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: January 21, 2021	Completed by: Jeremy Hogan					
Vendor Name, Address, Contact: CHD/disABILITY Services (Growth Opportunities)						
Vendor Number: H83790 (1:3), HN0293 (1:4), HN0202 (1:3)						
Service Type and Code: Adult Day Program, Service Code 510, Supported Employment						
Group, Service Code 950						

DEPARTMENT FUNDING GUIDANCE

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? \Box Yes \boxtimes No Please explain: We 'partially meet' this requirement

All programs within CHD/disABILITY Services are working towards being as integrated in the community as possible. However, this past year, we were limited in adequately providing support in community integration due to the COVID-19 pandemic. That said, before COVID-19, all program participants were given options to access the community. However, our program does not have the means to support those who communicate without words, or those who are visually impaired, in fully exploring or articulating their preferences. Also, in some cases, a participant has a conservator who has fears about community access or has safety concerns for the individual being served. Our most recent assessment showed us that 70% of program participants regularly accessed the community. The remaining 30% still need more support in accessing the community at large. We are very grateful for recent HCBS funds that allowed us to purchase one new wheelchair accessible van and one large SUV to help us provide more support in accessing the community.

We still have some challenges with the folks we support who do not communicate with words and/or have higher medical needs. We recognize that this will take more advanced communication technology and more training for our direct staff.

We are currently assisting participants who have stated that they are interested in work opportunities by focusing on what level they are at and what type of employment they want. Because of our recent HCBS funds, we have been able to train staff in Person Centered Planning and have begun to offer individualized supports for our participants. We provide different options such as pre-vocational training and classes, paid work training programs, volunteer opportunities, as well as assistance in opening up a case with DOR and focusing on job development. We have had challenges supporting some individuals with jobs in the community who have higher needs and/or challenges.

DEPARTMENT FUNDING GUIDANCE

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? \Box Yes \boxtimes No

Please explain: We are not 100% in compliance for all program participants

Most individuals in our program choose to attend our program based on choices given to them by their service coordinator at the North Bay Regional Center.

We are continuing to adjust and develop our individual planning process to become as person centered as possible. Thanks to recent HCBS funds, we were able to train our staff in Person Centered Planning and have created a new discovery process as a result, utilizing many person-centered approaches from the training. This process is helping us identify settings that are based on each individual's preference and needs.

We would benefit from advanced communication technology and more training for our direct staff in assisting individuals who communicate without words as we lack adequate alternative methods of communicating with these participants and must rely on the persons circle of support as a result.

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: We 'partially meet' this requirement		

DEPARTMENT FUNDING GUIDANCE

We provide initial and on-going training to all staff in regards to personal rights of our program participants. All staff receive competency training in 'client's rights', mandated reporting, and information on the Lanterman Act.

CHD/disABILITY Services provides training in alternate formats and takes into consideration the disabilities of all of our staff, including those who are visually impaired. However, we do lack adequate alternative methods of communicating with some of the individuals we serve who communicate without words and those who are blind.

That said, we do honor every person's right to privacy, dignity, respect, and freedom from coercion and restraint, regardless of their ability to communicate with words.

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? $\ \ \Box$ Yes $\ \boxtimes$ No

Please explain: We 'partially meet' this requirement

We encourage our program participants to engage in activities and classes of their choosing, including picking classes and community outings that interest them. We have also gone through Person Centered training to help our staff determine how to adequately provide more choices for the individuals we serve. That said, we do lack adequate alternative methods of communicating with some of the individuals we serve who communicate without words.

In our most recent survey, most program participants said that they did have adequate choice in how the spend their time and how their supports are structured. However, some individuals mentioned that others made choices for them and they would like more input in their daily activities. All participants interviewed did say that if they did not like their schedule, they could always tell a supervisor and change it.

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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? \Box Yes \boxtimes No

Please explain: We 'partially meet' this requirement

In our most recent survey, the individuals we serve, along with their family members, expressed that program participants did receive a choice in who they could work with and most understood about the grievance policy. However, some individuals said that they felt like certain things were just picked for them, or they felt that the grievance policy could be emphasized more.

During Cycle #2, we received funding to train two staff in Person Centered Train-the-Trainer Certification and we are now developing new approaches and systems to allow program participants to be more involved in designing their services and choosing their staff.

