

**TABLE OF CONTENTS**

<b>Practice: Safety Plan Services</b>	<b>Practice: Family Safety, Risk, and Permanency Services</b>
<a href="#">3055</a>	<a href="#">Case Definitions</a>
<a href="#">FACS Help</a>	<a href="#">3055</a>
<a href="#">Referral Process</a>	<a href="#">FACS Help</a>
<a href="#">Contact Requirements</a>	<a href="#">Referral Process &amp; Eligibility</a>
<a href="#">Monthly Performance Summary</a>	<a href="#">Background</a>
<a href="#">Removals</a>	<a href="#">Case Plans</a>
<a href="#">Safety Plans</a>	<a href="#">Service Plans</a>
<a href="#">CINA Assessment</a>	<a href="#">Transportation</a>
<a href="#">15 Day Summary Reports/Contact Summary Logs</a>	<a href="#">Supervised Interactions</a>
	<a href="#">Case Progress Report</a>
	<a href="#">5 Business Day Contact</a>
	<a href="#">Monthly Contact</a>
	<a href="#">Monthly Performance Summary</a>
	<a href="#">Jurisdiction Issues</a>
	<a href="#">Case Termination/Summary/NOD</a>
	<a href="#">FTDM/YTDM Meetings</a>
	<a href="#">Other</a>

<b>Contract</b>
<a href="#">Billing &amp; Payment (Safety Plan Services)</a>
<a href="#">Billing &amp; Payment (FSRP Services)</a>
<a href="#">Subcontractors &amp; Model of Practice</a>

## **SAFETY PLAN SERVICES**

### **3055**

**Q1:** What happens if the 3055 is not sent to the Contractor within the identified 24-hour time frame?

**A1:** The Contractor shall deliver services and alert the local DHS office. This should be handled through collegial consultation. If there is no resolution, then the Contractor should alert their Service Contract Specialist that the 3055 has not been received. Once the Service Contract Specialist is informed, they will see that the Contractor receives the 3055. The Service Contract Specialist will work with DHS staff and supervisors to ensure that this does not occur. (7.1.15)

**Q2:** Does the 3055 need an original signature?

**A2:** No. Contractors do not need an original signature on the 3055. (7.1.15)

**Q3:** What if there is a 2<sup>nd</sup> authorization for Safety Plan Services, how will this look on the 3055?

**A3:** If there is a 2<sup>nd</sup> authorization, the DHS worker will check the option "reauthorization" on the 3055 since this is an extension of the existing service. The original start date will appear on the 3055; however, the authorization date will reflect the date that there was a change in service authorization (i.e. 2<sup>nd</sup> authorization). Safety Plan Services utilize the same Case ID if the 2<sup>nd</sup> authorization is approved and both units of service are paid under the same Case ID.

The 3055 is pulled from the VARP screen in the FACS system which eliminates duplication of entry by the DHS worker and ensures that services authorized are reflected in the VARP screen for billing accuracy. The VARP screen drives this process so by pulling this information from the VARP screen, it also assists in accuracy of performance measure payments.

For example: A case is referred on 8.1.15 for one unit (15 days). It is determined that a 2<sup>nd</sup> authorization is necessary, so a 2<sup>nd</sup> authorization is approved.

**Authorization date:** 8.16.15

**Effective date:** 8.1.15

**Final eligibility date:** 8.30.15

This reflects that the initial referral was made on 8.1.15 (which would end on 8.15.15) but a 2<sup>nd</sup> authorization was approved on 8.16.15 so the end date now becomes 8.30.15. (7.1.15)

### **FACS Help**

No questions currently under this topic.

### **Referral Process**

**Q1:** What happens if the handoff from the SW 3 to the SW 2 occurs before the end of the Safety Plan Services?

**A1:** If the child abuse assessment is completed and the handoff occurs with the ongoing social worker, Safety Plan Services may continue through the end of the service period (end date on 3055) or services may be terminated and FSRP Services initiated. (7.1.15)

**Q2:** Does the 2<sup>nd</sup> authorization of Safety Plan Services have to be consecutive with the end date or can there be a break?

**A2:** The 2<sup>nd</sup> unit of service will immediately follow the first unit of service. The FACS system only allows authorizations for 30 calendar days.

For example: The first authorization ends on August 15, 2015 so if referred for a 2<sup>nd</sup> authorization, the start date would be August 16, 2015 and the end date would be August 30, 2015. (7.1.15)

### **Contact Requirements**

**Q1:** The contract states that for Safety Plan Services, face-to-face contact will be daily with the alleged child victims and parents as identified in the Safety Plan and Referral Face Sheet. The frequency of contact with siblings and others involved in the case will be identified on the Referral Face Sheet. Does daily mean that DHS workers can direct a Contractor to make multiple contacts with a family on a daily basis?

**A1:** Daily contact means that the Contractor is required to make contact with the child/family identified in the Safety Plan and Referral Face Sheet one time per day, not multiple daily contacts.

If the DHS worker believes there should be more contact with the child/family, the DHS worker should consult with their supervisor and reassess the child/family situation. (7.1.15)

**Q2:** What is the contact requirement for a parent who becomes incarcerated during the course of Safety Plan Service delivery?

**A2:** The contract states there is to be daily face-to-face contact with the alleged child victim(s) and parent(s) as identified in the Safety Plan and Referral Face Sheet. If during the course of Safety Plan Service delivery, a parent residing in the home becomes incarcerated (jail or prison), efforts must continue in order to engage the parent in services.

In cases of incarcerated parents, there should be coordination with the jail or prison facility to determine if that facility allows for contact and identify the types of contact allowed. Although the parent is incarcerated, they are still a required contact and contact cannot be waived.

If a caretaker in the home is not a parent or step-parent to the children and becomes incarcerated, they are not a required contact to be seen. (Revised 9.4.15)

**Q3:** What happens if DHS provides an incorrect address for contact information for the Contractor to make contact with an identified member of the case during Safety Plan Service delivery?

**A3:** If the Contractor receives invalid contact information, DHS should not require the Contractor to meet with those identified members at any frequency until valid contact information is obtained. DHS and the Contractor should both make attempts at securing valid

contact information based upon interactions and contact with the family during service delivery. In the contact summary logs, the Contractor should document that the location is not valid and also document any attempts made to locate the identified members. (7.1.15)

### **Removals**

**Q1:** What happens if a case is opened for Safety Plan Services but a few days later it is determined that the child is unsafe and the child is removed from the home? Will Safety Plan Services continue or will Safety Plan Services end and refer to Family Safety, Risk, and Permanency Services? If FSRP Services are referred, does the child abuse assessment need to be completed before referring to FSRP Services?

