

NORTH CAROLINA DEPARTMENT OF HEALTH and HUMAN SERVICES DIVISION OF SOCIAL SERVICES

REQUEST FOR APPLICATION (RFA) # 09001-19 State Fiscal Years 2017-2019

For eligible contractors to provide services to the North Carolina Division of Social Services to develop, operate, and/or expand community-based, Intensive Family Preservation Services to ensure safety, permanency, well-being and self-sufficiency for children and families through the:

NORTH CAROLINA INTENSIVE FAMILY PRESERVATION SERVICES PROGRAM

RFA Release Date:	December 14, 2015
Letter of Intent:	December 18, 2015
Deadline for Questions:	December 31, 2015
Deadline for Applications:	January 15, at 5:00 p.m.
Mailing Address –USPS:	NC Division of Social Services Mail Service Center 2410 Raleigh, NC 27699-2410
Hand Delivery/Overnight Delivery: (i.e., Fed EX, UPS, DHL)	NC Division of Social Services 820 S. Boylan Avenue McBryde East, room 225 Raleigh, NC 27603
Attention/Questions:	Michelle Reines Program Consultant Office (919) 527-6437 <u>michelle.reines@dhhs.nc.gov</u>
Submission Instructions:	Late applications will not be accepted. Faxed or emailed applications will not be accepted.

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I. GENERAL INFORMATION

A. PURPOSE OF REQUEST

The North Carolina Department of Health and Human Services (NC DHHS), through the Division of Social Services (NC DSS), is seeking applications from qualified applicants to develop, operate and/or expand community-based, Intensive Family Preservation Services (IFPS) to ensure safety, permanency, well-being and self-sufficiency for children and families.

IFPS is provided when the safety of the child, home and/or community are at-risk; and/or the child is at-risk of out-of-home placement as well as to prevent an adoption disruption. Consistent with family-centered practice, IFPS provides children with safe, nurturing environments that promote their physical, social and emotional well-being by promoting protective factors, addressing traumatic experiences and decreasing risk factors in families and communities.

In State Fiscal Year (SFY) 2015, under previous RFA #09001-16, 514 families were served. Applicants will demonstrate the capacity to achieve positive outcomes for children at imminent risk of removal from their families. The North Carolina IFPS program helps to advance the NC DHHS' vision: *All North Carolinians will enjoy optimal health and well-being*.

B. AWARD AMOUNT AND TERM

IFPS annual allocation is \$3,231,900 for 11 grants.

NC DSS has allocated a dollar amount for each region of the state. Please see Appendix D for the state map with the delineated 11 regions and the funding allocated for each region. Applicants are required to serve all counties in each region. Applicants are not allowed to submit an application to serve a portion of a region.

The term of any resulting grant award is anticipated to be for three years, from July 1, 2016 until June 30, 2019. The initial contract period will be for one year, from July 1, 2016 until June 30, 2017. Contract renewal will be required for SFY18 and SFY19 and will be based on availability of funding, grantee performance and contractual compliance.

C. ELIGIBILITY

Any tribal government, community–based, public or private nonprofit, tax-exempt organization (including faith-based), school system or local government agency that is duly incorporated and registered under North Carolina Statutes is eligible to apply provided they meet the following requirements:

- Applicants have completed registration with the Secretary of State. For more information, visit: <u>https://www.secretary.state.nc.us/corporations/feenpc.aspx</u>.
- Applicants and subcontractors must follow E-Verify requirements found in HB786 (http://www.ncga.state.nc.us/gascripts/BillLookUp/BillLookUp.pl?Session=2013&BillI D=hb+786). This requires contractors and the contractor's subcontractors to comply with the requirements of Article 2 of Chapter 64 of the General Statutes

(<u>http://www.ncleg.net/EnactedLegislation/Statutes/HTML/ByArticle/Chapter_64/Articl e_2.html</u>).

- Applicants' Internal Revenue Service (IRS) exemption letter must be current within five years.
- Applicants' Employer Identification Number (EIN), IRS tax exemption status documents, and registration with the Secretary of State must be consistent with both the name of agency and the EIN provided.

Applicants that receive this award for IFPS will also be subject to a pre-award risk assessment, per CFR Title 2 200.205: <u>http://www.ecfr.gov/cgi-bin/text-</u> idx?SID=9488ab373262441562fad70c1c91ddfc&node=se2.1.200_1205&rgn=div8.

NC DSS is a covered entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and, therefore, must ensure that all contractors are in compliance with HIPAA. Applicants that receive this award must provide verification that they have and are implementing policies and procedures which address HIPAA requirements, specifically protected health information and breach of confidentiality.

D. LETTER OF INTENT

All applicants must submit a signed letter of intent on applicant's letterhead via email to Michelle Reines at <u>michelle.reines@dhhs.nc.gov</u> by **December 18, 2015**. In addition, the letter must include the following information:

- Legal name of the agency or organization;
- Mailing address, phone number, and fax number of the agency or organization;
- Intent to respond to this RFA;
- Region or regions to be served; and
- Name, title, and email address of the person who will coordinate application submission.

Applicants will be able to submit questions regarding the RFA by *December 31, 2015 at 5PM* to Michelle Reines at <u>michelle.reines@dhhs.nc.gov</u>. Questions shall only be accepted via email for tracking purposes. Please send questions as soon as possible for due consideration. Answers to all questions received will be posted on *January 5, 2016* on the NC DSS public notice site: <u>http://www2.ncdhhs.gov/dss/pubnotice/</u>.

E. TECHNICAL ASSISTANCE WEBINAR

NC DSS has recorded a technical assistance webinar to explain the application requirements in greater detail. The webinar link can be accessed through the following link: <u>2015-12-03 15.14 IFPS</u> Webinar.wmv

F. NUMBER OF COPIES

<u>One complete original application</u> including a signed cover letter on agency letterhead and signed certifications and <u>three additional complete application copies</u> are required at the time of initial submission. An Acknowledgement of Receipt will be provided to all applicants. If the application is received by mail, the Acknowledgement of Receipt will be sent via email.

G. DEADLINE

The closing date for submission of applications is *January 15, 2016, at 5:00 p.m. Applications received after 5:00 p.m. will be classified as late and will <u>not</u> be considered for funding. Applicants should be aware that certain conditions influence the timely submission of applications, i.e., traffic congestions, available parking, highway construction, weather conditions, faulty driving directions, etc. Applicants are cautioned to request a legible dated United States Postal Services postmark or receipt or to obtain a legibly dated receipt from a commercial carrier. Applicants should allow adequate time (approximately seven days) for application packages to arrive at the NC DSS building. No faxed or emailed applications will be accepted.*

H. SELECTION PROCESS

All applications received by the deadline will be forwarded to the award review committee which will review, score and rank the applications with the requirements listed in Section III to be used as factors in the award process. Nothing may be added to or removed from any application after it has been submitted. Although a primary factor, score alone will not be the sole determinant for awards. NC DSS staff will consider overall factors, including program history, when determining final award decisions.

NC DSS anticipates posting award notices on the NC DSS public notice site by *February 12, 2016* at <u>http://www2.ncdhhs.gov/dss/pubnotice/</u>. Awards will be deemed final. There are no protest rights from an RFA as the NC DHHS Procurement and Contract manual states: "The funding agency reserves the unqualified right to reject any or all offers if determined to be in its best interest".

I. REPORTING

If awarded funding, the following are required reporting for all contractors:

Monthly:

- DSS-1571 III Administrative Costs Report, by the 10th of each month. Contractors with subcontract(s) must include monthly 1571 Report(s) completed by the subcontractor(s). 1571 Report(s) must be submitted monthly even if no costs are incurred.
- Entry of all services/activities in the NC IFPS Database.

Quarterly:

• Completed Performance Status and Protective Factors Survey Reports by October 10th, January 10th and April 10th. These reports include data on agency functions, program outputs and outcomes.