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

Federal Requirement #6:

The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State. county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord/tenant law

Guidance:

- As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?
- Are individuals informed about how to relocate and request new housing?

Federal Requirement #7: Each individual has privacy in his/her sleeping or living unit: Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed. Individuals sharing units have a choice of roommates in that setting. Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.	 Guidance: Do individuals have a choice regarding roommates or private accommodations? Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences? Do individuals have the ability to lock their bedroom doors when they choose?
Does the service and/or program meet this Please explain: Click or tap here to enter text.	•

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

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Federal Requirement #8: Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.	 Guidance: Do individuals have access to food at any time? Does the home allow individuals to set their own daily schedules? Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?
Does the service and/or program meet this Please explain: Click or tap here to enter text.	-
Federal Requirement #9: Individuals are able to have visitors of their choosing at any time.	 Guidance: Are visitors welcome to visit the home at any time? Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?
Does the service and/or program meet this Please explain: Click or tap here to enter text.	
Federal Requirement #10: The setting is physically accessible to the individual.	 Guidance: Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area? Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move about the setting as they choose? Are appliances and furniture accessible to every individual?
Does the service and/or program meet this Please explain: Click or tap here to enter text.	-

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CONTACT INFORMATION

Contact Name: Jeremy Hogan

Contact Phone Number: 707-523-1155 Ext. 4612

Email Address: Jeremy.Hogan@cahumandevelopment.org

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.

More information on the HCBS rules and this form can be found at https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/.

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

Vendor name	CHD/disABILITY Services				
Vendor number(s)	H82790 and HN0293				
Primary regional center	North Bay Regional Center				
Service type(s)	Adult Development Program				
Service code(s)	510				
Number of consumers typically and currently served	48 participants in H82790 (1:3) 24 participants in HN0293 (1:4) 5 participants in HN202 (1:3)				
Typical and current staff- to-consumer ratio	1:3 and 1:4				

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.

Our Day Program provides 'Education Enrichment' classes as well as sub-contract work that is paid by piece rate under our DOL 14(c) certificate. We also provide opportunities for program participants to take part in community outings. This Day Program supplements our Supported Employment Division which provides Job Coaching for individuals in the community along with other employment services. Typically, program participants would meet at our main facility, where they would either attend classes they had previously selected, or take part in available sub-contract work in our warehouse. Individuals can also engage in community activities if interested. Due to COVID-19, we are not currently providing in-person supports at our facility. We are offering up to 6 hours of daily online Zoom classes, dropping off educational materials at individual's homes, and calling program participants to touch base via phone. We are still providing "Supported Employment" services to individuals and groups working in the community. Recent surveys of our program participants, and family members, indicate that we still have some work to do to become fully compliant with HCBS requirements. We have identified three major areas of improvement that we still need to focus on:

1) Our program participants would like more opportunities to spend time in the community. Before COVID-19, roughly 70% of our participants accessed the community on a regular basis. 2) Our program participants would like a wider range of work opportunities and we need to do a better job of finding employment opportunities for integrated employment in the community. Many participants who have struggled to find employment in the community have relied on sub-contract work at our program, under our 14(c) certificate. 3) We need to improve at adequately understanding and communicating with participants who communicate without words and for those who are visually impaired. Roughly 20% of our program participants communicate without

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words. A few other participants are visually impaired and struggle to utilize the technology in classes and in employment services.

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.

Over this past year, we have realized how important technology is when it comes to engaging with our participants. COVID-19 has exposed disparities in access and ability to engage with technology. Many of the individuals who don't communicate with words were not able to engage with our Zoom classes, or talk on the phone. As a result, we are seeking funding to purchase technologies including 15 speech tablets (AAC devices) and JAWS computer software to assist in serving our participants who are visually impaired. These new approaches will improve our ability to draw out the needs and preferences for ALL of our participants. We have also noticed that our staff could benefit from a deeper level of person centered training. We offer sub-contract work to roughly 35% of the individuals in our program. These individuals are being paid sub-minimum wage for production work under our 14(c) designation as they have historically not been able to find competitive integrated employment in the community. We are seeking training and credentialing in Customized Employment and Self Employment from the internationally recognized Griffin-Hammis Associates. We hope to fund a "Virtual Training" to provide ACRE Certification for all of our staff as well as a Mentored CE Fieldwork Practicum for our leadership team. We are also seeking funding for personnel costs for those who would be taking part in the Fieldwork Practicum and who would be in charge of adjusting our policy and procedures to implement this approach into our systems. We believe this will help us eventually transition away from offering sub-minimum wage and help us develop employment models that are truly person-centered and fully integrated.

