

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: February 09, 2021	Completed by: Ziba Nassab, Psy. D, Director of Clinical Services and Elicet Gonzalez, M.S., MFT Associate
Vendor Name, Address, Contact: Holding Hands, Inc., Pediatric and Adult Services has 4 Centers: Headquarters: 2115 Beverly Blvd. Los Angeles, CA 92115 Ziba Nassab, Psy. D, Director of Clinical Services	
Vendor Number: Early Intervention Social Skills (Ages 3-6): PD2992 & PL1687; School Age Social Skills Training (Ages 7-12): PD1047 & PL1682; PEERS Social Skills Training (Ages 13-19): PD2978 & PD1683; SEEDS Adult Social Skills Training (Ages 19-40): PD3352 & PD3353 Social Skills Developmental Programs (Ages 3-18): PD1822	
Service Type and Code: Socialization Training Program 028	

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

Federal Requirement #1:

The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.

Guidance:

- Do individuals receive services in the community based on their needs, preferences and abilities?
- Does the individual participate in outings and activities in the community as part of his or her plan for services?
- If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?
- Do individuals have the option to control their personal resources, as appropriate?

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

Holding Hands Inc. provides on-going socialization programs for children, youth, adults and families between 3 and 40 years old. All our programs are integrated in, and supports full access for all individuals in our community. Currently our social skills programs are center based, however families have opted to HIPAA Compliant Telehealth through home in order to continue services through the unprecedented COVID-19 pandemic. Our four centers provide services to everyone in the community. Adults with families who have medical issues/limitations, lack transportation, access to resources, limited financial resources, have opted for Telehealth services. We lack the resources for the equipment necessary in order to provide the most meaningful choice based programs such as Hybrid Social Skills Programs that provides both telehealth and center/community options. Limited resources makes it difficult to accommodate multiple groups. We lack the funds, assistive technology and electronic devices.

Our immediate goal is to ensure all the individuals we serve have access to choice base programs and that our staff is skilled and trained in providing Hybrid Social Skills Programs that provides both Telehealth and center/community options. An added positive providing Hybrid Social Skills Programs will allow Holding Hands, Inc. to serve and strengthen the community at large by providing these services at home. The requested change in service delivery will significantly impact individuals and families in offering more choices or options and opportunities in how they received their social skills programs for community engagement and inclusion in innovative ways. In addition, we would be able to prioritize the preferences of individuals served utilizing feedback in developing this service concept. Lastly, Hybrid Social Skills Programs could remain beyond the COVID-19 State of Emergency for a more creative service delivery options.

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

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 individual's IPP document the different setting options that were considered prior to selecting this setting?

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

Please explain: Holding Hands Inc. provides year-round socialization programs for children, youth, adults and families between 3 and 40 years old. All our social skills programs are integrated in, and supports full access for all individuals and families in our community. Socialization programs foster individual choice, options, opportunities, independence and autonomy. We lack adequate funds and resources to train 5 full time executive salaried employees in Person Centered-Thinking/Planning (PCT) advanced trained and developed staffing needed to enhance client individualized choice program approach. We provide the most meaningful, choice based programs we can within the constraints of staffing ratios, supervision/observation requirements, costs, families' limited resources and Regional Center Funding. Our staff would significantly benefit from Person-Centered Planning/Thinking and training regarding the HCBS rules in order to develop individualized support plan that will optimize individual choice or options and independence. We need 5 full time executive salaried employees Certified Person Centered Thinking/Planning Train-the-Trainer staff members to conduct PCT training to all our 150 staff in our 4 centers in order to enhance individual independence, choices or options and opportunities. The PCT training certification is beyond our current budget, as it involves: pre-requisites, Stage 1-Agreement & practice; Stage 2- Preparing to Train; Stage 3- deliver the training. The certification, credential and maintaining PCT Trainer Certification needs to be maintained by continuing long term annual training. Our ultimate goal is to ensure that all Holding Hands, Inc. 150 staff in all locations are skilled and trained in Person Centered Thinking/Planning principles and practices to incorporate individual interests, choices or options and support needs in the person centers 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?

