

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: Fiscal Year 21-22	Completed by: Tamra Hernandez
Vendor Name, Address, Contact: Vender Name Valley CAPS Corporate Office 178 South Austin Road, ABLE (H07649) 1900 Blue Gum Ave Suite B (HV0299) Contact: Tamra Hernandez, Program Director	
Vendor Number: H07649, HV0299	
Service Type and Code: 515 Behavioral Management Program	

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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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please explain: Individuals receive services based on their needs, preferences and abilities however, non-ambulatory and highly behavioral individuals have limited access to resources in the community as staff lack the resources and dedicated time allowance to facilitate integrated employment opportunities with smaller groups and extra staffing.</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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please explain: Each individual has a current Individual Program Plan on file; however, it is not documented in all IPP's the different setting options that were considered prior to attending Valley CAPS.</p>	
<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider inform individuals, in a manner they can understand, of their rights to

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	<p>privacy, dignity, respect, and freedom from coercion and restraint?</p> <ul style="list-style-type: none"> • Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality? • Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Upon intake, at annual review, and periodically Valley CAPS informs individuals of their rights of privacy, dignity and respect, and freedom from coercion and restraint. Valley CAPS communicates this information both verbally and in writing in a manner the ensures privacy and confidentiality. Staff communicate with individuals through verbal, gestural, and picture exchange. For individuals who have difficulty using the aforementioned communication, Valley CAPS has limited resources to assistive technology tools, braille, sign language, the individual's preferred language, adaptive equipment, etc.</p>	
<p><u>Federal Requirement #4:</u> <i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider offer daily activities that are based on the individual's needs and preferences? • Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings? • Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Individuals are offered daily activities based on their needs and preferences however, non-ambulatory and highly behavioral individuals have limited opportunities to access the community due to limited resources available to provide enriched staffing along with limited non-ambulatory vehicles. Individuals are provided limited options to meet their employment needs and preferences due</p>	

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to a lack of resources within the Program. Individuals indicate their preferred setting upon intake and are grouped with individuals of their preference both onsite-and in the community. The individual is provided with supports to participate in activities that interest them and corresponds with their IPP goals. Individually planned activities and instructions that increase the individual's ability to engage in conversation, exchange information, and communicate on a social basis are provided daily.

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: Individuals are supported in choosing the staff that provide their care as well as alternative staff support. Choices are supported in a manner that leaves the individual feeling empowered to make decisions throughout their day at the Program. Individuals have continuous opportunities to modify their services and express their concerns or ask questions regarding the services they receive during their IPP meetings, through the Self-Advocacy group, and other opportunities both within and outside of the Program.

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

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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<i>eviction processes and appeals comparable to those provided under the jurisdiction's landlord/tenant law.</i>	
Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Click or tap here to enter text.	
<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>	<u>Guidance:</u> <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?
Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Click or tap here to enter text.	
<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>	<u>Guidance:</u> <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?
Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Click or tap here to enter text.	
<u>Federal Requirement #9:</u> <i>Individuals are able to have visitors of their choosing at any time.</i>	<u>Guidance:</u> <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?
Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Please explain: <u>Click or tap here to enter text.</u>	
<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</p> <p>Please explain: <u>Click or tap here to enter text.</u></p>	

CONTACT INFORMATION

Contact Name: Tamra Hernandez

Contact Phone Number: 209-815-3743

Email Address: tamra@valleycaps.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.

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Vendor name	Valley CAPS, Inc
Vendor number(s)	V07649, HV0094
Primary regional center	Valley Mountain Regional Center
Service type(s)	Behavior Management Program
Service code(s)	515
Number of consumers typically and currently served	48, 80
Typical and current staff-to-consumer ratio	1:3

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.

