

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

Vendor name	D Jones Investments, LLC dba Loving Home
Vendor number(s)	HQ1380
Contact Name	Dario Jones
Contact Email Address	dariopty@cox.net
Primary regional center	San Diego Regional Center East County / Santee Unit 8
Service type(s)	Adult Residential Facility (ARF); Level 4i
Service code(s)	CCL Adult Homes: 915
Number of consumers typically and currently served	Four (4)
Typical and current staff-to-consumer ratio	Ratios are: 1 staff for every 2-3 consumers
<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>A Loving Homes (ALH) is a 4-bed home located in the quiet neighborhood of San Carlos. Our CCL home provides home-like services with intensive staffing. A typical day at ALH starts with all residents waking, eating breakfast, and doing personal care in preparation to attend various day programs. Depending on the person's age, individuals attend school five days per week or adult day programs 3 days per week. One resident is currently not enrolled in a day program. Residents return from their respective programs between 11:30am and 4:30pm. In the afternoon, individuals engage in community outings by consensus, when transportation and staffing are available. In the evenings, individuals engage in leisure activities, eat a meal, and prepare for the next day. Weekends are spent relaxing, engaging in enjoyable activities at home and in the community, visiting with family and friends, and/or running errands or other community outing of their choice.</p> <p>Following are comments on baseline/current levels for aspects of services for which we are requesting funding. Activities outside the home are desired by service recipients but are dictated by availability of staff and transportation. Attempts are made for individual choice and self-determination but frequently community sites and activities are chosen by consensus and participation is in groups, due to limited transportation and staffing resources.</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>Project funding will be used to purchase a vehicle (1 van) and cover additional staffing costs to increase opportunities for service recipients to control their own schedules and activities and engage more fully in community life. These additional resources will allow for individualized choice, rather than compromising on group outings which is the current standard.</p>	

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3. Identify which category/ categories this concept addresses.
<input checked="" type="checkbox"/> Community Integration <input checked="" type="checkbox"/> Individual Rights <input checked="" 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>Individuals served will each have the opportunity to choose and plan for one (1) individual activity/outing/event each quarter in addition to regularly scheduled program/home activities/outings. Supplemental staffing will be arranged to support the individual's choice. Tracking outcomes will be incorporated into established client records and data collection mediums.</p> <p>It is projected that residents at A Loving Home will be happier and more productive in their quest towards becoming more independent and empowered in their choice(s) of preferred activities to undertake.</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>Individuals served express likes and dislikes formally as part of their semi-annual and annual ISP meetings. With input from residents, management, staff, and others who know the individual well, contribute to identification of preferred activities and environments. Informal collection of input from involved advocates supports client's expression of varied interests and highlights the current vehicle and staffing barriers to meeting these interest choices.</p> <p>Inclusive team meetings are being held where both the day program and residential providers who jointly serve individuals are represented. Individual wishes and choices are being identified at these formal meetings. Informal attention to choice-making and on-going development of the concept will continue to evolve as future individual ISP meetings incorporate Person Centered Training profiles and identified interests.</p>
6. Please describe how the concept you propose will enable you to provide more person-centered services to the individuals you serve.
<p>Having additional transportation and staffing resources available will shift the focus from the group to the individual. Instead of relying on compromise and concession to balance the needs and preferences of everyone in the home, the focus will be on honoring individual choice in regard to schedule, activities, and community involvement.</p> <p>Having greater access to transportation and augmented staff support will provide the resources necessary:</p> <ul style="list-style-type: none"> • For individuals to increase access to services in the community, and participate in individualized outings and activities outside the home (Requirement #1) • To honor individuals' choices regarding participation in preferred activities outside of the home and interaction with people of their choosing (Requirement #4) • To empower individuals to decide their own schedules and receive the support necessary to implement their choices (Requirement #8)

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7. What percentage of individuals served by your program will directly benefit from implementation of this concept?	
It is projected that 100% of residents will benefit from the 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.	
<p>After the initial funding of all items above, A Loving Home will take great care to preserve their functionality and efficiency for years to come, this includes regular maintenance and sustainable staff rations. We are in the process of training staff in Person Centered Thinking philosophy and the new resources of vehicles and increased staffing will provide tangible changes that demonstrate our commitment to the HCBS concepts. This combination of PCT philosophy and action steps will create a “new normal” that is in alignment with the HCBS requirements. We are confident that at the conclusion of 2021-22 HCBS Funding we will be well positioned to be in full compliance with CBS requirements.</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>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>The two categories of funding include the purchase of 1 vehicle, inclusive of maintenance and insurance, to be available to provide 1:1 outings and activities for the individuals we serve. Though this home has access to a van it is not owned by the home and is not available for alternative outings. The vehicle would be purchased within 6 weeks of approval of request. During this time, we will do research, cost comparisons, and solicit competitive bids in order to find a suitable vehicle for the best price.</p> <p>The second category is the additional 1:1 staff required to facilitate these outings outside of the standard staffing. Staffing could be at OT rate as frequency and scheduling of personalized outings must be flexible.</p> <p>Funding requested for two years and thereafter we would strive to continue by working into general operational budget.</p> <p>There will be minimal administrative costs. Please see attached excel budget.</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.	
After funding first two years of additional staff time, we are fairly confident that on-going costs for staffing would be included in general operating budget for each home, as well as maintenance and insurance of the vehicle.	
11. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	<p>HCBS Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____</p> <p>Service Access and Equity Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____</p> <p>CPP Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____</p> <p>CRDP Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____</p> <p>If yes to any question be sure to answer questions 13 and 14.</p>

**Home and Community-Based Services (HCBS) Rules
Reference Information****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		A Loving Home				
Vendor Number(s)		HQ1380				
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Direct Care staff for 1:1 outtings over and above regular staffing equivalent of One (1) FTE	40186.64	1	\$ 40,187	1	\$ 40,187	\$ 80,373
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
Personnel Subtotal			\$ 40,187		\$ 40,187	\$ 80,373
Operating expenses						
Vehicle Maintenance			\$ 2,360		\$ 2,360	\$ 4,720
Vehicle Insurance			\$ 2,700		\$ 2,700	\$ 5,400
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Operating Subtotal			\$ 5,060		\$ 5,060	\$ 10,120
Administrative Expenses						
Accounting			\$ 600		\$ 600	\$ 1,200
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Administrative Subtotal			\$ 600		\$ 600	\$ 1,200
Capital expenses						
1 Transport Van, Taxes, Registration & Fees			\$ 46,431			\$ 46,431
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Capital Subtotal			\$ 46,431		\$ -	\$ 46,431
Total Concept Cost			\$ 92,278		\$ 45,847	\$ 138,124

See Attachment F for budget details and restrictions