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

	<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.)?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Holding Hands ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint and extensively documented in the program design, policies and procedures and staff training. All our social skills programs are integrated in, and supports full access for all individuals in our community. Our social skills programs foster individual choice or options, independence and autonomy. We lack adequate funds and resources to train 5 full time executive salaried employees in CPI'S train-the-trainer certified instructors and its advanced program which offer an array of curriculums that can meet the needs of the individuals and families we serve to support that emphasizes on crisis intervention and de-escalation techniques to better assist our staff with supporting each individual we serve in a more individualized basis CPI was established for human service professionals to address the need for training in safe, respectful, noninvasive methods for managing disruptive and assaultive behavior in a way that is compatible with staff's duty to provide the best possible care. Receiving funds to train 5 full time staff in understanding effective communication and human physiology during aggressive moments, as well as the core philosophy of maintaining Care, Welfare, Safety, and Security, provides the trainings solid foundation. We need 5 full time executive salaried employees trained and certified in CPI train the trainer to train all staff in our 4 centers in order to enhance individual independence choices or options and opportunities and be integrated and included in the community. Our ultimate goal is to ensure that all Holding Hands, Inc. 150 staff in all 4 centers are skilled and certified in Nonviolent Crisis Intervention giving staff an ability to problem solve and support individuals and families served on a more person-center interventions to promote community integration. In addition, we can offer the training to individuals, families, current/new staff, community in English and Spanish to strengthen the community at large in feeling confident by utilizing more person center interventions with individuals with negative or behavioral challenges in order to be socially integrated into the community. We currently lack the resources to certify 5 full time staff and to provide educational trainings on CPI nonviolent crisis interventions to current/new staff, individuals, families regarding the advantages of implementing person center deescalating interventions to provide the safest environment for individuals, families and staff.</p>	
<p><u>Federal Requirement #4:</u></p> <p><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 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?

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

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

Please explain:

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: Families and clients are given group time/day options that matches the need of the individual and they can choose the best day/time that works for them. If they are unhappy with services or with a staff member, they can contact the clinical program coordinator for a 1:1 meeting. Holding Hands, Inc. has a grievance process set in place in all programs.

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: N/A

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

<p><u>Federal Requirement #7:</u> <i>Each individual has privacy in his/her sleeping or living unit:</i></p> <ul style="list-style-type: none"> . <i>Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.</i> . <i>Individuals sharing units have a choice of roommates in that setting.</i> . <i>Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i> 	<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</p> <p>Please explain: N/A</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</p> <p>Please explain: Families and clients are given group time/day options that matches the need of the individual and they can choose the best day/time that works for them.</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</p> <p>Please explain:N/A</p>	

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

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: All 4 Holding Hand, Inc. centers are physically accessible to the individual and families we serve. We have large handicap therapy rooms and restrooms.

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

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

Home and Community-Based Services (HCBS) Rules 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.