Valley CAPS provides services to individuals in need of support with challenging and/or socially inappropriate behavior. Valley CAPS believes that providing community integration to individuals promotes the ability to live, work, and participate independently within the community setting. Currently, employment opportunities are based on the job market, limiting the opportunities available for individuals based on their needs and preferences. Individuals are provided access to the community in a group setting as there are limited resources to support individualized community integration. It is challenging to provide consistently for highly behavioral individuals as well as individuals with limited mobility.

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.

Program Specialist 2: Lead the community/employment team in enhancing access to the greater community and develop and secure competitive integrated employment. This position will supervise the Job Procurement Specialists and Job Coaches.

2 Job Procurement Specialists: Full-time Job Procurement Specialists within the Programs will facilitate opportunities for competitive integrated employment centered around the individuals' interests, preferences, and abilities.

1:1 Job Coaches: 1:1 Job Coaches in addition to the current 1:3 ratio in the Program will help to stabilize individual employment placements in the community. The number of 1:1 Job Coaches will vary depending on the needs of the individual and job placements.

3 Company Vehicles: Provide the Program Coordinator and Job Procurement Specialists with transportation to ensure community access and competitive integrated employment opportunities are actively sought. The estimated vehicle usage will be 80% of the available hours traveling to areas within the community, visiting multiple businesses daily regarding opportunities, meetings and interviews, transporting individuals to interviews, providing check-ins to sustain placement, etc.

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1:1 Instructors: Utilizing 1:1 Instructors in addition to the current 1:3 Instructors in the Program will provide additional support to individuals requiring a greater need of support while in the community. The number of 1:1 Instructors will vary depending on the needs of the individuals in the community.

3 Wheelchair Accessible Vans: The utilization of wheelchair accessible vans for each facility will allow for increased integration into the greater community and the ability to provide employment opportunities to individuals limited to onsite training because of their non-ambulatory status.

Training & Supports: In order to fully implement Person-Centered Services and planning, Valley CAPS is requesting the following training and supports to ensure that Valley CAPS is implementing Person-Centered Services according to the HCBS Rules consistently throughout the organization: I) Training Coordinator Position: The Training Coordinator will be responsible for ensuring all Valley CAPS employees are trained annually on Person-Centered Services and that Person-Centered Services are implemented consistently throughout the organization. II) Train-the-Trainer: The Training Coordinator and select Valley CAPS Management members will receive the "Trainer-the-Trainer" certification on Person Centered Planning/Thinking to conduct training throughout the organization. III) Training: Provide training opportunities both internally and externally related to competitive integrated employment that can include trainings such as the ACRE-Approved Basic Employment Certification that will cover Introduction to Customized Employment and Discovery and other job development tools.

Technology/Software & Training: I) Expand communication with all individuals needing alternative methods of communication with supports such as assistive technology, sign language, the participants primary language, etc. Staff would be provided training and education on the software and/or participants language. II) Positions such as the Program Specialist, Job Procurement Specialists, 1:1 Job Coaches, and 1:1 Instructors will require technological devices such as smart phones, tablets, and laptops as their primary assignments will be community based. III) Provide a Career Readiness Program through an accredited school whereby individuals can earn certifications and career diplomas. An active learning environment including technological devices such as tablets, smart boards, computers, etc. will support collaborative learning in the classroom related to resume building, submitting online applications, and the completion of the Career Readiness Program. Therap Employment Module: Purchase Therap Services Employment Module to track placements and progress on the individuals in competitive integrated employment settings.

Access to Desired Activities: Support individuals requesting to participate in activities outside of normal business hours for activities such as professional sports games, concerts, amusement parks, etc.

Branding/Public Relations: Infuse Person-Centered Planning/Thinking into the culture and branding of Valley CAPS and provide outreach and printed materials regarding the HCBS rules to individuals served, members of their support team, and the community at large.

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 2 3 4 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.

