

EASTERN LOS ANGELES REGIONAL CENTER

ANNOUNCEMENT

OF

COMMUNITY PLACEMENT PLAN (CPP) START-UP AWARD

**ONE COMMUNITY CRISIS HOME
FOR ADULTS**

FISCAL YEAR 2021- 2022

Project Numbers:

TBD

REQUEST FOR PROPOSALS (RFP)

EASTERN LOS ANGELES REGIONAL CENTER
COMMUNITY PLACEMENT PLAN (CPP) START-UP AWARD
FISCAL YEAR 2021-2022
REQUEST FOR PROPOSALS
ONE COMMUNITY CRISIS HOME FOR ADULTS

SUMMARY OF PROJECT

The Eastern Los Angeles Regional Center (ELARC), in collaboration with North Los Angeles County Regional Center (NLACRC), is seeking proposals for one Community Crisis Home (CCH) serving adults with the Community Placement Plan Start-Up Grants for **FY 2021-2022(CPP)**. ELARC will be requesting **\$240,000 in FY 21/22 for one CCH (project number to be determined)**, for approval by DDS. Amount granted will be subject to approved allowable reasonable costs incurred in the development of the residential program. Applicants may apply for the project listed below:

Project Numbers and Description:

Project Number To Be Determined: 4 Bed CCH for 2 IMD Placements and 2 Community Placements.

A Community Crisis Home is a new service model approved in the State of California Budget Act of 2014, through Trailer Bill Language SB 856. The statute and regulations pertaining to a CCH are enumerated in the Welfare and Institutions Code, starting in section 4698 and in Title 17 emergency regulations, starting with Section 59000.

Definition of Terms below are quoted from California Code of Regulations, Title 17, Division 2, Chapter 3, Subchapter 23. Community Crisis Homes.

“Community Crisis Home” means an adult residential facility certified by the Department and licensed by the Department of Social Services that provides 24hour nonmedical care to individuals with developmental disabilities receiving regional center services and in need of crisis intervention services, who would otherwise be at risk of admission to a more restrictive setting. A Community Crisis Home may have a maximum capacity of up to eight consumers. A Community Crisis Home is eligible for, and must meet all the requirements for, vendorization as a residential facility by a regional center pursuant to the requirements of Division 2, Chapter 3, Subchapter 2.

“Continuous Quality Improvement System” means a process to ensure systematic improvement of services to increase positive outcomes for the consumers being served.

“Crisis Intervention Services” means additional assessment, staffing, supervision, and other intensive services and supports to immediately address a consumer's urgent or emergent abrupt onset of behavioral or other needs, which are beyond what is typically available in other community living arrangements. These services shall facilitate transition to a less restrictive community environment.

“Direct Care Staff” means facility staff that personally provide direct supervision and special services to consumers, as defined in Section 56002(a). The term includes the licensee, the administrator, management, supervisory, and lead staff during that time when they are providing direct supervision and special services to consumers. (1) Direct supervision and special services shall include “care and supervision” as defined in Title 22, California Code of Regulations, Section 80001(c)(3).

“Emergency Intervention(s)” means the intervention(s) used with consumers during the time they present an imminent danger of serious injury to self or others, which cannot be prevented by the use of a less restrictive technique.

“Emergency Intervention Plan” means a written plan, which addresses the implementation of emergency interventions and the prevention of injury.

“Facility Liaison” means the person, or his or her designee, assigned by the vendoring regional center as the principal coordinator between the regional center and the facility.

“Health Care Professional” means a licensed registered nurse, nurse practitioner, physician assistant and/or a medical doctor, contracted or hired by the facility.

“Immediate Danger” means conditions which constitute an impending threat to the health and safety of a consumer and which require immediate action by the regional center to safeguard the health and safety of the consumers in the facility, and as defined in Section 56053.

“Individual Behavior Supports Plan” means the plan that: identifies and documents the intensive support and service needs of a consumer; details the strategies to be employed and services to be provided in order for the consumer to return to their previous placement or to an appropriate alternative community based environment; and includes the entity responsible for providing those services. This plan includes the requirements of Section 1180.4(a) of the Health and Safety Code.

“Individual Behavior Supports Team” means those individuals who participate in the development, revision and monitoring of the Individual Behavior Supports Plan for consumers residing in a Community Crisis Home. (1) The team shall, at a minimum, be composed of the following individuals: (A) Consumer and, where applicable, authorized consumer representative; (B) Regional center service coordinator and other regional center representative as necessary; (C) Community Crisis Home administrator; (D) Regional center clients' rights advocate, unless the consumer objects on his or her own behalf to participation by the clients' rights advocate; and (E) Community Crisis Home Qualified Behavior Modification Professional. (2) The team may also

include: (A) Regional center's mobile crisis team; (B) Representative(s) from the consumer's prior residence and/or identified alternative future community based residential setting, as applicable; (C) Health Care Professional; and (D) Any individual(s) deemed necessary by the consumer, or, where applicable, his or her authorized consumer representative, if any, for developing a comprehensive and effective Individual Behavior Supports Plan.

“Planning Team” refers to the planning team defined in subsection (j) of Section 4512 of the Welfare and Institutions Code, which develops and reviews a consumer's IPP through the planning process described in Sections 4646 and 4646.5 of the Welfare and Institutions Code.

“Qualified Behavior Modification Professional” means an individual with a minimum two years of experience in designing, supervising, and implementing behavior modification services who is one of the following: (1) An Assistant Behavior Analyst certified by the national Behavior Analyst Certification Board as a Certified Assistant Behavior Analyst; (2) A Behavior Analyst certified by the national Behavior Analyst Certification Board as a Certified Behavior Analyst; A Licensed Clinical Social Worker, pursuant to Sections 49964998.5 of the Business and Professions Code; (4) A Licensed Marriage and Family Therapist, pursuant to Sections 49804984.7 of the Business and Professions Code; (5) A psychologist, licensed by the California Board of Psychology; or (6) A professional with California licensure, which permits the design of behavior modification intervention services.

“Registered Behavior Technician” means an individual recognized by the national Behavior Analyst Certification Board as a Registered Behavior Technician.

A Community Crisis Home (CCH) will support up to four (4) individuals who will have psychiatric and behavioral challenges, engage in emotional outburst, yelling, biting, property destruction, self-injury behaviors, other maladaptive behaviors, physical/verbal aggression, may have extensive self-care needs deficits, mental health/medical needs and/or non-ambulatory, history of forensic involvement, substance abuse or nicotine addiction, potential fire starting tendency, and selected eating disorders. Individuals will require support in developing coping strategies for effective self-control, positive communication, skills development utilizing positive behavioral support systems, and day program development/supports. The residential facility will serve consumers who are transitioning out of the State Developmental Centers, Mental Health Resource Center (MHRC), or Institution for Mental Disease (IMD) or at risk of entering into a more restrictive environment. Individuals identified for this development may have unpredictable aggression and violent behaviors with psychiatric challenges. This development would allow for individuals to reside in the least restrictive environment that promotes independence and provides a safe and nurturing environment while assuring the consumer's health and safety utilizing natural supports within the community. The facility may need to provide in-home day programming as appropriate, transportation, and high level of staffing and consultation needs

DDS may decertify a Community Crisis Home that it determines is not in compliance with applicable laws or when it cannot ensure the health and safety of consumers.

An applicant for Community Crisis Home certification, or their designee, shall complete the Regional Center's Residential Services Orientation.

DDS established a rate methodology for Community Crisis Home that includes a CCH Transition component (Service Code 899), a CCH Facility component (Service Code 902), and a CCH Individual Support component (Service Code 903) based on each consumer's needs as determined through an individual program plan process.

