

2024 Fall HVSA SB6109 Funding Opportunity

Frequently Asked Questions

November 12, 2024

Application Problems1

Funding Opportunity:2

StartUp or Expansion?4

Applicant Eligibility.....4

Scope of Proposals: Service Areas, Locales, Caseloads4

Budget and Timeline.....6

Funding Sources7

SB6109 Program Specific – Referrals.....8

Implementation- Reporting, Training, Sustainability.....9

Application Problems

**** NEW Q: The FAQ and application guidance document both say application and budget template is due on November 14th, but the DCYF funding opportunities webpage says November 18th. Please confirm the correct date. (submitted 11/12)**

A: We are sorry for the error on the application. The deadline for the SB6109 application is November 18th.

****NEW Q: We have run into a problem entering text to respond to Section II Proposal Overview D. Terms of Funding: there is no space to enter text except for the last line of the table. (submitted 11/7)**

A: We apologize for this problem with the application. We recommend you enter the terms of funding in the Name of Funder column after the name. See Screenshot below:

Gan!

D. Home Visiting Program Funders

List ALL the current and anticipated funders of your home visiting program.

Name of Funder	Funding \$	Terms of Funding (dates)
ABC Foundation, March 2024 to February 2025	\$10,000	
	\$	
	\$	
	\$	

**** NEW Q: On the application, there is no space to respond to Section V Staffing, Section A Staffing Plan, Question 2: “Please tell us which of the staff described above will be independent contractors and not employees of your organization.” (submitted 11/12)**

A: Please use the space available in Question 1 to respond to Question 2, noting the question number as in the example below:

1. Describe how many staff will be newly hired and how many existing positions will have hours increased in the proposed expansion. (not scored)

#1: We will hire 1 new home visitor for this expansion
 #2: No staff are independent contractors

2. Please tell us which of the staff described above will be independent contractors and not employees of your organization. (not scored)

****NEW Q: We have run into a problem entering text to respond to a question in section V Staffing C. Staff Recruitment and Retention, Question 3 Strengths and weaknesses with staff retention (page 8): there is no space provided to enter text. (submitted 10/29)**

A: We apologize for this issue in the application. Please use the response box for Question D 1 below to respond to Question 3 – using the “Response to Question 3:” and continue your answer. We will alert reviewers to this issue. (see screenshot below):

2. Describe specific strategies you will use to recruit and hire staff for this new program: 10 points

- Who have relevant and required qualifications (education, experience, lived experience),
- Whose values align with your organizational culture,
- Who are reflective of the community you propose to serve and will be able to connect with the diverse needs, cultures and experiences of those families
- Who understand and can address the impacts of synthetic and substance abuse on parenting and the family functioning,
- Who have effective relationship-building skills and able to apply a strength-based approach with all families.

3. Please reflect on your organization’s strengths and weaknesses with staff retention in the last few years, including any recent history (1-2 years) of worker and supervisor turnover (if applicable), your understanding of the causes behind staff turnover, and your approach to retaining staff/preventing turnover for the proposal. 5 points

D. Staff Support and Supervision

1. Thinking about program supervision of home visitors and supervisors, particularly of practitioners serving families, home visitors and supervisors, how do you apply a implement Reflective Supervision* (RS) and what benefits arise from using RS? 5 points

Response to Question 3 above: Reflecting on our organization’s recent history with staff retention...a...b...c...

Response to Question D1: Our home visiting program currently implements Reflective Supervision.....a...b...c...

* Reflective supervision is a formal term used to describe the regular collaborative reflection between a home visitor and supervisor that builds on the home visitor’s use of her thoughts, feelings, actions, reactions and values evoked in the course of working closely with young children and their families. Please refer to the Guidance document for a more in-depth definition.

Funding Opportunity:

Q: We found errors in the Guidance on the tabulations of the Application Section point totals - Guidance Sections 6 and 7

Please note there were errors on the application and guidance as to the correct point totals for each section. The table below depicts the scores as indicated in the application and guidance and the accurate tally of the scores. There is no difference in the total points possible.

Application Component	Score Totals as in Application	Correct Score Totals
Organization Information	Not scored	Not scored
Startup Proposal Overview	Not scored	Not scored
Proposed Community/Population to be Served and Capacity to Reach	35	35 points
Advancing Equity and Reducing Disparities	30	30 points
Staffing	35	35 points
Home Visiting Service	15	20 points
Program Quality, Fidelity and Technical Assistance	35	15 points
Organization Infrastructure	15	15 points
Budget Proposal	Not scored	not scored
Supplemental Documents	Not scored	not scored
Total Points	165 points	150 points

Q: As referenced in the Guidance document, who is included in the estimated need for home visiting number?