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<p>Federal Requirement #1: Non-ambulatory and highly behavioral individuals have limited opportunities to access the community due to limited resources for enriched staffing support while in the community that can transport mobility devices. Individuals are provided limited options to meet their employment needs and preferences due to a lack of resources within the Program. Federal Requirement #2: Current Individual Program Plans are on file for all individuals however, it is not documented in all IPP's the different setting options that were considered prior to selecting Valley CAPS. Federal Requirement #3: Valley CAPS has limited resources to assistive technology tools, sign language, the participant's language, adaptive equipment, etc. making it difficult to ensure the individual understands the content that is being reviewed. Federal Requirement #4: See response to Federal Requirement #1 listed above.</p>
<p>5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance by March 2023.</p>
<p>Federal Requirement #1: Funding for the requested positions, training, and other resources will further enhance Person-Centered Services throughout the organization. Valley CAPS will be able to provide individuals with a greater access to the community and competitive integrated employment opportunities based on their needs and preferences. Federal Requirement #2: Valley CAPS will request addendums to be attached to Individual Program Plans that do not contain IPP's documenting the different setting options considered prior to selecting Valley CAPS. Federal Requirement #3: By providing alternative methods of communication, individuals can communicate their needs and preferences in a manner that can be understood. Federal Requirement #4: See response to Federal Requirement #1 listed above.</p>
<p>6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?</p>
<p>The proposed outcome of this concept is that Valley CAPS will support all individuals in the greater community based on their needs and preferences, develop and sustain competitive integrated employment, increase communication with individuals using alternative communication methods and enhance training and development in providing person-centered services consistently throughout the organization. Tracking will be maintained through in a variety of modules and monitored daily.</p>
<p>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.</p>
<p>Valley CAPS conducts ongoing Self-Advocacy Client Council Meetings where Valley CAPS receives feedback from the individuals served expressing their interests and desires. Additionally, Valley CAPS will provide satisfaction surveys requesting feedback from the individuals, care homes/families, stakeholders, etc. Valley CAPS has adopted the "Personal Profile" to be completed with all individuals served based on their needs and preferences.</p>
<p>8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.</p>
<p>This concept promotes Person-Centered Services and will enhance the delivery of services in a manner reflecting the individuals personal needs and preferences while also ensuring the individual has opportunities to access the greater community, seek employment, and work in competitive integrated settings to the same degree of access as individuals not receiving Medicaid HCBS.</p>

