

Intensive In-Home Services
Request for Grant Applications
Questions and Answers

1. Can you confirm the submission date?
State's Response: Deadline for submission is August 2nd by 11:00am.
2. What is the total number of staff, is it a minimum of three? Staff a team of at least one licensed team leader with a master's degree in social work, psychology, counseling, or a closely related field. The team leader must also have at least three years of experience providing clinical or crisis-oriented services. The team must also include at least two team members with a bachelor's degree in social work, psychology, counseling, or a closely related field.
State's Response: Correct, the minimum team size is three – one supervisor and two direct care staff.
3. The grant will not fund staff positions. What does this mean/clarification?
State's Response: Staff compensation is covered in a weekly rate. The Department will not fund the staff positions outside of the weekly rate.
4. The only funding allowable are for direct Intensive In-Home services to the family (What does this mean?)
State's Response: This grant funds direct intensive in-home services. It does not fund other operational or staff costs.
5. What case load average per year?
State's Response: This is a pilot; we cannot predict the average case load. The goal is to serve 180 families in each region under the amount awarded in this grant; however, this number will vary depending on discharge date and length of service.
6. P. 4, section B, pt. 2 references the proposed weekly rate. Further, p 6, pt 6 states the provider is to detail the rate setting methodology for reimbursement rates. Is this a reimbursement for services rendered? Or is it a grant?
State's Response: This grant provides funding to pilot Intensive In-Home Services in two regions. Services will be billed as they are rendered through an invoice to the Department.
7. How is the award amount paid to the selected Provider(s)? A one-time payment, or installments.
State's Response: Services will be billed to the Department as they are provided. The awardee will receive a grant agreement and a purchase order. Invoices and supporting documents should be submitted to the Department for approval.
8. The language on p. 3, pt. 6 says the grant is “not to fund staff positions. The only funding allowable is for direct Intensive In-Home services to the family.”
 - a. The services are provided by the staff though. Are staff salaries for the Supervisor and the staff rendering the services allowable expenses?
State's Response: Staff compensation is covered in a weekly rate. The Department will not fund the staff positions outside of the weekly rate.

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- b. If staff salaries are not funded, what is considered an allowable expense under this grant?
State's Response: Service provision (case rate) will be the allowable expense under this grant.
9. Will this grant be available for renewal in future years, or is it a one-time funding opportunity?
State's Response: The Department is piloting intensive in-home services in the Upstate and Midlands with the intent of expanding geographically and allocating additional funding to this service in the future, based on review of the pilot program's outcomes.
10. A clinical assessment is described as the basis of the comprehensive service plan (p. 3, pt 1) including a diagnostic assessment (p. 3 pt. 3)– who is the intended “client” for the purposes of the diagnostic assessment – the child or the parent(s)/caregiver(s)? Both?
- a. If Diagnostic Assessments are being performed – is the provider encouraged or required to bill Medicaid/private insurance in cases where there is a diagnosis? (not just a V code for family relational problems)
State's Response: The Department does not require the provider to bill Medicaid or insurance.
- b. Alternatively, if a provider is awarded funds under this grant, are they prohibited from billing insurance for IIHS services provided?
State's Response: The provider will not be prohibited from billing insurance, but they should not bill both insurance and the Department.
11. P. 3, pt. 5 – 48 hours to initiate contact with the family. Is this defined as 2 business days, or 48 clock hours?
- a. P. 3, pt. 5 – how is “initiate contact” defined? Is this a home visit, telephone call?
State's Response: The provider may initiate contact through a telephone call but must follow up with a home visit.
- b. If a family is unresponsive to attempted contacts, is the Provider penalized?
State's Response: The provider will not be penalized for unresponsive families.
12. Who will determine which families are referred to the Provider for IIHS services?
State's Response: The Department will refer families to Intensive In-Home Services.
13. Is the provider permitted to decline any referrals? (ie in cases of level of care concerns, safety concerns to staff, or family unwillingness to participate).
State's Response: The provider is not permitted to decline any referrals. The agency will need justification to evaluate on a case-by-case basis.
14. If the referred family has an open Foster Care case, who will be the recipient of the services? A child in out of home care? Or the parents who do not have custody of the child?

