

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

Vendor name	Hillside Enterprises
Vendor number(s)	H00936
Contact Name	Shea Matherly
Contact Email Address	smatherly@hillsideenterprises.org
Primary regional center	Harbor Regional Center
Service type(s)	Adult Day Activity Center
Service code(s)	505
Number of consumers typically and currently served	~30
Typical and current staff-to-consumer ratio	H00936 = 1:6

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?

Our Day Program is a full day (9:00am to 3:00pm), site-based, activity/living skills training program. Our consumers can choose from 2 activities during the morning and 2 activities in the afternoon. Activities include, art, music, gardening, cooking, grooming and leisure and are held in themed classrooms. Community outings, such as bowling, library time and local shopping are a choice for our consumers about 2 to 3 times a week. Because most activities are provided on-site, consumers are not given a choice of setting for their program, and they only have access to the community less than 3 hours a week. We have previously identified as HCBS compliant in the self-assessment, but after a change in leadership and a more thorough evaluation of our program, we understand that since our consumers have no access to the community and are not able to choose the setting of programming, thus we are not HCBS compliant.

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 proposing a half-day, community integrated day program. We would provide a morning session from 8am to 12pm, serving 30 consumers, with 10 staff and an afternoon session from 12:30pm to 4:30pm, serving 30 consumers, with 10 staff. Due to the need of a 1:3 staffing ratio to keep our consumers safe in the community and to fully support them during activities to ensure they all have equal participation; we will need to hire the staff to support this new plan. Consumers will have a choice of community integrated activities, such as, volunteering with community clean-up groups and nursing homes, community gardening with local parks and schools, sports and leisure activities, and community outings that lead to strengthening the individual's

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<p>independence skills. While we will encourage most outing to consist of public transportation, we will need a wheelchair accessible van for easier transportation to further destinations. To track location, enable staff communication with program managers, and log consumers progress, each staff will be provided a tablet, equipped with a consumer-based app.</p>
<p>3. Identify which category/ categories this concept addresses.</p> <p><input checked="" type="checkbox"/> Community Integration <input type="checkbox"/> Individual Rights <input checked="" type="checkbox"/> Choice <input type="checkbox"/> Collaboration</p>
<p>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?</p> <p>Our proposed outcomes for consumers of this concept include maximizing participation in community integrated activities as well as improving independent living skills. In order for us to accomplish these goals for our consumers, we will be developing Person Centered Plans for all of our consumers. With PCP training, our case managers and direct support staff will have the resources and training to develop and coordinate PCPs for our consumers. Regular follow-ups as well as planned IPP meetings will assist staff in developing plans that meet the consumers needs and interests as it relates to our program. Specific and measurable objectives will be developed, tracked and reported to the Regional Center on a regular basis.</p>
<p>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.</p> <p>AR&C Long Beach gathers participant input on a regular basis through satisfaction surveys, Individual Program Planning meeting, and assessments in order to make changes or add additional support. In addition, consumers and their families/ care providers were sent a survey earlier this year to gather input about our concept. The survey was done either over the phone or virtually and included our concept, why changes are being made, and asked for individual input of their own interests and wants for the program. The majority of our consumers and their support circle were adamant that the new programs continue to focus on work and vocational training. As that will still be a major feature of the program, they were receptive of the idea, and many were enthusiastic about the new concept. Many are excited that the consumers will have Person Centered Plans and community integrated activities, and work opportunities related to their individual goals.</p>
<p>6. Please describe how the concept you propose will enable you to provide more person-centered services to the individuals you serve.</p> <p>While we do take a Person-Centered approach when developing goals and outcomes for our consumers, the goals and outcomes are generally tied to site-based activities and general behavioral issues, and thus does not incorporate the full scope of true Person-Centered Planning. With training in Person Centered Programming, staff will be able to identify and put into practice each consumers strengths, goals, medical and community-</p>