**A1:** If the child is removed from their home during the Safety Plan Services period, the DHS child protective worker may, if they believe it necessary, either terminate the Safety Plan Services and initiate Family Safety, Risk, and Permanency Services; or continue the Safety Plan Services until the end of the 15 calendar day service period and then initiate Family Safety, Risk, and Permanency Services. With any out of home placement, the child abuse assessment summary does not have to be completed prior to referring to Family Safety, Risk, and Permanency Services.

A DHS child protective worker may refer a case for Family Safety, Risk, and Permanency Services but the child protective worker retains responsibility for the case until the child abuse assessment summary report is completed. An ongoing DHS child welfare case management worker cannot be assigned until the assessment report is completed. (7.1.15)

### **Safety Plans**

No questions currently under this topic.

### **CINA Assessments**

No questions currently under this topic.

### **15 Day Summary Reports and Contact Summary Logs**

No questions currently under this topic.

## **FAMILY SAFETY, RISK, AND PERMANENCY SERVICES**

### **Case Definition**

No questions currently under this topic.

### **3055**

**Q1:** What happens if the 3055 is not sent to the Contractor?

**A1:** The date of referral for FSRP Services is the effective date on the 3055. The 3055 can be faxed, emailed, or hand delivered to the Contractor on the date of the referral. A phone call or email to a contractor does not constitute a referral for FSRP Services. If there is no 3055, there is no referral.

If the Contractor receives emails and/or phone calls from DHS staff wanting to make referrals without a 3055, the Contractor should notify their Service Contract Specialist. If the subcontractor receives emails and/or phone calls from DHS staff wanting to make referrals without a 3055, the subcontractor should notify their lead Contractor, and the Contractor should then notify their Service Contract Specialist. (7.1.15)

**Q2:** Does the 3055 need an original signature?

**A2:** No. Contractors do not need an original signature on the 3055. (7.1.15)

**Q3:** What date should the end date reflect on the 3055?

**A3:** DHS workers are instructed to end the date of service generally on the last day of a month. However, there may be situations when the end date would not be the last day of the month. Cases may close anytime during the month. If the case is closed prior to the end date on the current 3055, a termination 3055 must be provided to the Contractor on or before the termination date. (7.1.15)

**Q4:** What happens if a 3055 expires on a weekend? How will this be handled so that there isn't a lapse in authorization dates?

**A4:** There is system in place that automatically sends an alert to the DHS worker 14 days in advance of the expiration of the 3055 as well as again 7 days before the expiration. The 7 day notification is also sent to the supervisor to prevent this from occurring. If there is a problem with the 3055s not being provided to the Contractor, this is a local issue and should be handled through collegial consultation. (7.1.15)

**Q5:** How will 3055 reauthorizations look to the Contractor?

**A5:** The Contractor will see the initial service start date listed in the effective date on reauthorizations with the service end date in the final eligibility date for any reauthorizations that occur on FSRP. So if a service is reauthorized that began on 10.1.14 the Contractor will see something similar to the following:

Authorization date: 8.23.15

Effective date: 10.1.14

Final eligibility date: 9.30.15

The effective date and final eligibility date are the two dates utilized for payment of all services as well as FSRP performance measures. (7.1.15)

### **FACS Help**

**Q2:** DHS opens a FACS case on the youngest child in a family and if there is a placement DHS opens a FACS case for maintenance on each specific child. Since a case is a family, is there a need to open up individual FACS cases for COSD (court ordered supervision)?

**A2:** Yes, an individual case should be set up for each child by opening a FCSD service by using the A510 code with the DHS Provider Number of 1000001. Instructions on how to complete this can be found in the following document:

<\\Hoovr3s1\fac\Desk aides and Tips from the Help desk\Non-payment service entry.doc>  
(7.1.15)

### **Referral Process and Eligibility**

**Q1:** Can we start Family Safety, Risk, and Permanency Services without a CINA or voluntary service application? How about when we have a placement but no order or application?

**A1:** Services could begin without a CINA in place if the case meets criteria for DHS Eligibility. However, a signed voluntary service application would be required.

FSRP Services are targeted to children and families with an open DHS child welfare service case following a child abuse assessment or a CINA assessment or juvenile court action. Cases referred to FSRP Services are based upon the following criteria:

1. Adjudication as a Child in Need of Assistance (CINA) by Juvenile Court; or
2. Placement in out-of-home care under the care and responsibility of the Agency (DHS);  
or
3. Need for Agency (DHS) funded child welfare interventions, based on one of these factors:
  - a. Any child in the family is a founded victim of child abuse or neglect; or
  - b. Any child in the family is a confirmed victim of child abuse or neglect, and the child's Agency (DHS) assessed risk level is high. (See RFP Section 1.1.2 – 7.1.15)

**Q2:** Does the family need to sign a release of information upon referral to the FSRP Services Contractor?

**A2:** No, unless the information is specific to Mental Health, Substance Abuse, or HIV/AIDS information.

Please refer to 441 IAC 9.10(7), which in part says: "You may share information concerning clients with service providers under contract to the Department when the Department does not provide the needed service directly. This policy does not authorize free exchange of confidential information between any Department employee and any employee of a contracted service provider. It allows for the exchange of pertinent information necessary to carry out the plan about a mutual client between the Department employee involved with the case and the foster parent or the social worker, psychiatrist, or other staff assigned to the case by the provider agency."

When the information needed by the provider is mental health information or substance abuse information, the specific consent is required. (7.1.15)

**Q3:** Under what grounds can DHS Supervisors authorize referral overrides to the Contractor?

**A3:** With DHS Supervisory approval, referral flexibility is permissible when a new referral was previously served by one of the contractors or one of their subcontractors, and either the family, DHS worker, or both feel it would be beneficial for services to continue with that contractor. If a family received FSRP Services from Contractor A when the case closed but

reopens within 12 months, the DHS worker may override the assignment to Contractor A if Contractor B should come up at the time of referral. (7.1.15)

**Q4:** Are youth over the age of 18 in foster care under a Voluntary Placement Agreement (VPA) eligible for FSRP Services?

**A4:** Iowa Code 234.1(2) defines “child” as follows:

“Child” means either a person less than eighteen years of age or a person eighteen or nineteen years of age who meets any of the following conditions:

- a. Is in full-time attendance at an accredited school pursuing a course of study leading to a high school diploma.
- b. Is attending an instructional program leading to a high school equivalency diploma.
- c. Has been identified by the director of special education of the area education agency as a child requiring special education as defined in section 256B.2, subsection 1.