Annually:

- Completed Performance Status and Protective Factors Survey Reports by July 10th. These reports include cumulative end-of-year data on agency functions, program outputs and outcomes.
- NC State Auditors GS 143-6.22&23 Grant Compliance Report: <u>http://www.ncga.state.nc.us/gascripts/statutes/statutelookup.pl?statute=143c</u>

- Maintain an active record in the federal government's System for Award Management (SAM) which now contains data previously entered in Central Contractor Registration (CCR) System. To update the record in SAM, contractors must log in at the SAM home page: www.sam.gov
- Federal Funding Accountability and Transparency Act (FFATA) Data Reporting Requirement form due within 10 days upon request by the NC DSS.

J. MONITORING

The Contract Administrator reviews all contractors' 1571s for accurate, allowable and reasonable costs and the State Auditors' non-compliance list is reviewed to ensure all G.S. 143-6.22&23 reporting requirements are being fulfilled by the contractor. If applicable, monthly service reports or database entries are reviewed to ensure participants are enrolled and service activities have been implemented. Ongoing telephone and e-mail monitoring is documented by the Contract Administrator when it pertains to possible contractual non-compliance issues.

When each quarter of the contract year is complete, contractors submit a Performance Status Report. After the first quarter, a conference call is conducted between the Contract Administrator and contractor staff to review the contractor's report and ensure that required components of services, accurate monthly reporting, and fiscal procedures are being implemented and baseline data is being compiled to fulfill the evaluation plan of the contract.

For announced on-site monitoring reviews, the Contract Administrator sends a formal written notification letter to the contractor at least 30 days prior to the scheduled review date. A preliminary site visit report is discussed and completed at the end of the on-site monitoring review. Areas concerning services, fiscal management, compliance requirements, personnel, safety, organizational capacity, subcontract services and evaluation are also reviewed to confirm contractual compliance during the on-site review. The CFR Title 2 Part 200 specifies federal areas of compliance: http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

Within 30 days of an on-site monitoring review, the Contract Administrator sends a formal written monitoring report letter to the contractor which contains findings if corrective action is needed. If the contractor remains in non-compliance status, the contract may be terminated due to failure to meet the terms and conditions of the contract.

Contractors will be monitored at least once during an award cycle according to an established schedule once baseline data is collected, unless other requirements for frequency take precedence. In addition, NC DSS reserves the right to conduct unannounced on-site monitoring reviews. The NC DSS monitoring plan can be found at <u>http://www.ncdhhs.gov/dss/Monitoring/</u>.

K. REQUIRED BACKGROUND CHECKS

Contractors shall document for all staff and volunteers having direct contact with children or families on an ongoing basis, completion of a criminal history background check. This check should also include a check of the National Sex Offender Registry. Any prior felony convictions or other abnormalities must have written evidence of supervisory review and acknowledgement, which justifies employment. This documentation shall be kept within the volunteer or employee personnel file and will be subject to review during an on-site monitoring visit.

L. REQUIRED TRAINING

- 1. All direct service staff and their supervisors shall attend the *NC DSS Family-Centered Practice in Family Preservation Programs* five-day specialized curriculum designed for IFPS workers. Specifics regarding the course content and availability may be found on "NCSW Learn: A Learning Site for North Carolina's Human Services Professionals" at <u>https://www.ncswlearn.org/</u>. *All staff is expected to complete this training prior to being assigned cases.* Contractors shall have trained staff and/or facilitators in place prior to contract execution or shall demonstrate that staff is scheduled to be trained prior to case assignment.
- 2. All direct service staff and their supervisors shall complete The National Alliance of Children's Trust and Prevention Funds (Alliance) online training course to support implementation of the Strengthening Families[™] Protective Factors Framework in Multiple Settings: Bringing the Protective Factors Framework to Life in Your Work A Resource for Action http://ctfalliance.org/onlinetraining.htm. This training shall be completed by all required staff within 90 days of the beginning of the contract period or their date of hire.
- 3. Staff and supervisors shall attend the training on using the *NCFAS-G/T/WB Trauma Domains*, which will be offered July 8, 2016.

NC DSS, in partnership with Prevent Child Abuse North Carolina, FRIENDS National Center for Community-Based Child Abuse Prevention, and other state and national partners will provide ongoing training and technical assistance throughout the three-year award cycle.

II. GOVERNING LEGISLATION AND FUNDING SOURCES

In the 1991 Session of the North Carolina General Assembly, legislation was enacted which established Family Preservation Services to be developed and implemented by NC DHHS. The mission of NC DSS is to provide family-centered services to children and families to achieve well-being through ensuring self-sufficiency, support, safety and permanency. NC DSS is guided by both federal and state legislation designed to protect children and strengthen safe, stable, nurturing families. The following federal and state requirements govern the administration of the IFPS program:

Adoption and Safe Families Act (ASFA) of 1997

On November 19, 1997, the President signed into law (P.L. 105-89) the Adoption and Safe Families Act of 1997, to improve the safety of children, to promote adoption and other permanent homes for children who need them, and to support families. ASFA recognized that innovative approaches are needed to achieve the goals of safety, permanency, and well-being and provided a funding mechanism allowing greater flexibility to develop community-based strategies to achieve positive results for families.

<u>Promoting Safe and Stable Families Amendments (PSSF) of 2001 and The Child and Family</u> <u>Services Improvement and Innovation Act of 2011 (public Law (Pub. L.) 112-34)</u>

The purpose of this program is to enable States to develop and establish, or expand, and to operate coordinated programs of community-based family support services, family preservation services, time-limited family reunification services, and adoption promotion and support services to accomplish the following objectives:

- To prevent child maltreatment among families at risk through the provision of supportive family services.
- To assure children's safety within the home and preserve intact families in which children have been maltreated, when the family's problems can be addressed effectively.
- To address the problems of families whose children have been placed in foster care so that reunification may occur in a safe and stable manner in accordance with the Adoption and Safe Families Act of 1997.
- To support adoptive families by providing support services as necessary so that they can make a lifetime commitment to their children.

North Carolina Session Law 2015-241

Intensive Family Preservation Services Funding and Performance Enhancements

SECTION 12C.2.(a) Notwithstanding the provisions of G.S. 143B-150.6, the IFPS program shall provide intensive services to children and families in cases of abuse, neglect, and dependency where a child is at imminent risk of removal from the home and to children and families in cases of abuse where a child is not at imminent risk of removal. The program shall be developed and implemented statewide on a regional basis. The IFPS shall ensure the application of standardized assessment criteria for determining imminent risk and clear criteria for determining out-of-home placement.

SECTION 12C.2.(b) NC DHHS shall require that any program or entity that receives State, federal, or other funding for the purpose of IFPS shall provide information and data that allows for the following:

(1) An established follow-up system with a minimum of six months of follow-up services.

(2) Detailed information on the specific interventions applied, including utilization indicators and performance measurement.

(3) Cost-benefit data.

(4) Data on long-term benefits associated with IFPS. This data shall be obtained by tracking families through the intervention process.

(5) The number of families remaining intact and the associated interventions while in IFPS and 12 months thereafter.

(6) The number and percentage, by race, of children who received IFPS compared to the ratio of their distribution in the general population involved with Child Protective Services.

SECTION 12C.2.(c) NC DHHS shall establish a performance-based funding protocol and shall only provide funding to those programs and entities providing the required information specified in subsection (b) of this section. The amount of funding shall be based on the individual performance of each program.

III. PURPOSE AND REQUIREMENTS

The goal of North Carolina's IFPS program is to prevent unnecessary placement of children away from their families by providing in-home services aimed at restoring families in crisis to an acceptable level of functioning. These services are designed to meet the following objectives: (1) stabilize the crisis which put the family at imminent risk, (2) keep the child, family and community safe by defusing the potential for violence (physical, sexual, emotional/verbal abuse), and (3) help families develop the skills, competencies and resources they need to handle future crisis situations more effectively.

