

## 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](mailto:HCBSregs@dds.ca.gov).

Date(s) of Evaluation: February 10, 2021	Completed by: Jennifer Santos
Vendor Name, Address, Contact: Mitchell Residential 1900 Robbie Ave; Modesto, CA 95350; Jennifer Santos: 209-353-5839	
Vendor Number: HV0467	
Service Type and Code: Residential Service Code: 915	

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<p><b><u>Federal Requirement #1:</u></b> <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><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals receive services in the community based on their needs, preferences and abilities?</li> <li>• Does the individual participate in outings and activities in the community as part of his or her plan for services?</li> <li>• If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?</li> <li>• Do individuals have the option to control their personal resources, as appropriate?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please explain: It is not possible to support engagement in community life based on preferences. Since we are a behavioral home, behaviors severely limit transportation options and decreases desired independence. Currently, there is an 8-seat van that is not person-centered and was purchased prior to opening. Resident's presence is prominent in a group. Sharing the one van does not allow for integrating to the same degree as others. It needs to be shared amongst all and preference is second to someone else's need. Residents have the ability to control their own resources.</p>	
<p><b><u>Federal Requirement #2:</u></b> <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><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals?</li> <li>• Does each individual's IPP document the different setting options that were considered prior to selecting this setting?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Each resident has an IPP with a living situation objective. This is developed with the resident and their IDT members. Each resident has an objective that identifies the appropriate and desired setting.</p>	
<p><b><u>Federal Requirement #3:</u></b></p>	<p><b><u>Guidance:</u></b></p>

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<p><i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<ul style="list-style-type: none"> <li>• Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?</li> <li>• Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?</li> <li>• 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.)?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Please explain: Mitchell Residential assures that consumer's right of privacy, dignity and freedom from coercion are assured at all times. Resident rights are gone over in detail, verbally and in writing, in a manner that they can understand. Staff are able to communicate with all residents based on their needs and preferences.</p>	
<p><b><u>Federal Requirement #4:</u></b> <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><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Does the provider offer daily activities that are based on the individual's needs and preferences?</li> <li>• 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?</li> <li>• 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?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b> Please explain: RSP cannot support community access based on preferences. Since we are a behavioral home, behaviors severely limit transportation options and decreases desired independence. The current van is not person-centered and was purchased prior to opening. One resident is struggling to get into it because he has Degenerative Disk Disease. It is painful for him to climb into it. The van is</p>	

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shared amongst all and preference is second to someone else's need. Residents are supported with peer interactions but transporting them to meet is not always possible. Staff are currently not trained to provide Person Centered approaches that encourage individual initiatives. Residents should be able to direct their own schedules/activities and Mitchell Residential would like to learn how to restructure services with this goal in mind that will increase opportunities and support individual choices.

**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: All staff are trained to provide for resident's immediate needs. Residents have the choice to pick a preferred staff to work with during that shift. There is more than one staff on at a time during awake hours. If they request a special activity, they will often tell administrator that they would like to complete it with a specific staff. Some staff are phenomenal bakers, cooks, have knowledge of a particular place/activity or is just preferred by the resident because of their personality. Mitchell Residential makes every attempt to make sure that their requests are honored.

**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*

**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?

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<p><i>provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord/tenant law.</i></p>	
<p><b>Does the service and/or program meet this requirement?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Please explain: Each resident has an admission agreement on file that is signed by all parties involved. Residents are informed of how to request relocation and are very verbal should they choose to.</p>	
<p><b><u>Federal Requirement #7:</u></b> <i>Each individual has privacy in his/her sleeping or living unit:</i>  <ul style="list-style-type: none"> <li><i>Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.</i></li> <li><i>Individuals sharing units have a choice of roommates in that setting.</i></li> <li><i>Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i></li> </ul> </p>	<p><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have a choice regarding roommates or private accommodations?</li> <li>• 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?</li> <li>• Do individuals have the ability to lock their bedroom doors when they choose?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b> Please explain: Residents are not always able to pick their own room. There are two single rooms and one shared. It usually comes down to seniority, gender and/or individual need with how rooms are decided. All are encouraged to decorate their rooms and RSP assists them. Currently, none of the rooms have the ability to lock when residents wish to lock them. Residents recently received stimulus funds and desire big ticket items such as TVs and computers. They will require locks on their doors if they wish to keep their rooms/items locked and to comply with HCBS Rules.</p>	
<p><b><u>Federal Requirement #8:</u></b> <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><b><u>Guidance:</u></b></p> <ul style="list-style-type: none"> <li>• Do individuals have access to food at any time?</li> <li>• Does the home allow individuals to set their own daily schedules?</li> <li>• Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?</li> </ul>
<p><b>Does the service and/or program meet this requirement?</b> <input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b> Please explain: Freedom of schedules/activities are encouraged but do not always happen. This is not possible due to lack of another vehicle to transport residents to</p>	

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desired places. Transportation is currently utilized with necessity negating pleasure or scheduled based on needs/risks. Having only one vehicle decreases opportunities and the ability to support residents on an individual basis. Food and full access to facilities are available at all times.