A person over eighteen years of age who has received a high school diploma or a high school equivalency diploma is not a child within the definition in this subsection.

In the example above, the youth would be eligible for FSRP Services as long as they have not received a high school diploma or a high school equivalency diploma and meets the definition of child. (7.1.15)

**Q5:** Do Contractors need to have a signed release of information or complete a Request for Child Abuse information in order to receive a copy of the CPW Assessment Summary Report included in the transfer packet?

**A5:** No. However, if the Contractor is requesting any prior or subsequent founded CPS Assessment Summary Reports on the family, a completed Request for Child Abuse Information is required. (7.1.15)

**Q6:** What is the Contractor’s obligation when a child is placed out of state? What if the child resides out of state? What if the entire family moves out of state? When does ICPC become involved?

**A6:** If the identified child victim is placed or resides out of state, and there are no siblings and the parents remain in Iowa, then there would be no need to refer to FSRP Services. In this particular case, the DHS worker would initiate the ICPC referral process.

If the child moves and resides out of state during the course of service delivery, the FSRP Contractor is no longer required to make contact with this child.

If during FSRP Services, the identified child victim is placed out of state, but the parents and siblings remain in Iowa; the Contractor would continue to work with the siblings and parents but there would be ICPC for the child placed out of state. The DHS worker would coordinate through ICPC to ensure that the contact and services are provided to the identified child out of state.

If the entire family moves out of state, you would close FSRP services. However, if the DHS case remains open then the DHS worker would make an ICPC referral to the other state. (7.1.15)

**Q7:** If there is a current open FSRP case, and the identified child victim in that case gives birth to a child, does this now become a new FSRP case? Or does the minor's baby become part of the original case? If the baby becomes part of the original case, how does the father of the baby become part of the case? Would the father be considered the "out of home" parent for the new baby or what would his role be for contact?

**A7:** The decision to decide the number of cases will be determined at the local DHS level based on the complexity of the case and the permanency goals identified for the children involved. Confidentiality alone is no reason to separate or split cases; however, confidentiality in reporting must be observed and may require separate reports. If the father of the baby does become part of the original case, he is not entitled to information other than what is specific to the baby; therefore, separate reports may be completed or the information in the report must be redacted prior to submitting to the father of the baby. (7.1.15)

**Q8:** If a grandparent or other person becomes the legal guardian of a child during the provision of FSRP Services, are they considered the adult caretaker in the home? Are the birth parents considered "out of home" parents for the child when the legal guardianship has been transferred to another person?

**A8:** If guardianship was in place prior to the FSRP referral, the guardian would be considered the adult caretaker in the home and the birth parents would be considered the "out of home". If the child was removed and placed into kinship care, the home which the child was removed from prior to placement in foster/kinship care would be the home identifying who must be seen. (7.1.15)

### **Background**

No questions currently under this topic.

### **Case Plans**

**Q1:** When will the Family Case Plan be completed by DHS? When will Contractors receive a copy of the Family Case Plan?

**A1:** The Family Case Plan is to be completed within 60 days from the initial provision of services or a court order.

Please refer to Iowa Administrative Code (IAC) 441 Chapter 130.7(3)(2):

**130.7(3)(2)** The case plan shall be developed and filed in the case record as follows:

*a.* In child welfare cases, the case plan shall be developed in partnership with the child, the family, and the caregiver.

(2) A case plan that meets the requirements of Iowa Code section 232.2 shall be filed within 60 days from the date the child enters foster care or the date the department opens a child welfare service case, whichever occurs first. (7.1.15)

**Q2:** What if there is no Case Plan after 60 days?

**A2:** DHS workers are to have a Case Plan completed within 60 days from the initial provision of services or a court order. If a Case Plan has not been provided to the Contractor after 60 days, this should be addressed at the local level through collegial consultation to resolve this issue. (7.1.15)

### **Service Plans**

**Q1:** (Will) All new cases received will have 30 days to complete? All cases that we currently have, we will have 90 days to complete those – is that correct?

**A1:** Yes. Correct. Refer to 1.3.1.13.2 B of the Contract. (7.1.15)

**Q2:** If an In home parent and/or out of home parent is MIA or refuses to sign case progress report or service plans, is that a performance concern or a contractual concern?

**A2:** If the parent is not participating with services because their current location is unknown or if the parent refuses to sign, then document such within the case progress report or service plan. The Contractor is not required to have parental signatures as part of contract compliance or for performance measures. (7.1.15)

**Q3:** When invited to do so by the Department, we will contribute to the review of the new Treatment Plan template/process...an initial comment we would like to share for the Department's consideration: we hope we can align service plan due dates with monthly progress report due dates?

**A3:** The RFP/Contract states that Contractors shall complete the service plan within thirty (30) calendar days from the effective date of the 3055. Contractors shall update the service plan, at a minimum, every ninety (90) days following the date of the original service plan.

Due dates for case progress reports are calculated from the effective date of the 3055.

These two dates should already be aligned. If they are not, as long as the initial service plan is completed within 30 days and updated every 90 days, you may align with the monthly case progress report. (7.1.15)

**Q4:** We've been discussing service plans for families that will transition over July 1<sup>st</sup>. Our plan is to produce service plans according to their original effective date like we have been instructed to do with case progress reports. We want to make sure this is okay.

**A4:** Yes, this is ok. See response to Q3. (7.1.15)

**Q5:** Can Contractor Care Coordinators and Supervisors use electronic signatures for the service plan? Are family signatures required at time of submission to the DHS worker?

**A5:** Electronic signatures for the Care Coordinator and Supervisor are sufficient for providing the service plan to DHS within the timeframes outlined in the contract. A parent signature is not necessary at submission of the plan to DHS; however, a parent signature is required on the service plan in the Contractor case file. All signatures will be verified by the assigned Service Contract Specialist during quarterly onsite reviews. (7.10.15)

### **Transportation**

**Q1:** Do FSRP Contractors transport youth to placements such as foster care or residential treatment?

**A1:** The primary responsibility for placement of children is with the DHS worker, not Contractors. Safety Plan/FSRP Service Contractors do have the ability to provide transportation assistance when necessary, but should not be making any placement of a child. (7.1.15)

### **Supervised Family Interactions**

No questions currently under this topic.