A: Estimated need is derived from the [2020 Washington State Home Visiting Needs Assessment](#); additional documents may be found on the [DCYF Home Visiting Service Account webpage](#): <https://www.dcyf.wa.gov/services/child-dev-support-providers/home-visiting/hvsa> in the Home Visiting Assessment tab.

Q: Where can I access 2024 HVSA SB6109 materials?

Q: Where can the Oct. 11, 2024 Bidders’ Webinar PowerPoint slides be accessed?

A: Funding opportunity materials and webinar slides are available on the [DCYF Home Visiting Funding Opportunities webpage](#): <https://www.dcyf.wa.gov/services/child-dev-support-providers/home-visiting/funding-opportunities>.

Q: Where can I send questions after the webinar?

A: Email all questions about this funding opportunity to the DCYF Home Visiting inbox at: home.visiting@dcyf.wa.gov with the subject line, “2024 HVSA SB6109 Question”. To receive answers ahead of the application deadline, all questions must be submitted by 5 pm PT on November 7, 2024.

Q: When is the application and budget due back to DCYF?

A: The Letter of Intent – which must be submitted ahead of all applications – is due Oct. 25, 2024 by 12 pm PT. The Application Form, Budget & Required documents are due, November 14th, 12 pm PT.

****NEW Q: Can we include letters of support from community and referral partners along with the required supplemental documents? (submitted 10/30)**

A: No, DCYF is not asking for letters of support as part of the application, and these will not be forwarded to reviewers.

StartUp or Expansion?

Q: Would expansion of a program into an entirely new area (different county) be a startup or a general expansion?

A: An organization desiring to expand its current programming into a new geographic area is considered an expansion. Please note, the SB6109 Funding Opportunity is not intended to fund new startup programs; eligible applicants must be currently funded HVSA programs intending to expand their current home visiting model.

Q: Are you using "existing programs" synonymously with "existing models"? Or "existing programs" = existing caseloads?

A: Existing programs are those 45 LIAs currently funded through a DCYF/HVSA home visiting contract; existing models are only the 8 allowable models. It is expected that programs will be increasing the number of families served through this expansion.

Applicant Eligibility

Q: Will these funds also be available for ECEAP programs to apply for?

A: Only organizations currently funded through DCYF/HVSA home visiting may apply. ECEAP is not part of the HVSA funding cohort; an organization implementing HVSA home visiting and ECEAP may apply to expand their HVSA funded program.

Scope of Proposals: Service Areas, Locales, Caseloads

Q: How do you define a “family”?

A: Using the US HHS definition, a family is the parent, child, caregiver, and /or extended family member who is eligible and recruited for or participates in home visiting; the term is inclusive of all family and caregiver structure. DCYF/HVSA uses the family unit to define the number of slots of a program.

****NEW Q: Can SB6109 expansion funding be used to create a site in a county where we already have programming as long as we are expanding the number of slots in the county and not supplanting funding? (submitted 10/30)**

A; SB6109 funding may be used to support expansion of number of home visiting slots reaching the SB6109 service population, so long as families receiving services are child welfare referred, impacted by substance abuse, and residing in the service locales indicated for eligibility; service expansion may be in counties where home visiting programs currently exist or in new areas.

Q: Regarding the service locales - are you only going to be placing expansion slots under this funding source to those counties or are those just prioritized areas?

A: SB6109 expansion funds can only be used for families residing in the locales identified in the SB6109 Application and Guidance (see the table below); they may be served by programs intending to expand to serve families residing in these locales.

County	Locale
Adams	Benge
	Lind
	Washtucna
Asotin	Asotin-Anatone
	Clarkston
Clallam	Port Angeles
	Sequim
Cowlitz	Kelso
	Longview
Grays Harbor	Aberdeen
	Cosmopolis
	Hoquiam
	Ocosta
King	King South-East DCYF
	King South-West DCYF
	King West DCFS DCYF
	Martin Luther King Jr. DCYF
Lewis	Boistfort
	Centralia
	Morton
	Mossyrock
	Onalaska
	Pe Ell
	Toledo
White Pass	
Lincoln	Almira
	Creston
	Davenport
	Harrington
	Odessa
	Reardan-Edwall
	Ritzville
Wilbur	
Okanogan	Okanogan
	Omak

County	Locale
Pacific	Naselle-Grays River Valley
	North River
	Ocean Beach
	Raymond
	South Bend
Pend Oreille	Willapa Valley
	Cusick
	Newport
Pierce	Selkirk
	Parkland DCYF
	Lakewood DCYF
Skagit	Tacoma DCYF
	Sedro-Woolley
Snohomish	Smokey Point DCYF
Spokane	Spokane
	Spokane ICW DCYF
	Sprague
Stevens	Evergreen (Stevens)
	Loon Lake
	Mary Walker
	Summit Valley
	Valley
Thurston	Wellpinit
	Olympia/Tumwater DCYF
Wahkiakum	Wahkiakum
Whatcom	Meridian
	Mount Baker
	Nooksack Valley
	Bellingham DCYF
Yakima	Yakima
	Yakima DCYF

Q: Since this is a more complex caseload, are providers still expected to serve a full model caseload?

