# 2020 Home Visiting Service Account Expansion Funding Opportunity FAQs

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Letter of Intent (LOI)

**Question:** Was the Expansion LOI Bidder’s webinar recorded? Is it available to view?

**Answer:** Yes. It is available on the DCYF Home Visiting Home Page: https://www.dcyf.wa.gov/services/child-dev-support-providers/home-visiting

**Question:** Can applicants submit more than 1 letter of professional reference?

**Answer:** No.

Eligible Organizations

**Question:** Can the funding be utilized to develop a program or does a program need to be established before we are eligible for funding?

**Answer:** Home Visiting Programs are eligible to apply if they have been fully operational in the existing model for at least one year and intend to use these funds to increase the number of families receiving home visiting services.

**Question:** Is there a ramp up period once contracts are awarded or are organizations expected to begin service delivery immediately?

**Answer:** Yes, it is expected that the first 6 to 9 months will involve effort to build the program expansion, depending upon the program model. This ramp up period would include recruitment and hiring of staff, training of new staff, and recruiting and enrolling new families. If the applicant is not currently funded through the HVSA, it will also include establishment of a TA plan with the Ounce Hub and creating the data sharing and management tools required by the HVSA.

**Question:** Can Child Parent Psychotherapy (CPP) apply for the 2020 HVSA Expansion Funding Opportunity?

**Answer:** Yes, CPP is currently on the HVSA Model Eligibility list.

**Question:** What is DCYF definition of “model in good standing” vs “meeting model fidelity?”

**Answer:** These essentially are equivalent terms. “Meeting model fidelity” means your program is meeting expectations for service components, staffing, training, and other elements considered essential to the home visiting program model. “In good standing with the model” means the national office of your home visiting program considers your program to be meeting model fidelity. For more specifics on fidelity related to your program model and your program standing, please consult your program model lead at the Ounce Hub.
**Question:** What does “priority enrollment” mean?

**Answer:** Applicants are eligible to apply for funding if they serve children ages 0 through 4 years (prenatal up to a child’s fifth birthday); the HVSA prioritizes that enrollment into programs occurs families prenatally and with children to 3 years of age.

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**Budget**

**Question:** Do you have any additional guidance to budgeting? For example, a cost per home visiting slot in developing our budgets?

**Answer:** The HVSA does not have specific guidance for costs per home visiting slot, as these vary uniquely by host organization and program model. The general guidance is that these $500,000 funds should create an expansion of 60-75 slots. Remember, for the LOIQ, the budget is anticipated; if you are invited to submit a final application, more guidance will be provided to produce a detailed budget.

**Question:** May we include costs associated with increasing supervisory FTE if the expansion takes us beyond the one supervisor to eight nurse home visitors for NFP?

**Answer:** Applicant budgets should include all program, supervision, and administrative costs incurred to implement your proposed expansion. We recognize that with some expansions, this will create additional supervisory needs in a program; it is up to the applicant to determine the appropriate budget burden of supervision this expansion should bear and include that in the proposed funding request.

**Question:** We are an HVSA funded program that is currently receiving MIECHV and State General Funds (backfill); will there be “third” fund source added to our budget if we apply and become awarded these expansion dollars?

**Answer:** The likely answer is yes because these are funds from a different legislative proviso which we are required to track independently; however, the details of this are not available at this time.

**Question:** If we apply for maximum award funding, would we be considered for both our entire ask as well as a smaller expansion?

**Answer:** Yes, final budgets will be determined upon announcement of awards and based upon the funds available.
Anticipated Program Expansion Service Capacity (Caseload)

**Question:** The number of funded slots can change over time and enrollment numbers change frequently as families come in and go out. Would you suggest we approximate?

**Answer:** Yes; caseload guidance is best received from your program model and your numbers should align with model fidelity, your staffing plan, and your anticipated annual budget (e.g. it is recommended your proposed caseload align with the recommended caseload of your program model, and therefore your proposed staffing plan and budget). For the LOIQ, this is an anticipated number.

Service Area

**Question:** On page 11 of the Applicant Guidance for the LOIQ states “Selection of one of the 22 identified school locales, Pend Oreille County, or a federally recognized Tribe are sufficient evidence of community need.” Three of the 22 identified school locales are in our service area. Is it appropriate to propose serving two or three school locales?

**Answer:** Yes, an applicant may propose to serve one or a combination of school locales and be prepared to clearly indicate the number of families they intend to serve in each locale and explain how they are positioned to reach families in each locale.

Data & Reporting.

**Question:** You mentioned on the bidders’ conference that child maltreatment will be tracked by CPS. Can you provide more guidance on how to secure partnership agreements/data sharing agreements with CPS to track child maltreatment?

**Answer:** More guidance on data collection expectations will be provided to applicants invited to be finalists. DCYF contracts with the Department of Health to lead the data processing and reporting for the HVSA. They establish data sharing agreement with each home visiting contractor and then work with CPS to collect child maltreatment data on program participants for evaluation purposes only.