

California Department of Developmental Services

DDS Rate Study

Specialized Therapeutic Services Provider Survey

Prepared by Burns & Associates, Inc.

September 10, 2018

Questions? Contact Burns & Associates, Inc. at ddsprovidersurvey@burnshealthpolicy.com or (602) 241-8515

Agency Contact Information and Revenues (see p. 3 of the instructions)

Line	Factor	Input
<i>Agency Contact Information</i>		
1	Agency	
2	FEIN/Tax ID(s)	
3	Vendor ID(s)	
4	Contact name for individual responsible for completing this survey	
5	Title of the individual listed on Line 4	
6	Phone number for the individual listed on Line 4	
7	Email address for the individual listed on Line 4	
8	Agency address	
9	City	
10	Zip Code	
<i>Annual Agency Revenues - Report revenues from your agency's most recently completed fiscal year.</i>		
11	Spec. Therapeutic Svcs Consumers 3 to 20 (115)	
12	Early Start Spec. Therapeutic Svcs Consumers Under 3 (116)	
13	Spec. Therapeutic Svcs Consumers 21 and older (117)	
14	All Other DDS Services	
15	Total fundraising and investment income	
16	All other agency revenues	
17	Total Revenues	

**California Department of Developmental Services
 DDS Rate Study - Specialized Therapeutic Services Provider Survey**

Administrative Staff - Salary and Benefit Costs (see p. 5 of the instructions)

Include only those staff who perform administrative functions

Report costs from your agency's most recently completed fiscal year

See the instructions for the specific benefits that should be recorded in the 'Cost of Payroll Taxes & Benefits' column

See the instructions for further details on allocation of time for individual job titles reported

Line	Title	# of Emp.	Wages	Cost of Payroll Taxes & Benefits	% of Time Allocated to DDS Program Admin	% of Time Allocated to Fundraising/ Investments	% of Time Allocated to Other Program Admin	% of Time Allocated to Non-Admin. Tasks
Ex.	Executive Director	1	\$75,000	\$6,000	50%		50%	
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Administrative Staff - Salary and Benefit Costs (see p. 5 of the instructions)

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Report costs from your agency's most recently completed fiscal year

See the instructions for the specific benefits that should be recorded in the 'Cost of Payroll Taxes & Benefits' column

See the instructions for further details on allocation of time for individual job titles reported

Line	Title	# of Emp.	Wages	Cost of Payroll Taxes & Benefits	% of Time Allocated to DDS Program Admin	% of Time Allocated to Fundraising/ Investments	% of Time Allocated to Other Program Admin	% of Time Allocated to Non-Admin. Tasks
27								
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**California Department of Developmental Services
DDS Rate Study - Specialized Therapeutic Services Provider Survey**

Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	% of Admin Cost Allocated to DDS Services	% of Admin Cost Allocated to Fundraising/Investments
1	Administrative facility rent/mortgage/depreciation (exclude direct service space such as community-based day program centers, community care facilities, ARFPSHNs, or other residential facilities)				
2	Administrative facility janitorial/landscaping/etc. not part of rent (exclude direct service space)				
3	Repairs and maintenance (includes facilities and furnishings)				
4	Office equipment and furniture				
5	Depreciation (exclude facility and vehicles)				
6	Interest expense (excluding mortgage)				
7	Utilities/telecommunications/etc. (exclude direct service space costs)				
8	Taxes (exclude payroll taxes and personal income taxes)				
9	Licensing/certification/accreditation fees				
10	Hiring expenses (e.g., advertising; exclude staff costs)				
11	Staff training expense (e.g., fees and materials; exclude staff costs)				
12	Insurance (exclude auto insurance for direct care staff and health, dental, workers' comp for all)				
13	Workers' compensation costs (for Administrative Staff only)				
14	Information technology expense (e.g., computers and software)				
15	Office supplies				
16	Program supplies				
17	Advertising				
18	Dues and subscriptions				
19	Professional consultant services - legal/accounting/etc.				
20	Travel (exclude transporting service recipients or direct care vehicles/ reimbursement)				
21	Allocated corporate office overhead				
22	[If Overhead is reported in Line 21, describe allocation methodology here]				
23	Other 1 (Input Description)				
24	Other 2 (Input Description)				
25	Other 3 (Input Description)				
26	Other 4 (Input Description)				
27	Other 5 (Input Description)				