Consistent with family-centered practice and program goals is the goal of strengthening and supporting families and children to increase their stability by building an integrated community-

based system to family functioning. As a foundation to achieving these goals, North Carolina has implemented, as part of its system reform, Six Principles of Partnership:

- Everyone Desires Respect
- Everyone Needs to Be Heard
- Everyone Has Strengths
- Judgments Can Wait
- Partners Share Power
- Partnership is a Process

North Carolina IFPS applicants shall meet *all* of the following requirements to be eligible for funding (*a detailed description of each requirement is provided on the subsequent pages*):

- 1. Provide services based on the values and beliefs of Family Preservation Services.
- 2. Serve eligible population at risk of child's removal from the home.
- 3. Implement the model and comply with agency and program requirements.
- 4. Promote the five protective factors and children's social and emotional well-being.
- 5. Demonstrate the ability to provide trauma-informed services as they relate to clients and staff.
- 6. Demonstrate positive outcomes through accountability and evaluation tools.
- 7. Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
- 8. Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.

1. Family Preservation Services Values and Beliefs

It is critical that IFPS providers and supervisors have a firm understanding of and commitment to these values and beliefs about families:

- 1. Safety of the children is the first concern.
- 2. Children have a right to their family.
- 3. The family is the fundamental resource for the nurturing of children.
- 4. Parents should be supported in their efforts to care for their children.
- 5. Families are diverse and have a right to be respected for their special cultural, racial, ethnic and religious traditions; children can flourish in different types of families.
- 6. A crisis is an opportunity for change.
- 7. Inappropriate intervention can do harm.
- 8. Families who seem hopeless can change and grow.
- 9. Family members are our colleagues.
- 10. It is our job to instill hope.

2. Eligible Population At-Risk of Removal from the Home

Families eligible for IFPS services have at least one child age birth through 17 years who is at imminent risk of placement in out-of-home care. The priority for case assignment are those children at risk of placement into the social services system, and at least 75% of cases served each year shall be referred by County Departments of Social Services (County DSS), but referrals may also come from the mental health/developmental disabilities/substance abuse or juvenile justice systems.

"Imminent risk of out-of-home placement" is defined as follows:

County DSS referred cases:

- There has been a substantiation of abuse, neglect or dependency (as determined by the County DSS prior to the referral to IFPS) **AND** there is a rating of 'high' or 'intensive' on the Family Risk Assessment (DSS form 5230) or the Family Risk Reassessment (DSS Form 5226); **OR**
- There is a substantiation of abuse, but there is no rating of 'high or 'intensive' on the Family Risk Assessment (DSS Form 5230) or Family Risk Reassessment (DSS Form 5266); **OR**
- There has been a finding of In Need of Services (as determined by the County DSS prior to referral to IFPS) **AND** there is a rating of 'high' or 'intensive' on the Family Risk Assessment (DSS form 5230) or Family Risk Reassessment (DSS Form 5226).

Juvenile Justice referred cases:

- There has been an adjudication that the juvenile is delinquent or undisciplined, and the juvenile violates protective supervision or probation, or there are new charges, **OR**
- The juvenile has been placed on Level 2 disposition by the court.

Mental Health referred cases:

- It is determined by the child's treatment team that if IFPS is not offered, the child would be referred to a residential or inpatient setting, **AND**
- A standardized assessment tool must be completed demonstrating that the child is at imminent risk of removal from the home if IFPS services are not provided. The Community Based Programs Staff of NC DSS must approve the tool utilized prior to referrals based on that tool being accepted.

3. Agency and Program Requirements

The IFPS program is based on the Homebuilders model. The following internet links provide information on this model:

- Institute for Family Development (developers of the HOMEBUILDERS program) http://www.institutefamily.org/
- HOMEBUILDERS Strengthening America's Families program http://www.strengtheningfamilies.org/html/programs_1999/23_HOMEBUILDERS.html
- Casey Family Programs, A Ten-Year Review of Family Preservation Research
 <u>http://www.casey.org/resources/publications/TenYearReviewFamilyPreservation.htm</u>
- National Family Preservation Network <u>http://www.nfpn.org/</u>

It is a requirement that applicants demonstrate that there has been careful thought around the implementation of the IFPS program. Applicants must demonstrate that these supports are in place and are able to be sustained throughout the award period. All applicants shall complete the "Implementation Plan Form", for which a link can be located in Appendix F.

NC DSS requirements are as follows:

Contract Compliance:

- Develop a working knowledge of State policy and procedures regarding IFPS and ensure staff compliance. The contractor shall use and maintain forms as required by the NC DSS.
- Complete regular evaluations of IFPS staff to assess knowledge of, and compliance with, philosophy and intervention strategies of the IFPS model.
- Participate in quality assurance evaluation activities as designated by NC DSS. Activities include, but are not limited to, participating in group meetings, site visitations and peer review of policies and procedures.
- Make accessible to the assigned State IFPS Consultant or other designated NC DHHS or NC DSS representative full access to and the right to examine all case and administrative records for the purpose of monitoring this agreement.
- Unit Definition: one (1) unit equals one (1) family intervention as outlined in program description. Units The number of IFPS units to be provided for each region per year during the contract term shall be in accordance with the chart in Appendix D.
- The contractor shall provide services only in the region identified in its contract.

Staffing Requirements:

The contractor shall assure that the IFPS program shall be staffed as identified herein and that the staff identified to fill the roles of program manager, supervisor and worker shall have the following minimum qualifications for each position:

Program Manager:

- Appropriate degree in the human services area or in management and experience to manage in-home programs. Administrative and clinical experience preferred.
- Participation in initial and ongoing training provided by NC DSS staff or trainers coordinated by the NC DSS.
- Not more than 25% position for one full team (four workers and one supervisor).

Supervisor:

- A degree in the human services area and field experience working with multiproblem families. A master's degree in social work is preferred.
- Demonstrated experience in, or potential for, providing supervision to workers who provide in-home services.
- Knowledge of child welfare policies and programs, family therapy theories, treatment philosophies and strategies of home-based services, as well as knowledge and availability of local resources is necessary.
- An understanding of and commitment to the IFPS model is essential.
- Capacity for overseeing program operations related to the family's entry into and participation in the program.
- The ability to relate to and collaborate with County and State personnel, the courts and other service providers on behalf of the family.
- Ability to maintain a flexible work schedule.
- Participation is required in initial and ongoing training provided by NC DSS staff or trainers coordinated by the NC DSS.

Worker

- A degree in the human services area. A master's degree in social work is preferred.
- Field experience working with multi-problem children and families and overall ability to relate to and engage with these families.
- Ability to maintain a flexible work schedule.
- Understanding of the IFPS philosophy and intervention strategies is essential.
- Willingness and ability to participate in initial and ongoing training provided by NC DSS staff or trainers coordinated by the NC DSS.

Activities contractor shall perform:

Referrals:

- Market the IFPS program to eligible referral sources. It is the responsibility of the contractor to ensure an adequate number of referrals are received in order to meet contractual requirements for the number of families to be served.
- Develop a procedure for accepting referrals. The procedure shall include accepting referrals 24 hours per day/7 days per week. There shall be no provision for maintaining a waiting list. The contractor shall make available to referring units notice of any vacancies.
- Accept a second referral for any given family only if it has been 90 days since the contractor or any other IFPS contractor terminated the most recent intervention for the family, or if permission specific to the referral is granted by the State IFPS Consultant.
- Accept a third, or subsequent, referral for any given family served by the contractor or any other IFPS contractor only after consultation with and approval by the State IFPS Consultant.

Capacity and Staffing:

- Maintain the capacity to serve the anticipated number of families specified in this Agreement. The contractor shall be responsible to provide 1 full-time IFPS worker for every 18 anticipated families to be served. It is expected that a full-time worker can deliver at least 18 interventions per year. Supervisors shall directly serve some families each year.
- Assign a caseload of 2 families to each IFPS worker. The contractor may serve a 3rd family ONLY during the transitional period of an intervention.
- Maintain a supervisory/direct service staff ratio that ordinarily shall be 1 full-time supervisor to no more than 5 full-time IFPS workers.
- Ensure IFPS workers and supervisors work a flexible schedule determined by the needs of the family (rather than a standard 8AM to 5PM schedule). IFPS staff shall submit to the contractor a disclosure statement regarding any supplemental employment and/or educational commitment. The contractor must ensure that the supplemental employment and/or educational commitment does not negatively impact services provided by the contract.
- Each new IFPS worker shall shadow the supervisor for at least 1 case, and be shadowed by the supervisor for at least one 1 case, before being assigned cases. (Shadowing shall be defined as accompanying the person responsible for the case on at least half the home visits to the family.)

