

CONCEPT INFORMATION

Fiscal Year 2021/22

Vendor Name(s)	Villa Teresa Memory Care
Vendor Number(s)	Villa Teresa Memory Care (HV0441)
Contact Name	Allan F Jose, Administrator
Contract Email Address	cghincinbox@gmail.com
Primary Regional Center	Valley Mountain Regional Center
Service Type(s)	RCFE
Service Code(s)	096
Number of Consumers (typical & currently)	Licensed for 6; current census is 5
Staff to Consumer Ration (typical & currently)	Staff-to-Consumer ratio is between 2-3 staff to 5-6 consumers, depending on the time of day and what activities are taking place

INFORMATION ABOUT THE FACILITIES

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?

Response to Item No. 1: *Villa Teresa (VT)* is unique: It is an RCFE that provides services to developmentally disabled consumers suffering from demential and memory loss-related illnesses. Pre-pandemic, our consumers attended day program five days a week. However, since March 2020, our consumers have remained at home and receive remote services from their day programs. On a typical day, consumers rise between 5:30-6:00 am in order do morning ADLs with the assistance of staff and perform other morning rituals. They have breakfast, take their medications (if any), and complete other routine tasks. Between 9 am and 3 pm, consumers participate in remote learning with their day programs; some programs visit consumers at home, spend time with them, and do activities. From 4 pm to 6 pm, our consumers get ready for dinner, have dinner, and perform their afternoon ADLs. In the afternoon, some consumers will begin to retire by going to their rooms, staying in the living room, and/or do various activities. Staff supervise residents throughout the day to ensure safety, completion of tasks, and to provide support for any residents who requires assistance.

2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.

Response to Item No. 2: Applicant is proposing a remodel of one (1) bathroom in the facility that can accommodate non-ambulatory consumers. The purpose of the remodel is to convert a bathroom into a *fully accessible* bathroom that non-ambulatory consumers can access without need for physical assistance. Currently, the facility has two (2) bathrooms. However, neither bathroom is fully accessible because all the showers have curbs that (1) prevent wheelchairs and walkers from entering the shower area and (2) limit some consumers' ability to physically enter the shower on their own.

Two of our objectives are the continued *independence* of our consumers and the *right to access* all public spaces of their home. But because the shower curbs create physical limitations for many of our consumers, some of them cannot realize full independence or achieve full access without asking for physical assistance. While many of our consumers are elderly or have physical disabilities, they are still independent and want to remain so. They resist full physical assistance for various reasons, including modesty and their insistence on maintaining their dignity. While these reasons are ideal, we cannot ignore their limitations and the dangers of physical barriers such as inaccessible showers and non-conforming fixtures.

This proposal, if funded, would result in the construction of one (1) fully accessible bathroom at VT. The bathroom would be curbless so wheelchairs, walkers, and persons with physical limitations can enter without assistance. The toilets and vanities likewise would be raised and positioned for independent use. Finally, the size of the bathroom would be increased to allow for easier access for mobility devices so they can enter, position, and turn without assistance or physical impediments.

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?

Response to Item No. 4: The proposed objectives and outcomes of this project are three-fold: (1) Allow consumers to full access all the common areas of the home regardless of disabilities; (2) encourage consumers to maintain (or gain) independence through self-motivation and/or training; and (3) allow consumers to "age in place" by investing in infrastructure that will allow them to remain in their homes as they age and lose physical abilities. Staff will continue to monitor and chart our consumers' daily, documenting their ADL's, behaviors, and other objectives. Through charting and observation, our facilities can track the success and continued needs of our consumers.

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.

Response to Item No. 5: Our facility tracks the progress, behaviors, and objectives of all our consumers from the time of their admissions. The purpose of this charting, of course, is to determine which objectives require further assistance, or modification, or whether the goals have been achieved. In addition to charting and data collection, administrators and staff continue to seek the input of consumers themselves and their families, our consultants, and individuals involved in our consumers' lives. Over the last five to eight years, we have notified a decline in the physical abilities of our consumers. Not only is this decline observable, but they are supported by the data compiled over several years of charting. This decline is expected given their medical conditions and their ages. But many of our consumers have been with us for more than 10 years and do not wish to leave or be transferred. VT is their home. This proposal seeks to address one of their changing needs by providing the infrastructure needed for them to remain as independent as possible while aging in place.

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

Response to Item No. 6: A larger and safer bathroom promotes more person-centered services. Most of our consumers identify "independence in their ADL's" as one or more of their IPP objectives. But many of them cannot achieve true and full independence if they do not have unimpeded access to a bathroom. As our population ages, consumers rely on mobility devices. They are more susceptible to falling because of seemingly minor barriers such as shower cubs. This proposal addresses those concerns so that (1) consumers can enter the bathroom freely and without need for physical assistance (especially when they want privacy in the bathroom, as many do) and (2) staff can be reassured that consumers are safe when they are in the bathroom alone.