### **Case Progress Reports**

**Q1:** A copy of the Case Progress Report is to be provided to the parents unless the parental rights are terminated. What if the parents are divorced? Are Contractors obligated to send the reports to the absent parent? What if the custodial parent is requesting that the reports NOT be sent to the non-custodial parent because it is causing problems? What if there is a No Contact Order between the parents?

**A1:** A copy of the Case Progress Report should be provided to the parents unless their rights have been terminated or if there is a Court order stating that the report should be withheld from the absent parent. (7.1.15)

**Q2:** How are Case Progress Reports shared with parents who have TPR on some children, but not on all children? For instance, two children have been terminated on but there are two children that remain at home in the custody of the parents. This is still treated as one FSRP case, but the parents are not entitled to the information on the children that have been terminated on. The Case Progress Reports contain information on all four children.

**A2:** One option is to complete separate Case Progress Reports on the two groups of children. The other option is to redact information that the parents are not entitled to. (7.1.15)

**Q3:** What can Contractors tell court appointed special advocates (CASA) who call for information or request copies of reports? What about Foster Care Review Boards (FCRB)?

**A3:** The Contractor shall provide to the local Iowa Child Advocacy Board (ICAB) Office copies of the reports upon receipt of a request and the court order appointing CASA.

In reference to Foster Care Review Boards, Iowa Code Chapter 237.21(2) states the following:

**“Information and records relating to a child receiving foster care and to the child's family shall be provided to a local board or the state board by the department or child-care agency receiving purchase-of-service funds from the department upon request by either board. A court having jurisdiction of a child receiving foster care shall release the information and records the court deems necessary to determine the needs of the child, if the information and records are not obtainable elsewhere, to a local board or the state board upon request by either board. If confidential information and records are distributed to individual members in advance of a meeting of the state board or a local board, the information and records shall be clearly**

identified as confidential and the members shall take appropriate steps to prevent unauthorized disclosure.”

Therefore, per Iowa Code the Contractor shall provide a copy of the report to the FCRB. (7.1.15)

**Q4:** Current cases we have now in the Eastern area will keep their original effective date for reporting purposes. Is that correct? For example, we received a case on 6/16/2013; will we keep this on our monthly report as this date or change everything over on our new report to 7/1/15 and then have to track internally for reports?

**A4:** Cases that transitioned from the old contract under the new contract will keep the original effective date for reporting purposes. Refer to “Note:” in Section 1.3.1.13.2 C of the Contract. (7.1.15)

**Q5:** Can Contractor Care Coordinators and Supervisors use electronic signatures for the case progress report? Are family signatures required at time of submission to the DHS worker?

**A5:** Electronic signatures for the Care Coordinator and Supervisor are sufficient for providing the case progress report to DHS within the timeframes outlined in the contract. A parent signature is not necessary at submission of the report to DHS; however, a parent signature is required on the case progress report in the Contractor case file. All signatures will be verified by the assigned Service Contract Specialist during quarterly onsite reviews. (10.19.15)

### **5 Business Day Contacts**

**Q1:** Can the DHS worker waive the requirement of seeing a child that is in PMIC or Group Care (out of home placement) within the first five (5) business days of referral?

**A1:** A child placed in PMIC or Group Care is not required to be seen within the first five (5) business days, but is required to be seen in the first month of service. DHS cannot waive contractual obligations. (7.1.15)

**Q2:** If a child and siblings reside with both parents, but then one parent moves out taking the identified child victim with them, who becomes the primary contacts during the first five (5) business days?

**A2:** Any child(ren) identified by the DHS worker at referral as abuse victims and/or subjects of a court order based on CINA proceedings who reside in the home or in foster family care, kinship or suitable other care, or shelter care placements as well as the parents and any caretaking adults in the home must be seen within five (5) business days of the referral.

The parent who moved out of the home and took the identified child victim with them would become the parent required to be seen in the first five (5) business days.

The parent who the child no longer resides with would become the parent out of the home and any siblings residing with that parent who are not subjects of a court order would not be required to be seen within the first five (5) business days. Contact would be at least once in the first month of service. (7.1.15)

**Q3:** If a youth whose parental rights have been terminated is placed in a shelter awaiting a foster care placement, do FSRP Contractors have to meet with shelter staff as “caretaking

adults”? Or is the requirement that FSRP meet with the child in shelter and once placed in a foster home, begin meeting with the foster parents?

**A3:** In this particular scenario, only the youth must be seen in the first five (5) business days. Once the child is placed in a foster home, then the foster parents must be seen as per definition of “in the home” when termination of parental rights has occurred. (7.1.15)

**Q4:** In FSRP Services, Contractors must see certain contacts within five (5) business days of the referral so when does the count for this begin?

**A4:** The first business day begins the day after the referral. For example, if a referral is made on 7.6.15, day one begins on 7.7.15 so the Contractor must make all required contacts on or before 7.13.15. (7.1.15)

### **Monthly Contact**

**Q1:** If a child is placed in PMIC or Group Care during the first month of service, how often do we as a Contractor continue to see them because they are now in one of these placements?

**A1:** Once the child enters into one of these placements, the Contractor would be required to see the child at least once within the first month of service and at least once a month thereafter. (7.1.15)

**Q2:** Is the Contractor required to facilitate the interaction between a child and their family members if the child is placed out of state?

**A2:** The Family Team Decision-Making (FTDM) meetings and Family Case Plan will determine the frequency and forum for parent child interaction. If face-to-face interactions cannot occur based on the Case Plan or FTDM meetings, then other forms of contact should be explored. (7.1.15)

**Q3:** When can DHS notify a Contractor that they are no longer required to meet with an uncooperative parent during FSRP service delivery?

**A3:** Contractually, there is no identification of a specific number of attempts to be made in order to engage and work with the parents. If the parents are uncooperative, the Contractor can stop seeing the parents and this would fall into the 15% margin of compliance requirements. If the parent is not residing in the home the frequency and method of contact will be determined by the Court, the Department worker and/or the results of Family Team Decision-Making (FTDM) meetings based on the needs and complexity of the case as assessed by the Department worker and Contractor staff. The method of contact could include phone, written or electronic correspondence, or face-to-face. Otherwise, it is the responsibility of the Contractor to engage the family.

If a parent is uncooperative while working with the Contractor, the Contractor should notify the DHS worker immediately.

Iowa Code 441-130.5(2) *Termination*. A particular service may be terminated when the department determines that:

- a. The specific need to attain the goals and objectives to which the service was directed has been achieved, or

- b. After repeated assessment, it is evident that the family or individual is unable to achieve or maintain the goals set forth in the individual client service plan, or
- c. After repeated efforts, it is evident that the family or individual is unwilling to accept further service. (7.1.15)

**Q4:** If the address of the NCP or the parent not residing in the home is unknown, can DHS ask the FSRP Contractor to make attempts to locate them?