For the facility rate, the service provider selected shall submit DDS form DS 6023 as **EXHIBIT F** to the regional center for review and written approval. The facility rate may not exceed the maximum rate of reimbursement to be determined by the DDS. The monthly facility rate is prorated by the licensed capacity of the facility. Portions not funded by a consumer placement are paid through the contract between the selected provider and the regional center. Prior to the facility reaching licensed capacity, the facility rate is paid based on the licensed capacity of the facility, with vacancies funded through the contract. At six months from the initial placement in the facility, and at each subsequent 30 days, the vendor and regional center shall meet to determine if the portion of the facility rate funded through the contract due to the unfilled beds will continue. Once the facility reaches maximum capacity, the facility rate is paid based on the licensed capacity of the facility, despite temporary consumer absences or subsequent temporary vacancies, with vacancies funded through the contract. "Temporary vacancy" here means a vacancy of 60 days or fewer. At 60 days of temporary vacancy, and at each subsequent 30 days, the vendor and regional center shall meet to determine if the portion of the facility rate funded through the contract due to the temporary vacancy will continue. The established facility rate is prorated for a partial month of service when a consumer is discharged from the facility.

In regards to the individual rate, the service provider selected shall submit the completed DDS form DS 6024 as **EXHIBIT G** to the regional center for review and written approval prior to a consumer's admission to the Community Crisis Home. A consumer's Individual Behavior Supports Team shall review the consumer's individual cost within 30 days of initial placement, and at least every six months thereafter, and submit an updated DDS form DS 6024 to the regional center within 30 days, for review and written approval. The monthly individual rate may not exceed the maximum rate of reimbursement to be determined by DDS. When a consumer is temporarily absent from the facility 14 days or less per month, the individual rate may be paid by the regional center for the full month. When the consumer's temporary absence, is due to the need for inpatient care in a health facility, the regional center may, continue to pay the established individual rate as long as no other consumer occupies the vacancy created by the consumer's temporary absence, or until the Individual Behavior Supports Team has determined that the consumer will not return to the facility. Individualized services and supports funded by the regional center during a consumer's temporary absence shall be approved by the regional center director and shall only be approved in 14 day increments. The facility shall continue to provide direct supervision and special services as needed during a consumer's temporary absence to continue to receive payment of the individualized services and supports rate. The established individualized services and supports rate is prorated for a partial month of service in all other cases.

In regards to the individual costs associated with transition, the service provider selected shall submit the completed DDS form DS 6028 as **EXHIBIT H** to the regional center for review and written approval prior to a consumer's admission to the Community Crisis Home. The transition rate is used to fund additional services and supports for the consumer during times of transition into or out of the Community Crisis Home. Transition funding shall only be used for staff training, cross-training or needs specifically related to the consumer's transition process. Transition funding is time limited, as determined by the consumer's Individual Behavior Supports Team. The transition rate shall not be utilized for services and supports already billed at the individual rate during placement at the Community Crisis Home, or for services and supports provided as part of the rate during placement at the previous or future residential arrangement. Transition funding shall not be used for facility expenses. A consumer's Individual Behavior Supports Team shall review the consumer's transition rate at least monthly and submit an updated completed Department form DS 6028 to the regional center within 10 days for review and written approval. The daily rate of reimbursement to any vendor for any consumer's transition costs may not exceed the rate limit determined by the Department by use of the DS 6028. The transition rate shall be paid only for actual days of service. The payment of the transition rate is dependent on the regional center prior authorization. Retroactive authorizations shall not be allowed.

Awardee will need to lease a property purchased and owned by a non-profit housing corporation and operate a minimum of ten years. **If the awardee is a for-profit organization, it is the responsibility of the awardee to pay the property tax after possession of the property.** Renovation of the property is the responsibility of the non-profit housing corporation selected with the collaboration of the awardee and the regional center.

Applicants must adopt a non-reject policy toward consumers who meet the entrance criteria referred for services and a commitment for modifying supports to ensure continued stability. The interested parties are invited to submit a proposal to ELARC in accordance with the specifications contained in this Request for Proposal (RFP) for the development and operation of the facility.

Start-up monies are awarded with the intent of defraying the cost to develop new services. Therefore, commitments in the form of hard (dollar) and/or soft (in-kind) contributions are necessary for each applicant receiving an award. Selection will be based on the proposal which best meets the desired elements of this RFP.

PURPOSE & SCOPE

The selected service provider will be required to develop and operate a Community Crisis Home for adults with developmental disabilities in need of crisis intervention services who are transitioning out of the State Developmental Centers, Mental Health Resource Center (MHRC), or Institution for Mental Disease (IMD) or at risk of entering into a more restrictive environment. The home will be located within the NLACRC or ELARC catchment area as indicated in the attached **EXHIBIT A**. In addition, the home will be located in a typical residential neighborhood having enough indoor and outdoor space for resident activities.

Additional specifications for the prospective **Community Crisis Homes** are provided below:

Features:

- Private bedroom for each consumer
- At least 50% of the bedrooms must be approved for consumers who are non-ambulatory.
- Seclusion shall not be utilized in a Community Crisis Home
- A home with a fenced yard
- Highly structured program services, including night component with at least 2 awake staff
- Providing assistance to consumers in accessing mental health resources, medical resources, other generic resources, or community treatment groups.
- The home administrator, licensee's qualified behavior modification professional, the regional center service coordinator, health care professional, and other regional center representatives, as necessary, the consumer and his or her authorized representatives are required to comprise the Individual Behavior Supports Team meeting and contribute to the individual behavior supports plan.
- The regional center Clients Rights Advocate will participate in the Individual Behavior Supports Team meeting unless the consumer objects on his or her own behalf to participation by the Clients' Rights Advocate.
- The regional center will conduct at least quarterly quality assurance visits in addition to a monthly face-to-face, onsite case management visits with each consumer.
- A regional center qualified behavior modification professional shall visit, with or without notice, the consumer, in person, at least monthly in the Community Crisis Home, or more frequently if specified in the consumer's individual behavior supports plan.
- DDS shall conduct onsite visits to all the Community Crisis Homes at least every six months.
- The administrator is responsible for coordinating the development and subsequent updating of each consumer's Individual Behavior Supports Plan. The Individual Behavior Supports Plan must be initiated immediately at the consumer's admission. The Individual Behavior Supports Team members shall provide their input for inclusion in the Individual Behavior Supports Plan within 7 days of the consumer's admission, review the plan monthly and provide update information as necessary.
- The Individual Behavior Supports Plan must be function-based, evidence-based, and target functionally equivalent replacement behaviors. Refer Section 59010 for detailed requirements of Individual Behavior Supports Plan.
- Prior to vendorization, the vendoring regional center and the vendor shall execute a contract (service agreement).
- A Community Crisis Home must have an operable automatic fire sprinkler system approved by the State Fire Marshal or local fire department as condition of certification.
- If applicable, required State Developmental Center Transition Program participation as facilitated by the Regional Center State Developmental Center Liaison and the Regional Resource Development Program at State Developmental Center. The selected service provider needs to coordinate and collaborate with the Regional Resource Development

Program which will introduce the State Developmental Center Transition Team. The State Developmental Center Transition Team is composed of a physician, psychologist, and direct care staff who are most familiar with the consumers.

Personnel Qualifications: Bilingual English/Spanish speaking Staff Preferred. The DSP will have the ability to speak English and at least three DSP on duty will have the ability to speak the primary language of consumers.