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

Vendor name	Holding Hands, Inc., Pediatric and Adult Services has 4 Centers: Headquarters: 2115 Beverly Blvd. Los Angeles, CA 92115
Vendor number(s)	Early Intervention Social Skills (Ages 3-6): PD2992 & PL1687; School Age Social Skills Training (Ages 7-12): PD1047 & PL1682; PEERS Social Skills Training (Ages 13-19): PD2978 & PD1683; SEEDS Adult Social Skills Training (Ages 19-40): PD3352 & PD3353 Social Skills Developmental Program (Ages 3-18): PD1822
Primary regional center	Frank D. Lanterman Regional Center (FDLRC)
Service type(s)	Socialization Training
Service code(s)	028
Number of consumers typically and currently served	50
Typical and current staff- to-consumer ratio	1:5
<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>Holding Hands, Inc. Pediatric and Adult Services is an outpatient clinic that provides services to the community. Both on site and in-home. Holding Hands, Inc. centers serves residents Los Angeles, Whittier, Burbank and Calabasas area. Established in 2004, the centers features 4 centers which include private therapy rooms, large training rooms, parent training rooms with handicap accessible rooms. Large rest rooms, which are handicap accessible. The centers feature indoor large play area, sensory gym, large toy room selection. The buildings provide services to the public in addition to regional center consumers. The services are provided in buildings in close proximity to adult healthcare centers, medical center, Universities, stores, restaurants. In addition, the centers are in close proximity to elementary, middle and high schools within a close radius.</p> <p>Holding Hands Inc. provides year round socialization programs for children, youth, adults and families between 3 and 40 years old. All our social skills programs are integrated in, and supports full access for all individuals in our community. Our four centers (Los Angeles, Whittier, Burbank and Calabasas) provide services to everyone in the community. All program incorporates activities based on client's individual interest, preferences, choices or options. The center has training programs available 6 days a week, Monday through Saturday and operates afternoon and morning hours. The trainings incorporate visual schedules, which are large front print, and basic sign language. Holding Hands also provides parent training in Spanish based on individuals and families preferences and needs. Staff are provided monthly trainings including Person Centered Based Thinking/Planning, however none of our staff have been certified in PCT and we are limited in training as we can only train staff based on preferences when possible. We need funds to train staff in Person Center Planning/Thinking and training regarding the HCBS rules. We need to get our staff certified in PCT to prioritize the choice, preferences of individuals and support individuals and families in a more individual basis. In addition, we lack adequate funds and resources to train 5 full time executive salaried employees in CPI'S train-the trainer instructor program in order for our staff to gain the skills and confidence to handle crisis and intervene in person centered interventions for behavior management on an individual basis and support family in community inclusion. Currently our social skills programs are center based, however families have opted to HIPAA Compliant Telehealth through home in order to continue services through the unprecedented COVID-19 pandemic.</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>	

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

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

Holding Hands, Inc., Pediatric and Adult Services is requesting for the following items to fully comply to HCBS requirements:

- Federal Requirement #1: Program Development to provide options in locations of services such as Telehealth and ensuring they have the tools to engage in remote telehealth services (IPAD) or computer.
- Federal Requirement #2: Person Centered Thinking (PCT) Training to train staff and implement in programs with clients and in clinical documentation.
- Federal Requirement #3: CPI (Crisis Prevention Intervention). CPI's training programs provide staff with an array of assessment frameworks for evaluating behaviors and risk factors which promote person-centered interventions. With the increase in anxiety as a result of the COVID-19 pandemic, the need for social/emotional and behavior management training has never been in greater need.
- Having Train-the-Trainer certification in CPI will improve community integration, person-centered practices, and choice for individuals with behavior challenges that limits them from social interaction in the community. In addition, the trainer will train direct current/new staff on Introduction Establish the learning expectations and guidelines for the training. Relate the impact of crisis behavior to participants' experiences in the workplace. MODULE 1: The CPT Crisis Development Model: Identify behavior using the Crisis Development Model and apply staff approaches most effective in responding at each behavior level to prevent further escalation.
- MODULE 2: Integrated Experience Explore underlying causes of behavior, recognize the need to maintain consistent, calm behavior in a time of crisis, and understand how the behavior of one person impacts the behavior of others. MODULE 3: Communication Skills Practice communication strategies and observe how different approaches positively and/or negatively impact an individual's behavior. MODULE 4: Responding to Defensive Behaviors Identify defensive behaviors in crisis situations using the Verbal Escalation Continuum. Use specific verbal patterns when de-escalating a crisis to develop a range of responses. Identify how to prepare for a difficult conversation. MODULE 5: Safety Interventions Practice and apply skills needed to keep oneself safe when crisis escalates to risk behavior. Apply principles for using a coordinated and collaborative approach. Safety Interventions: Disengagement Skills Learn how to respond effectively when an individual is in risk behavior. Build the confidence of staff in their ability to keep themselves and others safe using disengagement skills. MODULE 6: Introduction to Restrictive Interventions Identify restrictive interventions and explore the key legal and professional considerations when using restrictive interventions. Explore the Physical Skills Review Framework. MODULE 7: Decision-Making Organize thinking regarding the risks associated with different behaviors, encouraging critical analysis and rational reasoning in response decisions. Safety Interventions: Holding Skills Learn how to respond effectively when an individual is in risk behavior. Build the confidence of staff in their ability to keep themselves and others safe using physical holding skills. MODULE 8: Post-Crisis Introduce the COPING Model, which is a framework to help guide staff and the individuals in distress through the process of establishing Therapeutic Rapport after a crisis. Conclusion and Assessment Reflect on new learning and complete an action plan. Revisit program values, person-centered care, and a culture of safety. Instructor Certification Program Includes both practice and evaluation of teaching the facilitator-led and physical skills portions of the program. Recognition of Certification Formally recognizes successful completion of all participants who have earned certification privileges.