**A4:** If the address of the NCP or the parent not residing in the home is unknown at the time of the FSRP referral, then DHS should not require the Contractor to meet with them at any frequency until valid contact information is obtained. DHS and the Contractor should both be making attempts to locate the NCP or the parent not residing in the home based upon interactions and contact with the family during service delivery. The FSRP Referral Face Sheet does ask if contact for parents not residing in the home is expected but the address/phone information is unknown, DHS is to identify the Contractor's responsibilities. In this section, DHS may request that the Contractor make attempts to locate the NCP or the parent not residing in the home, but that contact is not required until located. The Contractor should not be the only one attempting to locate the NCP or parent not residing in the home.

In the Case Progress Report, the Contractor should document that the location is unknown and also document any attempts made to locate the NCP or the parent not residing in the home. (7.1.15)

**Q5:** If the parent not residing in the home or the NCP's whereabouts becomes unknown during service delivery, are Contractors still required to attempt contact?

**A5:** If the Contractor's expectations are to meet with the NCP or the parent not residing in the home they are required to do so with valid contact information. However, if during service delivery, their whereabouts become unknown, the Contractor should notify the referring DHS worker. If the DHS worker does not have an updated address for the Contractor to make contact, then the DHS worker should document the change in who must be seen in an electronic communication. Since the whereabouts are unknown at this time, DHS should not require the Contractor to meet with them until valid contact information is obtained.

DHS and the Contractor should both make attempts to locate the NCP or the parent not residing in the home based upon interactions and contact with the family during service delivery. The Contractor should not be the only one attempting to locate the NCP or parent not residing in the home.

In the Case Progress Report, the Contractor should document that the whereabouts are no longer known and also document continued efforts to locate. (7.1.15)

**Q6:** What is the contact requirement for a parent who becomes incarcerated?

**A6:** If a parent residing in the home becomes incarcerated (jail or prison), efforts must continue in order to engage the parent in services. Contractors are required to make face-to-face contact with the family and with all children in the case that reside in Iowa. Contacts may occur in alternative settings based on the needs and circumstances of the case.

In cases of incarcerated parents, there should be coordination with the jail or prison facility to determine if that facility allows for contact and identify the types of contact allowed. Although the parent is incarcerated, they are still a required contact and contact cannot be waived. If contact is not made, this would fall into the 15% margin of compliance requirements. There may be situations where the length of incarceration would change the parent from an in home parent to a parent not residing in the home. These will be reviewed case by case with the referring worker to determine frequency of contact.

If a caretaker in the home is not a parent or step-parent to the children and becomes incarcerated, they are not a required contact to be seen. (Revised 9.4.15)

**Q7:** If a child resides with one parent at the time of the FSRP referral, but during the course of service delivery moves in with the other parent, which parent becomes the parent in the home? Which parent becomes the parent not residing in the home?

**A7:** If a child resides with one parent and then moves to reside with the other parent, the parent who the child currently resides with becomes the parent in the home. The parent from where the child had previously resided becomes the parent not residing in the home. The frequency of contact for the parent not residing in the home will be determined by the Court, the Agency worker and/or results of the Family Team Decision-Making meetings based on the needs and complexity of the case.

There should be electronic documentation in the Contractor case file showing the change of residence from one parent to the other. In the Case Progress Report, the Contractor should document the change in child's residence as well. (7.1.15)

### **Monthly Performance Summary (Submitted to Service Contract Specialists)**

**Q1:** How does the Contractor document on the Monthly Report contact with the NCP or parent not residing in the home when the address is unknown? If during service delivery, the parent not residing in the home or the NCP's whereabouts becomes unknown, how does the Contractor document on this report?

**A1:** For both of these situations, the Contractor will document "NA" in the respective column. (7.1.15)

**Q2:** How does the Contractor document the 2<sup>nd</sup> orange column of the Monthly Report regarding face-to-face contact with identified family members residing in the home within first month of service when frequency of contact is not specified at time of referral?

**A2:** The Contractor is required to make face-to-face contact within five (5) business days with parents, any caretaking adults, and any children identified as abuse victims. The Contractor will mark either a "Y" or "N" in the 1<sup>st</sup> orange column. If frequency of contact is not specified for the first month of service after the first five (5) business days, the Contractor will mark "NA" in the 2<sup>nd</sup> orange column. (7.1.15)

**Q3:** How does the Contractor document on the Monthly Report contact with birth parents of children with the permanency goal of APPLA?

**A3:** The Contractor is required to make contact with birth parents of children with the permanency goal of APPLA as determined by Court, the Agency Worker, and/or the results of Family Team Decision-Making meetings. The Contractor will mark either a "Y" or "N" in the 2<sup>nd</sup>

blue column. If frequency of contact is not specified, the Contractor will mark “NA” in the 2<sup>nd</sup> blue column. (7.1.15)

**Q4:** How does the Contractor document on the Monthly Report contact with parent(s) not residing in the home if the requested contact is more than the minimum required once every calendar month?

**A4:** The Contractor will mark in the 2<sup>nd</sup> blue column a “Y” if the Contractor was required to have face-to-face contact and the Contractor met with the parent(s) at least once during that calendar month. The Contractor will mark an “N” in the 2<sup>nd</sup> blue column if required contact was face-to-face but the Contractor did not meet face-to-face at any time with the parent(s) not residing in the home. If frequency of contact is not specified, the Contractor will mark “NA” in the 2<sup>nd</sup> blue column. If the contact requirement is by phone, written, or electronic correspondence, the Contractor will mark “NA” in the 2<sup>nd</sup> blue column. (7.1.15)

**Q5:** If the FSRP Contractor Care Coordinator shows up for a scheduled family team decision-making (FTDM) meeting but the meeting is not held because a key member does not show up; how do we document this on the monthly report? Do we document “Y” because we showed up or “NA” because the meeting did not occur?

**A5:** If a key member of the family team did not show up for the meeting, then the family team decision-making meeting does NOT occur. The FSRP Care Coordinator would document “NA” in the report section because there was no actual FTDM. The contract states that Care Coordinators will attend/participate in FTDM meetings. This is a contract requirement with no tracking or financial incentive tied to the number of FTDM meetings attended.

If the FTDM meeting did not occur but the FSRP Care Coordinator met with family members during this time, they would document this in the Contacts Report section of the Case Progress Report or contact summary log if during Safety Plan Services. (7.1.15)

**Q6:** How do Contractors track FTDM meetings that are requested directly before or after a removal on the monthly report?

