



DATE: September 14, 2011

RE: Request for Proposals (RFP) - - Supported Living Independent Assessment Services

Letter of Intent deadline: 10/14/11

The Westside Regional Center (WRC) is requesting letters of intent for the development of programs that offer Independent Assessments for individuals currently receiving, or initially entering, supported living who have SLS costs, or have an initial recommendation for service costs that exceed 125 percent of the annual statewide average costs of SLS, as published by DDS commencing June 30, 2011. Pursuant to the recently enacted Trailer Bill (AB 104) that became effective July 1, 2011, regional centers must identify the individuals mentioned above, and arrange for an independent assessment to be completed prior to the next scheduled IPP for individuals currently in a supported living arrangement and within 30 days of identification of individuals with an initial recommendation for services.

Start-up funding: There are no start-up funds for these programs.

The independent assessment must be completed by an impartial entity or individual other than the SLS agency providing, or planning to provide the service, and shall be used during IPP meetings to assist the team to determine whether the services provided or recommended are necessary and sufficient and that the most cost-effective methods of service is utilized. The Regional Center will identify the entities and individuals it will use to conduct independent assessments, and ensure there are sufficient independent assessors so that assessments are done in a timely manner.

Program Design:

The independent assessment process must adhere to the following:

- SLS providers must conduct comprehensive assessments for the purpose of getting to know the individual they will be supporting and developing a support plan reflecting the choices and needs of the individual and consistent with the Lanterman Act and Title 17.
- The purpose of the assessment is to provide an additional look at whether the SLS being provided or proposed for a person entering supported living, are necessary, sufficient, or cost effective to meet the person's choices and needs.
- The assessment may include use of natural and generic resources, sharing housing, support alternatives, learning methods, transferring, grooming, meals, bathroom, communication, transportation, mobility, emergency procedures,

medication management, personal needs, household responsibilities, behavioral, medical and overnight supports.

- An individual shall not be excluded from SLS based on an independent assessment.
- The entity or individual conducting independent assessments shall not be an employee of a regional center or the individual's service provider. Current SLS providers may conduct assessments for individuals being supported, or about to be supported, by other providers. **However, a provider that conducts an assessment may not provide direct services to an individual it has assessed for a period of one year.**

Qualifications:

Independent Assessors shall meet all of the following qualifications:

- Have a demonstrated understanding of the foundation of supported living as a service provider that assists an individual to live in his or her own home with supports as needed to be part of their community and of the principles and operational requirements of supported living set forth in the Lanterman Act and Title 17.
- Have a demonstrated understanding of the IPP process and the legal rights of people with developmental disabilities in California; and,
- Have a minimum of 5 years of experience providing Support Living in California.
- Be in good standing with the vendoring regional center and have not been under a Corrective Action Plan and/or Do Not Refer Status within the past 5 years.

An individual shall be reassessed every three years in conjunction with the individual's IPP review to determine whether all the services are necessary and sufficient and to ensure that the most cost-effective methods of service are being utilized.

Individuals who are moving to a supported living arrangement or have moved to a supported living arrangement from a developmental center or state-operated community facility are not required to have an additional assessment during the first 12 months following placement.

As required by law, the department has published on its homepage the annual statewide average cost of SLS, and 125 percent of the annual statewide average costs of SLS. Commencing July 1, 2011, the annual average cost of SLS is \$44,196 and 125 percent of the average cost of SLS is \$55,245.

Proposals should include: *Applicant's resume, methodology of the assessment, proposed tools to be used in the assessment process, a sample assessment report and proposed cost statement.*

Rate:

The rate for an independent assessment can not exceed \$50.00 an hour nor \$1,000 in total.

TIMELINE

The letter of intent that includes a narrative addressing all of the above stated requirements is **due to Westside Regional Center by 5:00 p.m. on 10/14/11**. Letters of Intent and Proposals may be mailed to Daniel Hoyos, Westside Regional Center, 5901 Green Valley Circle Suite 320, Culver City, CA 90230. **FAXED copies will NOT be accepted.**

Acceptance and intent to vendor these programs are at the sole discretion of the selection committee at Westside Regional Center. The decision of the selection committee is final and not subject to appeal. Employees of regional centers and Area Boards are not eligible to apply. Current employees of State Developmental Centers may apply, but are subject to approval following AB 1106 guidelines provided by the Department of Developmental Services (DDS).

- 10-14-11 Letter of Intent submitted to WRC by 5:00 p.m.**
- 10-18-11 Evaluation by Selection Committee**
- 10-24-11 Interviews with the highest-ranking applicants**
- 10-28-11 Notification of intent to vendor a selected applicant**
- 11-01-11 Completion of a negotiated contract**

INQUIRIES

All additional inquiries regarding the application should be directed to Daniel Hoyos at 310-258-4134. Technical assistance is limited to information about the requirements for the letter of intent.

Letter of Intent—Instructions

The applicant is required to submit a letter of intent that complies with the following instructions. An application may be disqualified from consideration for failure to: follow instructions, complete documents, submit required documents or meet the deadline.

- Standard size (8 ½ x 11) paper except for special charts or schedules that require larger paper.**
- Typed using a standard font (12), double-spaced pages.**
- Every page numbered consecutively**
- Do NOT place in ring binders or folders, but rather use binder clips or compressor clips**
- Letter of intent not to exceed 7 pages including attachments**

ATTACHMENT A—TITLE PAGE

SUPPORTED LIVING INDEPENDENT ASSESSMENTS SERVICES

TO: SELECTION COMMITTEE

Westside Regional Center

5901 Green Valley Circle #320

Culver City, CA 90230

ATTENTION: (Daniel Hoyos)

PROGRAM TITLE *(please print)*

NAME OF APPLICANT or ORGANIZATION SUBMITTING PROPOSAL *(please print)*

SIGNATURE OF PERSON AUTHORIZED TO BIND ORGANIZATION DATE

CONTACT PERSON FOR PROJECT *(please print)*

TELEPHONE NUMBER /FAX NUMBER /e-mail address

NAME OF PARENT CORPORATION; if applicable *(please print)*

ADDRESS *(please print)*

AUTHOR OR PROPOSAL, DATE

IF DIFFERENT FROM PERSON SUBMITTING PROPOSAL

ATTACHEMENT B—STATEMENT OF OBLIGATION

1. The applicant is presently providing support to persons who have a developmental disability. No Yes
If yes, indicate name, location, and number of people you support.
2. The applicant is currently receiving or planning to apply for grants/funds from any source to develop the same program support program? No Yes If yes, indicate name, location, type and capacity of service(s).
3. The applicant is planning to expand existing service from a source other than Westside Regional Center during Fiscal Year 2011-12: No Yes
If yes, indicate funding source and scope of grant project.
4. The applicant or member of the applicant's organization or staff has received a citation from any agency for abuse (verbal, physical, sexual, fiduciary, neglect)?:
 No Yes
If yes, indicate agency, type of citation and outcome of investigation.
5. Has the applicant or any member of the applicant's organization received a Corrective Action Plan (CAP), Sanction, a notice of Immediate Danger, or an "A" or "B" citation, or any other citation from a regional center or State Licensing agency? No Yes If yes, explain in detail.
6. Describe all other professional/business obligations held by the Licensee and Administrator, including name, location, type, and capacity (time commitment) of each obligation.
7. Signature of Applicant or Authorized Representative Date