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<p>9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2020-21 HCBS Funding.</p>	
<p>Valley CAPS has requested funding for positions, training, and other resources that will further enhance Person-Centered Services throughout the organization. The positions and resources requested will serve multiple purposes and will be maintained through the submission of a Program Design for Service Code: 055-Community Integration Training Program. Through this Program Design, Valley CAPS will ensure the individuals served maintain access to the greater community and are provided work in competitive integrated settings based on their needs and preferences.</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. 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>See attached budget and timeline.</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>Not applicable.</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 ___ Yes. If Yes, FY(s) ___ NA _____ Disparity Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___ NA _____ CPP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___ NA _____ CRDP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___ NA _____</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>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							
Vendor Name		Valley CAPS					
Vendor Number(s)		H07649, HV0299					
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total	
		FTE	Annual Cost	FTE	Annual Cost	Cost	
Personnel (salary + benefits)							
Job Procurement Specialist	54,000	2.00	\$ 108,000		\$ -	\$ 108,000	
Job Coach	40,000	5.00	\$ 200,000		\$ -	\$ 200,000	
Training Coordinator	60,000	1.00	\$ 60,000		\$ -	\$ 60,000	
Program Specialist 2	58,000	1.00	\$ 58,000		\$ -	\$ 58,000	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Personnel Subtotal			\$ 426,000		\$ -	\$ 426,000	
Operating expenses							
Train the Trainer			\$ 40,000		\$ -	\$ 40,000	
Trainings			\$ 32,000		\$ -	\$ 32,000	
Branding/Public/Relations/Printing			\$ 85,000		\$ -	\$ 85,000	
Phone			\$ 5,000		\$ -	\$ 5,000	
Mileage			\$ 5,600		\$ -	\$ 5,600	
lease			\$ 14,000		\$ -	\$ 14,000	
Utilities			\$ 3,500		\$ -	\$ 3,500	
Therp Employment Model			\$ 700		\$ -	\$ 700	
Traini the Trainer travel			\$ 3,000		\$ -	\$ 3,000	
desired activities			\$ 5,000		\$ -	\$ 5,000	
Operating Subtotal			\$ 193,800		\$ -	\$ 193,800	
Administrative Expenses							
Admininrative Expences			\$ 52,000		\$ -	\$ 52,000	
					\$ -	\$ -	
					\$ -	\$ -	
					\$ -	\$ -	
					\$ -	\$ -	
					\$ -	\$ -	
Administrative Subtotal			\$ 52,000		\$ -	\$ 52,000	
Capital expenses							
3 wheelchair vans			\$ 195,000		\$ -	\$ 195,000	
2 vehicles for Job Procurment Specilists			\$ 45,000		\$ -	\$ 45,000	
10 computers for staff			\$ 10,000		\$ -	\$ 10,000	
2 Smart Boards for Trainings			\$ 9,000		\$ -	\$ 9,000	
9 Laptops for Job Coaches			\$ 9,000		\$ -	\$ 9,000	
10 Computers for Consumers			\$ 10,000		\$ -	\$ 10,000	
Vehicle for Training Coordinator			\$ 20,000		\$ -	\$ 20,000	
Assistive Technology & Software			\$ 15,000		\$ -	\$ 15,000	
Carerr Readiness Program			\$ 10,000		\$ -	\$ 10,000	
Capital Subtotal			\$ 323,000		\$ -	\$ 323,000	
Total Concept Cost			\$ 994,800		\$ -	\$ 994,800	

See Attachment F for budget details and restrictions

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Date(s) of Evaluation: Fiscal Year 21-22	Completed by: Tamra Hernandez
Vendor Name, Address, Contact: Vender Name Valley CAPS PLUS 1180 North Union Road, Manteca, CA Corporate Office 178 South Austin Road, Contact: Tamra Hernandez, Program Director	
Vendor Number: HV0094	
Service Type and Code: 505, Activity Program	

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

<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please explain: Individuals receive services based on their needs, preferences, and abilities however, individuals have limited access to resources in the community as staff lack the resources and dedicated time allowance to facilitate integrated employment opportunities with smaller groups and extra staffing.</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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please explain: Each individual has a current Individual Program Plan on file; however, it is not documented in all IPP's the different setting options that were considered prior to attending Valley CAPS.</p>	
<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider inform individuals, in a manner they can understand, of their rights to

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	<p>privacy, dignity, respect, and freedom from coercion and restraint?</p> <ul style="list-style-type: none"> • Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality? • Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Upon intake, annual review, and periodically Valley CAPS informs each individual of their rights of privacy, dignity and respect, and freedom from coercion and restraint. Valley CAPS communicates this information both verbally and in writing in a manner the ensures privacy and confidentiality. Staff communicate with individuals through verbal, gestural, and picture exchange. For individuals who have difficulty using the aforementioned communication, Valley CAPS has limited resources to assistive technology tools, braille, sign language, the individual's preferred language, adaptive equipment, etc.</p>	
<p><u>Federal Requirement #4:</u></p> <p><i>Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider offer daily activities that are based on the individual's needs and preferences? • Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings? • Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Individuals are offered daily activities based on their needs and preferences however, individuals have opportunities to access the community due to limited resources available to provide enriched staffing supports. Individuals are provided limited options to meet their employment needs and preferences due to a lack of resources within the Program. Program has a staff ratio of 1:8 which limits</p>	

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opportunities for individual choices. Individuals do indicate their preferred setting upon intake and are grouped with individuals of their preference both onsite and in the community. The individual is provided with supports to participate in activities that interest them and corresponds with their IPP goals. Individually planned activities and instructions that increase the individual's ability to engage in conversation, exchange information, and communicate on a social basis which is provided daily.

