

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

Vendor name	Walters Residential Home Care (WRHC), 2 and 3
Vendor number(s)	HV0545; HV0496; HV0573
Contact Name	Moses Walters Sr., TannehKoayen
Contact Email Address	Moseswalters58@gmail.com
Primary regional center	VMRC
Service type(s)	ARF
Service code(s)	905
Number of consumers typically and currently served	14 Adults (breakdown: WRHC – L4I = 4 consumers; WRHC 2- L4F- 6 consumers ; WRHC 3-L4I =4 consumers)
Typical and current staff-to-consumer ratio	2:2, 2:3; 2:2
<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>On a typical day, staff support consumers in the morning with their hygiene routines, provide them breakfast and prepare them for programs. Staffs provide consumers snacks, interact with them about their day upon their return from programs. Staffs also take consumers out for walks and other activities based on their IPP goals. Consumers are also provided dinner by staff, assisted with their medication and supported in preparing for their bedtime routine during the evening. Consumers are also taken out occasionally on Tuesday and Thursday Nights to participate in recreation activities such as going to the movies or bowling alley, site seeing. Staff also take consumers for outings on every Saturday and prepare them lunches on Saturdays and Sundays.</p> <p>Federal Guideline #1: Access to the Community: With increase to transportation, our consumers will have adequate support to community outings of their choices and preferences. By having additional vehicle, their community access and choices to locations will easily be met.</p> <p>Federal Guideline #4: Independence: Our staffs lacking the experience and understanding of the person-centered approach when working with consumers is impacting our ability to offer daily activities based on the consumer's needs and preferences and increasing our ability to provide structure for the client across different environment based on their IPP. Having person centered planning certified trainers on our staff will increase our ability to provide consistent and ongoing trainings to our staff and improve our ability to offer daily activities based on the consumer's needs and preferences, and increasing our ability to provide structure for the client across different environment based on their IPP</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</p>	

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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.
<p>Walters Residential Home Care, 2 and 3 is requesting funds to acquire/purchase additional vehicle to support consumers' outings in the community; and to train two staff as a Person-Centered Trainers. We conducted a self-assessment of our facility program/services and identified deficits in our compliance with federal requirement #1 and #4.</p> <p>To achieve our compliance with these requirements, Walters Residential Care, 2 and 3 will utilize the fund to purchase an additional vehicle (van) and cover a Train- the Trainer certification for 2 of its managers in person-centered planning/thinking. The availability of these resources will enable us to increase our ability to increase our consumers' community and resources access, and enhance our ability to have in house trainers who will provide ongoing trainings to our staff on person-centered planning/thinking.</p>
3. Identify which category/ categories this concept addresses.
<input checked="" type="checkbox"/> Community Integration <input 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>The first outcome of this proposed concept will be to improve the facility's ability to support consumers with transportation to their individual and preferred outings. The objective is to purchase an additional vehicle (a van) that will be used to transport consumers on their outings and visits. The progress of this outcome will be recorded weekly and evaluated on the quarterly and annual basis. By having this extra vehicle will give more freedom of choice and control over their schedule to our consumers which are the most important idea of person-centered services. They will be able to go more places they want to go to, and it is the main principle of person-centered thinking.</p> <p>The second outcome of this proposed concept will also enhance the facility's ability to offer of daily activities based on the client's needs and preferences; and increasing our ability to provide structure for the client across different environment based on their IPP. The objective is to pay for 2 staff to complete a Train-the Trainer certification in person-centered planning/thinking. Progress on this outcome will be measure by staff completing the Train the Trainer certification course on person-centered planning, and then they are providing training on person-centered approach to other staff at our facility.</p> <p>Also, the progress of this outcome will be evaluated quarterly with the consumers and ask them if their quality of life in the homes has improved or not. The new places visited, new experiences made, new people met, new friends made, and their needs are being met. Using the process of evaluation, our homes/staff will adjust accordingly to meet residents' needs.</p>

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Federal Guideline #1: Access to the Community: The purchase of an additional vehicle (van) will achieve this requirement by:

- Increasing our ability to provide transportation for each consumer to weekly home visits (our current ability to transport consumer to home visits is once a month).
- Increase our ability to support consumers with transportation to their individual or preferred outings 3-4 times a week. (Our current ability to provide transportation to consumers on individual outing is 2 time a week).
- On outing day individual preferences are usually different (some consumers want to go to the bowling alley; some consumers want to go to watch movies and others want to go to soccer game). By having this extra minivan, individual choices and preferences will be met.
- In additional, every 3 months our consumers will go to entertainment parks (like Great America Park, Raging Waters, and Water Park. Other places of their choice and more for outings).

