

Home and Community-Based Services (HCBS) Rules Reference Information

The Home and Community-Based Services (HCBS) rules supports people with disabilities to 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. **Completion of this concept form is for the sole purpose of applying for compliance funding and does not take the place of provider assessments or remediation that the Department has required to determine provider compliance with the HCBS settings rules.**

Prior HCBS funding focused primarily on barriers to compliance with the 10 federal requirements of the HCBS Final Rule. HCBS funding for fiscal year 2021-2022 will still take the 10 federal requirements into account and will also place increased emphasis on the outcome of a provider's concept. To simplify the process, the federal requirements were placed in three categories that target similar outcomes. Those categories are Community Integration, Individual Rights, and Choice. A fourth category, Collaboration, may be used for a concept between multiple providers to develop a community resource or collaborate on a project benefiting multiple settings. The bulleted questions listed under each category are for providers to consider when thinking about their current operations and plans for the future. These questions should be used when considering ways to build a concept that will achieve increased person-centered practices ongoing.

Service providers may request a copy of their completed self-assessment, by contacting their regional center HCBS Program Evaluator. A blank copy of the assessment can be found at <https://www.dds.ca.gov/wp-content/uploads/2020/09/CADDSHCBSProviderSelfAssessment.pdf>.

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.

Community Integration

How will providers support the following through their services?

- Individuals receiving services in the community based on their needs, preferences and abilities.
- Individuals participating in activities in the community, which are routinely accessed by the general public, and are not solely for the purpose of supporting people with disabilities, as part of their plan for services.
- Individuals exercising control over their schedules and activities.
- Opportunities for activities in the community that include meaningful interaction with individuals not receiving regional center services, not including paid staff or volunteers (e.g. development of hobbies or interests, volunteering, job training, etc.).
- Access to competitive integrated employment opportunities. Note: information on California's Competitive Integrated Employment Initiative can be found at <http://www.chhs.ca.gov/home/cie/>

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Individual Rights

How will providers support the following through their services?

- Informing individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint.
- Communication 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.).
- Individuals have informed consent and regular review regarding residential agreements, admission agreements, or other forms of written residency agreements.
- Individuals taking active roles in program policies and shared house rules.
- Individuals understanding of the balance between the rights they have and respecting the rights of others, building skills of negotiation.
- Individuals' understanding of the different service options available to them, and working towards individualized goals with support.
- Choice regarding roommates or private accommodations.
- Visitors are welcome to visit the home at any time.
- Individuals going 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.
- Individuals having the freedom to move about inside and outside the home.
- For those requiring accessible supports, grab bars, seats in bathrooms, ramps for wheelchairs, etc., are available so that individuals can move about the setting as they choose.
- Appliances and furniture are accessible to every individual.

Choice

How will providers support the following through their services?

- Offering daily activities based on individual's needs and preferences.
- Structuring support so that individuals are able to interact with people they choose to interact with, both at home and in community settings.
- Structuring support so that individuals are able to participate in activities that interest them and correspond with their IPP goals.
- Supporting individuals in choosing which staff provide their care to the extent that alternative staff are available.
- Opportunities to modify services and/or voice concerns outside of the scheduled review of services (IPP review).
- Individuals having access to food at any time.
- Supporting individuals to set their own daily schedules.

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Collaboration

- Does your program excel in a particular facet of your service type that can be beneficial to other programs in coming into compliance and strengthening person-centered practices?
- Does your concept involve at least one additional agency who will share in the development and implementation of the concept?
- Are there increased benefits to people you serve by collaborating on this concept with other providers?
- Are you developing a community of practice? (i.e. a group of people who share a common interest and come together to learn from each other and achieve a common goal.)

Some previously funded concepts have successfully collaborated to assist other providers in enhancing their services through projects such as:

- Development of toolkits and resources regarding the Final Rule, or areas within the Final Rule (employment options, housing, person-centered planning, etc.), that can be broadly accessed.
- Training and knowledge-sharing with others in their catchment area.
- Creation of person-centered planning applications/software.

HCBS Final Rule: List of Federal Requirements

Federal Requirement #1: Access to the Community

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.

Federal Requirement #2: Choice of Setting

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.

Federal Requirement #3: Right to be Treated Well

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

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Federal Requirement #4: Independence

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.

Federal Requirement #5: Choice of Services and Supports

Facilitates individual choice regarding services and supports, and who provides them.

For providers who operate a residential setting:

Federal Requirement #6: Residential Agreement

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

Federal Requirement #7: Privacy

- 1. Each individual has privacy in his/her sleeping or living unit:*
- 2. Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.*
- 3. Individuals sharing units have a choice of roommates in that setting.*
- 4. Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.*

Federal Requirement #8: Schedule and Access to Food

Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

Federal Requirement #9: Right to Visitors

Individuals are able to have visitors of their choosing at any time.