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: Individuals are supported in choosing the staff that provide their care as well as alternative staff support however, due to a staff ratio of 1:8 choice of staff is limited. Choices are supported in a manner that leaves the individual feeling empowered to make decisions throughout their day at the Program. Individuals have continuous opportunities to modify their services and express their concerns or ask questions regarding the services they receive during IPP meetings, through the Self-Advocacy Group, and other opportunities both inside and outside of the Program.

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

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>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>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Click or tap here to enter text.</p>	
<p><u>Federal Requirement #7:</u> <i>Each individual has privacy in his/her sleeping or living unit:</i></p> <ul style="list-style-type: none"> <i>Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.</i> <i>Individuals sharing units have a choice of roommates in that setting.</i> <i>Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i> 	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have a choice regarding roommates or private accommodations? • Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences? • Do individuals have the ability to lock their bedroom doors when they choose?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Click or tap here to enter text.</p>	
<p><u>Federal Requirement #8:</u> <i>Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have access to food at any time? • Does the home allow individuals to set their own daily schedules? • Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain: Click or tap here to enter text.</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?

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

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 requirement? Yes No

Please explain: [Click or tap here to enter text.](#)

CONTACT INFORMATION

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Contact Phone Number: 209-815-3743

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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.

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

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Vendor name	Valley CAPS, PLUS
Vendor number(s)	
Primary regional center	Valley Mountain Regional Center
Service type(s)	Activity Program
Service code(s)	505
Number of consumers typically and currently served	48
Typical and current staff-to-consumer ratio	1:8
<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>Valley CAPS provides services to individuals in need of support that will enable them to make decisions regarding their everyday life. Valley CAPS believes that providing community integration to individuals promotes the ability to live, work, and participate independently within the community setting. Currently, employment opportunities are based on the job market limiting the opportunities available for individuals based on their needs and preferences. Individuals are provided access to the community in a group setting as there are limited resources to support individualized community integration. This can be challenging to provide consistently for highly behavioral individuals as well as individuals with limited mobility.</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>Program Specialist 2: Lead the community/employment team in enhancing access to the greater community and develop and secure competitive integrated employment. This position will supervise the Job Procurement Specialists and Job Coaches.</p> <p>1 Job Procurement Specialist: Full-time Job Procurement Specialists within the Programs will facilitate opportunities for competitive integrated employment centered around the individuals' interests, preferences, and abilities.</p> <p>2:1 Job Coaches: 1:1 Job Coaches in addition to the current 1:8 ratio in the program will help to stabilize individual employment placements in the community. The number of 1:1 Job Coaches will vary depending on the needs of the individual and job placements.</p> <p>2 Company Vehicles: Provide the Program Coordinator and Job Procurement Specialists with transportation to ensure community access and competitive integrated employment opportunities are actively sought. The estimated vehicle usage will be 80% of the available hours traveling to areas within the community, visiting multiple businesses daily regarding opportunities, meetings and interviews, transporting individuals to interviews, providing check-ins to sustain placement, etc.</p>	

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1:1 Instructors: Utilizing 1:1 Instructors in addition to the current 1:8 Instructors in the Program will provide additional support to individuals requiring a greater need of support while in the community. The number of 1:1 Instructors will vary depending on the needs of the individuals in the community.

1 Wheelchair Accessible Vans: The utilization of wheelchair accessible vans for each facility will allow for increased integration into the greater community and the ability to provide employment opportunities to individuals limited to onsite training because of their non-ambulatory status.