**A6:** The Contractor will mark “NA” in columns I and J and a “Y” or “N” in column K to reflect whether or not the FTDM meeting was facilitated before or directly following the date of removal. The instructions on the monthly report were recently revised to include this direction. (7.10.15)

### **Jurisdiction Issues**

No questions currently under this topic.

### **Case Termination – Summary - Notice of Decisions (NOD)**

**Q1:** What code or manual reference should be documented on the Notice of Decision (NOD) at the close of FSRP Services?

**A1:** The code reference is IAC 441 – 130.5(2) **a, b, or c** depending on the reason for case closure.

441-130.5(2) *Termination*. A particular service may be terminated when the department determines that:

- a. The specific need to attain the goals and objectives to which the service was directed has been achieved, or
- b. After repeated assessment, it is evident that the family or individual is unable to achieve or maintain the goals set forth in the individual client service plan, or
- c. After repeated efforts, it is evident that the family or individual is unwilling to accept further service. (7.1.15)

### **Family Team/Youth Transition Decision-Making (FTDM/YTDM) Meetings**

**Q1:** When a DHS staff sends a referral for FTDM but then responds and says that the dates we offered for the FTDM – but then the DHS worker states they are unavailable for the dates requested. What do we do? We are a little concerned about the timeline and missing the 7 day window.

**A1:** DHS is a key member in the family team decision-making process and is required to be in attendance. If the referring worker is not able to be in attendance, they may ask to have another DHS worker participate in the FTDM meeting. If this is not possible, the FTDM meeting should be rescheduled. As a Contractor, document the reason for missing the identified timeline. This is a reporting requirement for the Monthly Report. If the FTDM meeting is not held within seven (7) business days, this would be reported as an “N” on the Monthly Report since the requirement was not met. This information will be tracked and considered as we move forward. (7.1.15)

**Q2:** We were having a discussion with a DHS supervisor regarding ongoing FTDM referrals after the initial FTDM had happened and for if a case changed permanency, removal and any other needs for a FTDM. The DHS person is stating that the referrals after the first initial referral will be coming from FSRP and not generated from DHS and that it will be our responsibility to track and refer these?

**A2:** All FTDM/YTDM meetings will be initiated by the Agency worker through completion of the FTDM/YTDM Meeting Referral, form #470-5150, and submitted to the Contractor through electronic communication. (7.1.15)

**Q3:** I am looking at Question 63 and 66 (of RFP Questions/Answers). Am I reading this correctly for FTDM/YTDM facilitators, that those in the facilitator position are not required to have the same educational or experience as a FSRP or Safety Plan Service worker? For example, we are interviewing a candidate now who does not have an approval number, nor do they meet the FSRP educational or experience qualifications. So, if I understand this correctly, I can hire this person for a facilitator to get approval number.

**A3:** FTDM and YTDM meeting facilitators are not required to meet the staff qualifications as outlined for the Care Coordinators. In order to be approved as a FTDM and/or YTDM meeting facilitator, there is a different set of requirements for them to be approved as such. Refer to Comm. 439 which can be accessed at the following:

<http://servicetraining.hs.iastate.edu/mod/folder/view.php?id=3483> (7.1.15)

**Q4:** What is the mechanism that is in place that the state will monitor the 2 day initiating planning with a family after the referral is received?

**A4:** See section 1.3.1.13.3 B (o) of the Contract. (7.1.15)

**Q5:** FTDM question: has there been a process put into place for when a DHS worker request an additional FTDM (more than the one per quarter). I know that there has to be a SAM approval, however, if there is no indication that it was approved to have an additional one in the quarter (does that make sense?) or will this be a Service Area Protocol that will need to be discussed with the SAMs?

**A5:** The Service Area will develop their process for obtaining the SAM approval. Once the SAM approves the additional FTDM meeting, a referral will be made. The approval should be noted in the referral. (7.1.15)

**Q6:** It states that we send in the compiled satisfaction surveys to the referring worker within two weeks from the meeting, is that calendar or business days?

**A6:** The requirement is fourteen (14) calendar days. The results of the satisfaction survey are to be submitted, not the actual satisfaction surveys. The satisfaction surveys are maintained with the Contractor. (Revised 9.4.15)

**Q7:** FTDM question: that we are to facilitate meeting “before or directly following the date of the removal” – is that business day or calendar day? If a DHS worker does not send referral prior to removal, the day of the removal, nor the date following removal, is it correct to assume we will have the 7 business days to hold the meeting from referral date?

**A7:** On cases where there is a removal or anticipated removal, the DHS worker will request a FTDM meeting through electronic communication. It is the Contractor’s responsibility to facilitate this meeting. The seven (7) day timeframe is not applicable on cases of removal or anticipated removal. The DHS worker will then follow up with the FTDM/YTDM Meeting Referral, form #470-5150 in a follow up electronic communication. (7.1.15)

**Q8:** FTDM question: Can a referral be made outside of the junctures of the life of a case that are not outlined in the contract?

**A8:** Yes. When requested by DHS. DHS requests exceeding one (1) request per quarter will be approved by the SAM or designee. Refer to Section 1.3.1.10 of the Contract. (7.1.15)

**Q9:** Is there a date when next fiscal year’s trainings are planned to be released and posted on the website?

**A9:** The FY 16 Training Plan is forthcoming. There is no specific date identified at this time. (7.1.15)

**Q10:** For FTDM’s, we expect that we will sometimes receive an electronic communication from DHS that modifies the time an FTDM is expected to be completed. Is that correct?

**A10:** All FTDM/YTDM meetings will be initiated by the Agency worker through completion of the FTDM/YTDM Meeting Referral, form #470-5150, and submitted to the Contractor through electronic communication except on cases where there is a removal or anticipated removal. At this time, the DHS worker will request a FTDM meeting through electronic communication and then follow up with the referral form. (Revised 7.10.15)

**Q11:** Also regarding FTDM’s, can the court order a meeting?

**A11:** If the Court orders a FTDM or YTDM meeting, you must adhere to such order. The FTDM meeting referral process will remain the same. If this meeting exceeds the one request per

quarter, the referral worker will obtain approval from the SAM indicating the presence of a court order. (7.1.15)

**Q12:** Re FTDMs, there are events in the life of a case for which FTDMs are mandated (removal, change of supervision, change of placement, permanency decision, etc.)...will we in all cases receive a “referral” from DHS before a meeting will be scheduled?