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State's Response: In Foster Care cases, the recipient of the service is the child and the child's current placement. Intensive In-Home Services are provided to support the placement and stabilize.

15. What is the expected volume of families to be referred in the Upstate region over the course of the 1-year funding cycle?

State's Response: The goal for number of families served in the Upstate under this grant is 180; however, that number may vary depending on the length of service and discharge date of other families served.

16. What is the expected volume of families to be referred in the Midlands region over the course of the 1-year funding cycle?

State's Response: The goal for number of families served in the Midlands under this grant is 180; however, that number may vary depending on the length of service and discharge date of other families served.

17. What is the minimum number of families that must be served during the 1-year funding cycle for each region?

State's Response: The goal for number of families served in each region under this grant is 180; however, that number may vary depending on the length of service and discharge date of other families served.

18. Is the provider required to provide services in all counties within a Region (Upstate or Midlands)?

State's Response: This grant is for the Midlands and Upstate regions. It is expected that the provider will serve Greenville and surrounding counties in the Upstate and Richland and surrounding counties in the Midlands. The provider must identify the surrounding counties they will serve in their proposal.

19. Is telehealth permitted for any sessions?

State's Response: In specific circumstances, telehealth will be permitted. The provider must have approval from the Department to provide telehealth services.

20. P. 3 pt. 2 – how is “multiple times per week” defined? What is the minimum number of sessions to be provided each week?

State's Response: The provider would meet with the family 6-8 hours per week over multiple sessions.

21. P. 3 pt. 4 – what is the method/platform for reviewing the service plan? Will the case manager attend visits every 2 weeks to review the plan? Is this completed by phone/video call? Is an email progress update sufficient?

State's Response: Email progress updates are sufficient.

22. How much time is the provider permitted to hire additional team members following award of the grant funds?

State's Response: It is expected that the awardee to be operational within 90 days.

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23. Is there a preferred training or evidence-based intervention that is to be utilized by the IIHS program?
State's Response: No, the Department does not have a preferred training or evidence-based intervention. The awardee must provide information in accordance to the requirements of the RFGA.
24. Are there preferred outcome measures or instruments utilized to assess family progress or outcomes?
State's Response: The outcome measure the Department is most interested in is the occurrence and reoccurrence of child maltreatment. Specifically keeping children stabilized in their placement.
25. **Funding:** Could you please provide a list of the eligible expenses that fall under “direct IHH services to the family” and detail how and when the funds are dispersed?
- a. What does it mean that the funding amount is dependent on agency approval which is based on performance over the project period but then is also based on the merits of the proposed projects as outlined in the grant applications?
State's Response: Funding is dependent on agency approval of the provider's proposal and performance.
- b. Will the provider be expected to submit invoices to the agency for reimbursement?
State's Response: The provider is expected to submit invoices to the agency for reimbursement.
- c. What is the expectation regarding the provider's 5% in-kind match? What types/categories of in-kind items are eligible for match?
State's Response: The 5% in-kind match is a non-cash contribution of value from the grantee. The in-kind match is typically the calculated value of personnel, goods, and services, including direct or indirect costs.
26. **Eligibility:** Can providers located in South Carolina choose to serve families within a specific radius of the agency which may include the county that the agency is in and more than 1 other county but not the entire county? For example, Pendleton Place is in Greenville, SC and if our agency chose to serve families within 25 miles of the agency we could serve families in Greenville, Pickens, and Spartanburg counties?
State's Response: This grant is for the Midlands and Upstate regions. It is expected that the provider will serve Greenville and surrounding counties in the Upstate and Richland and surrounding counties in the Midlands.
27. **Referrals:** Is the expectation that the agency will refer families to the program administering IHH services with the provider submitting service plans to the DSS case managers on a bi-weekly basis while also conducting outreach and providing services to families that are *not* referred by the agency

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State's Response: The Department will refer families to Intensive In-Home Services. Grantee must submit service plans to DSS Case Manager on a bi-weekly basis. Grantee will not conduct outreach and services to families not referred from the Department.

