



SFY 2010

REQUEST FOR APPLICATIONS (RFA)

**NEW JERSEY DEPARTMENT OF HEALTH AND
SENIOR SERVICES
DIVISION OF FAMILY HEALTH SERVICES**

**New Jersey Early Intervention System
Service Coordination**

I. General Information

A. Statement of Purpose

The New Jersey Department of Health and Senior Services (DHSS), Division of Family Health Services, Special Child Health and Early Intervention Services is announcing the availability of State Fiscal Year 2010 funds to support a statewide system of service coordination for infants and toddlers with developmental delays or disabilities and their families.

The New Jersey Early Intervention System (NJEIS) employs a dedicated service coordination model. In this model the service coordinator does not provide any additional early intervention services.

Funding will be available to support county or multi-county level service coordination units throughout the state. Funding will be available to public and private non-profit agencies that demonstrate the capacity to deliver the services in compliance with the standards identified within this Request for Applications (RFA).

This initiative will result in timely access to early intervention services and improved coordination of all services delivered to the eligible child and their family.

B. Background

The mission of the New Jersey Early Intervention System (NJEIS) is to enhance the capacity of families to meet the developmental and health-related needs of children birth to age three who have delays or disabilities by providing quality services and support to families and their children. Families from diverse racial, cultural and socio-economic backgrounds are involved in decision-making at every level of the design, implementation and evaluation of the Early Intervention System.

Each year, over 17,000 children are referred to early intervention and over 20,000 children and their families receive early intervention services.

When the lead agency for early intervention services was transferred from the New Jersey Department of Education to the New Jersey Department of Health, in 1993, the service coordination component of early intervention was added to the existing Special Child Health Services (SCHS) county based case management units. The SCHS case management units were established in 1984 and have been supported by state, federal and county resources. SCHS case management and early intervention service coordination units are administered by a variety of provider organizations, including local health departments, hospitals, not for profit agencies etc.

Over the past few years several SCHS county case management grantees have declined to continue delivery of early intervention service coordination activities.

As a county withdrew participation in the early intervention system, the NJEIS sought out other agencies to provide the service. In State Fiscal Year 2010, the NJEIS has again been informed that one or more counties may wish to discontinue providing early intervention service coordination. Therefore, the NJEIS has determined the best course of action is to issue a statewide competitive RFA.

In 2008, NJEIS also implemented a regional System Point of Entry (SPOE). This regionalized system is administered by the Regional Early Intervention Collaboratives and serves as the system point of entry for referral services, organizes initial evaluations and assessments, and serves as the service coordinator until eligibility is determined. Once a child has been determined eligible for early intervention services an ongoing service coordinator is assigned based on the child's county of residence.

C. Role of the Early Intervention Service Coordinator

The service coordinator is a practitioner that is assigned to serve as the primary point of contact with families to arrange and manage necessary service delivery for children and their families enrolled in the NJEIS. The major responsibilities include:

- Coordinating the performance of evaluations and assessments after initial eligibility is established;
- Collecting family information including concerns, priorities, resources and family cost participation;
- Facilitating and participating in the evaluation, periodic and annual review and development of Individualized Family Service Plans (IFSPs);
- Assisting families in identifying available service providers;
- Coordinating and tracking the delivery of available services on a regular basis;
- Informing families of advocacy services;
- Coordinating with medical and health providers and maintaining appropriate policies and procedures related to confidentiality and security of records;
- Facilitating the development of transition plans including changes in residence, moving to a new county or when exiting the early intervention system due to age; and
- Availability to provide services during reasonable off business hours.

A more detailed listing of the role and responsibilities of the early intervention service coordinator are delineated in N.J.A.C. 8:17-3.1 SERVICE COORDINATION, PROVIDER AGENCY, AND PRACTITIONER (Appendix 1).

II. Program Policies and Requirements

A. Applicant Eligibility

Eligible applicants must be a New Jersey based public or private non-profit health or education agency, county and/or municipal health department, hospital, a county welfare organization, social services organization, institute of higher education or a non-profit community based agency that can provide or contract for all identified services.