By receiving funding for the above-mentioned areas, we can better support individuals and the families we serve. They can have greater autonomy in decisions around choice of program and setting, accessibility, preferences, community engagement and inclusion. These items will impact individuals in offering more choices or options and opportunities.

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

<p>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.</p>
<ol style="list-style-type: none"> 1. Federal Requirement #1 2. Federal Requirement #2 3. Federal Requirement #3
<p>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>
<ol style="list-style-type: none"> 1. Barriers to Federal Requirement #1: Program Development We lack funding for innovative, creative Social Skills Program which individuals and families have options and choice to Telehealth Social Skills Training at center, Telehealth and Hybrid which can be accessed beyond the COVID-19 State of Emergency. 2. Barriers to Federal Requirement #2: Person Center Thinking (PCT) We lack PCT advanced trained staff. We need funds for PCT Train-the-Trainer certification in order to develop staffing and provide ongoing training in client center thinking/planning to implement CPT interventions in order to improve in individuals' choices, interests, options and support autonomy and needs in person center plans. 3. Barriers to Federal Requirement #3: (CPI) Nonviolent Crisis Intervention Training Instructor in person-centered interventions We lack in funding to get staff trained and certified in noninvasive interventions to help individuals and families with behavior challenges who need support in their needs in order to manage behaviors and intergrade/include individuals into the community.
<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 by March 2023.</p>
<ol style="list-style-type: none"> 1. Federal Requirement #1: Program Development Adding a new written and approved program by vrending regional centers and training a minimum of 150 staff We can offer individuals and families options (choices) on and where they would like services conducted (in center/ community, Telehealth, Hybrid approach). The requested change in service delivery will significantly impact individuals and families in offering more choices or options and opportunities in how they received their social skills programs for community engagement and inclusion in innovative ways. In addition, we would be able to prioritize the preferences of individuals served utilizing feedback in developing this service concept. Lastly, Hybrid Social Skills Programs could remain beyond the COVID-19 State of Emergency for a more creative service delivery options. 2. Federal Requirement #2: Person Center Thinking (PCT) Having 5 staff of Holding Hands, Inc. trained in Person Center Thinking Train-the-Trainer will give staff to PCT training/planning individualized support plan that will optimize individual choice or options and independence. The PCT trainer will be able to train all our 150 staff in our 4 centers in order to enhance individual independence, choices or options and opportunities for all the individuals and families we serve. We will also be updating all clinical documentation to meet the person center timely guidelines. 3. Federal Requirement #3: CPI (Crisis Prevention Intervention) CPI's training programs provide staff with an array of assessment frameworks for evaluating behaviors and risk factors which promote person-centered interventions. With the increase in anxiety as a result of the COVID-19 pandemic, the need for social/emotional and behavior management training has never been in greater need. Having Train-the-Trainer certification in CPI will improve community integration, person-centered practices, and choice for individuals with behavior challenges that limits them from social interaction in the community. In addition, the trainer will train direct current/new on CPI. In addition, care providers would be trained on CPI strategies (individual or group training).