28. **Implementation:** Will there be time for providers to recruit, onboard, and train staff following the notice of decision and before the initiation of the grant agreement?

State's Response: It is expected that the awardee to be operational within 90 days.

29. **Required Activities:** Will the agency be responsible for ensuring that the provider has access and information regarding when and where CFTM's are held?

State's Response: Yes, the agency is responsible for providing information regarding CFTM time and location to the provider.

30. **Program Description:** When describing how to reach eligible children and families in our region, is eligibility driven by the clinical assessment we choose to implement with families or does SCDSS determine eligibility for services?

State's Response: Families referred to IIH provider are already eligible for services. The services provided must be directed at the family's immediate risk factor in accordance with a clinical assessment.

31. **Required Activities:** If an agency offers 24/7 services, 365 days a year, is it acceptable for IIH services availability to be integrated into the existing on-call structure? For example, if an agency offers crisis response for adolescents and young adults seeking safe shelter, is it acceptable for clients receiving IIH services to access the same crisis response as long as the on-call service provider receives regular training on all the relevant child welfare topics?

State's Response: This is permitted.

32. **Reporting and Evaluation:** Will SCDSS be able to share data regarding outcomes with families to improve the provider's capacity to evaluate the success of the intervention? For example, if a family receives IIH services to support safe, timely reunification will the agency be able to share long term outcomes such as whether any additional reports, investigations, or foster care entries occur?

State's Response: Yes. After the first several months, the Department will have access outcomes and will share with the provider.

33. **Correction:** What is the anticipated annual number of families served for each region for these services?**State's Response:** The goal for number of families served in each region is 180; however, that number may vary depending on length of service and discharge date.

34. What is the funding stream for this grant?

State's Response: The funding will be outlined in the final grant award document.

35. Is there a specific format for the budget or budget narrative? If so, will one be provided?

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State's Response: No, there is not a specific format although a budget narrative must be submitted. The format is up to the discretion of the provider.

36. There are four parenting models listed on the State's IV-E Prevention Plan: BSFT, Homebuilders, Health Families America, and Parents as Teachers. Which providers are offering these four models within the state?

State's Response: The parenting models listed in the State IV-E Prevention Plan are not related to this RFGA.

37. On page 3, under II. Required Activities, #6., the RFGA says, "The grant will not fund staff positions. The only funding allowable are for direct Intensive In-Home services to the family." Please explain what is "direct Intensive In-Home services to the family" versus paying for staff to provide the services?

State's Response: Staff compensation is covered in this weekly rate. The Department will not fund the staff positions outside of the weekly rate.

38. On page 6, under C. ORGANIZATIONAL HISTORY, EXPERIENCE AND QUALIFICATIONS (30 POINTS TOTAL), the RFGA says, "The Provider must demonstrate the proven ability to accomplish the tasks set forth in the Bringing About Conditions." What are the "Bringing About Conditions"? Will the conditions be provided to applicants prior to the due date?

State's Response: The conditions are outlined in Required Activities of the RFGA.

39. The provider must provide detailed information about their ability, to include history, experience and qualifications working with children and families and implementing comparable program. The conditions of the grant are outlined under required activities. On Page 1 Eligibility it states that the applicant must have a documented history within the past 3 years of providing services to children and families as outlined in the Scope of the Grant Proposal. That section identifies Intensive In-Home services as the provider organization. Our agency had previously provided intensive in-home services in SC but does not currently provide these services. However, we serve in multiple states and we do provide intensive in-home services in 4 of our other states. Additionally, we have served in the area of foster care and intensive treatment foster care levels within SC for decades. We would love to utilize this funding to re-launch our intensive in-home services expertise in SC. Are we eligible to apply?