Agencies meeting the above stated applicant criteria but engaged in the delivery of another early intervention service may apply but must demonstrate how service coordination will be separately administered, supervised and managed to ensure no conflict of interest.

B. Community and Population

The applicant shall clearly define a geographic service delivery area and available community resources of not less than a county. Multi-county applications are also acceptable.

Appendix 2 contains the number of enrolled children in early intervention, by county, over the past two state fiscal years. This information should be considered when identifying numbers of children and families to be served and when calculating service coordination case load data.

C. Funding Information

A total of \$12,000,000 will be available annually to support service coordination activities. Funds are provided through a federal grant and State appropriation in SFY 2010 and will be awarded through a health service grant to the approved applicant.

The amount of the awards will vary based on targeted geographic area and population to be served. County units and grant awards fall into three ranges:

- \$ 75,000 - \$350,000 for small units serving <100 to 300 families;
- \$350,000 - \$640,000 for medium units serving >300 to < 500 families; and
- \$650,000 - \$1,500,000 for large units serving \geq 500 families.

Applicants can apply for one county unit or can combine counties when submitting an application. Only one service coordination unit will be awarded funding per county whether it is a single county application or multi-county application.

The project period will be April 1, 2010 through June 30, 2011.

Approximately 80 percent of support will be base funding to agencies to ensure adequate staffing and operational infrastructure. The remaining 20 percent of the funding will be provided based on timely performance of the following:

- Face to face Family Information Meetings;
- Face to face initial, six month and annual Individual Family Service Plans; and
- Face to face transition planning meetings

After the first grant year, applicants that successfully implement service coordination activities will be eligible for multi- year grant awards.

Funds **may** be used for:

- Personnel including but not limited to service coordinators, service coordinator associates, Unit supervisor, clerical and administrative support;
- Facility costs including rent and related costs prorated, as appropriate;
- Funds **may not** be used to support construction costs or facility purchases under this announcement;
- Purchase of equipment; (Computer equipment must meet NJEIS specifications and for budgeting purposes \$2000 per new employee should be allocated for computer equipment)
- Other equipment to support the unit operation should be specifically identified with adequate justification;
- Supplies (programmatic and operational);
- Consultant costs for audit, payroll, other etc.;
- Travel; and
- Other areas may be considered for funding support with adequate justification and demonstration of a direct relationship between the requested use of funds and meeting the goal and purpose of the grant.

There is no minimum matching funds requirement. However, the degree of agency commitment to the project, as evidenced by the contribution of organizational resources will be taken into consideration when awarding the funding.

The DHSS reserves the right to discontinue any service coordination grant funding for failure to meet program requirements and/or timelines.

III. Application Process

- A. The application shall be submitted by an authorized representative of an eligible applicant. Grant application forms and instructions can be found at www.nj.gov/health/grants/forms.shtml

Use the "Grant Application Package – General" including forms FS-40A, FS-40B and FS-40C. Use plain bond paper for the narrative section of the application.

The narrative section should not exceed 25 pages, which does not include any attachments or appendices. Use 1 inch margins, Times Roman 12 pt font, and line spacing should be 1.5. The narrative should address components as described below.

- B. The application shall consist of six (6) sections as follows:

1. Need statement – (maximum of 4 pages) Describe the population and geographic catchment area proposed to be served by the applicant. (Geographic catchment areas must be at least one county.) Identify projected numbers of families to be served monthly and annually in the following categories:
 - Family assessments
 - Individualized Family Service Plan (IFSP) development
 - Biannual and annual assessments and IFSP development
 - Ongoing contact with families
 - Transition

2. Applicant's Experience and Capacity:
 - Describe the agencies experience and capacity to provide:
 - services to the target population;
 - internal technical support for data collection, analysis and reporting;
 - fiscal management and ensure adequate cash flow;
 - Describe any related services provided by the agency that would enhance the delivery of service coordination to children and their families.
 - Describe the applicant's knowledge of and collaboration with related resources (community, medical, developmental disabilities) within the service area.
 - Describe the applicant's experience in recruitment, training and retention of qualified personnel.
 - Applicants previously awarded a grant for service coordination should describe their success in meeting or exceeding state targeted or compliance performance indicators.