Administrator must:

Have a minimum of two years of prior experience providing direct care or supervision to individuals with developmental disabilities and be one of the following:

- (A) A Registered Behavior Technician. (B) A Licensed Psychiatric Technician.
- (C) A Qualified Behavior Modification Professional. Possession of ARF Administrator certification, DSP I, DSP II, & ELARC Residential Services Orientation certificates prior to provision of services to consumers.

Direct Care Lead Staff Person must:

Have at least one year of prior experience providing direct care to individuals with developmental disabilities with challenging behavior service needs, and become a Registered Behavior Technician within 60 days of initial employment or be a Qualified Behavior Modification Professional

Direct Care Staff Person must:

Have at least six months of prior experience providing direct care to individuals with developmental disabilities who have challenging behavior service needs, and become a Registered Behavior Technician within twelve months of initial employment or be a Qualified Behavior Modification Professional.

May need licensed staff to monitor glucose levels and administer insulin injections as needed, or other medical conditions that require treatment from a licensed staff.

Direct Care Staff shall complete DSP I and DSP II as required by Section 59007 prior to or within one year of employment at the Community Crisis Home. Prior to providing direct consumer care and at all times while providing, direct care staff shall possess valid certificates of hands-on training in first aid and CPR by a certified instructor and renew CPR annually.

At least one lead staff person and one direct care staff person must be on duty at all times when a consumer is under the supervision of the facility staff.

The Administrator must be on duty a minimum of 20 hours per week per facility.

The regional center shall require a Community Crisis Home to provide additional professional, administrative, or direct care staff whenever the regional center determines,

in consultation with the Individual Behavior Supports Team, that additional personnel are needed to provide for the health and safety of consumers.

Consultant Hours:

The administrator shall assign a qualified behavior modification professional to each consumer. A minimum of 6 hours per month of behavior assessments and behavior interventions must be provided to each consumer by a qualified behavior modification professional. This time must be documented in the consumer file.

In addition to the behavior consultation hours required above, the facility administrator shall ensure the provision of a minimum of 6 other type of consultant hours per month per consumer, which must be appropriate to meet individual consumer service needs.

Staff Training Plan:

On-site Orientation -Within the first 40 hours of employment, the administrator shall ensure that direct care staff complete a minimum of 32 hours of on-site orientation. Refer to Section 59007 for the required training topics. Staff who has not completed the on-site training must work under the supervision of a fully trained direct care lead staff.

Emergency intervention training – In addition to staff receiving the on-site orientation, within the first 80 hours of employment, the administrator shall ensure that direct care staff receive a minimum of 16 hours of emergency intervention training. The training must include the techniques the licensee will use to prevent injury and maintain safety regarding consumers who are a danger to self or others and must emphasize positive behavioral supports and techniques that are alternatives to physical restraints, pursuant to Title 22, California Code of Regulations, Sections 85322 and 85365. A direct care staff person may not implement emergency intervention prior to successfully completing the emergency intervention training. Direct care staff's emergency intervention training is required to be renewed annually. Administrator and licensee must carefully review and understand the DDS Guidelines for the Use of Restraint or Containment in Community Crisis Homes. *The guidelines summarize laws and regulations around the use of restraint or containment as well as laws and regulations regarding the general provision of services in CCHs, including those relevant to Individual Behavior Supports Plans, Functional Behavior Assessments, facility and Individual Emergency Intervention Plans, staff training, data collection, monitoring and reporting.*

<https://www.dds.ca.gov/general/eligibility/community-crisis-homes/>

Due to some consumers with behaviors of making frequent allegations, provider must have enough staff to work with the consumers if another staff must be removed from direct care while an investigation is pending.

All staff including the administrator shall complete the competency-based trainings, segments I and II and pass the competency tests, or pass the challenge tests.

Continuing Education - a minimum of 20 hours of continuing education on an annual basis covering, but not limited to, the subjects specified in Section 59007(a). The administrator shall require additional continuing education, as necessary, to ensure the continued health and safety of each consumer.

***Resident Profile:**

(Project Number to be determine): Adults with autism, an intellectual disability, and possibly mental health diagnosis with severe behavioral challenges. Individuals currently residing in an institution for mental disease or who may be at risk for admission to an institution for mental disease or a state developmental center. Consumers may be diagnosed with a depressive disorder, anxiety disorder, psychotic disorder, obsessive compulsive disorder, or personality disorder. Consumer may also have inappropriate sexual behaviors.

- Adults male or female
- Ambulatory or non-ambulatory
- May require physical restraints during behavioral outbursts
- May require 2:1 staffing or more
- May have assaultive behaviors resulting injury to others
- May have severe self-injurious behaviors requiring medical attention
- May require Health Restricted Health Care Plan

Medical - Stable conditions including but not limited to seizure disorder, diabetes insulin dependent, assistance with monitoring glucose levels, g-tube dependent, weight monitoring, physician recommended diet, and vitamin supplemental intake regimes.

Mental Health – dual diagnosis (developmental disability and mental illness). May include but not limited to depression, anxiety disorder, psychotic disorder, obsessive compulsive disorder, neurotic disorder, and personality disorders.

Self-Help – capable to perform some of self-help skills with assistance. However, consumers may not be cooperative, or allow staff to perform activities of daily living.

Significant History/Services – may have an array of behavior challenges including the following behaviors: inappropriate sexual behaviors, physical aggression, frequent

psychiatric hospitalizations, history of unsuccessful placements in residential settings, living independently, or with family, AWOL, severe self-injurious behaviors, property destruction, disruptive sleep patterns, severe PICA, and making false allegations.

Consumers identified for a Community Crisis Home may have history of placement at a State Developmental Center or Institution for Mental Disease (IMD) or out-of-state placement(s) or unsuccessful placements in ARFs and Supported Living Services.

History of physical aggression (running into others, head butting others, punching, hitting, pushing, kicking and scratching others), history of serious assaultive behaviors with intent to harm, self-injurious behavior (biting, throwing self against hard surfaces, more severe forms of SIB), lack of safety awareness, and deliberately placing self in harms way. Physical aggression and self-injurious behavior may cause severe physical injury requiring a physician's attention to the consumer or staff needing medical attention.

Recreational/Leisure – The identified vendor shall provide opportunities for structured, supervised leisure activities to promote socially appropriate behavior and release frustration and tension.

Supports Needed:

- Behavioral intervention services
- Mental health supports including but not limited to psychiatric services, Counseling/therapy etc.
- Socialization skills and interpersonal relationship training
- Community inclusion services, crisis intervention, day programming, dietary services, employment services, recreation/leisure activities, and consistent medical services.
- 2:1 staffing during programming hours if needed or more
- Advocacy services
- Development and implementation of restricted health care plans, as necessary, and as specified in Title 22 Community Care Licensing Regulations.
- Acquisition and maintenance of adaptive equipment, if necessary

Day Opportunities:

- Consumer(s) may be without a regional center funded day program for indefinite period of time depending on consumer choice and preference, or due to behavioral challenges.
- A wide variety of community integration activities to include support of consumers in vocational services.
- Provide appropriate approved services throughout the day when the consumer(s) chooses not to attend day program(s), or is not accepted into a day program, or an appropriate day program is not available.

- Center-based or community-based component depending on consumer preference.
- Mental health day treatment service if appropriate.
- May require close supervision while out in the community.

