

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: 2/01/21	Completed by: Kim Totten
Vendor Name, Address, Contact: Horrigan Cole Enterprises/ First Step Independent Living, and Unlimited Quest: 9166 Anaheim Pl., suite 200, Rancho Cucamonga, CA 91730	
Vendor Number: H96659, H96660, H25658, H96306, HJ0076, HJ0626, HJ2788, H96661, H96665, H96663, H96664, H96666, H96627, H96628, H96629, H96630, H96633, H96632, H96631, PJ5225	
Service Type and Code: 510, 515, 055	

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<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 checked="" type="checkbox"/> No</p> <p>Please explain: Please explain: CVS, FS, UQ currently lacks the resources available for all of the day programs to meet this requirement. Many Individuals utilize wheelchairs that do not break down easily which makes it more difficult for them to access their community as much as they would like. Many programs rely on vendored outside transportation that provides limited access. Some of the programs have been able to obtain wheelchair vans that make it possible for more Individuals to fully integrate into their community. The programs do share 4 Job Developers who have been very successful in assisting many Individuals in obtaining meaningful paid and volunteer work in the community. We would like to be able to provide those opportunities to 100% of the Individuals interested in working or volunteering.</p>	
<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 checked="" type="checkbox"/> No</p> <p>Please explain: The RC and the programs (CVS, FS, and UQ) all work to ensure that the Individual has as many options possible when making a decision about services. The program ISP's however are not person centered, as many members of the team do not have the skillset to understand and implement the PCT process and planning when the</p>	

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meetings occur and when the ISP's are written. When staff have limited knowledge in PCT, those choices can be naturally limited.

Federal Requirement #3:

Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.

Guidance:

- Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?
- Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?
- Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?

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

Please explain: CVS, FS and UQ ensure that each Individual's privacy and dignity are upheld at all times. No program utilizes restraint of any form and all Individuals are communicated with in their unique style of communication preference, weather that be through assistive devices or pictures, if need be. Each Individual is given a copy of their personal rights annually, and a copy is up at each program site visible to all.

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: CVS/FS/UQ have many things in place to support the Individual in making daily choices. However, limited staff training in Person Centered Thinking

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(PCT) results in generic goals and activities that don't achieve skills training and opportunities to maximize initiative, autonomy and independence. We would like to begin the process of having Person Centered Plans in place for all of our Individuals so that we can begin to implement PCT with individual goals and activities. To accomplish this we must first have all of our staff trained in Person Centered Thinking and Planning. Staff are at the forefront of support and are a great influence on the Individuals. Not only do we want the plans to be person centered, we also must make sure that all interaction has person centered at the forefront.

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: Each Individual has the opportunity to direct which staff they would prefer to work with and can modify supports and activities based on preferences. However, providing all staff with the PCT training would enhance the likelihood of this across the board and would ensure that each Individual is offered many choices when choosing which staff to work with and what activities they would like to participate in.

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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: N/A</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</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: N/A</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</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: N/A</p>	

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

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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	Horrigan Cole Enterprises/ First Step Independent Living, and Unlimited Quest
Vendor number(s)	H96659, H96660, H25658, H96306, HJ0076,HJ0626, HJ2788, H96661, H96665,H96663, H96664, H96666, H96627, H96628, H96629, H96630,H96633, H96632, H96631, PJ5225
Primary regional center	Inland Regional Center
Service type(s)	Center and Community Based Day Programs
Service code(s)	515, 510, 055
Number of consumers typically and currently served	1,706
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 CMS Rule focuses on an individual's full access to the benefits of community life, the opportunity to receive services in the most integrated setting appropriate, and enhancing the quality of service based on the individuals choice while respecting and protecting their individual rights. Cole Vocational Services offers structured, activity-based day programs that give individuals the chance to achieve goals, become independent and be active in the community. Many of the programs listed above are center based licensed programs where Individuals arrive via third party transportation and employees utilize their personal vehicles to transport for community integration. Public and or vendored transportation can be used if available. Many Individuals who utilize wheelchairs that do not break down have remained largely in program, and have ventured out in small groups via public transportation when the weather is appropriate. The types of outings offered are often times short and limited. Also, although great effort is put in by staff to develop a meaningful schedule at both the community and center based programs listed above, the staff, including managers, are not adequately trained on the PCT/PCT concepts and lack the skillset to pull out the necessary information to ensure that the ISP's, and activities are truly "Individualized" and person centered.</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>	

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CVS, FS, and UQ would greatly benefit from hiring an outside certified PCT trainer to train all staff (approx. 700). This will require monies for the materials for the training with a certified PCT Trainer, and monies to pay staff for the training hours that would need to be outside of their regular work day (4 days, total of 16 hours). This training would greatly benefit our managers also as they would be responsible for overseeing the person centered focus at the program, and would be running the person centered planning meetings and changing over the ISP's to be person centered. Our goal is provide progressive, person centered activities to all Individuals we serve. This training would greatly enhance our services.

Additionally, due to many of the center site program's inability to transport all Individuals into the community to participate in meaningful, and fully integrated activities, we are requesting 4 wheelchair vans to be utilized by 4 of the center site day programs (FS Highland, FS Montclair, CVS Cucamonga, and UQ Ontario). This would allow us to expand the opportunity of community integration to Individuals who utilize larger wheelchairs that do not break down easily, and who have been limited on choices for community integration.

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

1_X_ 2_X_ 3___ 4_X_ 5___ 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.