Training & Supports: In order to fully implement Person-Centered Services and planning, Valley CAPS is requesting the following training and supports to ensure that Valley CAPS is implementing Person-Centered Services according to the HCBS Rules consistently throughout the organization: I) Training Coordinator Position: The Training Coordinator will be responsible for ensuring all Valley CAPS employees are trained annually on Person-Centered Services and that Person-Centered Services are implemented consistently throughout the organization. II) Train-the-Trainer: The Training Coordinator and select Valley CAPS Management members will receive the "Trainer-the-Trainer" certification on Person Centered Planning/Thinking to conduct training throughout the organization. III) Training: Provide training opportunities both internally and externally related to competitive integrated employment that can include trainings such as the ACRE-Approved Basic Employment Certification that will cover Introduction to Customized Employment and Discovery and other job development tools.

Technology/Software & Training: I) Expand communication with all individuals needing alternative methods of communication with supports such as assistive technology, sign language, the participants primary language, etc. Staff would be provided training and education on the software and/or participants language. II) Positions such as the Program Specialist, Job Procurement Specialists, 1:1 Job Coaches, and 1:1 Instructors will require technological devices such as smart phones, tablets, and laptops as their primary assignments will be community based. III) Provide a Career Readiness Program through an accredited school where individuals can earn certifications and career diplomas. An active learning environment including technological devices such as tablets, smart boards, computers, etc. will support collaborative learning in the classroom related to resume building, submitting online applications, and the completion of the Career Readiness Program. Therap Employment Module: Purchase Therap Services Employment Module to track placements and progress on the individuals in competitive integrated employment settings.

Therap Employment Module: Purchase Therap Services Employment to track placements and progress on individuals in competitive integrated employment settings.

Lease Office with Training Room: Lease office with a training room from the Manteca area that will provide ongoing staff training as well as house Job Coach and Program Specialist 2.

Access to Desired Activities: Support individuals requesting to participate in activities outside of normal business hours for activities such as professional sports games, concerts, amusement parks, etc.

Branding/Public Relations: Infuse Person-Centered Planning/Thinking into the culture and branding of Valley CAPS and provide outreach and printed materials regarding the HCBS rules to individuals served, members of their support team, and the community at large.

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_X 4_X 5___ 6___ 7___ 8___ 9___ 10___

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<p>4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.</p>
<p>Federal Requirement #1: Non-ambulatory individuals have limited opportunities to access the community due to limited resources for enriched staffing support while in the community that can transport mobility devices. Individuals are provided limited options to meet their employment needs and preferences due to lack of resources within the Program. Federal Requirement #2: Current Individual Program Plans are on file for all individuals however, it is not documented in all IPP's the different setting options that were considered prior to selecting Valley CAPS. Federal Requirement #3: Valley CAPS has limited resources to assistive technology tools, sign language, the participant's language, adaptive equipment, etc. making it difficult to ensure the individual understands the content that is being reviewed. Federal Requirement #4: See response to Federal Requirement #1 listed above.</p>
<p>5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance by March 2023.</p>
<p>Federal Requirement #1: Funding for the requested positions, training, and other resources will further enhance Person-Centered Services throughout the organization. Valley CAPS will be able to provide individuals with a greater access to the community and competitive integrated employment opportunities based on their needs and preferences. Federal Requirement #2: Valley CAPS will request addendums to be attached to Individual Program Plans that do not contain IPP's documenting the different setting options considered prior to selecting Valley CAPS. Federal Requirement #3: By providing alternative methods of communication, individuals can communicate their needs and preferences in a manner that can be understood. Federal Requirement #4: See response to Federal Requirement #1 listed above.</p>
<p>6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?</p>
<p>The proposed outcome of this concept is that Valley CAPS will support all individuals in the greater community based on their needs and preferences, develop and sustain competitive integrated employment, increase communication with individuals using alternative communication methods and enhance training and development in providing Person-Centered Services consistently throughout the organization. Tracking will be maintained through a variety of modules and monitored daily.</p>
<p>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.</p>
<p>Valley CAPS conducts ongoing Self-Advocacy Client Council Meetings whereby Valley CAPS receives feedback from the individuals served expressing their interests and desires. Additionally, Valley CAPS will provide satisfaction surveys requesting feedback from the individuals, care homes/families, stakeholders, etc. Valley CAPS has adopted the "Personal Profile" to be completed with all individuals served based on their needs and preferences.</p>
<p>8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.</p>
<p>This concept promotes Person-Centered Services and will enhance the delivery of services in a manner reflecting the individuals personal needs and preferences while also</p>

