

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

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: July 1, 2021 to June 30, 2023	Completed by: Terry Goodwin
Vendor Name, Address, Contact: Terry Goodwin, 25 Kearny Street, SF Ca 94108	
Vendor Number: H88864 service code 510, PG0764 service code 055	
Service Type and Code: Adult Development Program- 510,1-1 Adaptive Skills Training -605, Group Employment 950	

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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

Please explain: Toolworks has a community-based program driven by interests and preferences and the clients (pre-COVID) participate in many activities including volunteer work, educational classes, and other community access options into the local community in small groups of 3. With the additional funding and staffing support through our HCBS 18-19 funding, we have made great progress and have been able to increase job opportunities for 10 clients, participating paid employment options. Many clients still have not had paid work options, especially our deaf clients. Due to pandemic, we have been many of the options are paused, reduced, or closed down, and it is uncertain if and when we will be able to get some clients back to these opportunities.

Our Group services program- It is uncertain when they will be able to bring back clients in paid work, was reduced from 14 clients down to 4 of the clients at present.

Since COVID we have been engaging all the clients remotely 1-1 and group sessions with a variety of zoom classes (some in person as well) with activities of interest, including employment training sessions. We also continue to provide weekly classes around COVID health and safety procedures. Some of our deaf clients attend the employment classes.

Historically Toolworks clients in the day program have had limited individual choice and access to options for paid job opportunities in the community, including our clients who are deaf. It takes time and attention to develop these suitable customized job options – especially for most all remaining clients who have high support needs. More education and outreach to employers is also needed as well to create these options. There also continues to be reluctance, uncertainly and fear to participate in paid work opportunities, on the part of some clients, families, and Toolworks staff. Lack of exposure to options for employment for the clients adds to the fear.

Most of the clients live with either family or board and care and may not be able to control their personal resources but where possible we encourage and empower clients to make educated choices.

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<p><u>Federal Requirement #2:</u> <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 Please explain: Yes Toolworks has all Regional Center IPP's on file. Yes, each individual IPP identifies goals for the community-based activities and provides input and choice on settings and goals for the program activities. With Covid -19 we have met with all clients and families to discuss alternative services and options.</p>	
<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint? • Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality? • Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Toolworks clients receive a Client Handbook (adapted with picture) which includes all information on Rights & Treatment, Privacy, and Confidentiality and this is reviewed annually. Toolworks provides accommodations needed both verbally and in written form, and uses accessible methods, including sign language and interpreters, and large print for those who are blind.</p>	

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<p><u>Federal Requirement #4:</u> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider offer daily activities that are based on the 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?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Toolworks provides services adapted to the client's needs, desires and preferences and structures community-based services as best we can to accommodate the expressed wishes. Since COVID 19 we have provided remote or other Alternative Services offering an array of classes based on feedback and interests including employment preparation focus/ and job seeking skills. We make every effort to group individuals based on preferences. With the use of Zoom we have been able to provide many options across programs to the benefit of all, providing more integration of our Deaf clients, with the addition of a staff interpreter. Toolworks does not have influence over the home environment unless they are part of our community living program.</p>	
<p><u>Federal Requirement #5:</u> <i>Facilitates individual choice regarding services and supports, and who provides them.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Toolworks makes every effort to accommodate client's preference have choice in selection of their assigned staff to the extent possible. Clients can voice concerns at any time and can modify their services when requested.</p>	

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

<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: NA</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: NA</p>	

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<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: NA</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: NA</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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: NA</p>	

CONTACT INFORMATION

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Contact Name: Terry Goodwin
Contact Phone Number: 415 609-6178
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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