Federal Requirement #10: Accessibility

The setting is physically accessible to the individual.

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Regional center vendors may receive funding to make changes to service settings and/or programs to enhance current services through individualized service delivery. To be considered for funding, vendors must complete and submit this form 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. Please use the current FY 21-22 form.
- For providers that operate programs with several vendor numbers involved in one concept, one blueprint 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 blueprints 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 concept includes detailed information that describes the funding requests and supports how the requests will assist the provider in **enhancing person-centered service delivery**.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in **offering more choices and opportunities**.

While concept development should be individualized for each provider, some common themes persist among those that have been previously selected for funding.

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.

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Vendor name	Lutheran Social Services Avanti Program. 60 North Daisy Ave, Pasadena CA, 91107
Vendor number(s)	PD3857
Contact Name	Armine Kim
Contact Email Address	Armine.kim@lsssc.org
Primary regional center	Frank D. Lanterman
Service type(s)	Community Integration
Service code(s)	055
Number of consumers typically and currently served	27
Typical and current staff-to-consumer ratio	1:2 and 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. If you have previously identified your program as compliant with the HCBS Final Rule through the Self-Assessment, what changes have occurred that has changed your level of compliance?

Lutheran Social Services – Avanti has been serving the city of Pasadena and its surrounding cities for over 40 years. Our focus has always been to help our participants optimize their personal, social, and vocational competency to live successfully in the community. Participants served are active partners in determining the activities they desire and provided variety of community life experiences that may include, but are not limited to leisure, cultural or recreational activities; volunteerism; educational and training activities; development of living skills; health and wellness promotion and interacting with volunteers from the community in program activities to name a few. Currently, we provide both in-person service and remote/alternative services to address the desired service needs of each participant. Due to Covid-19, our program had to adjust to ensure health and safety of those we serve and that of our staff. Participants served remotely receive 1:1 service-ratio and they also have the choice to participate in the daily zoom activities with other participants for community engagement activities. Zoom activities includes virtual field trips, fun day Fridays, money management, community workers and daily exercise regimen. Both in-person and remote participants are also provided packets with supplies unique to their abilities and choices for preferred activities. Participants who are served in-person are grouped in either 1:2 or 1:3 ratio to ensure social distancing and safety protocol while they engage in community-based activities. For the past year, LSS-Avanti has taken necessary measures to ensure health and safety of our participants and while continuing to meet their IPP goals. However, we have found it challenging to fully incorporate personal choice and community access due to lack of staff. Due to COVID, some of our staff quit or left the organization rather than get vaccinated. It has been very difficult to hire new staff, but we are making progress! LSS- Avanti is desperate need of fund to hire ASL staff. Some of our participants who are none verbal but are able to sign will definitely from the funding. As our program continue to adjust to the post COVID

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Pandemic services delivery methodologies, the following challenges affect our program from fully complying to the HCBS Rules:

1. Lack of sufficient transportation.
2. Lack of fund to hire American Sign Language (ASL) staff.

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.

The COVID-19 pandemic has forced everyone to live at a social distance from other people. This has changed the way our center offers our services to meet the needs of our population. We are seeking funding in two areas.

1. Lack of sufficient transportation: Maintaining Social-Distancing while transporting participants to and from community- based activities and being in ratio will require an additional van to help address the issue. Currently, we send five vehicles in the community every day. Before the Pandemic, we were able to have all our participants out in community, but now, it has been a challenge as we have to maintain our ratios (1:2 and 1:3) and the social distancing while transporting participants.
2. Hiring ASL Life Support Staff with ASL background will help improve the communication between staff and non-verbal participants, thereby helping to meet their needs. In addition, hiring ASL staff will also turn train other staff on proper signing techniques. Improving the participants' communication skills will help our program to be more person-centered which aligns with the HCBS.

3. Identify which category/ categories this concept addresses.

- Community Integration
- Individual Rights
- Choice
- Collaboration

4. Please list the proposed objectives and outcomes of the concept, as well as the methods of achieving and tracking them. How will this concept assist you in reaching goals within the category that you are requesting funds?

Objective/Outcome - A full time ASL Life Support Staff and an additional van ensures a person-centered approach is fully integrated in our program. The ASL Life Support Staff will share knowledge to existing Life Support Staff so in turn they gain better understanding of their role in the person-centered process and execute accordingly. Each proposed concept increases available community resources and activities,

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providing more opportunities for our participants to participate in activities that align with their interests and goals.

