



Department of Developmental Services

Home and Community-Based Services

Provider Compliance



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4090 Truxel Road, Suite 250, Sacramento, CA 95834

**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 <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/>.

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

Date(s) of Evaluation: 2/5/21	Completed by Scott Barr, Executive Director
Vendor Name: Res-Care California, Inc. dba RCCA Services Address: 4090 Truxel Road, Suite 250, Sacramento, CA 95834 Contact: Scott Bar, 916-928-0220 ext. 14	
Vendor Number: H64144	
Service Type and Code: Day Program 515 Behavior Management Program	

<p><u>Federal Requirement #1:</u> <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Res-Care California, Inc. which will do business in California as RCCA Services.</p> <p>Person-centered planning is at heart of RCCA’s Auburn CAP. Driven by the individual and/or their representative, we develop an individual program plan (IPP) in which their clinical and support needs blend with their strengths, preferences, and desired outcomes, to form a plan reflecting what the individual finds important in the activities they pursue during Day program and their comfort level of involvement in the community.</p> <p>The population we serve in Auburn has severe to profound intellectual and developmental disabilities (IDD), and most are non-ambulatory. Our day program ensures each person receives services they need that fit their preferences and abilities. The individuals we serve participate in community integration activities as they choose and as fit with their service plans. We incorporate individualized pre-vocational skills into their service plans as they show interest and aptitude for them; most do not have the level of comprehension to sustain gainful employment.</p> <p>Learning to have control over their own resources is part of their care plans; we teach money use (paying for items and receiving change, monetary values, etc.), as well as other exchanges, such as using bus passes, movie tickets, or other tokens to exchange for goods or services.</p> <p>Our location is situated in a semi-residential area, near shops, salons, grocery stores, banks, churches, parks, and medical care providers. We ensure access to community services by engaging individuals in trips outside the facility (when not under COVID-10 public health emergency (PHE) restrictions), such as classes or programs at the local senior centers, shopping, restaurants, festivals and other community events, as well as volunteer opportunities. Our parent company, Res-Care, Inc. dba BrightSpring Health Services, hosts an annual “Community Service Challenge,” in which each operation competes for first place in three categories, fundraising, providing volunteer service hours, or donating goods, to a charity (or several charities) the individuals choose to support throughout the year.</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 individual’s 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: RCCA’s current day program complies with all regulations regarding IPPs and consumer freedom of choice. Participants in the day program have options to engage in the greater community through many community activities. Most participants’ comprehension abilities preclude competitive employment; however, they can choose to practice pre-vocational skills as part of their person-centered IPP.</p> <p>The current public health emergency caused by COVID-19 has impaired our ability to provide full person-centered services. We offer alternative service delivery (ASD) and individualized remote services through in-home activity bags, distributed weekly to our participants. As most are residents of group homes, the group home staff assists with how the participants engage with the activities in the bag and help them attend our Zoom meetings and participate in phone calls that round out the program while restricted to in-home habilitation services. The funding from this grant will improve our program’s person-centered planning by incorporating more employment/vocational components, as well as other program enhancements.</p> <p>After the COVID-19 PHE, participants in the day program will have options to engage in the greater community through many community activities. Most participants’ comprehension abilities preclude competitive employment; however, they can choose to practice pre-vocational skills as part of their person-centered IPP.</p>	
<p><u>Federal Requirement #3:</u></p> <p><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?

	<ul style="list-style-type: none"> 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.)?
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Does the service and/or program meet this requirement? Yes No
 Please explain: RCCA Services complies with all regulations regarding protecting individuals' rights and privacy. We instruct our Direct Support Professionals (DSP) to communicate in ways the consumer understands; however, we need to add additional assistive technology tools and equipment to give each person a set and prevent sharing of equipment that requires touching.

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 individual's needs and preferences?
- Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings?
- Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?

Does the service and/or program meet this requirement? Yes No
 Please explain: The Auburn CAP Day Program, 11960 Heritage Oaks Place, Suite 10, Auburn, CA 95603, currently serves approximately 35 individuals in alternate in-home services. The challenges associated with maintaining this physical location result from a lack of qualified applicants for the direct care positions we need to support the participants. When the pandemic restrictions started, we closed this facility and have served all the participants at their residences with weekly activity bags, zoom meeting, and phone calls, without the support of direct care staff.

Our current program meets the federal requirement; however, we seek funding to support training for two administrative staff to become trainers for person-centered thinking and PCT compliance. These two administrators will begin the process of recruiting and hiring up to 20 new DSPs – 10 for each day program (Auburn and Sacramento) at a staggered hire of two per month beginning September 2021 – and training them in PCT compliance. Until such hiring and training is complete, we will continue to serve consumers in their residences. We hope to find a new location nearby Auburn to accommodate an on-site program.