• The IFPS supervisor shall accompany experienced staff on home visits, as needed. Feedback on accompanied visits shall be part of the weekly individual conference or team meeting.

Supervision:

- Conduct regularly scheduled team meetings involving all IFPS staff, including the IFPS supervisor. The purpose of these meetings shall be to review individual family progress, consult on alternative service plans, action steps and activities needed on IFPS cases, staff all active cases and use results to develop weekly plans to achieve family goals. Meetings shall be documented and documentation shall be maintained.
- Conduct conferences between each IFPS worker and supervisor at least once weekly for the express purpose of enabling individual IFPS workers to discuss their client families on a one-to-one basis. The conferences shall be directed toward review of individual family progress, consultation on alternative service plans, and determination of action steps and activities needed on active cases. These conferences will be documented.
- Ensure the IFPS program manager reviews and approves, by signature, all service plans and termination reports of cases assigned to IFPS supervisors.
- Ensure the IFPS program supervisor reviews and approves, by signature, all service plans and termination reports of cases assigned to IFPS workers

Minimum Program Requirements:

- Ensure IFPS workers attempt to make face-to-face contact with the family within 24 hours (immediately if an emergency) from time of referral to IFPS. If unable to make face-to-face contact within 48 hours, referring staff shall be notified immediately.
- The assigned IFPS worker shall maintain ongoing contact with referring staff at a frequency sufficient to address the circumstances of the individual family, as agreed upon with referring staff.
- Provide services in the family's home or, at the family's request, a location (other than the contractor's facility) mutually agreed upon by the contractor and the family.
- Ensure IFPS staff is directly available to the families assigned to them 24 hours per day, 7 days a week.
- During each service period, the IFPS worker shall provide not less than 40 hours of face-to-face contact per family. Each family will receive face-to-face contact an average of 2.5 times per service week.
- Ensure IFPS workers provide services to each family for a minimum of 4 weeks. Services may be extended up to maximum of 6 weeks when an extension will substantially decrease the chance of placement. A service extension shall be determined by the IFPS supervisor and worker in consultation with referring staff.
- A case should only be suspended in extreme circumstances as determined by the IFPS supervisor and worker in consultation with referring staff. A case may only be suspended for a maximum total of 2 weeks.
- Require IFPS workers to develop a Service Plan Report for each family. The worker shall establish the service plan and goals in collaboration with the family.

The family's involvement shall be clearly documented by their signing of the final Service Plan.

- The Service Plan shall address safety measures put into place and shall include, but not be limited to: identifying family strengths, helping the family define the specific goals of intervention, showing the family how improvements can occur, helping the family resolve or improve safety concerns by such techniques as examining positive alternatives for negative behaviors, teaching skills to prevent the reoccurrence of abuse and neglect and other family conflict, and connecting with resources to maintain ongoing progress.
- The contractor shall submit the Service Plan to referring staff within 14 days from the time of referral to IFPS. An In-Home Family Services Agreement developed as part of a Child and Family Team Meeting will be sufficient in place of the Service Plan if the IFPS worker is present during the CFT meeting.
- Ensure IFPS staff provide a wide range of goal-directed services to the family which may include, but shall not be limited to:

1) Assessing risk and aiding the family in developing a behaviorally specific safety plan.

- 2) Teaching appropriate parenting skills, such as:
 - a) Alternatives to corporal punishment and neglect which encourage a no-hit policy
 - b) Age appropriate expectations
 - c) Parent as a role model
 - d) Choices and consequences
 - e) Display of greater parent/child affection and trust
 - 3) Family, individual and/or marital counseling, which shall:a) Be based on a cognitive, behaviorally oriented model that encourages the development of linkages with natural helping networks and community resources
 - b) Teach anger management techniques
 - c) Teach appropriate communication skills
 - 4) Assessing and teaching budgeting skills.

5) Aiding the family in meeting medical needs such as arranging for substance abuse treatment for family members and assisting in making available follow-up support resources when treatment is completed.
6) Teaching, assisting and modeling housekeeping, homemaking and other organizational skills needed to provide a positive family environment.
7) Assisting the family to access transportation and/or transporting them.
8) Referring and linking the family with needed services.

9) Referring and linking family with follow-up services when necessary.

- Develop a written plan to administer flex funds averaging \$315 per family. These funds will be used to purchase concrete supports, such as furniture, utilities and respite care. The contractor's plan must be available to the IFPS Worker and State IFPS Consultant.
- Discuss termination recommendations with referring staff. A termination conference shall occur no later than seven days prior to anticipated closure of the case. The family may be invited to attend the termination conference.
- Conduct a termination meeting with the family to summarize the progress made during intervention and options for maintaining progress. The meeting shall occur at the final family session. When possible, a CFT to discuss termination held with the

referring staff and family will meet this requirement. The case shall be considered closed as of that date.

- Within 7 days of case closure, send to the family and to the referring worker a Termination Report signed by the appropriate FPS staff which shall summarize the progress the family made during the intervention.
- Administer the Family Satisfaction Survey and Referring Worker Survey upon termination of each case to determine satisfaction with the IFPS program. A copy of the completed forms shall be maintained in each case record.
- Contact the most involved parent in each family served by the IFPS program and administer a follow-up evaluation at 6 and 12 months after termination. If a home visit is not possible, a telephone contact shall be attempted. Five telephone attempts to contact shall be made and documented. This evaluation shall determine the status of the family and whether placement of a child has occurred.

4. Promoting Protective Factors

NC DSS is committed to achieving safety, permanency and well-being for North Carolina's children and their families. Research and initiatives suggest that the Strengthening Families Framework that identifies protective factors can significantly reduce incidences of childhood maltreatment and trauma. The Strengthening Families Framework is an intentional focus on family development and optimal child development that identifies five protective factors that are relevant for the continuum of child welfare services.

North Carolina IFPS contractors shall measure outcomes for the following five protective factors:

Parental Resilience

A parent's ability to effectively cope with the various challenges of parenting and everyday life and their ability to overcome life's challenges. Examples include program activities that help caregivers establish relationships with friends, family, and professionals that provide on-going encouragement and knowledge of accessible community resources.

Social Connections

Positive relationships with friends, family members, neighbors, and others who can provide concrete and emotional support to parents and caregivers. Examples of programming would strengthen informal and formal support mechanisms for families.

Knowledge of Parenting and Child Development

Accurate information about raising children and appropriate expectations for their behavior. Examples would be parenting education through parent support groups, facility based education classes or home visitation.

• Concrete Support in Times of Need

Support and services within the community which can include financial, transportation, and food assistance, job training, and/or mental health services. An example of programming would be providing immediate and accessible resources or support to families in crisis.

• Children's Social and Emotional Development*

A child's ability to effectively interact with others and to articulate their feelings. An example of programming would be providing children and caregivers a safe and nurturing place to "practice" normal roles and behaviors, strengthening a positive parent-child relationship.

The Strengthening Families Framework identifies 7 key strategies that exemplary programs use in their work to build protective factors with families. While the strategies themselves are consistent across many different kinds of programs, the way in which a program implements the strategies may vary. To

find out more information on the 7 strategies please utilize the following link: <u>http://www.cssp.org/reform/strengthening-families/basic-one-pagers/Strengthening-Families-for-Practitioners.pdf</u>

* In April 2011, the Children's Bureau released an *information memorandum (IM)* articulating a framework for social and emotional well-being in child welfare. Emerging evidence shows that many of maltreatment's most devastating impacts are social and emotional, seriously affecting how children relate to their world. However, growing research also demonstrates that evidence-based interventions, when carefully selected and delivered with fidelity, can restore healthy, developmentally appropriate functioning. ACYF-CB-IM-12-04, 'Promoting Social and Emotional Well-Being for Children and Youth Receiving Child Welfare Services,' describes child welfare strategies for achieving real, achievable and long lasting improvements in well-being for children and families. Find this IM at: http://www.acf.hhs.gov/programs/cb/laws_policies/policy/im/2012/im1204.pdf.