Federal Guideline #4: Independence: The payment for training our facility managers as trainers in person centered planning/thinking will achieve this requirement by:

- Increasing our ability to person centered planning trainings in our new staff orientation and to provide quarterly training on person- centered planning/thinking to all our staff (currently we are unable to provide such training to our staff).
- Providing opportunities for our staff to improve their understanding and implementation of the person-centered approach in working with consumers and increasing our ability as a facility to track and identify areas of improvement in our implementation of this approach (some of our staff currently lack understanding of this approach and we currently do not have any means of evaluating our implementation of this approach.)

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.

To start the HCBS proposal we held house meetings with the consumers and staff. We asked the consumers what they wanted to change at home, while explaining the HCBS. We took the HCBS Self-Assessment evaluation form and restated the questions in an easier to understand format. After our meeting, we reviewed all consumers' goals and ISPs. In addition to our HCBS focused meetings and outing of their choice. We focused on those consumers expressing their choices for outings. We also gathered feedback from our staff on their training needs and understanding of the person-centered approach to providing care.

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

Having access and community integration to location of choice enable them smooth outings and meets their needs more efficiently which include person-centered services for each consumer. Also, having an in-house trainer on person-centered planning will enable us provide ongoing and consistent trainings to our staff and improve our implementation of person-centered approach in our care.

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7. What percentage of individuals served by your program will directly benefit from implementation of this concept?	
100 percent of the individuals that we served in our program will directly benefit from implementing 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.	
Walters Residential Care will continue to use the vehicle for transporting our consumers after the funding year ends. We will provide ongoing maintenance and repairs for the vehicle based on the manufacturer’s requirements, for the duration of the vehicle lifespan. For the training, Walters Residential Care will absorb all costs (including refresher for trainers) beyond the funding year. We also intend to provide training to other facilities on person-centered planning/thinking after the funding year.	
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 .	
<ul style="list-style-type: none"> • Two Facility managers pay during training for 1 year \$19,192 (2 staff) total is \$38,384. • We will purchase a vehicle like a Mini Van with a cost of \$65,000, including taxes, licenses, and fees. This vehicle is durable, easier to maintain and has a high safety rating. • Person-Centered Train-the Trainer Certification for staffs \$30,000 • 2 laptops (cost \$900 each) for staff training \$1800 • Printing training materials for staffs \$ 2000 <p>For details on the specifics and breakdown of our budget, please reference the attached excel sheet.</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.	
N/A	
11. Have you or the organization you work with been a past	HCBS Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____ Service Access and Equity Funding <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.If Yes, FY(s) _____

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recipient of DDS funding? If yes, what fiscal year(s)?	CPP Funding <input type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____ CRDP Funding <input type="checkbox"/> No <input type="checkbox"/> Yes. If Yes, FY(s) _____ If yes to any question be sure to answer questions 13 and 14.
<p>For providers who have received prior HCBS, Disparity, CPP or CRDP Funding from DDS</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.	
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		WALTERS RESIDENTIAL HOME CARE , 2, 3				
Vendor Number(s)		HV 0545; HV 0496; HV0573				
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Facility Manager #1 wages/training	19192	1.00	\$ 19,192		\$ -	\$ 19,192
facility Manager #2 wages/training	19192	1.00	\$ 19,192		\$ -	\$ 19,192
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ 38,384		\$ -	\$ 38,384
Operating expenses						
Mini Van			\$ 65,000		\$ -	\$ 65,000
Person Centered Train-the Trainer Certification			\$ 30,000		\$ -	\$ 30,000
2 laptop (900 each) Staff training			\$ 1,800		\$ -	\$ 1,800
Printing training materials			\$ 2,000		\$ -	\$ 2,000
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Operating Subtotal			\$ 98,800		\$ -	\$ 98,800
Administrative Expenses						
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
Capital expenses						
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
Capital Subtotal			\$ -		\$ -	\$ -
Total Concept Cost			\$ 137,184		\$ -	\$ 137,184

See Attachment F for budget details and restrictions