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Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	% of Admin Cost Allocated to DDS Services	% of Admin Cost Allocated to Fundraising/Investments
<i>Calculated Administrative/Program Operations Rate</i>					
28	Total calculated rate (as a percentage of reported revenues)				

**California Department of Developmental Services
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Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	% of Admin Cost Allocated to Other Services	Prog Ops for:
					Spec. Therapeutic Svcs Consumers 3 to 20 (115)
1	Administrative facility rent/mortgage/depreciation (exclude direct service space such as community-based day program centers, community care facilities, ARFPSHNs, or other residential facilities)				
2	Administrative facility janitorial/landscaping/etc. not part of rent (exclude direct service space)				
3	Repairs and maintenance (includes facilities and furnishings)				
4	Office equipment and furniture				
5	Depreciation (exclude facility and vehicles)				
6	Interest expense (excluding mortgage)				
7	Utilities/telecommunications/etc. (exclude direct service space costs)				
8	Taxes (exclude payroll taxes and personal income taxes)				
9	Licensing/certification/accreditation fees				
10	Hiring expenses (e.g., advertising; exclude staff costs)				
11	Staff training expense (e.g., fees and materials; exclude staff costs)				
12	Insurance (exclude auto insurance for direct care staff and health, dental, workers' comp for all)				
13	Workers' compensation costs (for Administrative Staff only)				
14	Information technology expense (e.g., computers and software)				
15	Office supplies				
16	Program supplies				
17	Advertising				
18	Dues and subscriptions				
19	Professional consultant services - legal/accounting/etc.				
20	Travel (exclude transporting service recipients or direct care vehicles/ reimbursement)				
21	Allocated corporate office overhead				
22	[If Overhead is reported in Line 21, describe allocation methodology here]				
23	Other 1 (Input Description)				
24	Other 2 (Input Description)				
25	Other 3 (Input Description)				
26	Other 4 (Input Description)				
27	Other 5 (Input Description)				

**California Department of Developmental Services
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Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	% of Admin Cost Allocated to Other Services	Prog Ops for:
					Spec. Therapeutic Svcs Consumers 3 to 20 (115)
<i>Calculated Administrative/Program Operations Rate</i>					
28	Total calculated rate (as a percentage of reported revenues)				

**California Department of Developmental Services
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Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	Prog Ops for:	
				Early Start Spec. Therapeutic Svcs Consumers Under 3 (116)	Spec. Therapeutic Svcs Consumers 21 and older (117)
1	Administrative facility rent/mortgage/depreciation (exclude direct service space such as community-based day program centers, community care facilities, ARFPSHNs, or other residential facilities)				
2	Administrative facility janitorial/landscaping/etc. not part of rent (exclude direct service space)				
3	Repairs and maintenance (includes facilities and furnishings)				
4	Office equipment and furniture				
5	Depreciation (exclude facility and vehicles)				
6	Interest expense (excluding mortgage)				
7	Utilities/telecommunications/etc. (exclude direct service space costs)				
8	Taxes (exclude payroll taxes and personal income taxes)				
9	Licensing/certification/accreditation fees				
10	Hiring expenses (e.g., advertising; exclude staff costs)				
11	Staff training expense (e.g., fees and materials; exclude staff costs)				
12	Insurance (exclude auto insurance for direct care staff and health, dental, workers' comp for all)				
13	Workers' compensation costs (for Administrative Staff only)				
14	Information technology expense (e.g., computers and software)				
15	Office supplies				
16	Program supplies				
17	Advertising				
18	Dues and subscriptions				
19	Professional consultant services - legal/accounting/etc.				
20	Travel (exclude transporting service recipients or direct care vehicles/ reimbursement)				
21	Allocated corporate office overhead				
22	[If Overhead is reported in Line 21, describe allocation methodology here]				
23	Other 1 (Input Description)				
24	Other 2 (Input Description)				
25	Other 3 (Input Description)				
26	Other 4 (Input Description)				
27	Other 5 (Input Description)				

Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	Prog Ops for:	
				Early Start Spec. Therapeutic Svcs Consumers Under 3 (116)	Spec. Therapeutic Svcs Consumers 21 and older (117)
<i>Calculated Administrative/Program Operations Rate</i>					
28	Total calculated rate (as a percentage of reported revenues)				

**California Department of Developmental Services
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Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	Prog Ops for:	
				All Other DDS Services	All Other Non-DDS Services
1	Administrative facility rent/mortgage/depreciation (exclude direct service space such as community-based day program centers, community care facilities, ARFPSHNs, or other residential facilities)				
2	Administrative facility janitorial/landscaping/etc. not part of rent (exclude direct service space)				
3	Repairs and maintenance (includes facilities and furnishings)				
4	Office equipment and furniture				
5	Depreciation (exclude facility and vehicles)				
6	Interest expense (excluding mortgage)				
7	Utilities/telecommunications/etc. (exclude direct service space costs)				
8	Taxes (exclude payroll taxes and personal income taxes)				
9	Licensing/certification/accreditation fees				
10	Hiring expenses (e.g., advertising; exclude staff costs)				
11	Staff training expense (e.g., fees and materials; exclude staff costs)				
12	Insurance (exclude auto insurance for direct care staff and health, dental, workers' comp for all)				
13	Workers' compensation costs (for Administrative Staff only)				
14	Information technology expense (e.g., computers and software)				
15	Office supplies				
16	Program supplies				
17	Advertising				
18	Dues and subscriptions				
19	Professional consultant services - legal/accounting/etc.				
20	Travel (exclude transporting service recipients or direct care vehicles/ reimbursement)				
21	Allocated corporate office overhead				
22	[If Overhead is reported in Line 21, describe allocation methodology here]				
23	Other 1 (Input Description)				
24	Other 2 (Input Description)				
25	Other 3 (Input Description)				
26	Other 4 (Input Description)				
27	Other 5 (Input Description)				

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Administrative & Program Operations Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions)

Report and allocate costs from your agency's most recently completed fiscal year

See the instructions for further details on allocation of cost for individual amounts reported

Line	Category	Total Expense	Total Allocation	Prog Ops for:	
				All Other DDS Services	All Other Non-DDS Services
<i>Calculated Administrative/Program Operations Rate</i>					
28	Total calculated rate (as a percentage of reported revenues)				

Fringe Benefits for Direct Care and Program Operations Staff (see p. 9 of the instructions)

Line	Factor	Example	Full-Time	Part-Time
Staffing				
1	Number of current employees provide direct services to individuals	30		
2	Average number of work hours per employee per week	35		
Holidays				
3	Are direct care and program operations staff eligible for holiday pay?	Yes		
4	If yes, waiting period before these are eligible for holiday pay	4 - 6 Months		
5	Minimum number of hours per week that these staff must work to be eligible for holiday pay	20		
6	Of the staff listed on Line 1, number currently eligible for holiday pay	22		
7	Average number of annual holidays that eligible direct care and program operations staff receive (in days)	10		
Paid Time Off (PTO, Vacation and Sick Time)				
8	Are direct care and program operations staff eligible to receive paid time off, in addition to holidays?	Yes		
9	If yes, waiting period before staff are eligible for PTO	7 - 9 Months		
10	Minimum number of hours per week that these staff must work to be eligible for PTO	20		
11	Of the staff listed on Line 1, number currently eligible for PTO	18		
12	Average number of annual PTO days that eligible direct care and program operations staff receive (in days)	10		
Health Insurance				
13	Are direct care and program operations staff eligible to receive health insurance through your organization?	Yes		
14	If yes, waiting period before staff are eligible for health insurance	7 - 9 Months		
15	Minimum number of hours per week that these staff must work to be eligible for health insurance	30		
16	Of the staff listed on Line 1, number currently eligible for health insurance	15		
17	Of the staff listed on Line 16, number currently receiving health insurance from your organization	10		
18	Organization's total contribution to health insurance costs in the previous month for the staff listed on Line 17	\$3,835		
19	Calculated average monthly cost per participating employee	\$383.50		
Other Benefits				
20	Does your organization contribute to any other benefits for direct care and program operations staff?	No		
21	[If yes, specify the benefit(s) here]			
22	If yes, waiting period before these staff are eligible for these benefits			
23	Minimum number of hours per week that these staff must work to be eligible for these benefits			
24	Of the staff listed on Line 1, number currently eligible for these benefits			
25	Of the staff listed on Line 24, number currently receiving these benefits from your organization			
26	Organization's cost for providing these benefits in the previous month for the staff listed on Line 25			
27	Calculated average monthly cost per participating employee			
State Unemployment Insurance				
28	Organization's state unemployment insurance tax rate for 2018 (or calculated rate if paying actual costs)	1.50%		