5. Providing Trauma-Informed Services

Research confirms child abuse and neglect has a long-term negative impact on a child's life and the entire community, harming both quality of life and prosperity. Children who experience abuse and/or severe neglect often develop toxic levels of stress. If prolonged, this high level of stress can damage the developing architecture of a child's brain. These changes to a child's brain caused by exposure to prolonged stress can lead to significant behavioral changes.

In 2005, the Centers for Disease Control and Prevention and insurer Kaiser Permanente released the most comprehensive research to date on the impact of child abuse and neglect. This study, called the Adverse Childhood Experiences Study or ACE Study, surveyed 17,000 adults about their childhood experiences and compared them with their health histories. The research found that children who suffered severe adversity in childhood – violence, abject poverty, substance abuse in the home, child abuse and neglect – were far more likely to suffer long-term intellectual, behavioral, and physical and mental health problems.

Child traumatic stress refers to the physical and emotional responses of a child to events that threaten the life or physical integrity of the child or someone critically important to the child (e.g., a parent or sibling). *Chronic trauma* refers to repeated assaults on the child's body and mind (e.g., chronic sexual or physical abuse, exposure to ongoing domestic violence, emotional or physical neglect). *Complex trauma* is a term used by some trauma experts to describe both exposure to chronic trauma, often inflicted by parents or others who are supposed to care for and protect the child, and the immediate and long-term impact of such exposure on the child (Cook et al., 2005).

A trauma-informed child welfare system is one in which all parties involved recognize and respond to the varying impact of traumatic stress on children, caregivers, families and those who have contact with the system. Programs and organizations within the system infuse this knowledge, awareness, and skills into their organizational cultures, policies, and practices. They act in collaboration, using the best available science, to facilitate and support resiliency, and recovery.

The following are essential elements which provide a guiding framework for agencies striving to infuse trauma-informed knowledge and practice into their existing systems.

- Maximize Physical and Psychological Safety for the Child and Family
- Identifying Trauma-Related Needs of the Child and Family
- Enhancing Child Well-Being and Resiliency

- Enhancing Family Well-Being and Resiliency
- Enhancing the Well-Being and Resiliency of Those Working in the System
- Partnering with Youth and Families
- Partnering with System Agencies

By incorporating these principles into practice, agencies can ensure they realize the impact of trauma, recognize the signs and symptoms of trauma, respond appropriately and resist retraumatization. Adopting a trauma-informed approach provides benefits on multiple levels. It equips staff members and leadership with the tools and skills necessary to manage their own secondary traumatic stress and assist the children and families in their care. It also provides a framework for educating the workforce and affiliated stakeholders on the impact of trauma and provides them with strategies to manage a child's difficult behaviors and overwhelming emotions and ensuring that the child receives the services he/she needs.

To find out more information, please refer to the following:

The Chadwick Trauma-Informed Systems Project. (2012). *Creating trauma-informed child welfare systems: A guide for administrators* (1st ed.). San Diego, CA: Chadwick Center for Children and Families.

The National Child Traumatic Stress Network, Learning Center for Child and Adolescent Trauma <u>http://learn.nctsn.org</u>

6. Outcome Accountability and Evaluation

All funded programs will be performance and outcome-based. The process of having applicants develop and utilize a logic model guides applicants towards greater outcome accountability. Outcome accountability is demonstrating that the expenditure of staff time, funding, and other resources result in tangible positive changes for children and families. The logic model should be the applicant's 'drawing board' for planning services and linking those services to outcomes. The logic model is intended to be a working document that is referenced regularly by contractors.

In order to support outcome accountability, and provide a framework for outcome evaluation, NC DSS *requires applicants* to utilize the FRIENDS National Resource Center Evaluation toolkit in the development of a required logic model: <u>http://friendsnrc.org/evaluation-toolkit</u>

The IFPS programs in this RFA will be offered in every county/region of the state. Therefore, it is necessary for all programs to measure the same outcomes, as outlined below. This allows for consistency in analyzing statewide data and in compiling performance reports to be provided to various stakeholders. Specific inputs (resources), activities/services and assumptions are determined by applicants.

The following shared vision, outcomes and measurement tools are required in the logic model:

- Shared Vision: Consistent with family-centered practice, IFPS provides children with safe, nurturing environments that promote their physical, social and emotional well-being by promoting protective factors, addressing traumatic experiences and decreasing risk factors in families and communities.
- **Outcomes** are divided into short-term, intermediate and long-term, as follows:
 - *Short-Term:* In 90% of families, the children will not enter foster care at case closure. 90% of families will demonstrate improved family functioning at case

closure. 90% of protective factors measured on families served will indicate some improvement at case closure.

- *Intermediate:* In 80% of families, the children will not enter foster care by 6 months after case closure. In 80% of families, the children will not experience repeat maltreatment by 6 months after case closure.
- *Long-Term:* In 80% of families, the children will not enter foster care by 12 months after case closure. In 80% of families, the children will not experience repeat maltreatment by 12 months after case closure.
- The **measurement tools** will be the case files (including termination reports), the North Carolina Family Assessment Scale (NCFAS-G/T/WB), the Protective Factors Survey* (as retrospective post-test) and the applicant's Post-Case Closure Follow-Up Tool.

*The Protective Factors Survey may be accessed at <u>http://friendsnrc.org/protective-factors-survey</u>. Also, the following website contains a Community Response Program technical assistance webinar for the survey: <u>http://vimeo.com/48608924</u>.

Once the logic model is developed, please transfer the data to the form in Appendix E, which can be adjusted as needed, but should remain 1 page. The narrative portion of this section should expand upon the information listed in the Logic Model. Applicants must discuss how their agency will ensure maintenance of the logic model.

7. Parent Engagement and Leadership

Developing strong relationships between parents and staff is an essential ingredient in the program's ability to connect with parents. When parents and other caregivers feel valued and supported in the context of a learning relationship, the likelihood of their taking responsibility for and making use of new information increases. *Applicants must demonstrate* how staff will work proactively with families who are isolated or seem most in need of encouragement and support, drawing them into the social networks and activities available. IFPS contractors are expected to convey a clear message that parents and caregivers are an important and valued part of their children's lives and their community.

Applicants are also required to demonstrate how they will model the family preservation values and beliefs, to include opportunities for parents and other caregivers to contribute to program planning, governance, and administration. Parents play an essential role in improving the quality of services and offer unique perspective as consumers. Meaningful involvement of families ensures the programming being delivered actually meets the community's needs.

8. Collaborative Community Partnership

Preventing child abuse and neglect is not the responsibility of one agency. It is a community responsibility. Applicants must demonstrate they are actively developing and participating in ongoing collaborative relationships with community partners to link families with appropriate and timely resources and identify gaps and/or barriers to families' access to services.

Applicants are also asked to discuss involvement with their local Community Child Protection Team (CCPT). Located in all 100 counties, the CCPTs meet to promote a community-wide approach to the problem of child abuse and neglect. The purpose of the CCPT includes identifying gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, and develop strategies to ameliorate child abuse and promote child well-being at a local and state level. Further information on local Community Child Protection Teams can be found at: <u>http://www.ncdhhs.gov/dss/ccpt/index.htm</u> .

Applications must include Memorandums of Agreement (MOA) with all County DSSs in the proposed region. Applicants must use the MOA form in Appendix F. This MOA form ensures the County DSSs will support the applicant in the provision of IFPS in the event that the applicant receives the award to serve the counties in the proposed region. County DSSs may complete MOAs with more than one applicant, and they may also decline to complete a MOA with a particular applicant if they choose.