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based needs, and desired outcomes. With the proposal of our concept, the program will be able to address all of the aspects of Person-Centered Planning in a way that we are unable to do so now.
7. What percentage of individuals served by your program will directly benefit from implementation of this concept?
100%
8. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2021-22 HCBS Funding.
<p>AR&C Long Beach's core values and guiding principles state that every individual served has the right to achieve a quality of life that leads to self-fulfillment and meaning. This includes exposure to vocational opportunities, the freedom to make individual choices, participation and inclusion in the community, and a life that is self-directed. These values that we hold will continue to be an integral part of our programs even after the conclusion of the funding. We will continue to offer our individuals programming options that allow for community integration as well as choices on the types of services they receive. With training in Person Centered Thinking, staff can oversee the development of appropriate and meaningful Person-Centered Plans far beyond the conclusion of funding. Programs will be designed around a model of community integration and personal choice with a strong emphasis on employment opportunities within the community, which the remainder of the budgeting will address.</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>With funding, we believe we can transition and implement a plan that not only puts our programs into HCBS compliance but also focuses heavily on a Person-Centered Model. This is a two-year budget with capital expenses in year one only. Major cost categories include: 1 wheelchair accessible vehicles = \$70,000. Vehicle will serve as transportation options for projects and activities in the community. PCT Training = \$16,000. Person Centered Thinking training will be provided for 2-3 leadership staff who will become Certified PCT trainers and train our existing and incoming staff. Staff wages = \$624,000 split in two years. Staff expenses include 10 Direct Support Staff to assist with the higher staff to consumer ratios. Other expenses include items that will facilitate daily operations of our program. These include technology items and material items such as: Tablets = \$5,100. Tablets will enable staff in the community to track consumer goals and outcomes. Software for tablets that can assist in attendance tracking, consumer goal tracking, GPS for groups in the community = \$8,640 for 10 tablets. Therap software is \$50/ consumer per year = \$6,000. This software will enable staff to document and track consumer goals and outcomes as well as provide detailed information on the consumers such as Emergency contact info, medication lists and allergies, Individual Program Plans, etc.</p>

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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.

The sustainability of our concept should not be heavily affected at the conclusion of the funding. A majority of the expenses will be covered within the first year of funding. Staff wages and fees related to the program setting such as rent, utilities, maintenance, etc. will be addressed through growth in our programs. Additional grant money and fundraising options will likely be considered in the future if necessary. Re-vendorizing our programs should also help with long term funding due to higher vendor rates we may receive.

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 ☐ Yes. If Yes, FY(s) _____
 Service Access and Equity Funding ☒ No ☐ Yes. If Yes, FY(s) _____
 CPP Funding ☐ No ☐ Yes. If Yes, FY(s) _____
 CRDP Funding ☐ 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

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.

N/A

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.

N/A

HCBS CONCEPT BUDGET							
Vendor Name		Hillside Enterprises					
Vendor Number(s)		H00936					
		Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
			FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)							
Direct Support Staff		31200	10.00	\$ 312,000	10.00	\$ 312,000	\$ 624,000
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Personnel Subtotal				\$ 312,000		\$ 312,000	\$ 624,000
Operating expenses							
PCT Training				\$ 16,000			\$ 16,000
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
Operating Subtotal				\$ 16,000		\$ -	\$ 16,000
Administrative Expenses							
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
Administrative Subtotal				\$ -		\$ -	\$ -
Capital expenses							
2021 Odyssey w Braun Ability Conversion, or similar				\$ 64,900			\$ 64,900
Tablet x10 \$510/ea				\$ 5,100			\$ 5,100
Data plan for tablets \$180/month				\$ 4,320		\$ 4,320	\$ 8,640
Therap software \$50/consumer per year				\$ 3,000		\$ 3,000	\$ 6,000
							\$ -
							\$ -
							\$ -
							\$ -
Capital Subtotal				\$ 77,320		\$ 7,320	\$ 84,640
Total Concept Cost				\$ 405,320		\$ 319,320	\$ 724,640

See Attachment F for budget details and restrictions