The Community Crisis Home shall exceed the minimum requirements of a Residential Facility Service Level 4I pursuant to Sections 56004 and 56013 of Title 17 Regulations, and shall meet all applicable regulations contained in Welfare and Institutions Code, Section 4648.1, (c) (2) & (3); Division 2, Title 17 of the California Code of Regulations (CCR); and Division 6, Title 22 CCR. The selected service provider is required to abide by the Residential Services and Quality Assurance Regulations in Title 17, Division 2, Chapter 3, Subchapter 4. Sections 56001 to 56003, 56018 to 56033, 56040 to 56057; Subchapter 6. Section 56917; and Subchapter 23. Sections 59000 to 59022 as they apply to the operation, reporting, access, payment and monitoring requirements for residential facilities.

APPLICANT ELIGIBILITY

Only applicants who have actually provided services to consumers for a minimum of two years will be considered. Applicants shall have a track record of successfully recruiting direct care staff, administrators and consultants who meet the staff qualifications described in the RFP. Applicants must possess qualifications as specified in the RFP. Proposals will be considered from residential service providers who currently meet the minimum personnel qualifications for administrator delineated in Sub-Chapter 23, Chapter 3, Division 2, Title 17 CCR, Section 59004. If the amount received from the regional center or regional centers during each state fiscal year is more than or equal to five hundred thousand dollars (\$500,000), but less than two million dollars (\$2,000,000), the entity shall obtain an independent review report of its financial statements for the entity's fiscal year that includes the last day of the most recent state fiscal year. If the amount received from the regional center or regional centers during each state fiscal year is equal to or more than two million dollars (\$2,000,000), the entity shall obtain an independent audit of its financial statements for the entity's fiscal year that includes the last day of the most recent state fiscal year. The report must be unqualified or any qualification must be resolved and approved by the regional center and the Department of Developmental Services.

APPLICANT INELIGIBILITY

The following agencies or individuals are not eligible for residential services facility development:

- a. The State of California, its officers, or its employees;
- b. A regional center, its employees, and their immediate family members;
- c. The area board members, its employees or their immediate family members;
- d. Any applicant determined to be an excluded individual or entity as defined in Section 54302 (b) (1).

PRELIMINARY ORIENTATION

An orientation to this RFP and an opportunity to have questions answered will be held **from 10:00 am to 12:00 pm, Tuesday, August 24, 2021, at:**

Eastern Los Angeles Regional Center (via Zoom)
1000 S. Fremont Ave.
Alhambra, CA 91802
(626) 299-4700

Attendance at the orientation is required in order for the proposal to be accepted unless special arrangements are made prior to the orientation.

SUBMISSION OF PROPOSAL

Notice of Intent to Respond to Request for Proposal (see **EXHIBIT B**, all questions must have a response and the form must be signed and dated) is **due Tuesday, September 2, 2021**. Response to the Request for Proposals must be received by the ELARC, **no later than 4:30 p.m., September 2, 2021**. All interested applicants must submit an original and four copies of the proposal to the attention of Maria Cañas, Project Coordinator, at:

Eastern Los Angeles Regional Center
1000 S. Fremont Ave
P.O. Box 7916
Alhambra, CA 91802-7916
(626) 299-4649

All inquiries regarding this proposal and technical assistance requests should be directed to **Maria Cañas, Project Coordinator, at (626) 299-4897, or mcanas@elarc.org**. Technical assistance is limited to information on the requirements for preparation of proposals. Applicants are expected to prepare their proposals themselves or retain someone to provide such assistance.

TIMELINE

Request for proposals announced & available online August 10, 2021
Orientation August 26, 2021
Notice of Intent to Respond to Request for Proposals due September 2, 2021
Deadline for receipt of proposals no later than 4:30 p.m. September 28, 2021
Evaluation & Selection of Proposals on or before October 19, 2021
Interviews w/ Applicants if necessary October 27, 2021
Notice of Selection Committee Decisions on or before November 15, 2021
Contract negotiations complete (subject to DDS funding approval)... December 13, 2021
Projects to start operation (subject to DDS funding approval) January 1, 2022
Monthly Reports due by the 16th of each month effective February 1, 2022
Project completion dateeight (8) months after close escrow of the property purchased

Strict adherence to the above deadlines will be followed.

PROPOSAL REVIEW AND SELECTION PROCESS

Each proposal will undergo a preliminary screening. Applicants who have not submitted a complete proposal in accordance with the Content of Proposal guidelines and requested documents will not be accepted for review and rating. **Proposals submitted after 4:30 pm, September 28, 2021 will not be accepted.** No proposal will be returned. To avoid contradiction, proposals should be time/date stamped by the regional center at the front desk.

The Review & Selection Committee will be selected by ELARC. This Committee will review, score, rank and prioritize the proposals.

Applicants’ proposals may be rejected for inconsistency with state and federal guidelines, failure to follow instructions, incomplete documents, and failure to submit required documents.

Acceptable proposals will be scored as per the following scoring guidelines by each of the CPP Review Committee members:

Agency Description	20 points
Program Design	35 points
Work Plan/Timeline of Project Activities	15 points
Budget and Finance – Start-up and On-going	15 points
Proposal Responsiveness/Innovation	15 points
TOTAL	100 points

The minimum requirement will be 70% of the total possible points

All applicants are urged to design and develop their proposal to fully address each of the scoring criteria. Applicants will be evaluated and selected based on merit of the proposal, previous performance (including the ability to complete the project, ability to work cooperatively with the regional center, ability to successfully recruit qualified staff members and track record in the area of development).

After preliminary review and scoring, interviews with highest ranking applicant(s) will be determined.

The recommendations of the Review & Selection Committee shall be approved by the ELARC Executive Director and the ELARC Board of Directors. This decision is not subject to appeal. All applicants will receive notification of ELARC’s decision regarding their proposal.

The RFP neither commits ELARC to select any proposal nor award any contract.

CONTRACT TERMS

The applicant selected for the CPP grant award will enter into an agreement (contract) with the ELARC.

ELARC may give the selected service provider(s) three advance payment during the term of this agreement. The maximum advance payment will be in the sum of 25% of the total start-up amount. Request for advance payment must be submitted in writing and accompanied by a copy of the Budget for which the advance is being requested.

The selected service provider shall submit invoices to ELARC for review. Within thirty (30) days of receipt of the invoice, the ELARC Project Coordinator shall determine, in collaboration with ELARC Fiscal Monitor, whose discretion shall be reasonably exercised, whether or not the services performed by the selected service provider are satisfactory and whether or not the selected service provider is otherwise entitled to payment in accordance with the terms of the Agreement. The selected service provider shall be bound by the determination of the ELARC Project Coordinator of approval or disapproval of any invoice. The final claim will not be reimbursed until the advance money has been verified with sufficient documentation if the advance money is issued. In addition, the program design must be completed and approved prior to reimbursement of final claim of the start-up funds.

Among other provisions, the contract will be in compliance with the State Administrative Manual (SAM) Requirements (refer to **EXHIBIT C**).

CONTENT OF PROPOSAL

The proposal must be typed on standard white paper. Include a table of contents and page numbering. Use the following outline. For items that request conditional information, provide a statement whether or not it applies to the applicant in order to ensure that it has been addressed.

A. APPLICANT INFORMATION

1. The name, address and telephone number of the proposed facility and applicant. If the applicant is a corporation, list the principal members of the corporation. Indicate whether it is a profit or nonprofit corporation.
2. State the name of the author of the proposal. List any parties who participated in writing all or part of the proposal.

Any proposal written for an applicant by a consultant or professional grant writer will demonstrate a commitment by the writer to provide ongoing technical assistance during the project implementation phase.

3. Names of partners, staff or consultants, if known, who will be involved in the implementation of the project if awarded a selection.

4. Resume and/or description of the applicant which details education, knowledge, experience in the field of developmental disabilities. Resume should reveal as much information as possible which demonstrates the applicant's ability to successfully administer and implement the proposal. It should also indicate a prior history of successful operation of a service similar to the proposal services which can be verified by primary consumers or agencies if available.