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

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

Proposed Outcomes/Objectives:

1. Federal Requirement #1: Program Development

(A) Proposed Outcomes Objectives:

- Develop person centered social skills program that provides choice for people receiving services such as telehealth or community/center-based services.
- Prioritizing the preferences of individuals served and utilizing feedback in the development of program.
- Get program vendored with contracted Regional Centers.
- Train Staff on PCT planning, strategies, and documentation
- Assistive technology library: Purchase 50 iPads and loan clients AT device (I-PADS) for telehealth if they do not have access to a computer or iPad for telehealth sessions.
- Implement new/modified social skills programs within 12-18 months to be in compliance with HCBS rule.

2. Federal Requirement #2: Person Center Thinking (PCT)

(A) Proposed Outcomes/Achieving:

- Be in compliance with HCBS rules by changing how services are delivered.
- Train the Trainer Certification in PCT and PCP
- Trainer will train direct staff (current and new) on PCT and PCP
- Implement PCT and PCP with our clients.
- Modify programs and clinical documentation in line with PCP
- Improve community integration, person-centered practices, and choice for people receiving services.

3. Federal Requirement #3: CPI

(A) Proposed Outcomes/Objectives:

- Improve community integration, person-centered practices, and choice for individuals with behavior challenges that limits them from social interaction in the community.
- Train the Trainer Certification in CPI
- Trainer will certify direct staff (current and new) on CPI.
- Direct staff will collaborate and train care providers on CPI strategies (individual or group training can be provided (this is not a certification)

4. Methods of Tracking/Achieving:

- CEO will assign a project coordinator for each proposal. The project coordinator will manage staff, create **task list** within (21 days of approval) **manage deadlines, staff,** and **budget**. Monthly report will be made to CEO AND CFO. Plat form used will be Microsoft Project Online which is a project and portfolio management software that allows users to view all their projects and resources. It comes with SharePoint, so collaboration, content and document management features are included. It is delivered as software-as-a-service through the Office 365 service.

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.

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

Holding Hands Inc. has been operating and serving children, teens, adults and families with developmental, neurological and mental health needs for the past 17 years. Through this experience we have had the opportunity to work with many individuals and families and were not always able to assist them because of the limitations of the program (how the program was written or funded) we did not have the funding or we did not have the adequate training/staffing to carry out the requests. By receiving funding, we can ensure our staff are trained to assist families with behavior that is preventing them from being social or accessing social skills through the CPI training. We will be better trained on how to document and assist individuals by what their needs, desires or choices are by implementing person centered planning. Lastly, we can modify our social skills programs to providing options for social skills services such as Telehealth, community/center and or hybrid approach.

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

Federal Requirement #1: Program Development

We can offer individuals and families options (choices) on and where they would like services conducted:

- In center/ community
- Telehealth
- Hybrid approach

Individuals with developmental disability possess certain strengths and abilities in the same way that neurotypical individuals do. Working on an developing these strengths and abilities can be seen as showing compassion and empathy and ensuring their favorite activities and preferences of location of services and telehealth option, which can support independence.

Federal Requirement #2: Person Center Thinking (PCT)

By being a Person Centered agency, we can improve the quality of care to our clients and families we serve. One of the biggest benefits of PCT are for individuals receiving care is that they get to make decisions and have input into their own care, Responsibility, Appropriateness, Independence, Happiness, Autonomy and promote self-determination by helping individuals achieve personal life goals.

Federal Requirement #3: (CPI) Nonviolent Crisis Intervention Training Instructor in person-centered interventions

By training and certifying staff and support and supporting care providers we can assist by helping the individual manages their own care & make sure they have input. Listen to their preferences. Empower them to be and feel involved with your care team.