**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 requirement?**  **Yes**  **No**

Please explain: Visitors are welcome at the home at any time but we ask that they take each other into consideration when planning a visit during times that other residents may be in their pajamas/sleeping and request privacy. Residents are able to go on visits and all have family/friends that they enjoy spending time with. Family/friend relationships are highly encouraged and supported.

**Federal Requirement #10:**

*The setting is physically accessible to the individual.*

**Guidance:**

- Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area?
- Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move about the setting as they choose?
- Are appliances and furniture accessible to every individual?

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

Please explain: All residents have the right to move freely to all areas of the property except for the staff office area. This area is locked to keep chemicals, important staff/resident documents and medications inaccessible. Residents are not forced to be in one area but are encouraged to be creative, productive and active.

### 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	Mitchell Residential
Vendor number(s)	HV0467
Primary regional center	Valley Mountain Regional Center
Service type(s)	Residential
Service code(s)	915
Number of consumers typically and currently served	Request submitted to Regional Center to reduce capacity size from 6 beds to 4 beds. Currently serving 4 residents.
Typical and current staff-to-consumer ratio	1:3 is required but it is more realistically 1:2 during awake hours.
<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>Mitchell Residential is a level 4i ARF that provides residential services to 4 ambulatory adults with developmental delays and behaviors. In addition, all have mental health diagnoses and a forensic background. All have a behavior plan that is individually developed to encourage positive interactions and increase socially appropriate behavior. A typical weekday consists of residents going to an appropriate vocational/behavior program/school. Residents attend AA/NA, individual therapy, anger management and 3/4 residents attend several Dr. appts for major ongoing health issues. The van is utilized to pick/drop residents off at school/program/appts. The weekends are usually reserved for church, a group activity and shopping. There is little room for spontaneous individual preference.</p>	
<p>Project Narrative Description: While filling out this section, reflect on how services are typically provided and how that might have changed in the past year. Think about what has been learned in the past year and how that might shape services going forward. Funding awarded through this concept can span the course of up to two years which would allow time to shape services to be more person-centered and align with the HCBS federal requirements.</p>	
<p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p>	
<p><b>Vehicle (#1 #4 #8):</b> There is one van that is shared by all and cannot provide an opportunity for residents to access the community to the same degree as others. Another vehicle would allow for smaller groups and would enable individual choices/preferences. It is also needed to allow an individual to age in place. He is 59 and struggles with getting into current vehicle and endures pain in doing so. A smaller vehicle will allow him to remain in the home. <b>Locks (#7):</b> There are currently no locks on bedroom doors. Residents usually have to ask to lock an item up they wish to keep safe. This occurs if a resident leaves or a housemate is having a behavior. Having locks on doors will promote independence in caring for their own items, allow them to have immediate access to their items and allow for privacy. <b>Training (#4):</b> Staff are not trained in a Person-Centered approach when providing services. Funding is requested to provide this training to staff. Residents should be able to direct their own schedules/activities/preferences/choices and we would like to restructure services to achieve this. <b>An emergency generator (#4 #8):</b> California</p>	

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is prone to incidents of blackouts and has a need to periodically cut service due to probability of wildfires. Residents do have medical equipment that requires electricity. A generator will allow for needs to be met with minimal disruption, allow residents to direct their own schedule and continue using items and facilities.

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\_x\_ 5\_\_ 6\_\_ 7\_x\_ 8\_x\_ 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.

**Locks (#7):** There are no bedroom locks. Locks would allow for more control to keep personal items safe and promote privacy. **Person Centered Training (#4):** Staff do not think from a resident perspective. With training, greater control would be afforded to the resident. We would like to learn how to restructure services to support this. **A generator (#4 #8):** This past year has been full of PUC blackouts and utility shutoffs. A generator will provide the opportunity to remain stable and in their own home. This will give residents the ability to follow/set their own schedule and continue accessing preferred/needed items/facilities. **Vehicle (#1 #4 #8):** A large van, used to meet immediate needs, does not support residents on an individual basis. A smaller vehicle will provide opportunities for individual choices, integration to the same degree as others and will allow for an individual to age in place.

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.

Funding for **locks (#7)** would allow doors to be locked (purchased/installed immediately). With PCT **training (#4)** staff will become Person-Centered with their support (completed within year). A smaller **vehicle (#1 #4 #8)** would create opportunities for participating in the community with autonomy and integration to the same degree as others. It would allow to age in place (completed in 2-6 months). A **generator (#4 #8)** would allow residents to set/follow their own schedules and have items/facilities available to them at all times (completed in 2-6 months).

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

Proposed outcome will be HCBS compliance and autonomy for residents. Arranging and tracking of staff training will be done by admin. Licensee will purchase/install electronic door locks with resident's assistance. Two residents have requested to help install locks. Licensee will purchase generator and will locate an electrician that will create a second panel with a transfer switch that will accommodate generator. Licensee/admin will solicit ideas and suggestions from residents and staff for an ideal vehicle to meet all needs, accommodations and preferences. Tracking of autonomy will be completed by taking quantitative data. The amount of community access, after the addition of a smaller vehicle, will be compared to current baseline data. Quarterly reports will be submitted to update RC of progress and/or completion of each concept.