Specify any past history of activities which have had a serious negative impact upon individuals with developmental disabilities including, but not limited to: client abuse, exploitation, or serious citation under Title 17 and Title 22 of California Administrative Code, the Penal Code of the State of California, or regulations, or the laws of other states or the Federal Government. Any information withheld or omitted may result in disqualification of the proposal or termination of the contract. Should at least contain information for the past 12 months. If no deficiencies still need to address.

5. List of references and/or letters of reference. Applicants should be aware that ELARC will contact reference or other sources to corroborate any of the information provided in the proposal.
6. Specify the start-up budget amount you propose to get awarded not to exceed specific amount. Additionally, specify the total start-up budget amount required which may exceed the funds available with hard (dollar) and/or soft (in-kind) commitments.
7. Specify whether you are currently in development of a residential facility with any other regional center with or without start-up grants.

B. TIMELINE OF PROJECT ACTIVITIES

The project objectives are a step-by-step action plan which includes measurable, time-limited activities toward the achievement of specific project tasks and achievement of the proposed outcome. The activities should cover each major step of the project and may include but not be limited to: Community Care Licensing (CCL) contacts; attendance at ARF administrator orientation and certification obtained; CCL Orientation Component I; completion of ELARC residential services orientation (RSO); property search; investigation of over-concentration through local government agency; ELARC site visits; open/close escrow; submission of licensing application to CCL; working collaboratively with the identified project partners (regional center, housing corporation, DC staff or psychiatric hospital staff); pre-inspection by the local fire department; CCL Orientation Component II, & III; submission of complete program design to regional center; service agreement being accepted by both the selected provider and ELARC; provision of

documentation that the automatic fire sprinkler system meets the NFPA 13D standard and approved by the State Fire Marshall or local fire department; review and certification by DDS; referral packets received from ELARC; recruiting, hiring and training staff; scheduled visit to meet with consumer and staff at the College Hospital DDMI Unit, State Developmental Center, or IMD; staff pre-employment training; decision to ELARC of consumers selected; furniture delivered; home/office equipment sufficient for licensing; consumer day time visit to the facility; leasing vehicle; initial licensing evaluation conducted by CCL; license obtained; consumer overnight visit; any other pertinent events; and monthly reports to ELARC documenting achievement of objectives. The project objectives should be realistically achievable within the time frame. The timeline of project activities has to reflect that the facility will be licensed and vendored eight months after close escrow of the property purchased by the Housing Provider.

C. PROPOSED RESIDENTIAL PROGRAM

The proposed residential program should include the following:

1. Number of consumers to be served;
2. Consumer admission criteria and procedures;
3. A description of how the facility will ensure that appropriate services and supports are provided at the time of admission to meet the consumer's immediate needs pending development of the individual behavioral supports plan;
4. An organizational chart for the staff in the facility and for the organization;
5. A description of how the facility will serve diverse populations including, but not limited to, culturally and linguistically diverse populations. The plan shall address how the facility will provide culturally and linguistically competent services and supports, examples of the applicant's commitment to address the needs of ethnicity, culture and language relative to the diverse populations in the ELARC catchment area and any additional information that the applicant deems relevant to issues of equity and diversity.
6. A description of consumer services to be provided; including the instructional methods and techniques to be utilized;
7. A description of how the licensee will ensure all direct care staff and consultants are competent to perform their assigned duties, including but not limited to:
 - (A) A description of the consultant disciplines, qualifications, and hours to be utilized;
 - (B) A description of staff qualifications and a duty statement for each staff position;
 - (C) A sample staff schedule;

- (D) Staff Training plan.
8. A description of the facility's emergency procedures, including but not limited to:
 - (A) The facility's emergency evacuation procedures
 - (B) A description of how regularly scheduled fire and earthquake drills will be conducted on a schedule of no less than every three months, with the drills conducted on alternating work shifts so that drills are conducted during the day and evening hours;
 - (C) The Emergency Intervention Plan
 9. An explanation of how the Community Crisis Home will ensure the protection of consumers' personal rights, including those specified in Sections 50500-50550;
 10. The methodology used to measure consumer progress which includes:
 - (A) Type of data to be collected, including use of emergency interventions;
 - (B) Data collection systems;
 - (C) Frequency of data collection; and
 - (D) Methods and intervals for summarizing data and reporting on progress made
 11. Consumer exit criteria;
 12. A description of the facility's Continuous Quality Improvement System, including but not limited to how;
 - (A) Consumers will be supported to make choices, including community integration
 - (B) Consumers will be supported to exercise rights
 - (C) Changing needs of consumers will be addressed
 - (D) Consumers receive prompt and appropriated routine and specialized medical services
 - (E) Individual risk is managed and mitigated
 - (F) Medication is safely managed and documented
 - (G) Staff turnover is mitigated
 - (H) The identification of a 24-hour crisis intervention team and transportation plan that will be utilized by the facility as defined in Section 4648(a)(10) of the Welfare and Institutions Code.
 13. Samples of a Functional Behavioral Assessment, data collection/tracking, progress report addressing the behaviors, and a training curriculum that the Qualified Behavior Modification Professional will utilize to train staff to implement the individual behavior supports plan.
 14. Date and signature of the applicant.

D. BUDGET AND FINANCE

1. Applicants are required to submit three of the following financial documents depending on the amount of payment received from the regional center(s) during the applicant's fiscal year:
 - If the applicant received from the regional center(s) during the applicant's fiscal year is more than or equal to \$500,000 but less than \$2 million, the applicant shall obtain and submit an independent audit or independent review report of its financial statements for the period; or
 - If the applicant received from the regional center(s) during the applicant's fiscal year is more than or equal to \$2 million, the applicant shall obtain and submit an independent audit of its financial statements for the period; or
 - Last yearly financial statement which details all current and fixed assets and current and long-term liabilities. The format for the financial statement should follow the Financial Statement Example outlined below.

If either the report of review or independent audit is qualified, an explanation of how the qualification was resolved and approved by the regional center and DDS.

Detail matching funds whether in a hard (dollar) or soft (in-kind) form.

Financial Statement Example

a. Current assets:

Cash in Banks
Accounts Receivable
Notes Receivable
Equipment/Vehicles
Inventories
Deposits/Prepaid Expenses
Life Insurance (Cash Value)
Investment Securities (Stocks and Bonds)

b. Fixed Assets:

Buildings and/or Structures
Real Estate Holdings
Long Term Investments
Potential Judgments and Liens

c. Current Liabilities:

Accounts Payable
Notes Payable (Current Portion)
Taxes Payable

d. Long Term Liabilities:

Notes/Contracts Payable
Real Estate Mortgages

e. Other income, wages, or revenues from other sources (specify)

f. Line of Credit Amount Available

ELARC will evaluate financial documentation in order to determine the applicant's financial ability to cover start up costs.

2. Using the attached Budget Form for Start-up Costs (**EXHIBIT D**) and Guidelines for the Use of CPP Funds (EXHIBIT E) as a reference, display all costs associated with the project. The proposed budget must not exceed the maximum amount approved (ELARC Project Number pending: \$240,000 to be requested) of the grant award even the projected budget may exceed the start up grant approved. A proposed budget should be developed which details start-up costs for the residential facility development.

Start-up costs are costs which are necessary for the implementation of the program but not its transitional or ongoing operation. Startup costs are usually incurred before the program is ready to begin actual services to consumers. Occasionally, some start-up costs are incurred during the transitional period. For example, equipment where the need was not established during the start up period.