3. Goals and Objectives: For each of the following areas, and in compliance with appropriate subchapters of N.J.A.C. 8:17 identify measurable goals, objectives, strategies and timelines for implementation.
 - Family assessment
 - Notification
 - Identification of surrogate parent
 - Individual Family Service Plan
 - Financial
 - Suspensions
 - Transition
 - Record maintenance and access
 - Confidentiality

4. Program Plan:
 - Describe current capacity to provide service coordination including available staffing and/or describe how the agency will recruit and maintain qualified personnel.
 - Describe how the agency will provide service coordination to the target populations within the identified catchment area.
 - Provide a flow chart of activities undertaken by the service coordinator

from the notification of a child's eligibility for early intervention until transition out of early intervention.

- Identify the number and type of personnel requested to carry out the identified responsibilities.
- Describe how the agency will supervise and monitor the provision of service coordination.
- Describe how the agency will provide internal training and technical assistance.
- Describe how the agency will assist in educating and guiding families in understanding the philosophy of New Jersey's Early Intervention System, the importance of communication with the early intervention team, their rights, procedural safeguards, Department guidelines and the process for accessing services through the early intervention system.
- Quality Assurance; i.e. productivity, self-assessment, practitioner performance reviews and family satisfaction levels.

5. Budget (use grant forms FS 40A, 40B and 40C as appropriate)

- a. Budget – Identify by line item the amount of funding requested to carry out service coordination activities. If applicable, the budget must include other resources that will be used to carry out the activities. The line item budget categories shall include:
- b. Personnel (salary and fringe)
- c. Consultants
- d. Equipment/supplies
- e. Travel
- f. Subcontracts
- g. Other

6. Budget Justification – The narrative must provide justification for each line item including how the expenditure of funding will increase the applicant's capacity to serve the targeted population and information.

C. Notice of Intent to Apply

Agencies interested in responding to this RFA **must** submit a letter of intent to:

Terry Harrison
Part C Coordinator, Early Intervention System
NJ Department of Health and Senior Services
PO Box 364
Trenton, NJ 08625-0364

If overnight or hand delivery send to

Terry Harrison
Part C Coordinator, Early Intervention System
NJ Department of Health and Senior Services
Capital Center, 6th Floor
50 East State Street
Trenton, NJ 08625-0364

The letter of intent must be received by May 7, 2009 and identify, at minimum, the county or multi-county catchment area the agency plans on serving if their application is successful.

D. Technical Assistance

Technical assistance to provide potential applicants an opportunity to ask any and all pertinent questions regarding this RFA will be held on Friday, May 1, 2009 at 20 West State Street, Trenton, NJ, training rooms 2nd floor. The **technical assistance session will begin at 9:30 AM and should end at approximately 12:30 PM.**

Attendance is not required but is highly recommended. Those planning to attend should **RSVP** by April 28, 2009 to Reda Khalifa at (609) 777-7734. If leaving a message, please include the name of person(s) attending (maximum of 2 persons), agency affiliation, mailing address, telephone number and e-mail address. In addition, please advise if special accommodations for someone with a physical disability will be required. Please note that no further scheduled technical assistance on the RFP will be provided after this meeting.

