

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

Vendor name	Pomeroy Recreation & Rehabilitation Center
Vendor number(s)	HG0099, HG0100, H89198
Contact Name	Jillian Flannery
Contact Email Address	jflannery@prrcsf.org
Primary regional center	Golden Gate Regional Center
Service type(s)	Adult Residential Facility, Behavior Management Program
Service code(s)	915, 515
Number of consumers typically and currently served	Adult Residential Facility (typically 10/currently 10 individuals), Behavior Management Program (typically 15/currently 11 individuals)
Typical and current staff-to-consumer ratio	1:6 (at 2626 Fulton St), 1:4 (at 2750 Fulton St), 1:3 (Behavior Management Program)

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?

The Pomeroy Center provides care and services to 6 individuals with developmental disabilities at 2626 Fulton St and 4 individuals with developmental disabilities at 2750 Fulton St. A typical weekday before COVID-19 consisted of residents getting up at around 7am and staff helping each individual resident with their morning routine based on their service plan. At around 9am, participants in the Pomeroy Center's OneCenter adult day program would be picked up by Pomeroy Center transportation and taken to the Pomeroy Center, where residents would be able to work on their skill goals listed in their ISP and do other activities, such as draw, go on outings, watch movies, and talk to friends, and return home at 4pm. Residents with employment in the community would independently travel to and from their jobs.

During the current pandemic period, most residents stay home from 10am until 4:15pm. Those enrolled in the Pomeroy Center's OneCenter adult day program participate in alternative services at home, including Zoom classes provided by the Pomeroy Center (residents choose which classes they would like to attend) and community walks/outings in which their day program program leader brings them into the community. The number of outings, accompanied by residential home staff, has been reduced dramatically with staffing shortages, and there is a focus on nearby outings. Residents have not yet returned to the Pomeroy Center's OneCenter adult day onsite programming, but have been able to return to swimming at the Pomeroy Center's pool. Several residents have employment in the community and independently travel to and from their jobs.

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In our self-assessment, in response to the question (FR1-1) of whether individuals have the opportunity to participate in individual and group outings in the community at the frequency and for the amount of time they desire, we responded “Sometimes”; this application’s concept has been designed in an effort to meet full compliance in that area. In response to the question (FR7-4) of whether individuals have the ability to lock their bedroom doors when they choose, our self-assessment response was “No” - our concept includes the replacement of doorknobs with privacy locks for 10 doors, across both residences, to fulfill this requirement.

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.

We are requesting funding specifically for (i) train the trainer certification for a currently identified staff to help support PCT/PCP training for all our current and future residential staff, including the development and compilation of training materials for all staff to use as a guide, (ii) a one-year membership to the Open Future Learning platform dedicated to the learning disability workforce, so that all of our residential staff and participants can benefit from side-by-side learning modules and videos, (iii) Elevatus’ “Become a Sexuality Educator” training for a currently identified staff, and (iv) replacement doorknobs to ensure residents have the ability to lock their bedroom doors when they choose. Staff certified in PCT training will support us by giving ongoing training to our existing staff to help provide more person-centered service for our residences, and all staff and participants will benefit from online learning modules. This person will help us attract, hire, and retain more experienced workers, as we currently face a shortage and a workforce that has been stretched thin by the requirements of the pandemic. Our two residential homes will, as a whole, be more person-centered and attract, hire, and retain more experienced workers. With trained and retained staff, residents will be able to participate in activities in the community they want to do more frequently. Residents have also raised concerns and questions about intimate relationships. Staff desire the knowledge and skill to confidently assist our residents in acquiring the information and skills needed to make healthy decisions about sexuality and relationships, recognizing this vital human right.

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?

The objective of this concept is to make the Pomeroy Center’s residential operations more person-centered and have a go-to staff and resource to support PCT/PCP training of current and new staff. Tracking this improvement will involve confirming that (1) all

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new staff receive Pomeroy PCT training and materials, (2) with replacement doorknobs on bedroom doors, all residents will be able to lock their bedroom doors, (3) 100% of residential staff have received training on person-centered topics through Open Future Learning, (4) using before and after training assessments, the staff trained through the train the trainer curriculum can report increased confidence in discussing and training others on person-centered concepts, (4) as a result of PCT training and the expected easing of the COVID-19 pandemic, staff are able to support and document more individualized outings for residents, and (5) by comparing before and after survey responses, we see residents report an increase in knowledge, understanding, and satisfaction in relationships and sexuality.