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

Make them full partners in their own care. Put the person in the center, with all other players (family, clinicians, caregivers, teachers, administrators, therapists, etc.) comprising a customized circle of support. Show the person that their individual needs, interests, passions, likes and dreams are always the core focus of every effort. Let them know that to the best of your ability, you will minimize what they don't like and maximize what they do like. Ask the person about their preferences offer choices and let the person know you aim to meet their needs. For example, if they don't like to shower in the morning, can you allow them to choose the time of day that feels best for them? If you can offer personalized options and flexibility, you can often avoid unnecessary altercations.

Get to know the person

- What's their background?
- What are their interests?
- What are they good at?
- What makes them feel supported?
- What makes them feel happy?

Use supportive body language. Be calm and rational, and treat them like they're calm and rational- even if they're being anything but. Build their trust. Look for the causes of behaviors- Behaviors is a form of communication. If a person in your care exhibits difficult behavior, seek to understand the function of the behavior. Do tasks WITH the person- Minimize doing things for them. Maximize their abilities. Focus on success, de-emphasize errors, and provide support where needed. To do that, be strengths-based. Working hand in hand with person centeredness is being abilities-focused and strength-based. Instead of focusing on deficits and disabilities, look for the person's potential and recognize what the CAN do with your belief in them and your support of their abilities. Help them feel purpose, skill, accomplishment, and self-respect- and this will improve how they feel and act toward you.

Offer comfort- With your person-centered responses, you can make something better and be part of the solution. Ways to offer comfort and reassurance include giving the person a pat on the back, a hand on the shoulder, a wink, a thumbs-up, or just being present with the person in a difficult moment. Avoid physical intervention- If the person you're working with sometimes poses a physical danger to self or others, there may be times when you need to physical intervention.

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

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

Holding Hands, Inc. will have a program coordinator for each program with guidelines and will be meeting to ensure that we are meeting the criteria and are in compliance with all HCBS requirements. We will also track all attendance, trainings, meetings on timesheets to account for time paid to staff and dates and times clients billed with supporting clinical documentation. HR will update and monitor duties to ensure each coordinator assigned follows through on requirements. Reporting on Likert Scales-The traditional way to report on a Likert scale is to sum the values of each selected option and create a score for each respondent. This score is then used to represent a specific trait — satisfied or dissatisfied, for example — particularly when used for sociological or psychological research. The “scale” in “Likert scale” refers to the total sum of all Likert items in the question, not the 1-5 range you see associated with each item. We can develop a Likert Scale for our clients and families that can be administered at the end of the program for evaluating a respondent’s opinion of satisfaction features and area to improve on. In these cases, the scores can be used to create a chart of the distribution of opinion across the population. For further analysis, you can cross tabulate the score mean with contributing factors.

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](#).

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

Within grant approval, Holding Hands will purchase the following items and train:

Federal Requirement #1: Program Development:

Time Frame: 12 to 18 months

- A) Program Develop: Develop Hybrid Person Centered Social Skills Program(s) research, curriculum and implementation strategy that provides both Telehealth and center/community options.
- B) Train direct staff Holding Hands program staff in curriculum.
- C) Assistive technology library. Purchase 50 iPads and loan clients AT device (I-PADS) for telehealth if they do not have access to a computer or iPad for telehealth sessions.
- D) Staff to administer and operate program.
- E) Train direct staff (cost of training) and training resources
- F) Program Coordinator/Manager to overlook project.
- G) IT Consultation

Federal Requirement #2: Person Center Thinking (PCT)

Time Frame 18 months to 24 months

- A) Certify staff 5 staff in PCT
- B) Mentorship for certified staff
- C) Train direct staff (cost of training) in house and training resources
- D) Program Development (Clinical staff to update programs and documentation to be in line wit PC agency.
- E) Program Coordinator/Manager (admin and clinical) to overlook project.
- F) Technology & electronic

Federal Requirement #3: (CPI) Nonviolent Crisis Intervention Training Instructor in person-centered interventions

Time Frame 6 months to 12 months

- A) Certify staff 5 staff (CPI) Nonviolent Crisis Intervention Training Program Certification.