E. Submission of Application

Eligible agencies interested in applying for these funds must submit a signed, original application and three (3) copies. The application must be received by the Division of Family Health Services, Special Child Health and Early Intervention Services no later than **4:00 P.M. June 26, 2009. No extensions will be granted.**

Applications must be delivered by courier or via overnight mail to:

NJ Department of Health and Senior Services
Division of Family Health Services
Attention: Terry Harrison
Capital Center, 6th Floor
50 East State Street
Trenton, NJ 08625-0364
(609) 777-7734

F. Review of Time Line

- Technical Assistance Session – May 1, 2009
- Notice of Intent to Apply – May 7, 2009
- Grant application submission – June 26, 2009
- Review Process – July 1, 2009 – August 30, 2009
- Notice of Grant Approval – October 1, 2009

IV. Review Process

- Applications received by the deadline will be reviewed for compliance with RFA requirements by Division of Family Health Services staff.
- A review team comprised of internal and external professionals will assess and score the applications based on the identified criteria.
- Applications will be ranked based on the scoring by the review team and the strengths and weakness of the application as determined by the review team.
- Agencies receiving preliminary approval for funding will be invited to a meeting to negotiate any outstanding programmatic or fiscal issues.
- Agencies approved for funding will be awarded a DHSS Grant.
- Upon final approval and budget negotiation agreement, an agency will receive notification of grant award.
- The Attachment C of the DHSS Grant will detail the terms and conditions of the grant.
- The grant project period and budget period will be April 1, 2010 through June 30, 2011.

V. Review Criteria (Points)

Criteria	Points
Demonstrate adequate understanding of the role and need for service coordination and community resources available for families.	100
Applicant demonstrates an understanding of NJEIS and how the early intervention mission and philosophy should be embedded in the service coordination role and responsibilities.	100
Program plan is clear and reasonable to carry out service coordination activities in compliance with state and federal regulations and policies.	200
Specific activities proposed as part of the project are measurable and include a reasonable time frame for outcomes to be achieved.	250
Application includes reasonable (or realistic or expected) projected numbers of families to be served by the unit by type and frequency of activity.	200
The budget is appropriate and reasonable based on the proposed costs as they relate to the application.	100
The proposed project incorporates a budget narrative that is complete, comprehensive and provides an explanation for each budget line item.	100
Applicant demonstrates the experience and capacity to provide internal technical support for management information system for data collection, analysis and reporting	150
Applicant demonstrates experience and capacity to provide successful management and fiscal controls.	100
Applicant demonstrates the experience and capacity to design, manage and improve performance.	100
Applicant has the experience and capacity to carry out service coordination for the population and catchment area identified in the application.	100
Agency documentation of meeting benchmarks (for existing agencies)	100 extra

APPENDIX 1 – Early Intervention Regulation – Service Coordination

N.J.A.C. 8:17

8:17-3.1 Service coordination activities

(a) A service coordinator shall undertake the following activities:

1. Assisting an eligible child under Part C and his or her family to receive the services, rights, and procedural safeguards authorized under the NJEIS
2. Assuming responsibility for:
 - i. Coordinating all services delivered to the eligible child across agency lines; and
 - ii. Serving as a single point of contact in helping parents to obtain the services and assistance they need for each child referred and his or her family;
3. Engaging in an active ongoing process that involves:
 - i. Assisting parents of eligible children in gaining access to and coordinating the provision of early intervention services;
 - ii. Facilitating the delivery of timely services; and
 - iii. Continuously seeking the appropriate services and situations necessary to enhance the development of each child being served for the duration of the child's eligibility;
4. Coordinating the performance of evaluations and assessments;
5. Assisting families to understand and to collect information needed to complete the family cost participation documentation identified in N.J.A.C. 8:17-9.2;
6. Assisting families in identifying available provider agencies;
7. Informing families of the availability of advocacy services;
8. Providing to families information related to their child's needs, including information based upon the child's diagnosis or condition;
9. Coordinating with medical and health providers;
10. Informing families of the philosophy of the early intervention system, their rights, procedural safeguards, Department guidelines and the process for accessing services through the early intervention system;
11. Facilitating and participating in the development, review and evaluation of IFSPs;
12. Coordinating and monitoring the delivery of IFSP services; and
13. Facilitating the development of a plan of transition preschool services, as appropriate.