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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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Vendor name	Toolworks
Vendor number(s)	HB0150, PGO764, H88864
Primary regional center	GGRC
Service type(s)	Adult Day Program - 1-1, Individualized Services Group Services
Service code(s)	510, 950
Number of consumers typically and currently served	Total = clients 27 clients in Day Program, San Francisco 14 clients in Deaf Program 8 -clients both Deaf and Hearing with individualize services 4- group program 53 total clients
Typical and current staff-to-consumer ratio	1-3 ratio
<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>Toolworks Day Program is community based with clients integrating into the community with a variety of activities including volunteer work, community college, educational & and general community access, fully supported by staff 1-3 ratio.</p> <p>Pre COVID-19, we had made lots of progress toward our HCBS grant goals of expanding paid options. We had 9 clients who participated in Internships, and 1 current CIE placement. Our group employment – opportunities have been reduced drastically, we had 14 and now have 4 individuals working and 4 unemployed.</p> <p>The majority of clients (at least 40) still have not had the opportunity for suitable integrated paid employment options. Not all staff have had the opportunity to participate in a training in customized employment and they need more knowledge to complete the placement planning documents fully (discovery info- Employment Supports Job Interest, Positive Profile, and placement plan)</p> <p>Due to the pandemic, we have been set back with progress, most all our internship sites are not active, and internships are a bridge to more independence and CIE placements. We still aim to continue to work toward CIE placement for the 9 clients who have had internships and also the 4 clients who lost jobs at the group site. We also have found that more education is needed for parents to address concerns shared related to SSI, especially for our families of Deaf clients.</p> <p>A typical day now consists of a variety of remote sessions and or in person based on the individual goals and desires, including group and 1-1 remote sessions and weekly zooms focused on employment skills training and other activities of interest, including Covid Safety training.</p>	

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With the likelihood of more remote service delivery, it will be important and necessary to enhance our training curriculum for employment skills and workplace essentials.

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.

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

Though Toolworks has made progress in developing paid work opportunities and set back by pandemic, there are still at least 40 clients who have not had any job exploration or paid work options. Many of the clients have high support needs and this requires the resources of staffing support for the job development and customized approach to help create the options. Also, there are still many unknowns and challenges ahead including high unemployment, shift to remote work. Toolworks proposes to provide the additional staffing resources to build on what we have accomplished and serve more clients:

- provide training for staff and manager in customized employment & person-centered planning for those who have not participated
- conduct employment planning meetings with support teams for all clients to complete placement plans for all clients
- work with the job development staff to develop job opportunities for at least 15 clients in paid opportunities/ internships based on interests, looking at innovative nontraditional jobs, goal of developing 3-5 CIE placements
- Provide job exploration opportunities to all the clients, especially our deaf clients
- Enhance our remote training curriculum, develop a weekly series on Employment
- continue with client mentor training sessions and introduce a 1-1 client peer mentor program- matching those with job experience with those without.
- Provide an Information session on Supported Employment and impact on benefits for family members to address all concerns
- Work to address barriers to technology for all clients, using local resources

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

1__x_ 2__ 3__ 4__ 5__ 6__ 7__ 8__ 9__ 10__

Compliance 1 – Not all clients have opportunities to seek employment and have not been exposed to options or job exploration to even know what the options are.

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.

In order to meet compliance 1, Toolworks needs to address the following barriers:

Lack of or limited exposure to job options and opportunities, many (40) of the clients have not had exposure or option for job exploration and job opportunities or internship. Our Deaf clients need more assistance with job options and more access to remote classes.

Need for more training on customized employment and person-centered planning- More education for staff is necessary to become more knowledgeable in fully completing

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placement planning documents and person-centered planning to improve our outcomes for client employment options.

Families and clients expressed fear to integrated employment options; More education and outreach to families and clients addressing barriers related to SSI benefits and information on Supported Employment.

Uncertainty of the pandemic & high unemployment, trend to shift to remote work creates even more challenges for developing innovative ideas and integrated employment options for our clients who have multiple barriers to employment and require workplace accommodations and job customizing .

Technology is also a challenge and a barrier for some clients

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.

The funding will enable us to build on what we have accomplished serve all the clients, create more individualized opportunities and internships for clients, provide the training needed to educate staff and managers to increase our outcomes for customized jobs, client integration and choice.