The following list represents the most frequently requested items which have historically received approval for reimbursement for residential provider start-up:

Rent (3 months + security deposit):
Utilities (after lease is signed)
Furnishings/Equipment (for the service only)
Staff (recruitment, training, program development)
Consultant Fees*
Office/Project Supplies
Communications
Travel
License/Fingerprinting
Rental Vehicle costs (three month only)
Insurance (Prorated for the length of the contract period)

* Contractor should seek regional center approval prior to incurring expense.

3. Using attached DDS form DS 6023 (EXHIBIT F), display all costs associated with the projected facility costs for on-going services. The monthly rate of payment for the CCH Facility Component/Service Code 902 may not exceed the maximum rate of

reimbursement to be determined by DDS.

4. A budget narrative describing how each budget line item was calculated is required to sufficiently define all terms and areas of the budget except the item for facility modification.
5. General Expenses (usually 10 to 15% of budget is considered reasonable) should address specific minor expenses that cannot be classified in any other line item.
6. Administrative costs (such as maintenance and repair, taxes, personal liability insurance directly associated with administrative functions, and depreciation) cannot exceed 15% of the costs in the development of residential program pursuant to W&I Code 4629.7.
7. The budget should be realistic in terms of the types of services to be offered in relation to expenditures versus income.
8. Demonstrate the ability to keep adequate fiscal records in accordance with all State and local requirements. Applicant may submit evidence of passing an Independent Audit.
9. Describe the applicant commitment to hard (dollar) contributions to this project.

ATTACHMENTS

EXHIBIT A Cities & Zip Codes for ELARC and NLARC

EXHIBIT B Notice of Intent to Respond to Request for Proposals

EXHIBIT C State Administrative Manual (SAM) Requirements

EXHIBIT D Budget Form for Start-up Grants

EXHIBIT E Guidelines for Use of CPP Award Funds

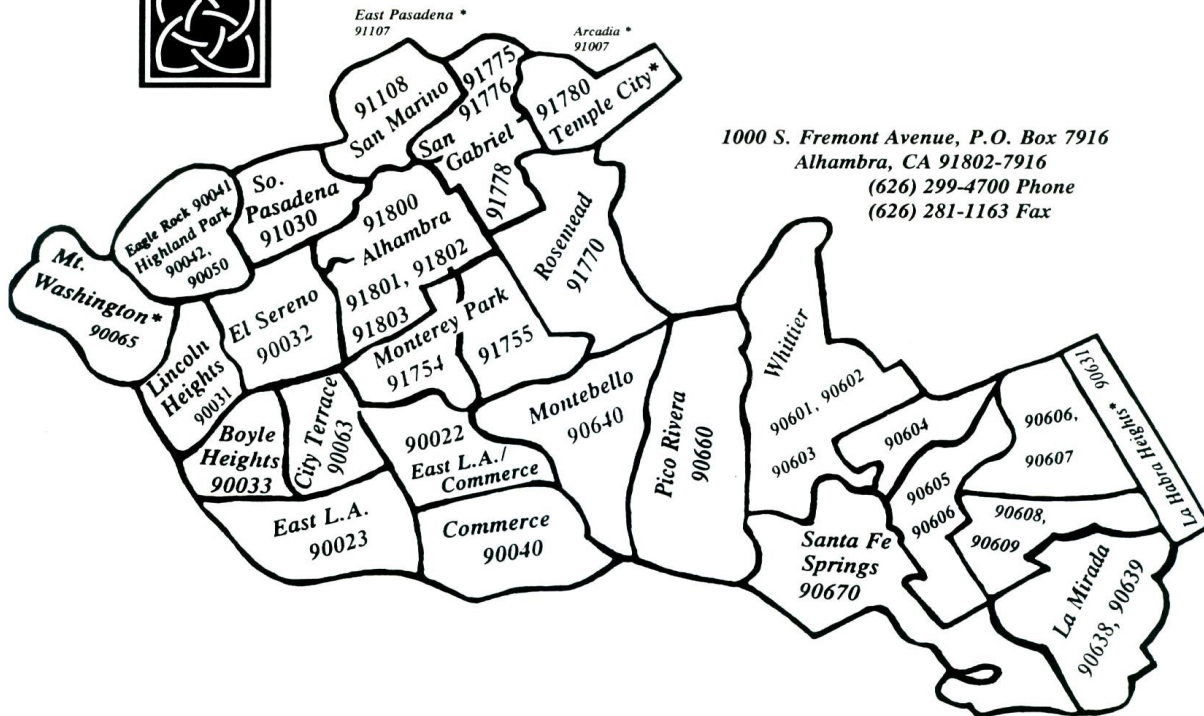
EXHIBIT F DS 6023, CCH – Rate Development, Facility Costs

EXHIBIT G DS 6024, CCH – Rate Development, Individual Costs Associated with Residency

EXHIBIT H DS 6028, CCH – Rate Development, Individual Costs Associated with Transition

EXHIBIT A
Cities & Zip Codes for ELARC & NLACRC

EASTERN LOS ANGELES REGIONAL CENTER, INC.



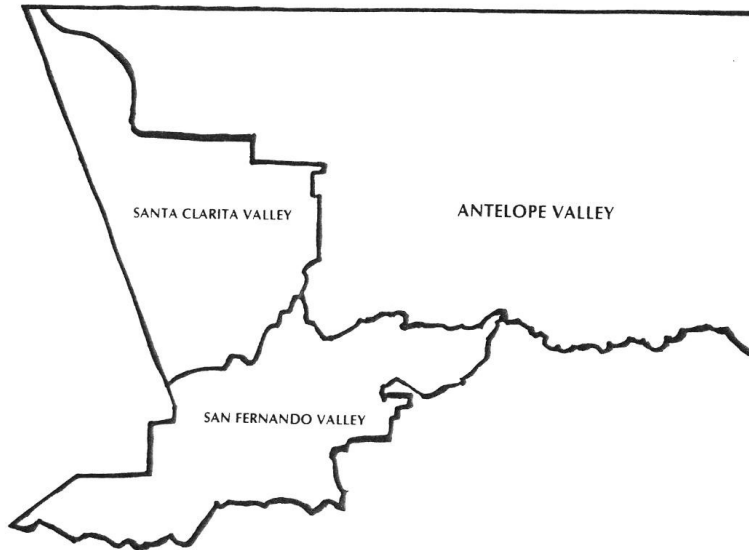
1000 S. Fremont Avenue, P.O. Box 7916
 Alhambra, CA 91802-7916
 (626) 299-4700 Phone
 (626) 281-1163 Fax

The ELARC catchment area includes the East L.A., Northeast LA, Alhambra and Whittier health districts which are composed of, but may not be limited to, the following cities and zip codes

<u>Cities</u>	<u>Zip Codes</u>	<u>Cities</u>	<u>Zip Codes</u>
Alhambra	91800, 91801, 91802 91803	Mt. Washington*	90065
Boyle Heights	90033	Pico Rivera	90660
City Terrace	90063	Rosemead	91770
Commerce	90040	San Gabriel	91775, 91776, 91778
East L.A.	90023	San Marino	91108
East L.A./Commerce	90022	So. Pasadena	91030
East Pasadena*	91107	Santa Fe Springs	90670
El Sereno	90032	Temple City*	91780
Eagle Rock/ Highland Park	90041, 90042, 90050	Whittier	90601, 90602, 90603, 90604, 90605, 90606, 90606, 90607, 90608, 90609
La Habra Heights*	90631		
La Mirada	90638, 90639		
Lincoln Heights	90031		
Montebello	90640		
Monterey Park	91754, 91755		