To achieve compliance with the new federal guidelines, during FY2, we we propose to identify and lease a new location more fitting to our person-centered plan. We will

modify the space, with landlord approval and support, to accommodate a program using themed stations to enhance community integration and personal choice of activities to achieve individuals' IPP goals. The person-centered, themed stations would provide additional opportunities for each person to engage in activities of their choice, when they choose, and with whom they choose to interact. The stations also provide them with opportunities to practice skills that correspond to their IPP goals, as well as expand their interests in new directions, and affords them a variety of options for engagement similar to community integration at a time when going out into the community is restricted due to the pandemic.

The themed stations will be similar to a program run by our sister agency in Ohio, Sonny Spot. Named after a generous donor, Sonny Spot features stations that offer individuals opportunities to explore their interests, participate in a variety of person-centered activities, engage in skill building and sensory experiences, and relax in customized spaces out of their wheelchairs. The space will include the advanced technology for video streaming, high-speed internet access, and multiple computer stations to practice vocational skills.

Our plan is to divide the existing space into themed stations: gardening, arts and crafts, music room, video theater, sensory experiences (both calming and stimulating), sports/exercise, kitchen/café/snack store, computer lab, grooming salon, library, and a multipurpose/meeting/training space. To achieve this, we need significant interior modifications to install walls or dividers to create the stations and comply with infection control regulations. Each station would have equipment appropriate to its theme that can be sanitized between uses. Air purifiers in each station will reduce air flow contaminants from spreading between areas. Outside each station, we will have carts containing sanitation supplies, PPE, and covered trash receptacles.

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: For those individuals able to express an opinion, we follow their choice of staff person to assist them whenever possible within available staff. Individuals' guardians/families are able to express opinions and request staff they feel interact best with their loved one. We monitor interactions regularly between staff and the individual served to ensure compatibility and make changes that are in the best interests of the individual outside the scheduled review of services, if necessary.

Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

<p><u>Federal Requirement #6:</u> <i>The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord/tenant law.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: N/A; non-residential program</p>	
<p><u>Federal Requirement #7:</u> <i>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.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: N/A; non-residential program</p>	

<p><u>Federal Requirement #8:</u> <i>Individuals have the freedom and support to control their own schedules and activities and have access to food at any time.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: N/A; non-residential program</p>	
<p><u>Federal Requirement #9:</u> <i>Individuals are able to have visitors of their choosing at any time.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: N/A; non-residential program</p>	
<p><u>Federal Requirement #10:</u> <i>The setting is physically accessible to the individual.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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: Our day program does not technically fall under this regulation, as it is a non-residential program; however, we ensure accessibility to the entire facility's non-staff-only areas for every individual. Our compliance modifications, as mentioned above, would ensure more flexibility for individuals to experience movement unrestricted by their wheelchairs in the sports/exercise station, the multipurpose area, and other stations, whenever possible.

CONTACT INFORMATION

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ACKNOWLEDGEMENT

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

I AGREE

CONCEPT FORM

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 backup 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.
- Using a form from previous years will negatively impact a concept score, so please ensure the current FY 20-21 form is 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 and opportunities.

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 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 a sustainable plan 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 <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/>.