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.

Most residents, but not all staff at our residential homes, have taken part in the Pomeroy Center's person-centered thinking class for staff, participants, and family members. Having an onsite resource, familiar with the specific needs of our residents, will aid our residential operations in being fully person-centered, and recover from the difficult time period in which residents and staff strictly sheltered in place, contributing to feelings of isolation, anxiety, and burnout, leading to increased staff turnover.

We survey all of the Pomeroy Center's adult participants and also have annual meetings with residents and their stakeholders to review each resident's progress towards their goals. While residents virtually always join group outings, they all have stated their wish for specific community outings, according to their preferences.

Training on topics related to sexuality and developmental disabilities is directly related to questions and requests from residents regarding relationships, behaviors, and wishes to self-advocate, and staff desire for the knowledge and skill to confidently assist our residents in acquiring the information and skills needed to make healthy decisions about sexuality and relationships.

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

The concept will provide more person-centered services because the staff trained in PCT concepts will be able to train both current and new staff, and all staff and participants will have access to Pomeroy PCT training materials and an online learning resource focused on improving the lives of people with developmental disabilities. Well-implemented person-centered services at both of our residential homes will attract staff that will help relieve recent staff turnover and allow us to support our residents in outings that interest them individually.

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

100% of individuals served by our residential program will directly benefit from implementation of this concept.

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

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<p>With staff trained (and able to train others) in person-centered practices, we will be able to ensure that all staff have person-centered training. Retaining and hiring more experienced, qualified, and person-centered staff is critical to our goal of supporting more individualized outings into the community. Pomeroy PCT training materials will be a valuable reference for all staff beyond the conclusion of 2021-2022 HCBS funding.</p>	
<p>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.</p> <p>Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs). This information can be found at this link.</p>	
<p>We would like to request a one year grant of \$23,939 to fund this concept: (i) \$20,000 for PCT train-the-trainer certification for a currently identified staff, (ii) \$1,344 for a one-year subscription to the Open Future Learning platform, to be used by all residential staff and residents, (iii) \$1,095 for Elevatus' "Become a Sexuality Educator and Trainer" training, (iv) \$500 for Pomeroy PCT training materials, and (v) \$1,000 for privacy doorknobs for 10 doors (including installation).</p>	
<p>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.</p>	
<p>Not applicable</p>	
<p>11. 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) _____</p> <p>Service Access and Equity Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____</p> <p>CPP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____</p> <p>CRDP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____</p> <p>If yes to any question be sure to answer questions 13 and 14.</p>
<p>For providers who have received prior HCBS, Disparity, CPP or CRDP Funding from DDS</p>	
<p>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.</p>	
<p>Not applicable</p>	
<p>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.</p>	
<p>Not applicable</p>	

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 CONCEPT FORM

HCBS CONCEPT BUDGET						
Vendor Name		Pomeroy Recreation & Rehabilitation Center				
Vendor Number(s)		HG0099, HG0100, H89198				
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Handyman (for privacy doorknob installation)			\$ 750		\$ -	\$ 750
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ 750		\$ -	\$ 750
Operating expenses						
Person Centered Course (Train the Trainer)			\$ 20,000		\$ -	\$ 20,000
Open Future Learning platform subscription			\$ 1,344		\$ -	\$ 1,344
Elevatus "Become a Sexuality Educator" training			\$ 1,095		\$ -	\$ 1,095
PCT training materials/guides			\$ 500		\$ -	\$ 500
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Operating Subtotal			\$ 22,939		\$ -	\$ 22,939
Administrative Expenses						
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
Capital expenses						
Privacy doorknobs			\$ 250		\$ -	\$ 250
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Capital Subtotal			\$ 250		\$ -	\$ 250
Total Concept Cost			\$ 23,939		\$ -	\$ 23,939

See Attachment F for budget details and restrictions