State's Response: Yes

40. It states on the bottom of page 3 that we are not able to use the grant funding for staff salaries/wages. And I recognize that you are requesting information from the provider applicants regarding a suggested hourly rate for Intensive In-Home services. Does this mean that the grant funding is primarily meant to cover the costs of things like training (as indicated on pg 6 B.3.) and maybe the computer set ups, build of the assessment costs, reporting design, etc and then the determined hourly rate for the IHH will be paid to the agencies as well to cover staff salaries/wages?

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State's Response: Staff compensation is covered in a weekly rate. The Department will not fund the staff positions outside of the weekly rate. This is not a capacity building grant, any language about training was added in error.

41. How will transportation costs for the IIH services be paid? Can the grant funding cover transportation costs or are those to be included into the costs of doing business within an hourly rate of face-to-face time as a rate for such is established with IIH?

State's Response: Grant funding covers the weekly rate for IIHS which includes transportation costs.

42. How long does DSS intend to fund this program?

State's Response: The grant is for 1 year.

43. To clarify, the RFGA (p.3) states that "The grant will not fund staff positions. The only funding allowable are for direct Intensive In-Home Services to the family." Does this mean this is a fee-for-service model and that the funds cannot be used to fund salaries for direct service providers?

State's Response: Staff compensation is covered in this weekly rate. The Department will not fund the staff positions outside of a weekly rate.

44. Additionally, p.6 states "describe the number of staff you will train using these funds". Is training a permissible cost under this grant?

State's Response: This language was added in error. Training is not included in this RFGA.

45. Page 4. Discusses staff-to-family ratio and states "ensure that staff to family ratio does not exceed 1:8 families" Does this mean that one team can only serve 8 families at one time or each team member can only be assigned to 8 families at a given time?

State's Response: Each team member may serve up to 8 families at one time.

46. P.3 discusses initiating contact with family within 48 hours of referral. What if a family is non-responsive during this time? Are there diligent efforts that need to be documented and reported to DSS within a certain timeframe?

State's Response: Initiating contract with the family must occur within 48 hours. If the family is non-responsive to multiple attempts, the provider must document these contacts and attempts.

47. What timeframe would DSS provide for a referral to be closed if a family is unable to be located?

State's Response: Before official closure of a IIHS case, provider must collaborate and communicate with the case manager via email about the attempts to contact the family.

48. P.3 states that "sessions should be at least 60-90 minutes in length". Does this refer to psychotherapeutic intervention or any and all interventions? Or will SCDSS consider cumulative weekly contact hours vs. sessions lasting 60-90 minutes?

State's Response: The Department will consider a cumulative weekly contact. Services should be rendered in a wraparound format.

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49. Is the Grant start date immediately following the award date of August 16th?
State's Response: The grant date begins immediately, and it is expected that the awardee to be operational within 90 days.
50. 5% in-kind match: what is the expectation for a for-profit provider to meet this requirement?
State's Response: The 5% in-kind match is a requirement for all providers, regardless of if they are non-profit or for-profit. The 5% in-kind match is a non-cash contribution of value from the grantee. The in-kind match is typically the calculated value of personnel, goods, and services, including direct or indirect costs.
51. It's a 1-year grant which covers the award date through 8/30/23: is there opportunity for renewal or is it going to be re-bid annually?
State's Response: The Department is piloting intensive in-home services in the Upstate and Midlands for one (1) year, with the intent of expanding geographically and allocating additional funding to this service in the future, based on review of the pilot program's outcomes.
52. Is this performance-based contracting? If so, is payment based strictly on outcome data and/or the families who finish services? (ie "The total dollar amount available will be dependent on approval by SCDSS which shall be based on performance over the aforementioned project period").
State's Response: No. The outcome measure the Department is most interested in is the occurrence and reoccurrence of child maltreatment. Specifically keeping children stabilized in their placement.
53. Are you looking for more specific data outcomes/fidelity measures of the model to be utilized? The only statement was: "prevent occurrence and reoccurrence of child maltreatment and enable to remain safe in the home".
State's Response: The outcome measure the Department is most interested in is the occurrence and reoccurrence of child maltreatment. Specifically keeping children stabilized in their placement.
54. Can the same provider agency receive awards for both regions, as long as the provider submits for both regions?
State's Response: Yes