**California Department of Developmental Services
 DDS Rate Study - Specialized Therapeutic Services Provider Survey**

Specialized Therapeutic Services (Service Codes 115, 116, and 117)
Wages, Training and Duties for Direct Care and Program Operations Staff (see p. 11 of the instructions)

Provide responses for your agency's most recently completed fiscal year.

Line	Direct Staff Specialty	'Other' Specialist	County or Regional Center (if LA County) Optional Responses	Employee/ Contractor	Total Hours Paid	% of Hours that were Over-time	Total Wages Paid	Average Hourly Wage	Annual Turnover
Ex.	Therapist (PT, OT or SLP)		Eastern Los Angeles	Employee	2,080	0%	\$70,000	\$33.65	10%
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Specialized Therapeutic Services (Service Codes 115, 116, and 117)
Staff Training & Job Functions

Spec Therapeutic (Codes 115, 116, & 117)
Staff Services Delivered

Line	Staff Training		Job Function						If supervisor, # of staff supervised	Services Delivered/ Supported			
	1st Year (per staff average)	Following Years (per staff average)	Direct Care	Supervision of Direct Care Staff	Training/ Program Development	Professional Supports	Other Program Ops Duties	Other Functions		Spec. Therapeutic Svcs Consumers 3 to 20 (115)	Early Start Spec. Therapeutic Svcs Consumers Under 3 (116)	Spec. Therapeutic Svcs Consumers 21 and older (117)	Other Services
Ex.	60	30	50%					50%		100%			
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**California Department of Developmental Services
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Specialized Therapeutic Services (Service Codes 115, 116, and 117)
Wages, Training and Duties for Direct Care and Program Operations Staff (see p. 11 of the instructions)

Provide responses for your agency's most recently completed fiscal year.

Line	Direct Staff Specialty	'Other' Specialist	County or Regional Center (if LA County) Optional Responses	Employee/ Contractor	Total Hours Paid	% of Hours that were Over-time	Total Wages Paid	Average Hourly Wage	Annual Turnover
26									
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Specialized Therapeutic Services (Service Codes 115, 116, and 117)
Staff Training & Job Functions

Spec Therapeutic (Codes 115, 116, & 117)
Staff Services Delivered

Line	Staff Training		Job Function						If supervisor, # of staff supervised	Services Delivered/ Supported			
	1st Year (per staff average)	Following Years (per staff average)	Direct Care	Supervision of Direct Care Staff	Training/ Program Development	Professional Supports	Other Program Ops Duties	Other Functions		Spec. Therapeutic Svcs Consumers 3 to 20 (115)	Early Start Spec. Therapeutic Svcs Consumers Under 3 (116)	Spec. Therapeutic Svcs Consumers 21 and older (117)	Other Services
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Specialized Therapeutic Services (Service Codes 115, 116, and 117)
Productivity and Other Factors (see p. 13 of the instructions)