A: Yes, the DCYF standard caseload, by model, is the expected number of families to be served in this pilot.

Budget and Timeline

Q: Question about 12-month budget for rates exempt – is this something we would revisit during the rate setting process?

A: The budgets for the remaining 5 months of SFY25 (effective February 1, 2025) will be negotiated with successful applicants. Subsequent 12-month budgets will be negotiated depending on the rate status of the proposed model and the 12-month budget submitted in this application.

****NEW Q: Our understanding is that PAT programs are currently in "Rates Delayed" status. If a PAT program is awarded expansion slots, would it be subject to the proposed rates methodology (that is still being developed) during the initial funding period (February-June 2025)? (submitted 10/29)**

A: Programs in Rates-Delayed status will remain in reimbursement-based payment through the current fiscal year SFY25; the SB6109 expansion slots will transition into rates-based payment when the entire program transitions to rates.

****NEW Q: If a PAT program is awarded expansion slots AND is it the intention to apply the rates methodology to these expansion slots, would there be period of time in which the program would be fully funded (funded based on full enrollment of these slots regardless of actual enrollment), and if so, for what period of time would the expansion slots be fully funded? (submitted 10/29)**

A: See the response above. DCYF does not intend to apply the rates payment methodology to rates delayed programs during the current SFY25 fiscal year (through June 30, 2025), and this applies to any successful rates-delayed awardees of SB6109 09 slots. When rates delayed programs transition into rates payment method, the SB6109 slots will also transition to rates based; at that time, the SB6109 slots would be paid at 100% of the determined monthly rate, regardless of whether or not the slot is filled each month. There is no end date for this payment approach for SB6109 slots.

****NEW Q: If a PAT program is awarded expansion slots, would it be funded through the current payment methodology of cost reimbursement based on an approved budget - during the initial funding period (February-June 2025) or beyond? (submitted 10/29)**

A: Programs in Rates-Delayed status will remain in cost-reimbursement-based payment through the remainder of the current fiscal year SFY25 (June 30, 2025); the SB6109 slots will transition into rates-based payment when the entire program transitions to rates-based payment methodology. DCYF expects to transition rates-delayed programs into rates payment on July 1, 2025.

****NEW Q: Will there office hours for the budget? If so, when? (submitted 10/30)**

Based on little demand and competition for time with the All HVSA, DCYF will not offer an additional office hours to support budget preparation. Please use the instructions provided in the SB6109 Funding Opportunity Guidance Document and the Budget worksheet to complete the budget. This budget, while required for the application, is not scored; DCYF will work with successful applicants in creating the final budget to be integrated into the contract. If you have specific questions, please direct them to the HV Inbox with “*SB6109 Funding Opportunity Question*” in the subject line, and we will respond if received before November 8, 2024.

Q: For timeline, we're filling it out through Dec 2026. Does this mean that successful applicants will automatically be offered an extension after June 30, 2025?

A: Continuation of funding beyond June 30, 2025 will be dependent upon on available funds. Contingent on available funding and program performance, 6109 contracts initiated on February 1, 2025 will be amended for annual contracts in subsequent fiscal years.

Funding Sources

Q: Do you know if the funds used for this expansion opportunity are state or federal funds?

A: The funds supporting this expansion opportunity are State Funds, authorized through SSB6109 by the 2024 Legislature/Budget.

Q: If we currently receive MIECHV and State GEN funds, would the funds be added to the existing GEN funds budget?

A: No, this funding source is distinct from State GEN funds and will be treated separately; programs receiving funding from more than one source are expected to “braid” and not blend funds. Use of these funds must be financially tracked separately, and families served would be tracked with a different fund source designation (SB6109) to support data collection.

Q: If we currently have TANF funding, will this add on TANF funds or are these funds broader?

A: The funding source of this expansion opportunity is separate; while both are state funds, SB6109 and TANF are designated separately and must be treated financially as distinct fund sources. As noted above, programs receiving funding from more than one source are expected to “braid” and not blend funds. Use of these funds must be financially tracked separately, and families served would be tracked with a different fund source designation (SB6109) to support data collection.

Q: Will SB6109 grantees get priority for contract renewals in the future?

A: Funding for SB6109 families will be determined by SB6109 continued funding. Programs receiving contracts for SB6109 implementation will not be given priority for contracts using other fund sources.