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<u>X 2X 3X 4X 5X 6</u> 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.

#1 –A barrier for us is the fact that we lack adequate alternative methods of communicating with participants who don't communicate with words. This is also influenced by some staff who may underestimate an individual's ability to find a specific job aligned with their abilities, due to past experience. #2 – Roughly 20% of the individuals we serve do not communicate with words and we do not have the appropriate communication tools to always determine what settings are preferred. #3, #4, and #5 – The major barrier for these three categories is that we do not have alternative methods of communicating with all of our participants in order to truly understand their needs, preferences, and sensitivity to cultural background. This lack of communication for those who don't use words can be challenging in identifying exactly

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what they want. In addition, staff have struggled to find jobs for those who have struggled with employment in the past, or who have deemed "unemployable" in the community in the past.

- 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.
- #1 These trainings and assistive communication tools will enable and train our staff to be able to apply person centered principles and integrate ALL program participants into the community at large. It will also allow our team to re-design our employment approach to better serve those who may have higher needs, or may not communicate with words, or may have visual impairments. Also, training in Customized Employment, and having our team re-design our employment approach will allow us to become fully person centered for ALL of our participants who want to find employment. #2 These trainings will enable staff to engage in a higher level of person centered planning for participants who may not communicate with words, may be visually impaired, or may have struggled in finding competitive integrated employment in the past. #3, #4, and #5 The assistive technology would allow us to communicate with ALL of our program participants based on their needs and preferences. It will assist us in utilizing alternative methods of communication for the individuals we serve who may not communicate with words or be visually impaired. Our concept would bring us into full compliance in all of these categories.
- 6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

Our objectives: 1) All staff will receive training and certification in Customized Employment and will better understand Person Centered Planning 2) Staff will have access to assistive technology to better deliver Person Centered discovery sessions and planning for participants who don't communicate with words or are visually impaired. Proposed outcomes we aim to achieve: 1) All staff will be equipped to provide Person Centered Services for ALL of the individuals we serve, including those who communicate without words, or have had specific challenges in finding competitive integrated employment 2) We will be fully compliant with HCBS regulations. Methods of measuring our outcomes: 1) We will measure how many of our program participants have participated in and completed an official Person Centered Plan with the goal of completing one for every individual in our program. 2) We will annually survey participants, family members, or other members of their circle of support to gauge level of satisfaction in our Person Centered Process, utilizing assistive technology when needed.

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.

We include input from our program participants via Customer Satisfaction Surveys. We also surveyed our program participants and family members to ask how we were doing when it came to topics aligned with the HCBS Final Rule. We've also had Person

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Centered Planning meetings for some of our participants in the past year and the barriers addressed in this application came up with our current staff.

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

This proposal will allow us to engage deeper in person centered services to individuals that we have historically struggled to adequately communicate with. In addition, the Customized Employment training will allow our staff to change their paradigm when discussing work opportunities with our program participants. With this training, staff will no longer ask *if* work is possible for a participant, but *what* work is the best fit for this person. This training will allow our staff to redesign our program from a more person-centered lens and give them the extra tools they need to best serve ALL of our participants, even those with higher needs.

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

Funding from this HCBS cycle will tie together what we have already learned in this process and will allow us to become even more deeply engrained in the philosophies of Person Centered Practices. It will help our agency address specific barriers that have challenged us. At the end of this funding, our staff will be trained thoroughly, will have helped re-design our approaches to employment and we will have the tools to become fully compliant with the HCBS Final Rule. As a CARF organization, we are dedicated to reviewing and revising our processes and this process allows us to continue to improve our services with a focus on industry best practices.

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.