Line	Factor	Example	Spec. Ther. Svcs. Consumers 3 to 20 (115)	Spec. Ther. Svcs. Consumers 3 to 20 (115)	Spec. Ther. Svcs. Consumers 3 to 20 (115)	Spec. Ther. Svcs. Consumers 3 to 20 (115)
Direct Staff Specialty						
1	Indicate the Direct Staff Specialty	Social Worker				
Agency Caseload and Service Design						
2	Number of individuals receiving services from your organization	10				
3	Average number of hours of service per week per individual	6.00				
4	Average number of service encounters per week per staff person	22				
5	Average encounter length in hours	1.50				
6	Percentage of service hours provided in individuals' homes and the community	60%				
7	Percentage of service hours provided in clinic setting	40%				
Clinic Space						
8	Number of clinics at which this service is provided	1				
9	Total approximate square footage for all clinics where services are provided	3,000				
10	Estimated percentage of square footage that is used for direct services	60%				
11	Total annual cost of rent/mortgage/depreciation for all clinics where services are provided	\$60,000				
12	Total annual cost of janitorial/landscaping/repairs for all clinics where services are provided	\$2,400				
13	Total annual cost of utilities/telecommunications for all clinics where services are provided	\$4,800				
14	Approximate operating cost per square foot (including rent)	\$22.40				

Specialized Therapeutic Services (Service Codes 115, 116, and 117)
Productivity and Other Factors (see p. 13 of the instructions)

Line	Factor	Example	Spec. Ther. Svcs. Consumers 3 to 20 (115)	Spec. Ther. Svcs. Consumers 3 to 20 (115)	Spec. Ther. Svcs. Consumers 3 to 20 (115)	Spec. Ther. Svcs. Consumers 3 to 20 (115)
<i>Staffing Pattern for a 'typical' week for a staff. Input the number of hours per week for the following:</i>						
15	Total hours worked and paid for in a week	40.00				
16	Providing Direct Care services (Line 4 * Line 5)	33.00				
17	Providing other billable services	0.00				
18	Participating in individual planning meetings	0.00				
19	Travel time between individuals	3.00				
20	Recordkeeping (do not include documentation during the course of service provision)	1.00				
21	'Employer time' (e.g. receiving one-on-one supervision, participating in staff meetings, etc.)	1.00				
22	Performing 'collateral contacts' (e.g., speaking with other provider(s) regarding a specific individual)	2.00				
23	Time lost to missed appointments	0.00				
24	Other activities [type description here]	0.00				
25	Other activities [type description here]	0.00				
26	Other activities [type description here]	0.00				
27	Has all time been allocated? (Total hours from Line 15 should equal sum of Lines 16 - 26)	Yes	Yes	Yes	Yes	Yes
28	Total miles driven per week per staff to travel between service encounters	90				
29	Workers' Compensation rate for direct service staff (amount per \$100 wages)	\$1.75				

Specialized Therapeutic Services (Service Codes 115, 116, and 117)

Productivity and Other Factors (see p. 13 of the instructions)

Line	Factor	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)
<i>Direct Staff Specialty</i>					
1	Indicate the Direct Staff Specialty				
<i>Agency Caseload and Service Design</i>					
2	Number of individuals receiving services from your organization				
3	Average number of hours of service per week per individual				
4	Average number of service encounters per week per staff person				
5	Average encounter length in hours				
6	Percentage of service hours provided in individuals' homes and the community				
7	Percentage of service hours provided in clinic setting				
<i>Clinic Space</i>					
8	Number of clinics at which this service is provided				
9	Total approximate square footage for all clinics where services are provided				
10	Estimated percentage of square footage that is used for direct services				
11	Total annual cost of rent/mortgage/depreciation for all clinics where services are provided				
12	Total annual cost of janitorial/landscaping/repairs for all clinics where services are provided				
13	Total annual cost of utilities/telecommunications for all clinics where services are provided				
14	Approximate operating cost per square foot (including rent)				