* Indicates only a portion, check Census Tract Book

NORTH LOS ANGELES REGIONAL CENTER
15400 Sherman Way, Suite 170
Van Nuys, CA 91406
(818)756-6108



The NLARC Catchment area includes the Antelope Valley, East Valley (San Fernando), West Valley (San Fernando), and San Fernando health districts which are composed of, but may not be limited to, the following cities and zip codes

CITIES AND ZIP CODES FOR NORTH L.A. REGIONAL CENTER

- | | |
|-------------------------------|---------------------------------|
| Acton - 93510 | Palmdale - 93550, 93551 |
| Agoura - 91301 | Panorama City - 91402, 91412 |
| Calabasas - 91303, 91304, | Pearblossom - 93553, 93563 |
| Canoga Park - 91303, 91304, | Reseda - 91335 |
| 91305, 91306, | Ridgecrest - 93555 |
| 91307 | San Fernando - 91340, 91341 |
| Canyon Country - 91351 | Saugus - 91350 |
| Castaic - 91310 | Sepulveda - 91343 |
| Chatsworth - 91311 | Sherman Oaks - 91403, 91413, |
| Encino - 91316, 91436 | 91423 |
| Granada Hills - 91344 | Simi Valley - 93062, 93065 |
| Lake Hughes - 93532 | Sunland - 91040 |
| Lancaster - 93534, 93535, | Sun Valley - 91352 |
| 93536, 93549 | Sylmar - 91342 |
| Lebec - 93243 | Tarzana - 91356 |
| Little Rock - 93543 | Thousand Oaks - 91320, 91359, |
| Mission Hills - 91345 | 91360, 91361, |
| Moorpark - 93020, 93021 | 91362 |
| Newhall - 91321 | Toluca Lake - 91602 |
| No. Hollywood - 91601, 91603, | Topanga - 90290 |
| 91604, 91605, | Tujunga - 91042 |
| 91606, 91607, | Valencia - 91355 |
| 91608, 91609 | Van Nuys - 91401, 91404, 91405, |
| Northridge - 91324, 91325, | 91406, 91407, 91408, |
| 91326, 91330 | 91409, 91410, 91411 |
| Oak View - 93022 | Woodland Hills - 91364, 91367 |

EXHIBIT B
EASTERN LOS ANGELES REGIONAL CENTER
COMMUNITY PLACEMENT PLAN (CPP) START-UP AWARD FISCAL YEAR 2021-2022

NOTICE OF INTENT TO RESPOND TO REQUEST FOR PROPOSALS
FOR **COMMUNITY CRISIS HOME**

DUE AT: 1000 S. FREMONT AVE, P.O. Box 7916, ALHAMBRA, CA 91802

BY: 4:30 P.M., Thursday, September 2, 2021- Late submission will disqualify the applicant.

TO: Maria Cañas Project Coordinator, Fax: (626) 299-4897, Email: mcanas@elarc.org

FROM: NAME:
REPRESENTING:
ADDRESS:
TELEPHTHREE:

PLEASE GIVE A BRIEF ANSWER TO EACH OF THE FOLLOWING QUESTIONS:

1. State the background of either your organization or yourself in providing the type of project/services outlined in the RFP.

2. Briefly outline your organization's ability to fiscally start up this service.

3. Describe similar projects/services with which the organization has been successful?

4. State how you have met the applicant eligibility requirements of having actually provided residential services to consumers with profiles as specified in the RFP. Include dates, time period and supporting documents.

5. Explain how you will recruit, hire and maintain qualified staff as referenced in the RFP.

Enclose completed: State of California–Health and Human Services Agency, Department of Developmental Services, **APPLICANT/VENDOR DISCLOSURE STATEMENT DS1891** found at <https://www.dds.ca.gov/wp-content/uploads/2019/05/DS1891.pdf>

Signature: _____ Date: _____

EXHIBIT C

STATE ADMINISTRATIVE MANUAL (SAM) REQUIREMENTS

CONTRACTS

CONTRACT FISCAL CONTROL PROVISIONS (Revised 2/83)

Payment provisions in subvention aid contracts may be on a cost reimbursement or a fixed unit rate basis, with a ceiling specified on the maximum dollar amount payable by the State.

Cost reimbursement type contracts must set forth in detail the reimbursable items, unit rates, and extended total amounts for each line item. Identified and reasonable direct costs and overhead costs, including employee fringe benefits, may be reimbursed. Where salaries and wages are a reimbursable item, the monthly, weekly, or hourly rate, as appropriate, and personnel classification, should be specified, together with the percentage of personnel time to be charged to the contract. Any rental reimbursement item should specify the unit rate, such as square foot rate.

If travel is to be a reimbursable item, the contract must specify that any reimbursement of necessary traveling expenses and per diem shall be at rates set in accordance with SAM Section 1243, and that no travel outside the State of California shall be reimbursed unless prior written authorization is obtained from the contracting State agency.

Subvention aid contracts must specifically reserve title in the State to State purchased or financed property not fully consumed in the performance of the contract, even where purchased in whole or in part by federally supplied funds and absent a Federal requirement for transfer of title.

The contract must include a detailed inventory of any State furnished property, and the contracting State agency must comply with the policies and procedures regarding state-owned property accounting set forth in SAM Sections 8651 et seq., including SAM Sections 8656, et seq. regarding disposition of State-owned property. Provisions must be included regarding the usage, care, maintenance, protection, and return of such property to the State.

If purchase of equipment is a reimbursable item, the equipment to be purchased should be specified. Automotive equipment is to be purchased by the State Office of Procurement, Department of General Services, and the contracting State agency should arrange for purchase of all other major equipment items by the State Office of Procurement, Department of General Services, as well as other items where economies could be achieved by so doing, with the cost to be deducted from the amount payable to the contractor.

Payments are not permitted for construction, renovation, alteration, improvement, or repair of privately-owned property which would enhance the value to such property to the benefit of the owner.

The contract should require prior authorization in writing by the contracting State agency before the contractor will be reimbursed for any purchase order or subcontract exceeding \$1,000 for any articles, supplies, equipment, or services; and require the contractor to provide in its request for authorization all particulars necessary for evaluation of the necessity or desirability of incurring such cost, and as to the reasonableness of the price or cost, with three competitive quotations or the absence of bidding adequately justified.

If printing or other reproduction work of more than an incidental and minor dollar amount is a reimbursable item, the contracting State agency should arrange for such work pursuant to SAM Sections 2800 et seq. with the cost to be deducted from the amount payable to the contractor.

The contract should reserve prior State approval controls over the location, costs, dates, agenda, instructors, instructional materials, and attendees at any reimbursable training seminar, workshop or conference, and over any reimbursable publicity, or educational materials to be made available for distribution. The contractor should be required to acknowledge the support of the State whenever publicizing the work under the contract in any media.

The contract must require the contractor to maintain books, records, documents, and other evidence pertaining to the reimbursable costs, and any matching costs and expenses, and hold them available for audit and inspection by the State for a reasonable number of years.

GENERAL BUDGET PROVISIONS

Payment provisions in subvention aids (CPP) contracts may be on a cost reimbursement or a fixed unit rate basis, with a ceiling specified on the maximum dollar amount payable by the state.

Cost reimbursement type contracts must set forth in detail the reimbursable items, unit rates, and extended total amounts for each line item. Identified and reasonable direct costs and overhead costs, including employee fringe benefits, may be reimbursed. Costs for meals, refreshments, beverages and tips are not reimbursable expenses.