Applicants must also include 3 letters of support. At least 1 letter should be from a consumer of services. Examples are:

- Juvenile justice system
- Mental health center
- Health Department
- Local Head Start /Early Head Start
- Child care center
- Housing authority
- Partnership for Children
- Hospitals/pediatricians/nurses
- If school based, a letter of support signed by school principal
- Community agencies (i.e. faith and civic organizations)
- Parents/caregivers

IV. GENERAL INSTRUCTIONS and FORMAT

Basic Format

- A *cover letter* on the applicant's letterhead must accompany the application. Include in the cover letter: purpose of the request, the specific amount being requested, number of participants to be served, program activities, area/county of program and the population being served. *This letter must be signed by the authorized official of the agency.*
- Type must be 12 point font size.
- The application must be typed on $8\frac{1}{2}$ " x 11" white paper and single spaced.
- Adhere to page limits. *Do not* add additional pages when responding to this application. Points will be deducted during scoring for applications that exceed page limits.
- Applications *must not* be stapled or bound instead use binder clips or paperclips.
- Respond to each criteria listed in this RFA in the order requested. *Include section headings* in the Scope of Work as listed in the application checklist. *Do not* insert page dividers.
- The Application Checklist (Appendix A) is recommended as reference. Links to all required contract documents are located in Appendix F.
- Page Limits pertain to narrative sections and do not include worksheets, logic model, checklists, job descriptions, etc.

Scope of Work

Direct Client Services Narrative - Face Sheet (1 page limit)

All sections must be completed.

Application Summary (2 page limit)

Please provide a <u>clear and concise</u> description of the program. Summarize the major points from the Scope of Work, including: the region to be served, the number of families who will be served for the entire award period and per fiscal year, the activities proposed and who will administer the program.

Needs Assessment (3 page limit)

Describe the regional needs that the proposed IFPS program will address. *Applicants are asked to reference the North Carolina County IFPS Eligibility Data, listed in Appendix C. After review of this data, applicants should speak to factors contributing to the region's child maltreatment rates and why providing the proposed IFPS program may have long-term impact on these rates.* The needs assessment should be a clear, concise, well-supported statement of what the regional problems are (not limited to child maltreatment) and why the program is needed. *Data and noted citations should be used to support the needs assessment*. Applications shall include:

- 1. How your agency assessed the <u>current</u> needs of your region (i.e. collaborative needs assessment process with other agencies and parents, focus groups, accessing other agency's data/reports).
- 2. Socio-economic needs of the region and risk factors of the specific target population. Please state the relationship of the target population to the larger region.
- 3. Need for the community-based IFPS program in the identified region. Applicants should reference how the proposed program fits into the community's continuum of services, if it fills an identified gap in services, and/or works to eliminate barriers to a family's ability to access services. If similar services are already being delivered to your community, the application should describe why an additional service is needed (i.e., location, service times, funding, people not being served, etc.)

Applicants may find some statistical information and/or needs assessments at collaborating agencies and organizations within their proposed region. Additional information can also be found on the internet at:

- <u>http://www.aecf.org/</u>
- http://www.ncchild.org/
- http://www.census.gov/popest/estimates/html
- http://www.ocme.unc.edu/nccfpp/index.shtml
- <u>http://ctb.ku.edu/en/tablecontents/chapter_1003.aspx</u>
- <u>http://quickfacts.census.gov/qfd/states/37000.html</u>

Project Design/Activities (15 page limit, <u>not</u> including implementation plan, logic model, MOAs and letters of support) Applicants shall describe how the program will meet **all 8 requirements listed on pages 9-19 of this RFA** by providing a detailed description of the program design. The following questions should be referenced when drafting the project design section: Family Preservation Services Values and Beliefs

- How will your agency model the Family Preservation Services Values and Beliefs?
- How will your agency affirm and strengthen families' cultural, racial and linguistic identities?
- How will you ensure families are approached with equality and respect?

Eligible Population

- What community outreach/recruitment will be done?
- How will you ensure that you serve the required number of families to be served?
- How will you ensure all families served meet eligibility criteria?
- How will you ensure services are accessible to all counties in the proposed region?
- Where will IFPS staff offices be located and program records be stored?

Agency and Program Requirements

- How will you ensure compliance with administrative requirements?
- Describe your agency's capacity to deliver the IFPS program.
- How will you implement IFPS based on the Homebuilders model?
- How will you ensure compliance with NC DSS program requirements?
- Include your implementation plan.

Promoting Strengthening Families Protective Factors Framework

- How will you ensure your IFPS staff is knowledgeable about assessing protective factors?
- How will you ensure your IFPS staff is knowledgeable about providing services to promote protective factors?
- Describe the strategies you will use to strengthen protective factors with the families you serve.

Trauma-Informed Services

- Describe trauma related training your staff has received in the last 24 months.
- Describe trauma-informed assessment and activities provided by your agency.
- Describe efforts your agency has established to minimize the re-traumatization of children.
- Describe your agency's efforts to address trauma experienced by staff.

Outcome Accountability and Evaluation

- What is your identified theory of change?
- What are your inputs, service strategies & assumptions and why did you choose them?
- How will you engage in a continuous quality improvement process and who will be involved in this?
- Include your logic model.

Meaningful Parent Engagement and Leadership

- What will meaningful parent engagement look like?
- How will you recruit and maintain parents to participate in this process?
- How will parents be involved in your agency's continuous quality improvement process?

Collaborative Partnerships

- What formal and informal resources are being used to support families?
- What is your relationship with the County DSSs in your region?
- How do you communicate your agency's available services to your community?
- How is your agency contributing to community efforts to prevent child maltreatment?
- Include your MOAs and letters of support.

Organizational Capacity (2 page limit, <u>not</u> including organizational chart, board profile and job descriptions). Successful applicants have strong organizational capacity to help achieve their goals. Organizational capacity includes but is not limited to, sound programmatic and fiscal policies and procedures, adequate staff, professional development opportunities, meaningful staff supervision time, engaged board and community stakeholders, sufficient resources, and a strong data and evaluation process.

This section should include, but not be limited to the following (do not mention staff names, only position titles):

- State the mission of the organization and how it relates to programming.
- Describe the history of your organization within the community and provide evidence that it has the capacity to serve and reach the target population.
- Will any of the proposed services be outsourced to a subcontractor? If so, describe how the services will regularly be monitored and performance evaluated.
- Who will oversee the administration and supervision of the proposed services and what are their qualifications?
- How will you support additional costs not covered by this award? *Please note: participants may not be charged fees for services funded by this award.*
- Include an **Organizational Chart** of your agency showing how the program fits into the organization's structure. Do *not* include names, only use position titles.
- Complete the **Board Member Profile**, listing your current board members, their board position and contact information.
- Include **Job Descriptions** for all positions related to the IFPS program. Do *not* include names, only use position titles.
- Who will be responsible for submitting all financial forms and the individual's experience with submitting budget modifications and monitoring agency/award spending?

Sustainability Plan (1 page limit, <u>not</u> including anticipated revenue summary and funding chart).

Applicants must address the potential for continuing the project beyond the initial award period, as the funding available from this source may not be available on a recurring basis. Sustainability is important because a break in services for families and children may increase risk of child maltreatment and removal. Applications may include actions that will be taken to ensure continuity of programming and identifying specific funding sources that will be contacted. Describe a *3 year sustainability plan* that includes a plan for diversifying funding for the program. Include the following:

- The types of support and resources from the applicant organization and their partners.
- In-kind resources.

• A funds diversification plan which includes identification of sources and types of local, state and federal funds, as well as foundations and corporate sources.

Complete the Anticipated Revenue Summary Form and Funding Chart.

Budget Narrative & Requirements

Based on the availability of funding, annual funding awards will remain the same for SFY17, SFY18 and SFY19, as outlined in Appendix D.

NC DSS will reimburse the IFPS contractor \$6,300 per family served for the full 28-day period. The 1st payment of \$3,150 may be requested on the DSS-1571 III (Administrative Costs Report) after 7 days of service. The 2nd payment of \$3,150 may be requested on the 1571 after 28 days of service. This must also be accompanied with the DSS 1571 – Addendum which lists the families served for both time periods. If a family terminates services prior to 7 days, the contractor receives no payment. If a family terminates services after 7 days but prior to 28 days, the contractor only receives the 1st payment of \$3,150.