Currently staff is not sufficiently trained and the company does not have a trainer with this very specific skill set and expertise. Staff is challenged in understanding the appropriate approach and how to assist the Individual in identifying their strengths, interests and short and long term goals. Staff can be limited at times due to their lack of skillset in this area. Additionally, RC has been providing consistent feedback that staff is lacking in knowledge and skill to complete thorough in-depth documentation in regards to Person Centered goals. We believe these training resources will improve the Individuals experience and future immensely.

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.

With providing the PCT training to all CVS, FS, UQ staff, we will be able to fully equip staff with how to support each Individual to identify and work towards their personal and professional goals for greater independence, by thoroughly walking them through and supporting them in the Person Centered Thinking process. All interaction with the Individuals will be person centered as to help them direct their activities and to make informed decisions about their life.

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

All staff to be trained on PCT and fully proficient in creating, and understanding how to support the Individuals in creating their best life and in becoming fully integrated into their community. The Individuals choices will be optimized, they will have greater autonomy

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and independence in their daily life when making choices that focus on daily activities, in making life choices, whom they choose to interact, and their circle of support team will be more knowledgeable on how to support them in living their best life, of their choice, not anyone else's,

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.

Each program has a self-advocacy group made up of Individuals who receive services through IRC. The group meets regularly and is very vocal about their challenges with services. They regularly bring up the challenges they face in regards to being able to make their own individualized choices, both at program and in their residence (either with family or a designated care provider), and to have greater independence through job opportunities. They want more autonomy and want to be able to live their life the way they choose. Based on this feedback and the opportunity of the PCT trainer monies, CVS, FS and UQ feels having the staff effectively trained on PCT by a certified trainer would best serve to meet the needs of the Individuals, and would enhance services immensely. Additionally, many Individuals who are limited to accessing the community due to their need for a particular style of wheelchair, are frustrated with not having as many choices as their peers, simply due to the limited transportation options available to them.

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

With this training, we will better be able to assist each participant with completing an in-depth PCT that identifies desires, interests, and choices along with skills needed for success. Focus will be on employment-related options and outcomes, along with general goals for personal success and community integration. Standardized tool(s) will provide the framework, with an individualized process for each Individual to ensure a robust plan; activities would include face-to-face meetings with participants, reviews of collateral information, along with the face-to-face meetings with staff, families, and service coordinators. Once the person centered plan is completed, PD's will work with the Individual and planning team to include identified community integration related goals and objectives in the individual service plan. The staff will also become proficient at documentation that is related to the Individual's ISP goals, which is a noted area of improvement from IRC QA. .

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

By the end of this project our goal is to have 100% of all CVS, FS, UQ staff proficiently trained in Person Centered Training/Planning and supports. This will not just be for DSP's however also for our leaders such as Regional Directors, Area Directors, Program Directors so that they may continue to implement the Person Centered model and reinforce that model with staff ongoing. The benefit of this PCT training will go on for years and will positively affect many of our Individuals lives. Additionally, our goal is offer more community integration access to those Individuals at our center based programs who utilize wheelchairs that make it difficult for them to

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<p>fully access their community. This will expand their choices immensely. Having greater access to their community will enhance their life choices, and expand their dreams!</p>	
<p>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.</p> <p>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.</p>	
<p>\$100 per all staff (PCT training materials) x 700 staff total: \$70,000.00 \$15.00 per hour x 16 hours= 240.00 x 600 DSP staff = \$144,000.00</p> <p>Total funding request for a 2 year grant period – \$ 214,000.00</p>	
<p>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.</p>	
<p>N/A</p>	
<p>12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?</p>	<p>HCBS Funding ___ No ___ Yes. If Yes, FY(s) FY2017/18 Disparity Funding ___ No ___ Yes. If Yes, FY(s) _____ CPP Funding ___ No ___ Yes. If Yes, FY(s) _____ CRDP Funding ___ No ___ Yes. If Yes, FY(s) _____</p> <p>If yes to any question be sure to answer questions 13 and 14.</p>
<p>For providers who have received prior HCBS, Disparity, CPP or CRDP Funding from DDS</p>	
<p>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.</p>	
<p>Monies received for a van, 4 Activity Coordinators, and 4 Job Developers: Activity Coordinators were hired. Initial training has occurred and ongoing training occurs monthly. Volunteer opportunities have increased by 75% of the 18 programs that are part of this contract, integration outside of the facility has increased for the center based sites, and Individuals are offered community outings at a variety of newly developed community sites, from twice weekly previously, to 3 or 4 times weekly (as tolerated and desired). The van has been acquired and driver hired and trained. Van and Driver is shared between FS Perris, UQ Sunny mead, and UQ Edgemont and has increased the opportunities for community outings for Individuals who utilize a wheelchair. Job Developers are in place, with several Individuals actively working at paid job sites in the community. Additionally, Job Developers are providing ongoing small group classes to the Individuals that focus on being successful in employment, as well as offering each Individual who is interested in work with the opportunity to go through the Job Discovery process.</p>	

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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 for the PCT trainer for all CVS/FS/UQ staff will only enhance the work that has already been done: hiring Activity Coordinators to enhance activities both in the program and the community, and Job Developers who have successfully obtained paid employment for several Individuals, and by adding the van that has provided more opportunities for community integration for 2 of the programs. It is non redundant. It is expanding on what has already been put in place to expand both personal and professional goals/opportunities to the Individuals we serve.