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

Vendor name	RCCA Auburn Community Access Program
Vendor number(s)	H64144
Primary regional center	Alta Regional Center
Service type(s)	Day Program
Service code(s)	Day Program 515 Behavior Management Program
Number of consumers typically and currently served	35
Typical and current staff-to-consumer ratio	1:3
<p>1. Please provide a brief description of the service/setting. Include what a typical day consists of during regular program as well as how services are currently being provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.</p> <p>The Auburn CAP serves up to 35 individuals in their residential settings due to COVID-19 PHE restrictions. A typical day starts between 8:00-9:00am; activities from 9:00-11:30am, with breaks for toileting, snacks, and hydration; lunch prep and dining from 11:30-12:30pm; more activities from 12:30 to 2:30, with similar breaks, and an exercise activity from 2:30-3:00pm, ending at 3:00pm. We provide supervision and support at a 1:3 ratio for both group and individual activities. Trips off-site, scheduled at least once a week when not under pandemic restrictions, may require 1:1 support but typically three individuals can go with one DSP. Each person may enjoy an activity singly or with a group of other interested participants; each chooses their involvement level.</p> <p>Choice of activities can be modified to fit each person’s personal preferences and abilities. The goals and objectives in their IPPs inform the schedule created for each participant, always incorporating skill-building, whether pre-vocational or activities of daily living, as well as social interaction and community involvement, whenever possible.</p> <p>The current pandemic-restricted program involves creating and delivering weekly activity bags for each person served to their residence. Through person-centered planning, we design activities for each person, specific to their likes and fitting with their ADL objectives, relating to sensory needs, money management, exercise, baking, music, arts and crafts, group projects, and monthly art projects. We offer zoom calls and weekly phone check-ins for each person served.</p> <p>We plan to implement our on-site, themed station concept in FY2, at a new location within 30 minutes’ travel time from Auburn. We will offer individuals more opportunities to engage in real-world-style activities while under pandemic restrictions, allowing them to practice skills and social interactions of their choice. People doing at-home Day Program will use the same themed station concept through person-centered activities provided in the activity box we create for each participant. In addition, the facility will be available to eligible individuals living in family home or supervised independent living situations who wish to learn and practice pre-vocational and vocational skills the program can offer.</p> <p>Project Narrative Description: While filling out this section, reflect on how services are typically provided and how that might have changed in the past year. Think about what has been learned in the past year and how that might shape services going forward. Funding awarded through this concept can span the course of up to two years which would allow time to shape services to be more person-centered and align with the HCBS federal requirements.</p>	
<p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p> <p>To enhance the Day Program in FY1 and remain compliant with federal requirements, we</p>	

CONCEPT FORM

must first find qualified staff in sufficient numbers to maintain our 1:3 ratio of staff to consumers then train them appropriately in PCT. Second, we must find a location near Auburn where our desired program model will be successful. In FY2, we wish to model our program after a sister operation in Cincinnati, Ohio, in which themed stations reflecting real-world locations and activities can give individuals experiences of interacting with the larger community. The themes replicate events and tasks that people with or without disabilities engage in regularly, such as checking out books at the library, gardening in their yards, visiting the barber or beauty salon, watching videos or playing video games, using social media and computers, purchasing items at a store, etc.

In the past year, we have learned how to improve support to individuals served through remote services, as well as gained a better understanding of each person, their individual needs, and what they really enjoy doing. We learned that what works for one person does not necessarily work for another in promoting independence; thus, we use a range of supplies to engage with each person served. By focusing on individuals' needs, our interaction and relationships with families has improved over the past year, enhancing the services their loved ones receive. We believe our themed station concept will provide that focus, enhancing the community access this program is designed to deliver.

3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.

1 _____ 2 **X** 3 **X** 4 **X** 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.

Two barriers affect our ability to maintain compliance with federal requirements: a lack of qualified applicants in the Auburn community to fill our staffing needs, and pandemic restrictions preventing community integration activities. Without sufficient staff, well-trained in PCT, we cannot maintain our 1:3 ratio of staff to consumers required for safe supervision and support. The COVID-19 PHE has exacerbated our ability to engage participants in greater community activities, not only from the problem of staffing, but also because the participants are a greater risk of infection while interacting with community members.

We believe the solutions are:

To move our on-site day program outside the borders of the Auburn community into areas with larger populations, thus reaching a greater number of eligible candidates to become DSPs

Designing an on-site program that replicates many of the real-world experiences of community integration while reducing or eliminating potential infection that comes from engaging with the larger community

The person-centered training will give our staff greater understanding of how to discover what is important and valued by the individuals served, how to implement those interests into service plans, and how to make modifications to those plans as a person's interests fluctuate over time

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 by March 2023.

By the March 2023 deadline, we expect to have hired and trained five additional DSPs for the Day program, as well as increasing staff as our program census increases, to maintain our 1:3 staffing ratio. The themed station concept of our on-site facility will improve our ability to provide full person-centered programming, with individuals engaging in real-world activities as their personal choices and desires dictate, in a safe, easily modified, infection-

CONCEPT FORM

controlled atmosphere. The person-centered training our staff will engage in will ensure they learn and understand what is important to the people served and put those interests first as they carry out an individual’s service plan.

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

The proposed objectives of the concept are:
 Provide real-world-style experiences during pandemic restrictions
 Offer individualized activities that more closely match the interests of people served
 Enhance variety of activities in which individuals can practice skills, achieve IPP goals, and increase independence

The proposed outcomes will be:
 Increase number of daily uses of ADLs and introduce a greater variety of experiences
 Identify new interests an individual develops through interaction with the themed stations and design individualized activities to build upon those interests
 Identify activities in which an individual shows aptitude and encourage pre-vocational skill-building

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.