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

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	Yes. If Yes, FY(s) _____	CPP
	Disparity Funding	<input checked="" type="checkbox"/> No	Yes. If Yes, FY(s) _____	
	Funding	<input checked="" type="checkbox"/> No	Yes. If Yes, FY(s) _____	
	CRDP Funding	<input checked="" type="checkbox"/> 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, 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

Home and Community-Based Services (HCBS) Rules

CONCEPT FORM

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**

HCBS CONCEPT BUDGET		Federal Requirement #1: Program Development					
Vendor Name		Holding Hands, Inc.					
Vendor Number(s)		Early Intervention Social Skills (Ages 3-6): PD2992 & PL1687; School Age Social Skills Training (Ages 7-12): PD1047 & PL1682; PEERS Social Skills Training (Ages 13-19): PD2978 & PD1683; SEEDS Adult Social Skills Training (Ages 19-40): PD3352 & PD3353 Social Skills Developmental Programs (Ages 3-18): PD1822					
		Year 1 Budget		Year 2 Budget		Total	
		Wage and Benefits	FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)							
Program Coordinator	65,000	1	\$65,000.00	1	\$32,500.00	\$97,500.00	-
Trainer	2,304	1	\$2,304.00	1	\$1,152.00	\$3,456.00	-
Training 150 staff x 4 hrs	10,800		\$10,800.00		\$5,400.00	\$16,200.00	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
Personnel Subtotal			\$78,104.00		\$39,052.00	\$117,156.00	-
Operating expenses							
Rent			22,926		11,463	\$34,389.00	-
Utilities			970		485	\$1,455.00	-
Telephone			1,179		590	\$1,769.00	-
Technology Subscription			7,179		3,590	\$10,769.00	-
Advertise			935		468	\$1,403.00	-
Food & Beverage			1000		500	\$1,500.00	-
Office Supplies			2,825		1,413	\$4,238.00	-
						\$ -	-
						\$ -	-
						\$ -	-
Operating Subtotal			\$37,014.00		\$18,509.00	\$55,523.00	-
Administrative Expenses							
IT support			2,621		1,310	\$3,931.00	-
Administrative support			19,548		9,774	\$29,322	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
Administrative Subtotal			\$22,169		\$11,084.00	\$33,253.00	-
Capital expenses							
50 Ipad for clients' library			13,800		13,800	\$27,600.00	-
1 Projector			900		0	\$900	-
1 Computer			1500		0	\$1,500.00	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
Capital Subtotal			\$16,200		\$13,800	\$30,000.00	-
Total Concept Cost			\$153,487		\$82,445.00	\$235,932.00	-

See Attachment F for budget details and restrictions

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

HCBS CONCEPT BUDGET	Federal Requirement #2: Person Center Thinking (PCT)							
Vendor Name	Holding Hands, Inc.							
Vendor Number(s)	Early Intervention Social Skills (Ages 3-6): PD2992 & PL1687; School Age Social Skills Training (Ages 7-12): PD1047 & PL1682; PEERS Social Skills Training (Ages 13-19): PD2978 & PD1683; SEEDS Adult Social Skills Training (Ages 19-40): PD3352 & PD3353 Social Skills Developmental Programs (Ages 3-18): PD1822							
			Year 1 Budget		Year 2 Budget		Total	
	Wage and Benefits	FTE	Annual Cost	FTE	Annual Cost	Cost		
Personnel (wage + benefits)								
Program Coordinator/Manager	60,000	1	\$60,000.00 -	1	\$30,000.00 -	\$90,000.00 -		
Training 5 trainers x 84 hrs each. by Joe Donfrio	17,010	1	\$17,010 -		\$5,670.00 -	\$22,680.00 -		
Training 150 direct staff x 8 hrs.	21,600		\$21,600.00 -		\$10,800.00 -	\$32,400.00 -		
2 Trainers to train direct staff x 8 hrs.	10,368		\$10,368.00 -		\$5,184.00 -	\$15,552.00 -		
			\$ -		\$ -	\$ -		
			\$ -		\$ -	\$ -		
			\$ -		\$ -	\$ -		
			\$ -		\$ -	\$ -		
			\$ -		\$ -	\$ -		
Personnel Subtotal			\$108,978.00 -		\$51,654.00 -	\$160,632.00		
Operating expenses								
Rent			22926		11,463	\$34,389.00 -		
Utilities			970		485	\$1,455.00 -		
Telephone			1179		590	\$1,769.00 -		
Technology Subscription			7179		3590	\$10,769.00 -		
Food & Beverage			1000		500	\$1,500.00 -		
Office Supplies			2825		1,413	\$4,238.00 -		
Joe Donofrio (Third party trainer)			29325		0	\$29,325.00 -		
					0	\$ -		
						\$ -		
						\$ -		
Operating Subtotal			\$65,404.00 -		\$18,041.00 -	\$83,445.00 -		
Administrative Expenses								
IT support			2621		2621	\$5,242.00 -		
Administrative support			19548		9774	\$29,322 -		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
Administrative Subtotal			\$22,169 -		\$12,395 -	\$34,564.00 -		
Capital expenses								
5 Ipads for trainers			1380		1,380	\$2,760.00 -		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
Capital Subtotal			\$1,380 -		\$1,380.00 -	\$2,760.00 -		
Total Concept Cost			\$197,931.00 -		\$83,470.00 -	\$281,401.00		

