pricing starts at \$85 per person with price breaks for groups

PROPOSED TIMELINE for PHASE 1 (other Phases to follow as requested)

Attend PCT Training	January-March 2020				
Trainer Candidate Orientation	July				
Coaching to develop portfolio 2x/mo	July '20-Aug '21				
Trainer Candidates observe mentor delivering training	October				
Coaching to deliver curriculum	Date TBD	Day 1	Date TBD	Day 2	July '20-Sept '21
Demonstration 1 - Trainers A, B	Date TBD	Day 1	Date TBD	Day 2	January 2020
Demonstration 1 - Trainers B, C	Date TBD	Day 1	Date TBD	Day 2	January 2020
Demonstration 2 - Trainers A, B	Date TBD	Day 1	Date TBD	Day 2	March 2020
Demonstration 2 - Trainers C, D	Date TBD	Day 1	Date TBD	Day 2	March 2020
Demonstration 3 - Trainers A, B	Date TBD	Day 1	Date TBD	Day 2	May 2020
Demonstration 3 - Trainers C, D	Date TBD	Day 1	Date TBD	Day 2	

PAYMENT SCHEDULE for PHASE 2 ONLY (PCT Credentialing)

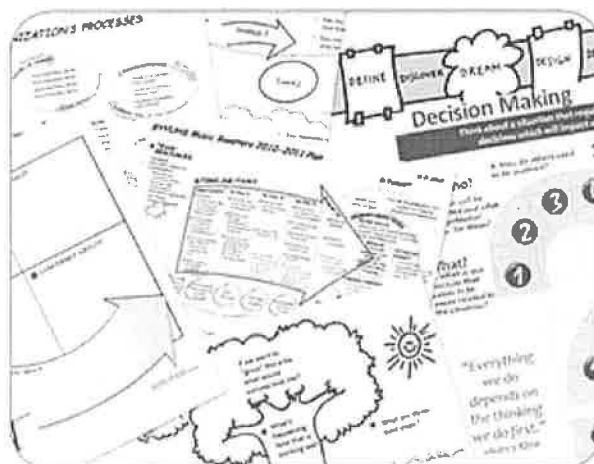
		\$	52,333.60
Payment 1: Completion of Orientation	\$ 13,083.40	\$	39,250.20
Payment 2: Completion of Demonstration 1	\$ 13,083.40	\$	26,166.80
Payment 3: Completion of Demonstration 2	\$ 13,083.40	\$	13,083.40
Payment 4: Completion of Demonstration 3/PCD	\$ 13,083.40	\$	-

Addendum

Person Centered Thinking and Planning



5 Phases of Strategic Planning



Strategic Planning simplified! We put together a user friendly overview of the strategic planning process with key questions to consider during five different phases. This is a great place to start if you're thinking about setting the strategic direction of your organization. We use a variety of visual facilitative techniques to hear multiple perspectives, generate creativity and inspire better solutions. We can help you customize each phase to suit your needs.

Phase 1: Planning the Plan

- What is the purpose of engaging in a strategic planning process?
- What period of time will the strategic plan support? 3 yrs? 5 yrs? 10 yrs?
- Who should be involved in the planning process?
- Who are your stakeholders (anyone who is responsible for, affected by or has a vested interest in the outcome of your decisions)
- What process and methodology will be used?
- How will you provide opportunity for stakeholder input?
- What leadership structure will be used to plan, facilitate and implement?

Phase 2: Information Gathering & Strategic Analysis

- What is the current fiscal, social and political context for your organization?
- What are the internal strengths and challenges of your organization?
- What are the external opportunities and barriers for your organization?
- What is important to the people you serve?
- How can this input inform your strategic thinking?

Phase 3: Setting Strategic Priorities

- Do your Mission, Vision and Values Statements need to be updated?
- Does your Board and/Staff need to renew its Purpose Statement?
- What is your desired future state, based on what you have learned in the Information Gathering & Strategic Analysis Phase?
- What are five critical focus areas/priorities for the next 3-5 years?
- How will you know when you have been successful in these five areas? How will you measure progress?

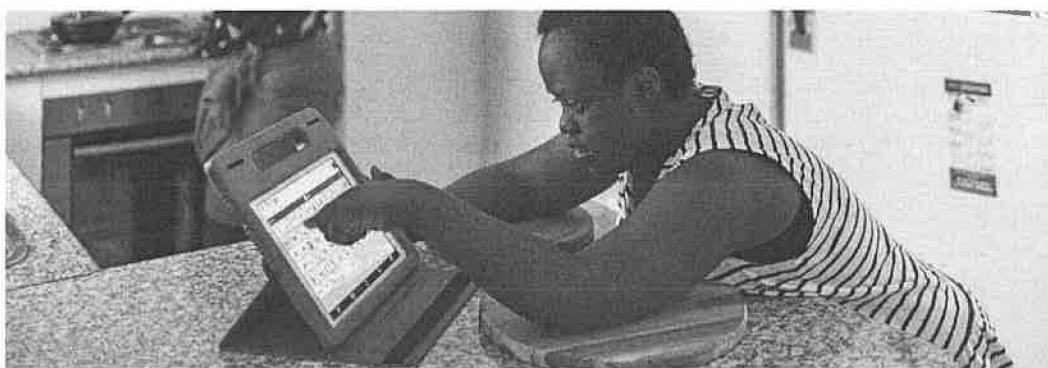
Phase 4: Developing Strategic Actions

- What measurable goals are needed to move you toward your desired future state?
- What operational steps will be documented in an action plan (who will do what, by when?)
- What annual milestones will be observed along the way to let you know if you are on track?
- Are you confident that your plan is realistic and achievable? It should be a stretch but not impossible.

Phase 5: Communicating, Managing and Evaluating the Plan

- How will you ensure that the Strategic Plan is a user-friendly working document?
- How will the Strategic Plan be transparent and visible to the community you serve?
- How will progress be evaluated and reported? How will you redirect if needed?
- How will the Strategic Plan be embedded in the work of the Board and Staff? (ex: job descriptions, performance evaluations, board development topics, etc)
- How willing are you to engage in a 3-year cycle to update/renew your Strategic Plan?

Proloquo2Go

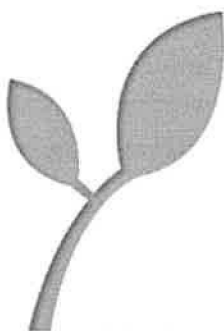


Hero

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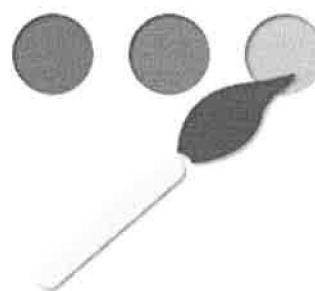
Studies show that just 200-400 words make up 80% of what we say. Known as core words, they act as the basis of Proloquo2Go. Users can develop from single words to full grammatical sentences in



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