

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

Vendor name	IDEAL DAY PROGRAM & BEHAVIOR MGMT SERVICES
Vendor number(s)	H73485, H73650
Contact Name	OMOLARA OKUNUBI
Contact Email Address	lokunubi@idealprogramsservices.org
Primary regional center	SOUTH CENTRAL REGIONAL CENTER
Service type(s)	DAILY LIVING SKILL & BEHAVIOR MODIFICATION
Service code(s)	510, 515
Number of consumers typically and currently served	120
Typical and current staff-to-consumer ratio	1:3 (Behavior modification) and 1:4 (Day Program)
<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>As a person-centered organization we worked hard to support our Consumers with trainings necessary to achieve greater independence and interdependence while at the same time respecting their rights and preferences in relation to culture, when, where and how to receive services. However, when covid hit in 2020 the opportunity for daily engagement and community integration diminished. For eighteen months, the focus shifted from providing options, encouraging informed decisions to Health and Safety (choices were bound). Skills they previously learned are forgotten, staff they were acquainted with are gone and volunteering site opportunities are now limited. As they are gradually returning, significant portion of the day is spent on Mask wearing, temperature testing and social distancing protocols, particularly for those needing behavior modification. A training on re-engagement is now necessary to ensure that the individuals can function autonomously at volunteering sites without compromising health and safety of other participants, as well as have access to non-disability settings.</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>We desire to retrain both workforce and individuals on person-centered planning focusing on strength, abilities, and aspirations of the individuals from a social and cultural context perspective. In the past eighteen months parents took frontline in decision making instead of supportive. Funding for a Person-centered Parent/Consumer Community Advocate (PCCA) will assist in cultivating the unique resources and natural supports systems that exists within the individual's family and community to promote choice and supported decision making. Having a professional advocacy training targeted at Parents, staff and Consumers will reduce the attention on</p>	

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covid protocols, to focusing on providing opportunities, avenues for self-actualization, personal freedom, meaningful interdependence, and greater community engagement in settings of choice.
3. Identify which category/ categories this concept addresses.
<input checked="" type="checkbox"/> Community Integration <input type="checkbox"/> Individual Rights <input type="checkbox"/> Choice <input type="checkbox"/> 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?
<p>Covid has created barriers to community integration and overcoming this barrier will require us to train and retrain 120 individuals (35 are new to our organization) in capacity building to understand and participate in making informed decisions about activities that are Important to them (enjoyable preferences) and Important for them (health and safety needs) using various person-centered tools.</p> <p>In the past 18 months our employees have been stretched beyond their job description but they will receive additional training that will increase community engagement from 15% to 75%. Current and new staff will be retrained in Person-centered thinking principles, developing community maps and SMART action plan. Our evidence-based intervention and approach will foster such outcomes as Community Presence, Community Participation, Competence, Choices and Control and Status. Monthly satisfaction surveys will be used to determine what's working, what's not working and how to modify for outcome.</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>The conversation about resuming services was held at the individual's home with parent's input and it was observed that they were not all on the same page. This grant will offer us additional opportunity to hire a bilingual Person-centered Advocate to support both parents and individuals in identifying their vision of a good day, improve parent's understanding of "informed decision" and who should be making it (with or without support) so that individuals can choose opportunities that appeal to their interests, needs and satisfaction. This Gap was identified with a survey of 20% of the individuals. The steps included utilization of the Discovery tool in building a One Page description to reflect what matters to the person in terms of relationships, places and interests, preferences, times and frequency; all of these informed building a customized Community Map. We need a dedicated Person-centered Advocate to educate and follow through with individuals, staff and parent (especially Spanish speaking).</p>
6. Please describe how the concept you propose will enable you to provide more person-centered services to the individuals you serve.
Our goal is to create opportunities for individuals to live, learn, work and enjoy life in the most integrated settings of choice. Having a Person-centered Parent/Consumer