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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.

The development of concepts came from discussions with residents and staff. Residents would like a smaller vehicle to help them achieve integration into community and would also be easier to physically get into. One resident with Degenerative Disk Disease, COPD and a pacemaker would like a lower vehicle so he doesn't need to climb into it. He will be 59 this year and this would help him continue to age in place. Another resident has asked for a vehicle that doesn't stick out so that he isn't "on display." Discussions about a generator have taken place during times of emergency shut offs and residents do not want to have to leave their home. Locks have been discussed and they would like the opportunity to keep their belongings safe and welcome the idea of privacy. Two residents would like the opportunity to learn how to install them when licensee has purchased them.

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

**Person-Centered training** will train staff to support residents with their goals/independence as the focus. **A vehicle** will help residents access the community and create individualized choice. It will allow for autonomy and for resident to age in place. **Locks** allow residents to take care of their own items during vulnerable times and give privacy. **A generator** allows all to remain in the home while following their own schedules during emergencies without power.

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

Implementing new concepts always require initial funding. Being able to maintain the locks, vehicle, generator and continuing to train new staff at the conclusion of funding will be achievable. It is financially easier to send one or two staff upon hire to a training than to initially send all. The training will allow for a new frame of thought and furthered success for all. The vehicle will receive ongoing maintenance and will be kept safe to assure this will be enjoyed for many years. Residents will be taught how to use the locks properly/effectively to keep them functioning and generator will be used by trained individuals in the event of an emergency.

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](#).

**Locks:** \$300 (3 x \$100) for electronic locks (licensee to install immediately)  
**Vehicle** (includes taxes/registration/insurance): \$23,000.00. This could be achieved after discussing with residents the type of vehicle desired to meet all

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<p>needs and then locating one (2-6 months to complete). This timeframe would also allow residents an opportunity to participate in the entire process, should they wish.  <b>Generator/Electrician:</b> \$1600 for 12kw generator with power cord and \$2000 for an electrician to update fuse panel with second panel transfer switch. This is an older house and fuse panel is out of date and will not handle a generator. An updated panel that allows for a transfer switch will be required. This will transfer the power when utility power is shut off and allow for the generator to power the necessities through the new panel. The generator could be purchased and an electrician scheduled after funding approval (2-6 months).  <b>Person Centered Training:</b> 13 staff x \$90 per training (\$1170 total) and \$2912 for staff wages to attend training. This may take up to 12 months depending on the frequency of trainings and availability of spots. Ideally one or two staff will attend (virtually or in person) at a time to keep basic functions operating as normal.</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>Vehicle maintenance and insurance will be the only ongoing costs for the vehicle. These ongoing costs can be absorbed into the budget after the funding timeline. Only new staff would need to receive Person-Centered training and those costs will also be absorbed into the budget. Door locks and generator will not require any foreseen ongoing funds.</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 <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.          If Yes, FY(s) _____          Disparity Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.          If Yes, FY(s) _____          CPP Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.          If Yes, FY(s) _____          CRDP Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.          If Yes, FY(s) _____</p> <p>If yes to any question be sure to answer questions 13 and 14.</p>
<p><b>For providers who have received prior HCBS, Disparity, CPP or CRDP Funding from DDS</b></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>N/A</p>	
<p>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.</p>	
<p>N/A</p>	

HCBS CONCEPT BUDGET	\$30,682.00
Vendor Name	Mitchell Residential
Vendor Number(s)	HV0467

	Year 1 Budget			Year 2 Budget		Total
	Wage and Benefits	FTE	Annual Cost	FTE	Annual Cost	Cost
<b>Personnel (wage + benefits)</b>						
wages for attending PCT training	224	13.00	\$ 2,912		\$ -	\$ 2,912
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
<b>Personnel Subtotal</b>			<b>\$ 2,912</b>		<b>\$ -</b>	<b>\$ 2,912</b>
<b>Operating expenses</b>						
PCT training classes for all st \$90/pp x 13			\$ 1,170		\$ -	\$ 1,170
vehicle insurance 1 yr			\$ 3,000		\$ -	\$ 3,000
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
<b>Operating Subtotal</b>			<b>\$ 4,170</b>		<b>\$ -</b>	<b>\$ 4,170</b>
<b>Administrative Expenses</b>						
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
<b>Administrative Subtotal</b>			<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>
<b>Capital expenses</b>						
vehicle (including taxes and registration)			\$ 20,000		\$ -	\$ 20,000
electrician/transfer switch with second panel for generator			\$ 2,000		\$ -	\$ 2,000
12kw generator w/ powercord			\$ 1,600		\$ -	\$ 1,600
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
<b>Capital Subtotal</b>			<b>\$ 23,600</b>		<b>\$ -</b>	<b>\$ 23,600</b>
<b>Total Concept Cost</b>			<b>\$ 30,682</b>		<b>\$ -</b>	<b>\$ 30,682</b>

See Attachment F for budget details and restrictions