Operating Expenses: \$12,500 (C.E. Training ACRE Certification) \$15,000 (CE Fieldwork Mentor Practicum), \$2,100 (Fusion JAWS computer software for visual impairments), \$6,000 (15 Speech Tablets –AAC Devices), \$1,499 (15 PECS Scheduling Kits) \$70,302 (Personal Costs) (Budget Template attached)

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	
12.11410 you of all	HCBS FundingNo _X_ Yes. If Yes, FY(s) _17/18,18/19 Disparity Fundingx_ No Yes. If Yes, FY(s)

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been a past recipient of	CPP Funding	x_ No Yes.	If Yes, FY(s)				
	CRDP Funding	x_ No Yes.	If Yes, FY(s)				
fiscal year(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.

F/Y 17/18 – The expenditures for this grant were fully funded and closed out on March of 2020. This grant trained two managers in Person Centered Train-the-Trainer Certification and helped us purchase two vehicles for our program. F/Y 18/19 – This grant is currently ongoing and will be completed in March of 2021. This grant is funding personnel costs to help us implement a program design addendum to support program participants in being more engaged and integrated in the community.

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.

We have received previous HCBS funding that has helped two of our managers obtain Person Centered Train-the-Training Certification. We have also received funding to purchase vehicles in order to help our participants access the community. This funding has allowed our team to begin the discovery process for the individuals we serve, as well as train our staff in what it means to be Person Centered. We look forward to using the vehicles to help our participants access different parts of the community. This current funding request would build on prior funding as it helps us dive deeper into Person Centered philosophy and address barriers in our program, specifically in regards to employment and with program participants who don't use words to communicate.

HCBS CONCEPT BUDGET									
Vendor Name CHD/disABILITY Services									
Vendor Number(s)	H83790 (1:3), HN0293 (1:4), HN202 (1:3)								
		Yea	ır 1 Bı	udget	Ye	ar 2 B	udget		Total
	Wage and Benefits	FTE		Annual Cost	FTE		Annual Cost		Cost
Personnel (wage + benefits)									
Position Description								\$	-
Employment Services Coordinator	\$68,663		\$	-	0.25	\$	17,166	\$	17,166
Rehabilitation Counselor	\$75,218		\$	-	0.25	\$	18,805	\$	18,805
Uplink Coordinator	\$68,663		\$	-	0.25	\$	17,166	\$	17,166
Work Services Coordinator	\$68,663		\$	-	0.25	\$	17,166	\$	17,166
Program Description			\$	-		\$	-	\$	-
Program Description			\$	-		\$	-	\$	-
Position Description			\$	-		\$	-	\$	=
Position Description			\$	-		\$	-	\$	-
Personnel Subtotal			\$	-		\$	70,302	\$	70,302
Operating expenses									
Virtual Competetive Employment Training	ng / ACRE								
Certificate - Griffin Hammis Associates(C	GHA) - All								
Staff			\$	12,500				\$	12,500
Competitive Empolyment Fieldwork Pra	cticum /								
GHA Customized Employment Crede	ntial -								
Leadership team \$2,500 @ 6 sta	ff		\$	15,000				\$	15,000
Fusion JAWS & ZoomText - Computer So	ftware for								
individuals with any level of vision impa			\$	2,100				\$	2,100
15 Speech Tablets (AAC devices) @ \$399		-	۲	2,100				٦	2,100
used in community	.99 - to be		ċ	6,000				\$	6,000
15 PECS Scheduling Kits @ \$99.9)E	-	\$	1,499		-		\$	1,499
13 r EC3 3CHEdding Kits @ \$39.5	, 5	-	7	1,433				\$	-
		-						\$	-
		-						\$	
		-						\$	-
		-						\$	-
Operating Subtotal		1	\$	37,099		\$	-	\$	37,099
Administrative Expenses			Ť	0.,000		Ť		, T	0.,000
Federally recognized Indirect Cost Rate 1:	3 54%		\$	14,542				\$	14,542
reactany recognized maneet cost nate in	5.5 170		Ψ	2 1,0 12				\$	
		-						\$	-
		-						\$	-
								\$	-
								\$	-
								\$	-
								\$	-
Administrative Subtotal			\$	14,542		\$	-	\$	14,542
Capital expenses		-							
								\$	-
								\$	-
								\$	-
								\$	-
								\$	-
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								\$	=
Capital Subtotal			\$	-		\$	-	\$	-
Total Concept Cost			\$	51,641		\$	70,302	\$	121,943
Total Concept Cost			Y	31,041		Y	70,302	Y	121,34

See Attachment F for budget details and restrictions