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

Response to Item No. 7: At VT, about four out of five current consumers will benefit directly from the proposal.

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

Response to Item No. 8: The proposed modification is a permanent fixture that requires no maintenance or additional costs upon construction. Additionally, this modification will require a contractor to move a wall, relocate plumbing and electrical outlets, and conduct tile and carpentry work. But again, these efforts are one-time expenses that result in permanent structures or fixtures in the home. Therefore, a successful project will provide years of value in the form of accessibility and increased independence.

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). T

Response to Item No. 9: The proposal requires extensive construction; it will not incur administrative, staffing, or payroll costs. Since the construction is limited to the hallway bathroom, it will have an impact on consumers' daily routines because the consumers will be limited to one bathroom during construction. However, Provider expects this construction to last no more than 10-15 days. Phases:

1. The first phase of the project will require a licensed contractor to obtain permits.
2. The second phase (once permits are approved) involves demolition of any structures, including cabinets, steps, and the removal of flooring material. The construction site will be screened off from the rest of the house.
3. The third phase involves removal and construction new walls, and installation of new plumbing and electrical lines displaced by the construction. The contractor will install new cabinetry, fixtures, and tile.
4. The fourth phase involves reconnecting plumbing and ensuring that all fixtures are in place.

Finally, the project will require a final approval from the local building authorities to ensure that the work is done properly and that it complies with all state and county regulations. Construction should take about ten days to complete. Please see attached **Excel Spreadsheet** for the proposed budget.

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.

Response to Item No. 10: This is not applicable for this proposal.

11. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?

Response to No. 11: Yes, applicant received funding from the 2020-21 Grant Year for Estrella's Care Home No. 1 (HV0111). (**Note:** This is a *different* facility than the current applicant facility.)

HCBS Funding No Yes. If Yes, FY(s) 2020-21
 Service Access and Equity Funding No Yes.
 CPP Funding No Yes.
 CRDP Funding No Yes.
 If yes to any question be sure to answer questions 13 and 14.

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.

Response to No. 12: Applicant received funding for one of its other facilities, Estrella's Care Home No. 1 (HV0111). That project involves the construction of a wheelchair ramp to connect the street level and raised level portions of the facility. Construction is currently ongoing on this project. The timeline and status of this project is listed below. Contractor estimates that the project should be completed by Nov. 30, 2021 (some materials are back-ordered).

Date	Description of Work to Date
June 10, 2021	Executed Contract with Regional Center
June 16, 2021	Executed Contract with Contractor
August 10, 2021	Construction begins
September 15, 2021	Phase 1 of Construction completed: electrical and plumbing relocated; demolition completed
September 24, 2021	Phase 2 of Construction completed: framing for ramp completed
October 19, 2021	Phase 3 of Construction completed: flooring installed; cabinetry completed

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

Response to No. 13: This current proposal is not redundant to funding received from Grant Year 2020-21 because that previous grant was for a different facility. Neither Villa Teresa nor Estrella's Care Home No. 3 has received any grants in the past.

HCBS CONCEPT BUDGET	
Vendor Name	Hilla Teresa Memory Care
Vendor Number(s)	HV0441

	Year 1 Budget			Year 2 Budget			Total
	Wage and Benefits	FTE	Annual Cost	FTE	Annual Cost	Cost	
Personnel (wage + benefits)							
Position Description	NOT APPLICABLE		\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Position Description			\$ -		\$ -	\$ -	
Personnel Subtotal			\$ -		\$ -	\$ -	
Operating expenses							
NONE	NOT APPLICABLE					\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
Operating Subtotal			\$ -		\$ -	\$ -	
Administrative Expenses							
NONE	NOT APPLICABLE					\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
Administrative Subtotal			\$ -		\$ -	\$ -	
Capital expenses							
Permit Costs			\$ 1,200			\$ 1,200	
Construction Cost details:						\$ -	
Demolition			\$ 1,800			\$ 1,800	
Framing & carpentry			\$ 4,250			\$ 4,250	
Electrical			\$ 1,450			\$ 1,450	
Plumbing installation			\$ 2,345			\$ 2,345	
New toilet, vanity, fixtures			\$ 2,350			\$ 2,350	
flooring/Tile, Painting, Finishing			\$ 4,250			\$ 4,250	
Contingency (10%)			\$ 1,900			\$ 1,900	
Capital Subtotal			\$ 19,545		\$ -	\$ 19,545	
Total Concept Cost			\$ 19,545			\$ 19,545	

See Attachment F for budget details and restrictions