Tracking – LSS-Avanti will develop bi-yearly survey to assess satisfaction of person-centered plan and receive feedback from participant and family/caregiver. Area Director will work with each participant to develop ISP and review yearly to ensure goals are met. Area Director will also track satisfaction during via survey. Life Support Staff will track daily interaction activities and document through daily progress note.

5. Please describe how and/or what was done to ensure that individuals served by the program led the development of 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.

LSS-Avanti adopted the one-page “About Me” person centered profile and as a result, the newly arisen needs and proposed concept was developed. Participants and their support system were also surveyed asking for suggestions on how our center can further improved our services. As LSS-Avanti continue to move forward to a hybrid-model, offering in-person and remote services, Area Director and Life Support Staff have also increased communication with participants and their family/caregiver, conducting 1:1 teleconference to assess specific needs of participant.

6. Please describe how the concept you propose will enable you to provide more person-centered services to the individuals you serve.

As a result of Covid-19, LSS-Avanti has realigned its services to meet the needs of our participants. The ASL Life Support Staff will not only train our Life Support Staff to build on best-practices for a person-centered program, but the position will also allow us to continue to improve on our hybrid program, opening new doors of communication with our participants, increasing opportunities not only for participants who needs such services but also advancing communication techniques for all Life Support Staff. An additional van will provide additional services for community integration, encouraging participants to increase community activities. Our concept is to allow our center to evolve and improve our existing services and our goal is also to continue to provide a more consistent person-centered training expectations for our participants, their families and caregivers and community we serve.

7. What percentage of individuals served by your program will directly benefit from implementation of this concept?

Additional Van- 100%
ASL Support Staff = 40%

8. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2021-22 HCBS Funding.

Each proposed concepts provide benefits, value, and continued success for our participants. Our staff will have further understanding on how to implement person-centered process, our participants will have the support he/she may need for increased community integration activities but most importantly, the concepts allow for increased of personal choice.

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9. 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](#).

LSS-Avanti is committed and invested in the future of Home and Community Based Services. To ensure continued development and learning, additional resources are needed.

ASL Life Support Staff Salary = \$23/hr. or \$44,160/year

Life Support Staff addresses the biggest need in our population. This person will not only support the gap in communication with our participants and their support team, but it will be another learning opportunity for other participants who are interested in expanding their skills. Additionally, ASL Life Support Staff will assist in planning community integration activities and ensure internal audits of IPPs are followed. ASL Life Support Staff will also be one of the liaisons for Regional Centers, Service Coordinators in addition to being an advocate for our participants. Lastly, the ASL Life Support Staff will also be tasked to lead our hybrid-program, providing activities for remote and in-person participants, focusing on specific needs for continued personal growth and development.

Transportation/Van – Ford Transit Passenger Van or similar \$43,640.

To transport more participants into the community and increase community integration activities.

10. 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.

Program growth (estimated to increase) over the two-year contract period will sustain staff positions and maintenance of transportation. LSS-Avanti are also supported by gifts from individual donors, in-kind contributions, and other philanthropic agencies.

11. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?

HCBS Funding ___ No x Yes.

If Yes, FY(s) 2019-2020

Service Access and Equity Funding ___ No x Yes. If Yes, FY(s)

CPP Funding x No ___ Yes. If Yes, FY(s) _____

CRDP Funding x No ___ Yes. If Yes, FY(s) _____

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

For providers who have received prior HCBS, Disparity, CPP or CRDP Funding from DDS

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12. 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.

For year 2019-2020, LSS-Avanti HCBS funds were used to purchase one wheelchair van. Funds received were also used for 4 training trainers for Person-Centered Training.

13. 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.

LSS-Avanti's proposal for year 21-22 focuses on program continuity, growth, and development. Our goal is to be in full federal compliance. The funding will advance progress we have made towards HCBS compliance and will address our language/communication gap, enhance person-centered services, and increase community integration program.

HCBS CONCEPT BUDGET							
Vendor Name		Lutheran Social Services - Avanti					
Vendor Number(s)		PD3857					
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total	
		FTE	Annual Cost	FTE	Annual Cost	Cost	
Personnel (wage + benefits)							
ASL Support Staff	3680	12.00	\$ 44,160	12.00	\$ 44,160	\$ 88,320	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Personnel Subtotal			\$ 44,160		\$ 44,160	\$ 88,320	
Operating expenses							
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
Operating Subtotal			\$ -		\$ -	\$ -	
Administrative Expenses							
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
Administrative Subtotal			\$ -		\$ -	\$ -	
Capital expenses							
Ford Transit Van or Similar			\$ 43,640			\$ 43,640	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
Capital Subtotal			\$ 43,640		\$ -	\$ 43,640	
Total Concept Cost			\$ 87,800		\$ 44,160	\$ 131,960	

See Attachment F for budget details and restrictions