**A12:** All FTDM/YTDM meetings will be initiated by the Agency worker through completion of the FTDM/YTDM Meeting Referral, form #470-5150, and submitted to the Contractor through electronic communication except on cases where there is a removal or anticipated removal. At this time, the DHS worker will request a FTDM meeting through electronic communication and then follow up with the referral form. (7.1.15)

**Q13:** Regarding email notification of initial contact on a case within two business days...families with multiple family members or with members in multiple household may have their initial contact occur on the same day at separate times, or on different days...how many emails are required?

**A13:** Initial contact on a case is when the first contact is made with the identified family members. (7.1.15)

**Q14:** RE: FTDMs - if a FTDM occurs under a circumstance of removal, placement/level change, perm decisions etc.....can we also have a per quarter request? Example: we want to make a referral on all of our cases at 10 days to have the FTDM at or about the 20th day. Can we have that one as well as one during one of the other situations, all in the same quarter?

**A14:** Yes. You may make a referral for one additional FTDM meeting per quarter with SAM approval. (7.1.15)

**Q15:** The contract allows for an electronic communication to the Contractor on FTDM meetings that occur before or directly following the date of removal. When does the actual referral form need to be sent?

**A15:** The FTDM/YTDM Meeting Referral, form #470-5150, should be provided to the Contractor as soon as DHS has the necessary information to complete the form. (7.10.15)

**Q16:** There are many open service cases pending adoption that do not have an active FSRP worker. If DHS wants to refer the case for a FTDM meeting, does the meeting referral go to the FSRP Contractor previously assigned to the case?

**A16:** On cases where there is an open DHS service case, but no open FSRP; there is an assignment screen in FACS (FYML) which assigns Contractors to FTDM and YTDM meeting facilitation referrals. This tracking system assigns on an every other referral basis unless there is only one Contractor. Referral flexibility is permissible if the family was previously served by one of the FSRP Services Contractors and the family and DHS worker both feel it would be beneficial for them to facilitate the FTDM or YTDM meeting. If a referral is assigned out of alternating order, to provide continuity of services or reconnect a referral to a previous Contractor, the stem is designed to recognize this assignment and will equalize future referrals. (7.10.15)

**Q17:** Under Section 1.3.1.10, where it states that “Agency requests exceeding one (1) request per case per quarter will be approved by the SAM or designee”. How is “quarter” defined?

**A17:** Quarter is defined per state fiscal quarter (July to September, October to December, January to March, and April to June) regardless when the case is referred. (9.4.15)

**Q18:** Under Section 1.3.1.10, please clarify what is meant by “Within 30 days of the Youth’s 17<sup>th</sup> birthday”.

**A18:** Within 30 days of the youth’s 17<sup>th</sup> birthday means that the YTDM meeting can be held 30 days prior to the youth turning 17 or 30 days after the youth turns 17. (9.4.15)

**Q19:** What if a YTDM meeting referral is received outside of the two junctures of life of the case as specified in the contract? Do we report these on the monthly report?

**A19:** The contract requires that Contractors facilitate YTDM meetings “within 30 days of the youth’s 17<sup>th</sup> birthday and within 90 days prior to the youth’s 18<sup>th</sup> birthday.” If a YTDM meeting is facilitated outside of these two junctures, it is outside the scope of contract requirements and should not be reported in the monthly report. A YTDM meeting shall be facilitated and reported on for the two junctures outlined in the current contract.

Transition planning or youth centered meetings should occur with the youth throughout the life of their case; however, facilitated YTDM meetings are required during the junctures stated above. (9.4.15)

**Q20:** On occasion, we receive two separate referrals at one time for a FTDM meeting on one family due to a No Contact Order or because the parents are no longer together. How is this reported on the monthly report?

**A20:** If a situation arises where a family requires two FTDM meetings, you will only report on the first facilitated meeting on the monthly report. You are required to complete the process and reporting requirements for both meetings, but will only report out on the first one.

The Department is gathering information as we continue to identify the best way to incorporate FTDM and YTDM meetings facilitation within these contracts. (9.4.15)

**Q21:** What method of contact is required to obtain background information from the referring worker for FTDM or YTDM meeting facilitation? Can this be by phone, email, or is it required to be in-person?

**A21:** The method of contact to gather background information from the referring worker may occur through electronic communication, by phone, or in-person. This is dependent upon the expectation of the referring worker. (10.19.15)

**Q22:** What method of contact is required to do initial planning with the family for FTDM or YTDM meetings? Can this be by phone, email, or is it required to be in-person?

**A22:** Please refer to the FTDM/YTDM Meeting Standards, specifically Standard 2. It’s preferable that the facilitator begin the preparation process through face-to-face meeting when feasible or appropriate but at a minimum through phone calls. The preparation is a time to build a trusting relationship and is separate from the facilitation component of the FTDM process. (10.19.15)

**Q23:** If a case is referred for a FTDM or YTDM meeting and the family cannot be located, how long does the Contractor search for the family?

**A23:** If the family cannot be located, the FSRP Care Coordinator should notify the referring DHS worker and ask for additional contact information. If the required reporting timeframes have passed (i.e. initiated contact with family in two (2) business days, facilitated meeting in seven (7) business days, submitted notes in five (5) business days, and submitted satisfaction survey results within two weeks of the meeting), the Contractor should notify DHS and report out on the monthly report, completing Contractor responsibility for reporting. (10.19.15)

**Q24:** Can Contractor FTDM/YTDM supervisors provide facilitation of FTDM and YTDM meetings during the course of service delivery? Can they provide coaching to potential facilitators?

**A24:** As long as the FTDM/YTDM supervisor is an active approved facilitator for FTDM or YTDM meetings and complies with the standards, the supervisor can facilitate a meeting. In order for a FTDM/YTDM supervisor to coach potential facilitators, the supervisor MUST be an approved coach. (10.19.15)

**Q25:** If a YTDM meeting referral is made to a Contractor on an older youth, does this count as the FTDM meeting for the family for the quarter or can we also make a referral for a FTDM meeting on the same family?

**A25:** FTDM meetings and YTDM meetings are counted separately. If a youth receives a YTDM meeting, the family may also receive a FTDM meeting. A focus of the YTDM meeting is to develop the youth's plan addressing the five (5) fostering connections areas whereas the FTDM meeting is to develop a family plan addressing the five (5) family functioning domains. (10.19.15)

### **Other**

**Q1:** Are there any rules or contract provisions relating to Contractors smoking while transporting children and/or supervising interactions?