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<p>Community Advocate will create opportunities for input, intentional listening, honoring and respecting the rights of individuals receiving services to choose who provides their services. This training and support will inform individuals that though three of them may be supported by one staff member, their activities can be customized to reflect their expectation, including attendance days, time (if they so choose). They will learn skills and competencies to make their dreams a reality, make better decisions and take responsibilities.</p>
<p>7. What percentage of individuals served by your program will directly benefit from implementation of this concept?</p>
<p>100% will participate and benefit at different levels depending on the level of impairment. Benefits will range from accessibility to neighborhood, assistive technologies/devices, cultural and social influences in the community (building friendship), increased support from parents, families and other community members through employment, volunteering or shared spaces.</p>
<p>8. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2021-22 HCBS Funding.</p>
<p>Our program planning and implementation dedicated to creating long lasting benefits will be utilized as a standard to train both existing and new hires to ensure continuity of individual's rights, dreams, and preferences. Training will be targeted to improving individual's capacity in decision making including using this skill to hold management accountable to service promises. Because this community integration program will increase access to various places in the neighborhood, promote community presence, participation, competency and effective use of resources, social-cultural diversity are inevitable outcomes. It is mostly these behavioral changes and management's commitment to improving access and quality of life that will substantially change services delivery and continuation of this project. The skill set learned by parents, staff and experiences of the individuals in knowing the community (including mobility training) will be pivotal in sustaining benefits already acquired.</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>Our population of Spanish speaking Consumers is growing and similarly are the parents who though speak English but would participate if they receive training and support in Spanish. Our budget includes purchasing Informed Decision Curriculum from National Association of Direct Support Professionals that will be translated to Spanish for training purposes, tailor the training and materials to individual's learning preference. Budget will also reflect compensation for Saturday training of Staff to ensure uninterrupted learning, opportunities to practice, discuss and implement what is learned. This training will be recorded and replicated for continued learning by individuals, parents and employees.</p>

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<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>We have introduced digital tools to streamline process and improve participation. We are fully persuaded that the competencies gained this time around will be long lasting. In addition</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 ___ No ___X Yes. If Yes, FY(s) _2018/2019/2020 Service Access and Equity Funding _X No ___ Yes. If Yes, FY(s) ___ CPP Funding _X_ No ___ Yes. If Yes, FY(s) _____ CRDP Funding _X_ 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>We are extremely grateful for past funding that enabled us to purchase two Wheel-Chair Accessible vans, hire Employment Specialist (as a result of which twenty of individuals supported regained employment after COVID, our baseline staff are person-centered thinking training but we experienced significant turnover (which is why re-training and extending the conversation to parents is very important).</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>The Covid effect, Staff turnover and parental fear are new barriers to community integration. Having a dedicated Person-focused parent consumer community advocate (PCCA) will require dedicated skill development and follow up to ensure individuals</p> <ul style="list-style-type: none"> • Have the ability to choose from multiple experiences and who they spend time with • Provides a path to recovery from COVID- induced isolation. • Have a full and equal presence in places where nondisabled individuals are present • Be recognized for their competencies and have access to learning opportunities • Offers the chance to engage with others and satisfaction of being part of a diverse community. • Be able to fully participate in life, rather than just observe from the sidelines • Have access to valued roles and be seen as a person, rather than a disability • Access to reasonable accommodations in employment, work, school and community spaces. 	

HCBS CONCEPT BUDGET		COMMUNITY INTEGRATION					
Vendor Name		IDEAL DAY AND BEHAVIORAL MANAGEMENT PROGRAM					
Vendor Number(s)		H73485 and H73650					
		Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
			FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)							
Parent Consumer Community Advocate		44000	0.50	\$ 22,000	0.30	\$ 13,200	\$ 35,200
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Position Description				\$ -		\$ -	\$ -
Personnel Subtotal				\$ 22,000		\$ 13,200	\$ 35,200
Operating expenses							
NADSA Curriculum				\$ 8,000		\$ 5,000	\$ 13,000
Technology Assistance				\$ 6,000		\$ 4,000	\$ 10,000
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
Operating Subtotal				\$ 14,000		\$ 9,000	\$ 23,000
Administrative Expenses							
Administrative Overhead (10%)				\$ 6,000		\$ 6,000	\$ 12,000
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
Administrative Subtotal				\$ 6,000		\$ 6,000	\$ 12,000
Capital expenses							
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
						\$ -	\$ -
Capital Subtotal				\$ -		\$ -	\$ -
Total Concept Cost				\$ 42,000		\$ 28,200	\$ 70,200

See Attachment F for budget details and restrictions