Our goal as a community access program is to provide our consumers with a goal-based plan for each person, with emphasis on real community activities. Many of our consumers are non-verbal; however, we have learned through the activity bags used for our alternate day program activities during 2020 that they enjoy a range of multiple choices activities that are like real life activities. The themed stations can provide our consumers with the ability to receive that range of experiences in one location during pandemic restrictions, and use those experiences when they can interact successfully in the community post-COVID.

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

The themed stations concept will enable us to provide more person-centered services because we will be engaging with each person at each station, learning more about what interests them, what they like to do, what they find difficult or boring, and how they choose to interact with the theme. We anticipate that not every person will enjoy every station, so that will give us an aggregate view of a station’s value to the program; we can modify or replace stations depending on how the participants receive them. In addition, we can tailor one person’s interactions within the theme to link more closely with their preferences. For example, while a person may not want to have their head touched, they might enjoy getting a manicure, or brushing someone else’s hair.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2020-21 HCBS Funding.

We intend for the funding to bring our program to a best-in-class level of performance and consumer satisfaction. The support we receive from our parent company, Res-Care, Inc. dba BrightSpring Health Services, will ensure we can continue not only to maintain the project at the conclusion of HCBS funding, but continuously improve services through our quality assurance process. The enhanced concept has continual evaluation of its structure and engagement factors built in to ensure the overall continued sustainability and success of the program.

CONCEPT FORM

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). This information can be found at this [link](#).

During FY1, we will focus on training two administrative staff to become certified Trainers in Person-Centered-Thinking. Our budget includes estimated operating costs for this training, as provided by SDA, LLC, at a total of \$27,618. In addition, these two staff will start recruiting and hiring new DSPs with staggered hire dates beginning in September 2021. Budgeted recruitment and outreach costs are \$600 for FY1. Indirect costs related to corporate, regional, and local core office support are in administrative expenses at 15% of operating costs of \$28,218 for a total of \$4,233. Total for our FY1 budget is \$32,450. In FY2, we plan to lease a location to accommodate up to 11 themed stations to enhance community integration and personal choice of activities to achieve individuals' IPP goals. We plan to create an activity box for each individual, for infection control, containing supplies for engaging in each themed room; 35 activity boxes at \$1,015 each equalling \$35,525 in operating costs. We have included supplies, furnishings, and equipment appropriate for each themed room, such as recliners, craft tables, gardening tables, salon equipment, exercise equipment, under \$5,000 each. Costs include any required modification to ensure that equipment and supplies meet safety standards. Budget for all themed rooms is \$102,500. Five air purifiers at \$400 equal \$2,000. Continued outreach and recruiting efforts equal \$600. Total operating costs in FY1 equal \$140,625. Indirect costs for corporate, regional, and local core office support have been included at 15% of operating expenses for a total of \$21,094 in FY2. We anticipate significant structural modifications to meet consumers' needs and ensure ADA Compliance, so an estimated \$200,000 in capital costs is included. FY2 budget is \$361,719.

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the timeframe of the requested funding, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program timeframe; up to two years.

Not applicable; all costs will be incurred during the grant period.

12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
	Disparity Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
	CPP Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes.	If Yes, FY(s) _____
	CRDP Funding	<input checked="" type="checkbox"/> No	<input type="checkbox"/> 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, CPP or CRDP 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.

Not applicable

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.

Not applicable

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

Attachment C

Attachment C

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

HCBS CONCEPT BUDGET	
Vendor Name	Res-Care California, Inc. dba RCCA Services
Vendor Number(s)	H64144

	Year 1 Budget			Year 2 Budget		Total
	Wage and Benefits	FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Direct Service Professional			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ -		\$ -	\$ -
Operating expenses						
Person Centered Thinking Training (Trainers)			\$ 27,618			\$ 27,618
Client Activity Boxes for Themed Rooms					\$ 35,525	\$ 35,525
Supplies, Furnishings and Equipment					\$ 102,500	\$ 102,500
Small Air Purifiers					\$ 2,000	\$ 2,000
Outreach and Recruitment Costs			\$ 600		\$ 600	\$ 1,200
						\$ -
						\$ -
						\$ -
						\$ -
Operating Subtotal			\$ 28,218		\$ 140,625	\$ 168,843
Administrative Expenses						
Indirect - 15% of Operating Costs			\$ 4,233		\$ 21,094	\$ 25,326
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Administrative Subtotal			\$ 4,233		\$ 21,094	\$ 25,326
Capital expenses						
Building Modifications					\$ 200,000	\$ 200,000
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Capital Subtotal			\$ -		\$ 200,000	\$ 200,000
Total Concept Cost			\$ 32,450		\$ 361,719	\$ 394,169

See Attachment F for budget details and restrictions