SB6109 Program Specific – Referrals

Q: Is there a way to get information from DCYF on how many potential referrals are in an area? Because the smaller counties (like Lincoln, Pend Oreille etc.) you would want to know you get a whole caseload.

****NEW A:** The DCYF Prevention Dashboard houses some data related to child welfare referrals; this is located at <https://dcyf.wa.gov/practice/oiaa/reports/prevention-dashboard>:

- The CPS Referents tab is organized by referent type, but it can be used to see number of child referrals by county (using the selection box on the left). In 2023, Lincoln County had 226 intakes and Pend Oreille had 330. This answers the question, but it's tough to compare between counties in this format unless you go county by county.
- The CPS Screen-Ins tab is organized geographically, though not necessarily by county, and is helpful to display the relationship between population and screen-ins, though not referrals. The locales in the map are defined by the DSHS and represent school districts or groups of school districts that equal a population of at least 20,000. The locale that contains Lincoln county along with Adams and possibly a little bit of Grant had a rate of 40.01 screened-in intakes per 1,000 in 2022 – an average rate compared to the rest of the state; the locale that contains Pend Oreille and parts of Stevens has a rate of 65.90 per 1,000 – one of the highest in the state.

Q: Are all referrals initiated by CPS?

A: Families experience substance use who are referred by a child welfare office within one of the identified locales for this funding (starting on p. 3 of this FAQ) are eligible for 6109 funding.

Q: Can referrals be initiated by tribal family service interventions?

Q: Can Indian Child Welfare referrals qualify for 6109?

A: Families referred to home visiting by Indian Child Welfare Offices who are experiencing substance use are eligible for 6109 funding.

Q: If a teen whose family is involved in an open CPS case is pregnant, that teen could be referred, yes?

A: Yes, if a teen is part of a family involved in an open CPS case, that teen is eligible for 6109 funded home visiting, contingent on the child welfare referral.

Q: Is WIC referral considered a child welfare referral? or do you mean CPS referrals only?

A: WIC is not a qualifier for 6109 home visiting; families experience substance use who are referred by a child welfare office within one of the identified locales for this funding (starting on p. 3 of this FAQ) are eligible for 6109 funding.

Q: I would like more clarity on how the referral system will look. Is that something you will talk more about? Also is there a list of the "locales" that will be included?

Q: Can you please explain what the collaborating relationship is supposed to look like between the applicant and the referring agency/ies? What are the expectations around this relationship?

A: DCYF is in the midst of planning the referral process and expectations to implement this 6109 programming. It is expected that home visiting programs will establish and work to sustain relationships with the local child welfare offices specific to the locales proposed in their application (the list of eligible locales is presented in the guidance and beginning on p.3 of this FAQ). DCYF will seek program input from programs as this process is established, and we will facilitate and support relationship building as the program evolves.

Q: Section B. Question 2 in the application requests that we list up to 4 key internal or community partners for whom we expect to receive referrals into our program; however, we were under the impression that all referrals would come from local child welfare offices. Is that correct, or are we expected to have more than just child welfare offices provide referrals?

A: This is an excellent clarification on Section B Question 2. 6109 families must be referred by local child welfare offices within the identified locales (as proposed by applicants). Referrals may come from more than one child welfare office within a locale or group of locales. In Question 2, you should list those offices from which you expect to receive referrals, whether it be one, two or more offices.

Implementation- Reporting, Training, Sustainability

Q: Are we going to be held to the same deliverables and report outs? If so, has a conversation begun with Child Welfare to help us with supports in holding families? What can we be doing now to have conversations about this?

A: DCYF is in the midst of planning the implementation of this pilot project, and conversations are under way on building successful referral relationships between child welfare and home visiting programs. While current data collection expectations are not yet established, it is expected that programs will need to report on referrals, family engagement, and program practice specific to 6109. DCYF will engage programs as identified for 6109 contracts in more intentional conversations and support engagement with the local child welfare offices.

Q: When can we expect DCYF's trainings on SUDs to take place—will it be before or after the February start date for this award?

A: An RFP to contract for substance use disorder (SUD) trainings to support HVSA providers and 6109 implementation is currently under way, with training anticipated to start in spring in 2025. The Fall 2024 All HVSA meeting scheduled for this November is focused on SUD topics related to 6109 implementation, including an introductory training that spotlights high potency synthetic opioids and safety protocols for home visitors.

Q: Is there a sustainability plan for SB6109 funded sites?

A: Applicants should make organization-specific plans for sustainability. DCYF has included ongoing funds in its Decision Package proposal for the Governor’s Budget for the 2025 legislative session. Funding decisions beyond this first year will be determined in the legislative process in 2025.