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<p>ensuring the individual has opportunities to access the greater community, seek employment, and work in competitive integrated settings to the same degree of access as individuals not receiving Medicaid HCBS.</p>	
<p>9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2020-21 HCBS Funding.</p>	
<p>Valley CAPS has requested funding for positions, training, and other resources that will further enhance Person-Centered Services throughout the organization. The positions and resources requested will serve multiple purposes and will be maintained through the submission of a Program Design for Service Code: 055-Community Integration Training Program. Through this Program Design, Valley CAPS will ensure the individuals served maintain access to the greater community and are provided work in competitive integrated settings based on their needs and preferences.</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. 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>See attached budget and timeline.</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>Not applicable.</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 ___ Yes. If Yes, FY(s) ___NA___ Disparity Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___NA___ CPP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___NA___ CRDP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___NA___</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>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>	

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N/A

HCBS CONCEPT BUDGET						
Vendor Name		Valley CAPS PLUS				
Vendor Number(s)		HV0299				
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total Cost
		FTE	Annual Cost	FTE	Annual Cost	
Personnel (salary + benefits)						
Job Procurement Specialist	54,000	2.00	\$ 108,000		\$ -	\$ 108,000
Job Coach	40,000	2.00	\$ 80,000		\$ -	\$ 80,000
Training Coordinator	60,000	1.00	\$ 60,000		\$ -	\$ 60,000
Program Specialist 2	58,000	1.00	\$ 58,000		\$ -	\$ 58,000
Additional Staff	35000	4.00	\$ 140,000		\$ -	\$ 140,000
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ 446,000		\$ -	\$ 446,000
Operating expenses						
Train The Trainer			\$ 25,000		\$ -	\$ 25,000
Trainings			\$ 20,000		\$ -	\$ 20,000
Branding/Public/Relations/Printing			\$ 25,000		\$ -	\$ 25,000
Phone			\$ 2,000		\$ -	\$ 2,000
Mileage			\$ 3,200		\$ -	\$ 3,200
					\$ -	\$ -
					\$ -	\$ -
Therp Employment Model			\$ 700		\$ -	\$ 700
					\$ -	\$ -
desired activities			\$ 5,000		\$ -	\$ 5,000
Operating Subtotal			\$ 80,900		\$ -	\$ 80,900
Administrative Expenses						
Administrative Expenses			\$ 8,000		\$ -	\$ 8,000
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Administrative Subtotal			\$ 8,000		\$ -	\$ 8,000
Capital expenses						
1 Wheelchair Van			\$ 65,000		\$ -	\$ 65,000
2 vehicles for Job Procurment Specilists			\$ 45,000		\$ -	\$ 45,000
4 Computers for staff			\$ 7,400		\$ -	\$ 7,400
2 Smart Boards for Trainings			\$ 4,500		\$ -	\$ 4,500
4 laptops fpr Job Cpaches			\$ 7,400		\$ -	\$ 7,400
10 Computers for Consumers			\$ 7,400		\$ -	\$ 7,400
					\$ -	\$ -
Assistive Technology & Software			\$ 15,000		\$ -	\$ 15,000
Career Readiness Program			\$ 10,000		\$ -	\$ 10,000
Capital Subtotal			\$ 161,700		\$ -	\$ 161,700
Total Concept Cost			\$ 696,600		\$ -	\$ 696,600

See Attachment F for budget details and restrictions