See Attachment F for budget details and restrictions

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

HCBS CONCEPT BUDGET	Federal Requirement #3: CPI (Crisis Prevention Intervention)				
Vendor Name	Holding Hands, Inc.				
Vendor Number(s)	Early Intervention Social Skills (Ages 3-6): PD2992 & PL1687; School Age Social Skills Training (Ages 7-12): PD1047 & PL1682; PEERS Social Skills Training (Ages 13-19): PD2978 & PD1683; SEEDS Adult Social Skills Training (Ages 19-40): PD3352 & PD3353 Social Skills Developmental Programs (Ages 3-18): PD1822				
			Year 1 Budget	Year 2 Budget	Total
	Wage and Benefits	FTE	Annual Cost	FTE	Annual Cost
Personnel (wage + benefits)					
Program Coordinator/Manager	60,000	1	\$60,000.00 -	1	\$30,000.00 - \$90,000.00 -
Training 5 trainers x 40 hrs	8,400		\$8,400.00 -		\$0 - \$8,400.00 -
Training 150 direct staff x 8 hrs	21,600		\$21,600.00 -		\$10,800.00 - \$32,400.00 -
2 Instructors x 12 hrs	12,096		\$12,096.00 -		\$6,048.00 - \$18,144.00 -
			\$ -		\$ -
			\$ -		\$ -
			\$ -		\$ -
			\$ -		\$ -
			\$ -		\$ -
Personnel Subtotal			\$102,096.00 -		\$46,848.00 - \$148,944.00 -
Operating expenses					
5 Staff trained by third party			19,995	0	\$19,995.00 -
150 books x \$20 each			3,000	0	\$3,000.00 -
Rent			11,463	5,732	\$17,195.00 -
Utilities			485	243	\$728.00 -
Telephone			589	295	\$884.00 -
Technology Subscription			3,589	1,795	\$5,384.00 -
Food & Beverage			500	250	\$750.00 -
Office Supplies			1,412	706	\$2,118.00 -
					\$ -
					\$ -
Operating Subtotal			\$41,033.00 -		\$9,021.00 - \$50,054.00 -
Administrative Expenses					
Administrative support			9,774	4,887.	\$14,661.00 -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
Administrative Subtotal			\$9,774.00 -		\$4,887.00 - \$14,661.00 -
Capital expenses					
1 Projector			900	0	\$900.00 -
1 Computer			1500	0	\$1,500.00 -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
Capital Subtotal			\$2,400.00 -		\$ - \$2,400.00 -
Total Concept Cost			\$155,303.00 -		\$60,756.00 - \$216,059.00 -

See Attachment F for budget details and restrictions