

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

Vendor name	Creshinda Johnson
Vendor number(s)	PX1018
Contact Name	Creshinda Johnson
Contact Email Address	emergingintegratedservice@yahoo.com
Primary regional center	SCLARC
Service type(s)	055- Community Integration (Employment Services)
Service code(s)	055
Number of consumers typically and currently served	18
Typical and current staff-to-consumer ratio	1:1
<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. 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?</p>	
<p>Emerging Integrated Services program is at a site where our internal standard for comm. access is 80% of the program day. Prior to COVID, participants typically met at their site & then departed for pre-determined activities including PIP & CIE, usually not tied to PCPs/goals. Emerging Integrated Services had 12 consumers working, but due to COVID, few are active. We have transitioned/started 12 consumers that earn min wage. Since the start of our 055 program, we have enrolled 22 consumers. Job Developers added 5 IPs since August of 2020. Emerging Integrated Services is now providing alternative remote services to most participants via daily calls, video calls, emailing/text messaging, package/material deliveries, & a wide range of virtual training/classes. Facilitators are creating PCP's for the consumers served employment plans and training other staff on PCT. We believe that the people we support receive great services, but with proper training and PCP's, there will be a greater emphasis on the needs/desires of each person and a personalized approach through which Emerging Integrated Services will come into HCBS compliance. Since June 1, 2021, 4 PCP's have been completed & 7 community resources have been developed for consumers.</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>Continuation of the position of PCP Integration Facilitator to continue to develop PCPs that reflect people's choices/goals. As Emerging Integrated Services participants served, this transition of all remaining plans and ensuring incoming participants plans reflect their person-centered desires/needs. The PCP Integration Facilitator will continue with</p>	

Home and Community-Based Services (HCBS) Rules

Reference Information

outreach/education with participants to ensure they understand why PCPs are being developed & addressing fears of change. Staff will begin to develop PCPs with oversight until ready to complete on their own. Resources/opportunities/transportation need to be found/coordinated in order to implement the desired services/opportunities. PCP Facilitation training will take place after PCT training has been received and will provide professional development, consultation regarding PC thinking, planning, and practices. It will establish a plan facilitation throughout Emerging Integrated Services & is planned for Feb 1, 2022 – Dec. 30, 2022. We will have access to the contractor's resources/materials & use them to train staff in PCP Facilitation. Contract with an outside agency to supplement PCT training to the remainder of our staff and the time requirement for senior leadership to complete training of all staff unassisted is too great. We have trained 2 staff and have 15 staff serving remaining. Prior to COVID, staff could be trained in 2 full days. However, remote classes now consist of 5 virtual classes held over 2 weeks.

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?

Proposed outcomes & objectives for this grant period are: a) develop 4 PCP's Q1, 4 Q2, 4 Q3, 4 Q4 - Q8, b) complete PCP Facilitation Training & train staff, d) Integration activities – developing resources for individual PCPs and coordinating individuals with same interests/goals/desires – develop 3 resources each quarter. Unmeasurable, is reviewing goals in PCPs, talking to individuals about goals as needed/the resources found – if they are working/liked/etc., coordinating like-minded/interested individuals with resources, communicating with managers, families, caregivers, etc. Contract an outside agency to supplement the PCT training needs of our staff resulting in all staff fully trained in PCT by the end of the grant period.

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.

Emerging Integrated Services gathers participant input on a regular basis through satisfaction surveys, input meetings, and assessments to make changes/additions to supports provided & cultural change. In addition, were asked about the concept and if they felt it would be beneficial. They were receptive to the idea & felt that it would be helpful to have people in place to develop their PC plans and add community integration activities, work, and volunteer opportunities related to their individual goals. People & their families who have already completed plans have given positive feedback and appreciation to Emerging Integrated Services for adapting this philosophy & providing in-depth, person-

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

centered services remotely during COVID-19 Pandemic.

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

Developing PCPs will allow us to work towards implementing PC goals/services for every individual. Educating families about PCT & reassuring them of safety concerns will support our goal of becoming PC. Further integration coordinating will also enable us to take PCP from ideas/goals to implementation. The PCP Facilitation training will provide us with added tools to move towards compliance & train every staff on how to facilitate plans. By contracting out PCT training, we will be able to accelerate the pace in which staff move through trainings and allow staff to understand their role better in implementing the PCPs.

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

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

100% of the individuals served by Emerging Integrated Services will directly benefit from implementation of this concept. Our individuals will see the results from the development of goals to the services being provided to achieve those goals all the way through them accomplishing their goals. Our staff will also see the change in the way they delivery services specifically to the individuals they are servicing.

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

In 2023, we will review the need for the position. We anticipate maintaining one PCP Facilitator for the whole agency to oversee new PCPs, develop PCPs, & help facilitate/track revisions as needed/assigned. The goal is to have the PCP Integration Facilitator jump start the PCPs, role model, & oversee employees on the development of appropriate/meaningful PCPs. Staff will be facilitating PCP's & maintaining them as needed. We will discontinue integration duties in 2023 because we will have created a database where the information can be accessed and information can be added to it.

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](#).

Salary, benefits, & supervision of the PCP Integration Facilitator, monthly usage fee for phone and mileage to travel to meetings. Marketing materials for integration education, subscriptions to licensed zoom accounts, contracting the Facilitation Training for the PCP Integration Facilitator, and contracting a trainer through Helen Sanderson & Associates to supplement the PCT training of all staff.

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.

We intend to keep a PCP Facilitator after funding stops. Anticipated need for the duties/position will lessen over time & if we need to continue the duties/position will be distributed to current positions as duties change due to HCBS/Employment Program

Home and Community-Based Services (HCBS) Rules

Reference Information

changes.	
11. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____ Service Access and Equity Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) ___ CPP Funding <input checked="" type="checkbox"/> No ___ Yes. If Yes, FY(s) _____ CRDP Funding <input checked="" type="checkbox"/> 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	

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

HCBS CONCEPT BUDGET							
Vendor Name	EMEERGING INTEGRATED SERVICES						
Vendor Number(s)	PX1018						
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total	
		FTE	Annual Cost	FTE	Annual Cost	Cost	
Personnel (wage + benefits)							
PCPI/ INTEGRATION FACILITATOR	75,000.00	1.00	\$75,000.00		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
			\$ -		\$ -	\$ -	-
Personnel Subtotal			\$75,000.00		\$ -	\$ -	-
Operating expenses							
COMMUNICATION			1,000.00			\$ -	-
MILEAGE REIMBURSEMENT			2500.00			\$ -	-
FACILITATION TRAINING			12,000.00			\$ -	-
PCT CONTRACT TRAINING			15,000.00			\$ -	-
MARKETING			5,500.00			\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
Operating Subtotal			\$36,000.00		\$ -	\$ -	-
Administrative Expenses							
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
Administrative Subtotal			\$ -		\$ -	\$ -	-
Capital expenses							
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
						\$ -	-
Capital Subtotal			\$ -		\$ -	\$ -	-
Total Concept Cost			\$111,000.00		\$ -	\$111,000.00	-

See Attachment F for budget details and restrictions