**California Department of Developmental Services
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Specialized Therapeutic Services (Service Codes 115, 116, and 117)

Productivity and Other Factors (see p. 13 of the instructions)

Line	Factor	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)	Early Start Spec. Ther. Svcs. Consumers Under 3 (116)
Staffing Pattern for a 'typical' week for a staff. Input the number of hours per week for the following:					
15	Total hours worked and paid for in a week				
16	Providing Direct Care services (Line 4 * Line 5)				
17	Providing other billable services				
18	Participating in individual planning meetings				
19	Travel time between individuals				
20	Recordkeeping (do not include documentation during the course of service provision)				
21	'Employer time' (e.g. receiving one-on-one supervision, participating in staff meetings, etc.)				
22	Performing 'collateral contacts' (e.g., speaking with other provider(s) regarding a specific individual)				
23	Time lost to missed appointments				
24	Other activities [type description here]				
25	Other activities [type description here]				
26	Other activities [type description here]				
27	Has all time been allocated? (Total hours from Line 15 should equal sum of Lines 16 - 26)	Yes	Yes	Yes	Yes
28	Total miles driven per week per staff to travel between service encounters				
29	Workers' Compensation rate for direct service staff (amount per \$100 wages)				

Specialized Therapeutic Services (Service Codes 115, 116, and 117)

Productivity and Other Factors (see p. 13 of the instructions)

Line	Factor	Spec. Ther. Svcs. Consumers 21 and older (117)	Spec. Ther. Svcs. Consumers 21 and older (117)	Spec. Ther. Svcs. Consumers 21 and older (117)	Spec. Ther. Svcs. Consumers 21 and older (117)
<i>Direct Staff Specialty</i>					
1	Indicate the Direct Staff Specialty				
<i>Agency Caseload and Service Design</i>					
2	Number of individuals receiving services from your organization				
3	Average number of hours of service per week per individual				
4	Average number of service encounters per week per staff person				
5	Average encounter length in hours				
6	Percentage of service hours provided in individuals' homes and the community				
7	Percentage of service hours provided in clinic setting				
<i>Clinic Space</i>					
8	Number of clinics at which this service is provided				
9	Total approximate square footage for all clinics where services are provided				
10	Estimated percentage of square footage that is used for direct services				
11	Total annual cost of rent/mortgage/depreciation for all clinics where services are provided				
12	Total annual cost of janitorial/landscaping/repairs for all clinics where services are provided				
13	Total annual cost of utilities/telecommunications for all clinics where services are provided				
14	Approximate operating cost per square foot (including rent)				

Specialized Therapeutic Services (Service Codes 115, 116, and 117)

Productivity and Other Factors (see p. 13 of the instructions)

Line	Factor	Spec. Ther. Svcs. Consumers 21 and older (117)	Spec. Ther. Svcs. Consumers 21 and older (117)	Spec. Ther. Svcs. Consumers 21 and older (117)	Spec. Ther. Svcs. Consumers 21 and older (117)
<i>Staffing Pattern for a 'typical' week for a staff. Input the number of hours per week for the following:</i>					
15	Total hours worked and paid for in a week				
16	Providing Direct Care services (Line 4 * Line 5)				
17	Providing other billable services				
18	Participating in individual planning meetings				
19	Travel time between individuals				
20	Recordkeeping (do not include documentation during the course of service provision)				
21	'Employer time' (e.g. receiving one-on-one supervision, participating in staff meetings, etc.)				
22	Performing 'collateral contacts' (e.g., speaking with other provider(s) regarding a specific individual)				
23	Time lost to missed appointments				
24	Other activities [type description here]				
25	Other activities [type description here]				
26	Other activities [type description here]				
27	Has all time been allocated? (Total hours from Line 15 should equal sum of Lines 16 - 26)	Yes	Yes	Yes	Yes
28	Total miles driven per week per staff to travel between service encounters				
29	Workers' Compensation rate for direct service staff (amount per \$100 wages)				