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

The proposed outcomes for the project include:

Updating and complete placement plans with the client support teams, for all clients and shared at IPP annually, continue to complete satisfaction surveys with clients at annual reviews, develop and place at least 15 individuals in internship over the 2 year period or other job options, provide opportunities for job explorations for all the clients, develop 3-5 CIE placements, provide a training on customized employment and person centered planning for staff and manager, provide Parent Information session, and continue with client peer mentor trainings, and 1- 1 client peer matches for those interested, and develop a employment training series curriculum for clients for remote classes, and integrate most of the deaf clients. Address technology needs of clients by accessing local or other resources.

Methods used to achieve and track-

Provide Trainings for Managers, staff, families, and clients documented by sign-up sheets and attendance logs, provide a quarterly summary of all annual IPP meetings,, and employment planning documents completed, provide a summary of survey information tracking feedback with % of responses included, provide active job development based resulting in new employer partnerships and job opportunities, tracking all client paid employment, job exploration on a spread sheet quarterly.

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.

Toolworks clients have completed interest and satisfaction surveys, recently and throughout the last year. Feedback indicates that many clients do want to work and would like the opportunity to explore jobs and work in the community. There are also

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some clients who say they do not know if they want a job and are fearful of leaving their friends. Through a recent survey from families and a brainstorm session with day program managers feedback has been that more education is needed about employment for staff and families, especially around SSI Benefits concerns for our families of clients who are deaf.

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

With the completion of placement planning documents and Placement Plans annually for all clients presented at the IPP, more staff training in customized employment and person-centered planning staff will be more informed and person centered.

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

Toolworks will maintain the benefits and success of the project, by having informed and trained staff in customized employment, have established more partnerships with employers, created more job options. Ultimately over time as we grow the internships, paid options, and CIE placements, we will be able to sustain the services financially by accessing the varied funding streams of DOR and CIE outcome payments.

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](#).

Costs for the project are for \$75,000, for 1 .50% FTE staff- Employment Coordinator, to assist with customized planning and job development to develop the partnerships, and meet the other objectives outlined for a 2-year period. Also, one- Hourly 17.5% for an Employment Specialist to support the grant efforts and provide ASL support for the Deaf clients to increase access and integration.

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.

Non 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 ___ No x___ Yes. If Yes, FY(s) 18-19
 Disparity Funding ___ No ___ Yes. If Yes, FY(s) _____
 CPP Funding ___ No ___ Yes. If Yes, FY(s) _____
 CRDP Funding ___ No ___ Yes. If Yes, FY(s) _____

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

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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.

Toolworks quarterly report dec 2020: Have met goals through Dec 2020: On target with goals total of 9 clients have participated in paid internships, 2 new internships developed post COVID (but put on pause currently), 2 job placement or CIE secured (1 active).

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.

The funding is still needed: Continued HCBS funding is needed now more than ever: 40 clients are still in need of paid job options, with the pandemic, high unemployment, shift to remote work, loss of many of job options, challenges with developing customized jobs for clients with high support, job accommodation needs, it is vital to have the additional staffing resource to address the barriers and meet the objectives listed.

HCBS CONCEPT BUDGET						
Vendor Name		Toolworks				
Vendor Number(s)		H88864, PGO764				
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Community Integration and Employment Coord(\$28/hr)	58,240	50%	\$ 29,120	50%	\$ 29,120	\$ 58,240
Employment Specialist (\$23/hr)	47,840	17.5%	\$ 8,380	17.5%	\$ 8,380	\$ 16,760
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ 37,500		\$ 37,500	\$ 75,000
Operating expenses						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Operating Subtotal			\$ -		\$ -	\$ -
Administrative Expenses						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
Capital expenses						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Capital Subtotal			\$ -		\$ -	\$ -
Total Concept Cost			\$ 37,500		\$ 37,500	\$ 75,000

See Attachment F for budget details and restrictions