EXHIBIT D

Proposed BUDGET Start-up Costs for Community Crisis Home

<u>ITEM</u>	<u>PROPOSED COSTS</u>	<u>PROJECT COSTS</u>
Salaries/Wages		
Fringe Benefits		
Liability & W/C Ins.		
Consultant(s)		
Communication		
Occupancy Costs (rent, utilities, gardener...etc		
Staff Training		
Vehicle Lease/Gas/Insurance		
Facility Furnishings/Appliances		
Household Supplies		
Food		
Office Supplies/Equipment		
Facility License Fees		
Travel		
Administrative Overhead		
Other (Specify)		
Total Projected Costs		

In addition to the projected cost for each line item, be sure to include a narrative detailed breakdown (on a separate sheet of paper) of how each line item was calculated

INSTRUCTIONS FOR COMPLETION OF BUDGET FORM FOR START UP COSTS

Using the Budget format for start-up costs (EXHIBIT D) and Guidelines for the Use of CPP Funds (EXHIBIT E) as a reference, display all costs associated with the project. A proposed budget should be developed which details start-up costs.

Start up costs are costs which are necessary for the implementation of the service but not its transitional or ongoing operation. Start up costs are usually incurred before the facility is ready to begin actual services to consumers. Occasionally, some start-up costs are incurred during the transitional period. For example, equipment where the need was not established during the start up period.

The following list represents the most frequently requested items which have historically received approval for reimbursement:

- Rent (3 months + security deposit)
- Utilities (after facility lease is signed)
- Furnishings/Equipment (for the service only)
- Staff (recruitment, training, program development)
- Consultant Fees*
- Office/Project Supplies
- Communications
- Travel
- License/CON/Fingerprinting
- Van costs (Rental only)
- Insurance (Prorated for the length of the project)

*Contractor should seek regional center approval prior to incurring expense.

A budget narrative describing how each budget line item was calculated is required to sufficiently define all terms and areas of the budget. Budget line items may include but are not limited to: Personnel Costs; Communication; Contractual Consultant; Occupancy Costs; Staff Training; Vehicle Lease/Gas/Ins; Equipment; Travel; Facility Furnishings/Appliances; Household Supplies; Food; Office Supplies/Equipment; Facility License Fees;

General Expenses (usually 10 to 15% of budget is considered reasonable) should address specific minor expenses that cannot be classified in any other line item.

Administrative costs (such as maintenance and repair, taxes, personal liability insurance directly associated with administrative functions, and depreciation) can not exceed 15% of the costs in the development of residential program pursuant to W&I Code 4629.7.

The budget should be realistic in terms of the types of project activity/services to be offered in relation to expenditures versus income.

EXHIBIT E

SPECIFIC GUIDELINES FOR CPP FUNDS PROPOSALS AND CONTRACTS

GENERAL BUDGET PROVISIONS

Payment provisions in subvention aids (Development Funds) contracts may be on a cost reimbursement or a fixed unit rate basis, with a ceiling specified on the maximum dollar amount payable by the state.

Cost reimbursement type contracts must set forth in detail the reimbursable items, unit rates, and extended total amounts for each line item. Identified and reasonable direct costs and overhead costs, including employee fringe benefits, may be reimbursed. Costs for meals, refreshments, beverages and tips are not reimbursable expenses.

PERSONNEL SERVICES

Where salaries and wages are a reimbursable item, the monthly, weekly, or hourly rate, as appropriate, and personnel classification, should be specified, together with the percentage of personnel time to be charged to the contract.

ADMINISTRATIVE OVERHEAD

If administrative overhead is claimed in the provider's contract it should not exceed **fifteen (15) percent** of regional center funds be spent on administrative costs pursuant to Welfare and Institutions Code, Section 4629.7 (a).

CONSULTANTS

Consultant rates must conform to (1) the Schedule of Maximum Allowance for positions covered by that schedule; (2) comparable state civil services positions; or if the above are not applicable, (3) the ongoing rate of similar work outside state service. If Option three (3) is applicable, the amounts to be paid to consultants depend upon the complexity and difficulty of the projects, the ongoing rate for similar work and the qualifications and reputation of the individual(s) or firm being awarded the contract. Proposals submitted must state the rate of compensation to be paid to consultants. Rates paid to consultants under Option 3 must have prior written approval of REGIONAL CENTER and DDS. The rate shall be an hourly rate with a ceiling on the total project or contract amount.

TRAVEL

Any reimbursement for necessary traveling expenses and per diem shall be at rates set in accordance with allowable state per diem and mileage rates. No travel outside the State of California shall be reimbursed unless prior written authorization is obtained from the Department.

REAL PROPERTY

Payments are not permitted for construction, renovation, alteration, improvement, or repair of privately owned property which would enhance the value to such property to the benefit of the owner.

If the regional center believed such restriction will preclude the provider from complying with fire/life safety requirement for licensure, it should contact its Development funds liaison at the Department before proceeding with the project.

Rent for a facility is a reimbursable expense. The rent should not exceed the rental rates for an equivalent size facility in the area where the program will be situated.

EQUIPMENT

The contractor should maintain an inventory record for each piece of non-expendable equipment purchased or built with funds provided under the terms of the contract. The inventory record of each piece of such equipment should include the date acquired, total cost, serial number, model identification (on purchased equipment), and any other information or description necessary to identify said equipment. Non-expendable equipment so inventoried are those items of equipment that have a normal life expectancy of three year or more and an approximate unit price of \$5,000 or more. In addition, theft-sensitive items of equipment costing less than \$5,000 should be inventoried. A copy of the inventory record must be submitted to the State on request by the State. This inventory must accompany the project's final report/claim and is due within forty-five (45) days of the end of the project's contract term.

For purposes of Development Funds, equipment item costs must be considered in terms of the end usable product, e.g. a bed is considered the sum or the costs of the mattress, box springs and frame. On questions concerning specific items over \$5,000.00, please contact the regional center.

Prior authorization of the regional center, in writing, is required prior to reimbursement for any articles, supplies or equipment exceeding \$1,000.00 in cost. A justification, including reasonableness of the cost, is required prior to authorizing such purchases.

Equipment may be leased. However, it may not be leased with an option to purchase. The provider shall provide the regional center with copies of leases for any equipment leased using Development funds.

Examples of equipment which may not be purchased or purchased only with prior approval include:

1. Motor vehicles - may not be purchased, they may be leased for the duration of the Development Funds contract.
2. Computers - may only be purchased if it can be demonstrated they are for the use of the consumers and are part of the program.

3. VCR, camcorders - may only be purchased if it can be demonstrated they are for the use of the consumers and are part of the program.
4. Wall-to-wall carpeting - may not be purchased, area rugs may be purchased with Development Funds.
5. Fax machines - may be purchased and considered a property of the State.
6. Xerox or copier machines - may be purchased and considered a property of the State.
7. Any equipment item that is attached to a facility or vehicle which cannot be removed in usable condition if the facility or vehicle cease to serve persons with developmental disabilities.

EXHIBIT F

DS6023 RATE DEVELOPMENT - FACILITY COSTS

https://www.dds.ca.gov/wp-content/uploads/2020/08/DS6023_rev.-5.20.20.pdf

EXHIBIT G

DS 6024 RATE DEVELOPMENT - INDIVIDUAL COSTS ASSOCIATED WITH RESIDENCY

<https://www.dds.ca.gov/wp-content/uploads/2019/05/DS6024.pdf>

EXHIBIT H

DS 6028 COMMUNITY CRISIS HOME - RATE DEVELOPMENT INDIVIDUAL COSTS
ASSOCIATED WITH TRANSITION

<https://www.dds.ca.gov/wp-content/uploads/2019/05/DS6028.pdf>