Applicants are not required to submit a line item budget because funding amounts are determined by NC DSS and payments are made at a preset amount per family served; however, applicants must submit a budget narrative explaining how their expenditures will help the IFPS program meet its deliverables. The budget narrative is subject to the following requirements:

- All funds received by the contractor must be expended for the IFPS program in the state fiscal year in which they are received. Unused funds must be repaid to NC DSS.
- Include a draft Sub-Contractors Agreement, if subcontractor(s) will be used.
- Lease Agreement/Mortgage Documentation, if funds will be used for this purpose.
- Expenditures for travel and daily subsistence must be in accordance with state approved rates. The Office of State Budget and Management (OSBM) prepares the Budget Manual which includes current state approved travel and daily subsistence rates and can be located through the following link: <u>http://www.osbm.state.nc.us/files/pdf_files/BudgetManual.pdf</u>
- Funds may not be used to purchase or renovate real estate nor purchase or lease vehicles.
- Tangible equipment costing \$3,000 or more requires justification and three price quotes.
- Contractors which received funding in previous years to purchase equipment (i.e. computers, televisions, video players) will not be approved to purchase duplicate equipment under this award, unless the need is clearly articulated.
- Funds from this award may not be used to supplant other funds.
- Award amounts do not require a local match.

APPENDIX A

<u>Application Checklist</u> (All required documents can be accessed in Appendix F)

 Cover letter on agency letterhead
 Application Checklist
 Scope of Work – will include the following sections:
Direct Client Services Face Sheet Application Summary Needs Assessment Project Design (please include the following): • Logic Model • Implementation Plan • MOAs with all DSSs in proposed region • Letters of Support (3) Organizational Capacity (please include the following): • Organizational Chart • Board Member Profile • Job Descriptions (for all IFPS staff) Sustainability Plan (please include the following): • Anticipated Revenue Summary • Funding Chart
 Budget Narrative - attach the following, as needed: Draft of Sub-Contractor(s) Agreement(s) Lease Agreement/Mortgage Documentation
 Conflict of Interest- Notarized (Include organizational conflict of interest policy).
 No Overdue Tax Form - Notarized & printed on Agency letterhead (non-governmental agencies only)
 IRS Federal Tax Exempt Letter (501)(c)(3) (non-profit) or Verification of Tax ID (governmental)
 Federal Certifications
 State Certification

APPENDIX B

SFY 2017-2019 COMMUNITY BASED PROGRAMS READER RECORDING SHEET - IFPS PROGRAMS

Reader: _____

Total Reader Points Awarded: _____

Applicant: _____

Funding Criteria	Clarification	Score Range	Points Awarded	
I. Application Summary			5 Maximum Points	
	Applicant submitted letter of intent by due date (NC DSS will provide this information).	0-1 point		
	 Applicant provides a clear and concise summary of proposed services. 	0-4 points		
	Subtract (-1) point if the applicant exceeded 2 pages for the application summary.			
		Subtotal		
II. Needs Assessment		10 Maxim	um Points	
	Clearly stated sources of needs assessment data.	0-1 point		
	 Applicant speaks to region's child maltreatment rate, contributing factors, and how the proposed program may mitigate the incidence of child maltreatment. 	0-3 points		
	 Program fits into the community's continuum of services. 	0-3 points		
	 Demographics of the area are provided. 	0-3 points		
	Subtract (-1) point if the applicant exceeded 3 pages for this section.	·		
		Subtotal		
III. Project Design		56 Maxim	um Points	
Family Preservation Services Values and Beliefs	 Applicant discusses how they will support the Family Preservation Services Values and Beliefs. Applicant states how they will demonstrate cultural competency. 	0-4 points		
Eligible Population	 Applicant discusses planned outreach/recruitment efforts. Applicant describes procedure for ensuring family eligibility. Location of staff offices and program records is stated. 	0-4 points		
Agency and Program Requirements	 Applicant describes procedures to ensure contractual compliance. Applicant demonstrates strong understanding of Homebuilders model. Applicant describes procedures to ensure compliance with the IFPS program model. Implementation Plan Form is included and demonstrates capacity to conduct IFPS program. 	0-8 points		
Promoting Protective Factors	 Applicant demonstrates understanding of all 5 protective factors. Applicant describes strategies it will use to strengthen protective factors with families. 	0-8 points		

	 Applicant describes plan to ensure staff's ability to conduct assessment and provide services to promote protective factors. 		
Trauma-Informed Services	 Applicant demonstrates the ability to conduct assessment and provide services to address trauma. Applicant describes its efforts to minimize the re-traumatization of children. Applicant describes efforts to address trauma experienced by staff. 	0-8 points	
Outcome Accountability and Evaluation	 Applicant identifies their inputs, service strategies and assumptions, and explains why these were chosen. Applicant explains how they will conduct their continuous quality improvement process. Logic model is included and accurately reflects required components. 	0-6 points	
Meaningful Parent Engagement and Leadership	 Applicant explains what meaningful parent engagement looks like in their agency. Applicant discusses how they will recruit parents and support their retention. Parent involvement in the applicant's continuous quality improvement process is discussed. 	0-4 points	
Collaborative Partnerships	 Community partners who are supporting service delivery are identified. Relationship with the County DSSs in the proposed region is discussed. Applicant discusses how they are contributing to community child maltreatment prevention efforts. A minimum of three required letters of support are included. (1 point per letter) MOAs for all County DSSs in the region are included. (Calculation; each county letter's point value is 9 divided by the number of counties in the region. Ex: 9 divided by 11 counties = .82 points, therefore deduct .82 for each missing letter.) Subtract (-1) point if the applicant exceeded 15 pages (not including logic model, implementation provide the second seco	0-14 points plan, MOAs and	
	letters of support).	Subtotal	
IV. Organizational Capacity		13 Maxim	um Points
	A brief description of the organization's history and structure is provided.	0–3 points	
	Organization's mission clearly relates to programming.	0–2 points	
	 Applicant demonstrates capacity to serve and reach the target population. 	0-4 points	
	Board Member Profile is complete.	0–1 point	
	Organizational Chart is included and provides evidence that there is a support structure in place.	0-1 points	
	Job Descriptions included for all IFPS staff positions	0-2 points	
	Subtract (-1) point if the applicant exceeded 2 pages (not including board profile, organizational descriptions) for this section.	chart, job	
		Subtotal	

V. Sustainability		7 Maximu	m Points
	 A three year plan for possible funding is clearly described, including a list of potential funding sources. 	0–5 points	
	Anticipated Revenue Summary Form is complete.	0–1 point	
	 Funding Chart is complete. 	0–1 point	
	Subtract (-1) point if the applicant exceeded 1page (not including worksheets) for this section.		
		Subtotal	
VII. Budget Narrative		9 Maxim	ım Points
	The amount listed in the budget matches the regional funding chart in Appendix D.	0–1 points	
	• The budget narrative provides justification for the projected expenses, is clearly articulated and is sufficient to support the goals and activities outlined in the application.	0–5 points	
	 The budget narrative includes supplemental documents, as needed (cost allocation plan, draft of Subcontractor(s) Agreement(s), lease agreement/mortgage documentation). 	0-3 points	
		Subtotal	
TOTAL POINTS AWARDED	Please add section subtotals and transfer this amount to the front page of the scoring sheet		

It is required to complete the following sections. Please bullet point areas of strength and concern.

Areas of Strength:	

Areas of Concern/ Questions Needing Clarification:			

Other Comments:

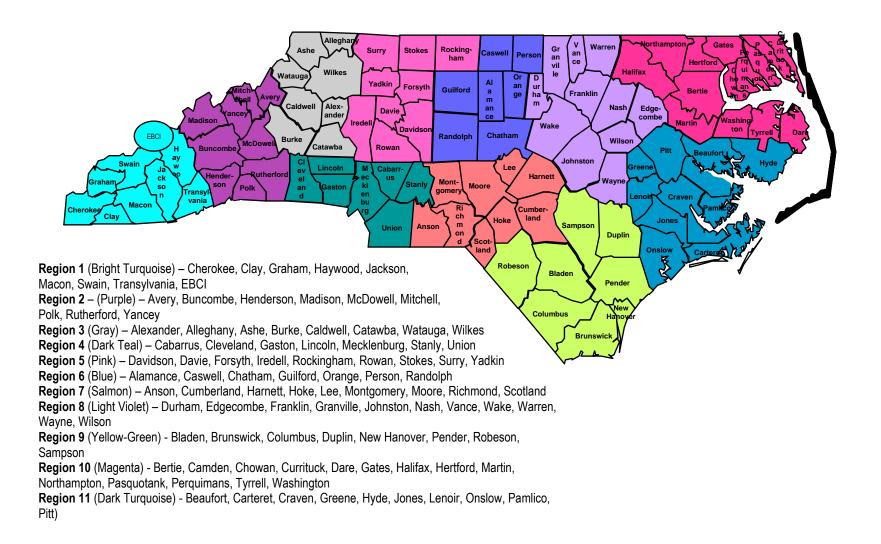
APPENDIX C North Carolina County IFPS Eligibility Data

The following are the average yearly numbers of children eligible for IFPS in SFY13, SFY14 & SFY15.

