

Home and Community-Based Services (HCBS) Rules CONCEPT FORM

Vendor name	VIP Care Facilities, Inc.
Vendor number(s)	HV0311
Primary regional center	Valley Mountain Regional Center
Service type(s)	ARF
Service code(s)	915
Number of consumers currently serving and current staff to consumer ratio.	6
Have you or the organization you work with been a past recipient of HCBS Funding?	no
Please provide a brief description of the service/ setting that includes what a typical day consists of and how services are currently provided; include barriers to compliance with the HCBS rules.	<p>Adult Residential Facility, 6 bed, Level 4 D. Staffing ratio is 1:3. All consumers are ambulatory with behavior excesses. As a regional center vendor we receive a fixed income based upon the state and this income does not meet the current needs of consumers due to the rise in costs associated with food, gas, wages, benefits, facility wear and tear, etc. We provide a behavior consultant. The setting is a large ranch house with lots of common area space. We primarily serve an organic menu since many of our clients are on psychotropic medications which are hard on their bodies. Our clients typically go to day program or high school transition. We are an active home often attending community events, Special Olympics and volunteer activities. Along with funding issues our second biggest barrier is staffing and training in the areas of person centered planning and informed choices. (caregiving is an entry level position with low wages and extremely high employee turnover). Lastly our residents fixed income for personal and incidentals does not fund their needs so our home tries to supplement where possible.</p>
Identify which HCBS federal requirements this concept addresses that are currently out of compliance.	<p>In our concepts, we address our inability to meet HCBS in several categories including (Req #1) ; lack of funding to purchase to provide additional staffing and purchase an additional vehicle to serve the desires of residents to access the community, integration and non-conspicuous transportation. Comfort and normalization. With additional funding the clients would have more access to the</p>

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	<p>community, participate in city recreation, utilize state and regional resources such as parks, attend events more often. Finances are the greatest barrier. (Req #2) Inability to have private setting at current placement due to house layout. (Req #4) Residents and RSP do not have finances or resources to research and secure activities to create a socialization/community integration outing plan for residents. Additional funding for electronics and “extras” (Req #7) Since private rooms are not fiscally an option, provide user friendly locking (coded) door locks and cabinets for resident’s personal belongings and invest in some comforts for the shared rooms. (Req #8) VIP currently has one large van for all resident and site necessity outings. Additional staffing hours and a smaller vehicle would enable support of individualized schedules and activities. (Req #9) On-Call staffing to accommodate flexibility in after-hour visitors or to assist in transporting for outside visits and activities.</p>
<p>Narrative/description of the concept; include justification for the funding request and explain how the concept would achieve proposed outcomes.</p>	<p>VIP currently serves 6 adult residents. All residents require additional supports due to behavior excesses (including aggression), low functioning level, self-injurious behaviors and/or lack of safety awareness. VIP works in alliance with Bright Futures who operates ARFs and Group Home and often jointly participate in outings and activities including but not limited to a 3-day trip to Lake Tahoe in the snow, an annual 4-day trip to Santa Cruz and sporting events, amusement parks and holiday parties. Accordingly, resolution of funding barriers potentially can serve a total of 21 residents at any given time.</p> <p>Requirements 1 & 8 ~ to enable greater access to our residents into the community and to secure a resource to provide training to staff on person centered approach, rights, and integration. With additional funding purchase a mid-size SUV for the facility with reasonable mpg such as a Toyota C-HR, Honda CR-V, Nissan Rogue, Ford Escape or similar to provide additional community access supports while normalizing the type of vehicle and honoring the resident’s desires to have more control of schedules and activity access.</p> <p>Secure a consultant and collaboratively develop and implement a training program to address Lanterman Act, HCBS, Person Centered, Empowerment and Rights.</p>

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	<p>Requirement #4 ~ to address the funding necessary to fulfill the resident's desire to participate in more activities and interests and to expand their experiences in their community. Including for each resident gift card purchases for movie theatre, favorite clothing store and their favorite eating establishment. Fund attendance to local sporting event of their choice. Secure on-call staff to allow for integration and schedule flexibility and individualized support.</p> <p>Requirement #7 ~ Assist residents in creating their own space that reflects individualized interests and likes by funding a shopping excursion for decorative items to select items for their own space. Replace existing twin beds with larger beds (twin XL or Full) where space permits including new bedding and provide user friendly coded individual locking storage cabinets for personal items, as client desires.</p>
<p>Please describe your person-centered approach¹ in the concept development process; how did you involve the individuals for whom you provide services?</p>	<p>We have an open-door policy with our residents and staff to discuss ideas, wants and needs. We involve our residents in monthly activity planning and hold weekly resident council type meeting to explore wants and needs for the residents and their livelihood at VIP. For HCBS we met with residents individually and collectively and asked them to share some of their wishes for their home and life. VIP's goal is to provide our residents with the same opportunities, rights and protections as other individuals not receiving Medicaid Funded Services.</p>
<p>Does the concept address unmet service needs or service disparities? If so, how?</p>	<p>In our concept, we address our inability to provide meet HCBS in several categories including inability to secure and/or private individual space. Lack of funding to purchase additional vehicles that serve the desires of residents to access community, integration and non-conspicuous transportation. Comfort and normalization. Training for personnel on HCBS, Person-Centered and client rights. Funding for additional activities and client personal items would be beneficial to the residents' overall health and well-being.</p>

¹ A person-centered approach emphasizes what is important to the individual who receives services and focuses on personal preferences, satisfaction, and choice of supports in accessing the full benefits of community living. For more information regarding person-centered practices, please visit www.nasdds.org/resource-library/person-centered-practices.

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<p>Estimated budget and timeline; identify all major costs and benchmarks — attachments are acceptable.</p>	<p>Vehicle ~ (1): \$26,000; 12 months' auto insurance \$800; Gas and Maintenance for the year \$1,500.</p> <p>Consultant and Staff Trainings ~ Consultant to develop trainings and provide staff trainings ~ \$3,000; Staff attendance for training and CEUs \$1,200</p> <p>Gift Cards for movies, clothing and eating out for residents: \$400 for each resident. Local sporting event including resident and support staff attendance, parking fees and food. \$150/per person (9).</p> <p>On-call staff for individualized activities and community integration. \$20,000 for the year.</p> <p>New bed frames, mattresses, bedding. \$1,500 each (3) New decorative items for room. \$100 each (6)</p> <p>Provide and install Personal locking cabinets \$250 ea. (6)</p>
<p>Total requested amount.</p>	<p>\$ 60,450</p>
<p>What is your plan for sustaining the benefits, value, and success of your project at the conclusion of 2018-19 HCBS Funding?</p>	<p>Vehicle and furnishings will be paid for so that initial expense will carry us a long way. The curriculum for person centered training will be developed and can be continued to be used as staff turnover and we are hopeful the DDS rate study will adjust the board and care rates to allow us to sustain.</p>