Region 1			Region 5			Region 9		
Cherokee	98.67	0.65%	Davidson	269.33	1.77%	Bladen	37.33	0.25%
Clay	27.67	0.18%	Davie	135.33	0.89%	Brunswick	159.33	1.05%
Graham	29.00	0.19%	Forsyth	175.33	1.15%	Columbus	149.67	0.99%
Haywood	271.00	1.78%	Iredell	511.00	3.36%	Duplin	58.67	0.39%
Jackson	126.67	0.83%	Rockingham	293.00	1.93%	New Hanover	412.67	2.72%
Macon	61.00	0.40%	Rowan	172.67	1.14%	Pender	46.00	0.30%
Swain	65.33	0.43%	Stokes	107.33	0.71%	Robeson	496.67	3.27%
Transylvania	69.67	0.46%	Surry	110.67	0.73%	Sampson	125.67	0.83%
Total	749.00	4.93%	Yadkin	66.67	0.44%	Total	1486.00	9.78%
			Total	1841.33	12.12%			
Region 2						Region 10		
Avery	20.67	0.14%	Region 6			Bertie	3.00	0.02%
Buncombe	517.67	3.41%	Alamance	160.00	1.05%	Camden	7.33	0.05%
Henderson	173.00	1.14%	Caswell	22.33	0.15%	Chowan	19.33	0.13%
Madison	82.33	0.54%	Chatham	94.33	0.62%	Currituck	60.00	0.39%
McDowell	142.33	0.94%	Guilford	337.00	2.22%	Dare	43.33	0.29%
Mitchell	32.67	0.22%	Orange	125.33	0.83%	Gates	4.00	0.03%
Polk	22.00	0.14%	Person	92.67	0.61%	Halifax	142.67	0.94%
Rutherford	296.67	1.95%	Randolph	143.33	0.94%	Hertford	2.67	0.02%
Yancey	38.33	0.25%	Total	975.00	6.42%	Martin	21.33	0.14%
Total	1325.67	8.73%				Northampton	12.33	0.08%
			Region 7			Pasquotank	80.67	0.53%
Region 3			Anson	40.67	0.27%	Perquimans	8.33	0.05%
Alexander	164.67	1.08%	Cumberland	531.33	3.50%	Tyrrell	3.00	0.02%
Alleghany	39.00	0.26%	Harnett	236.33	1.56%	Washington	11.67	0.08%
Ashe	87.33	0.57%	Hoke	37.67	0.25%	Total	419.67	2.76%
Burke	271.67	1.79%	Lee	82.00	0.54%			
Caldwell	335.67	2.21%	Montgomery	64.00	0.42%	Region 11		
Catawba	321.00	2.11%	Moore	106.67	0.70%	Beaufort	79.00	0.52%
Watauga	52.67	0.35%	Richmond	50.33	0.33%	Carteret	87.00	0.57%
Wilkes	187.67	1.24%	Scotland	104.33	0.69%	Craven	160.33	1.06%
Total	1459.67	9.61%	Total	1253.33	8.25%	Greene	20.67	0.14%
						Hyde	0.67	0.00%
Region 4			Region 8			Jones	13.67	0.09%
Cabarrus	184.67	1.22%	Durham	321.67	2.12%	Lenoir	125.00	0.82%
Cleveland	262.33	1.73%	Edgecombe	158.00	1.04%	Onslow	338.33	2.23%
Gaston	305.00	2.01%	Franklin	72.00	0.47%	Pamlico	25.33	0.17%
Lincoln	123.00	0.81%	Granville	72.67	0.48%	Pitt	241.67	1.59%
Mecklenburg	1120.33	7.38%	Johnston	226.33	1.49%	Total	1091.67	7.19%
Stanly	153.33	1.01%	Nash	133.67	0.88%			
Union	162.33	1.07%	Vance	134.33	0.88%			
Total	2311.00	15.21%	Wake	920.00	6.06%			
			Warren	21.00	0.14%			
			Wayne	130.67	0.86%			

Total

APPENDIX D SFY17/19 IFPS Regions



Region	Funding Allocation	Number of Families to be Served (\$6,300 per unit)
1	\$157,500	25
2	\$283,500	45
3	\$308,700	49
4	\$491,400	78
5	\$390,600	62
6	\$207,900	33
7	\$270,900	43
8	\$485,100	77
9	\$315,000	50
10	\$88,200	14
11	\$233,100	37
Totals	\$3,231,900	513

IFPS Funding Allocated for Each Region Per Year

APPENDIX E IFPS Program Logic Model *form*

<u>IFPS Shared Vision</u>: Consistent with family-centered practice, IFPS provides children with safe, nurturing environments that promote their physical, social and emotional well-being by promoting protective factors, addressing traumatic experiences and decreasing risk factors in families and communities.

INPUTS (Resources)	Activities/Services	OUTPUTS S Population Served	Short-term	OUTCOMES Intermediate	Long-term
		Families in which a child is at imminent risk of removal from the home.	 * In 90% of families, the children will not enter foster care by case closure. * 90% of families will demonstrate improved family functioning at case closure. * 90% of protective factors measured on families served will indicate some improvement at case closure. 	* In 80% of families, the children will not enter foster care by 6 months after case closure. * In 80% of families, the children will not experience repeat maltreatment by 6 months after case closure.	 * In 80% of families, the children will not enter foster care by 12 months after case closure. * In 80% of families, the children will not experience repeat maltreatment by 12 months after case closure.
ASSUMPTI	ONS	 Family improvement Family improvement Family improvement Child(ren) residing Child(ren) residing Case files (including NC Family Assession Protective Factors S 	nent Scale (NCFAS-G/T/WB)	r at case closure. //WB etrospective post-test. r at 6 months post-case closure. r at 12 months post-case closure.	

APPENDIX F REQUIRED DOCUMENTS & REFERENCE LINKS

On-Line Required Application Documents and Corresponding Instructions:

- Application Checklist
- <u>Direct Client Services Face Sheet</u>
- Implementation Plan Form
- IFPS Logic Model Form
- Board Member Profile
- <u>Anticipated Revenue Summary</u>
- Funding Chart Form
- Conflict of Interest Form
- <u>No Overdue Tax Form</u> (non-governmental agencies)
- <u>501(c)3 Status Form</u> (non-profit agencies)
- <u>Verification of Tax ID</u> (governmental agencies)
- IFPS MOA Form
- <u>Federal Certifications</u>
- <u>State Certification</u>

On-Line Contract Reference Materials (samples):

- IFPS Performance Status Reporting Tool
- <u>Administrative Cost Report DSS-1571 III</u>
- DSS-1571 Addendum for IFPS
- Notice of Certain Reporting and Audit Requirements
- <u>Child Abuse & Neglect Reporting & Responding</u>
- Monitoring Notification Letter

Other Helpful Links:

- The Department of Health and Human Services' Office of the Controller' website is http://www.dhhs.state.nc.us/control/index.htm
- U.S. Department of Health and Human Services, Administration for Children and Families, http://www.acf.hhs.gov/
- The Center for the Study of Social Policy (Strengthening Families Initiative) http://www.cssp.org/reform/strengthening-families
- Child Welfare Information Gateway http://www.childwelfare.gov/preventing/
- Prevent Child Abuse North Carolina http://www.preventchildabusenc.org/
- National Clearinghouse on Families and Youth (organization and community toolkit) <u>http://ncfy.acf.hhs.gov/publications/guide-to-starting-and-managing-a-youth-program/organization</u>
- Grant Writing <u>http://www.grantstation.com/</u>