**A1:** The following excerpt is from the current Safety Plan and FSRP Services Contract:

**2.14.1 Certification of Compliance with Pro-Children Act of 1994.** The Contractor must comply with Public Law 103-227, Part C Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act). This Act requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the Deliverables are funded by federal programs either directly or through State or local governments. Federal programs include grants, cooperative agreements, loans or loan guarantees, and contracts. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children's services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable federal funds is Medicare or Medicaid; or facilities (other than clinics) where Women, Infants, and Children (WIC) coupons are redeemed.

The Contractor further agrees that the above language will be included in any subawards that contain provisions for children's services and that all subgrantees shall certify compliance accordingly. Failure to comply with the provisions of this law may result in the imposition of a civil monetary penalty of up to \$1000 per day.

The Iowa Legislature enacted a Smoke Free Air Act effective July 1, 2008. **DHS highly discourages any smoking around a child (ren) during transport and supervised interactions.** (7.1.15)

**Q2:** Is there any time that a FSRP Contractor would be considered a caretaker relative to potential allegations of child abuse? What about during transportation? What about during supervised family interactions?

**A2:** While this is not normally the case, the service provider (just like a DHS social worker) could be in a position of caretaker when they assume “supervisory” responsibilities of a child. *For example:*

If the Contractor is in the home providing services or supervising interactions and the parents are there with the child, then the Contractor is **not** a caretaker.

If the Contractor transports a child, they are not just providing “transportation” (and should not be compared to ‘bus drivers’) but are also providing “supervision”.

“Person responsible for the care of a child” (also referred to as “caretaker”) means:

- ◆ A parent, guardian, or foster parent.
- ◆ A relative or any other person with whom the child resides and who assumes care or supervision of the child, without reference to the length of time or continuity of such residence.
- ◆ An employee or agent of any public or private facility providing care for a child, including an institution, hospital, health care facility, group home, mental health center, residential treatment center, shelter care facility, detention center, or child care facility.
- ◆ **Any person providing care for a child, but with whom the child does not reside, without reference to the duration of the care.** A person who assumes responsibility for the care or supervision of the child may assume such responsibility through verbal or written agreement, or implicitly, through the willing assumption of the caretaking role. (Iowa Code Section 232.68 (7)) (7.1.15)

**Q3:** The SP/FSRP Contract states that Contractors are required to conduct criminal, child and dependent adult abuse, and sex offender record checks in the state of Iowa on staff who will have contact with children and families served under this contract prior to their delivery of services as well as periodically, at a minimum annually through employment. Contractors will also periodically, at a minimum annually, check the HHS-OIG websites for exclusions for employees and subcontractors involved with this contract. How does the Department define “annually” for the record checks and exclusions websites?

**A3:** The annual requirement is defined as at least one time in a twelve (12) month period.

Example: If checks were completed in October 2014, further checks must be completed prior to November 2015 in order to be in compliance with these requirements. These checks cannot be more than 12 months apart year to year. (7.1.15)

## CONTRACT

### **Billing & Payment/Safety Plan Services**

**Q1:** In reference to Safety Plan Services, “Children do not suffer maltreatment during provision of Safety Plan Services” (Measure Two), is a Contractor ineligible for payment if there is an “accepted report” at Intake of child abuse while Safety Plan Services are open?

**A1:** The eligibility for payment of this measure is that children will be safe from abuse during the provision of services. A Contractor would be eligible for payment if there were no confirmed or founded abuse reports during the provision of services.

If there is an “accepted report” of child abuse while Safety Plan Services are open, the decision of eligibility cannot be made until the determination at the completion of the assessment report. (7.1.15)

### **Billing & Payment/Family Safety, Risk, and Permanency Services**

**Q1:** Is a Contractor eligible for incentive payments on cases where the youth is over 18 but on a Voluntary Placement Agreement and received FSRP Services?

**A1:** No. A Contractor is not eligible for incentive payments on cases where the youth is over 18 and on a Voluntary Placement Agreement while they received FSRP Services. The reason that these cases are not eligible is that they do not meet the measure definition.

A Contractor would be paid the base rate for the youth but they do not meet the measure definition. Once a child turns 18 years of age, they are no longer considered a child for the definition of child abuse (Measure 1); therefore, would not be able to be measured to determine if there are any confirmed or founded reports. Since the youth signed a voluntarily placement agreement, they cannot be "removed" from the home (Measure 2); therefore at the time of case closure, they would not be able to be measured on this area. (7.1.15)

**Q2:** What is the daily rate for FSRP Services? What is the daily and monthly graduated payment rate reduction of 70%?

**A2:** Effective July 1, 2015, the base rate for FSRP Services is as follows:

Daily Rate     \$23.60

Monthly Rate   \$708.00

The graduated monthly payment rate will be reduced to 70% which is as follows:

Daily Rate     \$16.52

Monthly Rate   \$495.60     (7.1.15)

### **Sub-Contractors and Model of Practice**

**Q1:** What is the procedure for getting approval to obtain subcontractors and what is the time frame for that?

**A1:** The Contractor is required to notify DHS in writing prior to implementing a subcontract by submitting the Subcontractor Disclosure Form to their Service Contract Specialist. The Service

Contract Specialist will acknowledge receipt of the Subcontractor Disclosure Form. If DHS objects, the Contractor will be notified within fourteen (14) days. The Contractor may request that DHS expedite their decision on whether they wish to object. To the extent possible, DHS will honor these requests.

**Note:** There is no objection to the use of current SP/FSRP Contractors to be considered as subcontractors for one another. (7.1.15)

**Q2:** Do subcontractors have to follow the Model of Practice of the Contractor?

**A2:** The Contractor remains responsible for all services performed under this Contract. All restrictions, obligations, and responsibilities of the Contractor under this Contract shall also apply to the subcontractors and the Contractor shall include in all of its subcontracts a clause that so states. The Contractor is responsible for determining if any variation to the Model of Practice by the subcontractor would be in compliance with this requirement. (7.1.15)

**Q3:** There are significant differences between the insurance requirements for FTDM/YTDM meeting facilitators under the new contract. Those providing facilitation through the end of June 2015 were not required to carry high levels of insurance as outlined in the SP/FSRP Services contract. Is it ok for FTDM/YTDM meeting facilitators who are subcontracting under a SP/FSRP Services Contractor to operate under the previous insurance requirements?

**A3:** Since all SP/FSRP Services Contractors are required to carry insurance for these contracts, it is permissible that the subcontractors providing only FTDM/YTDM meeting facilitate operate under the previous insurance requirements. (7.10.15)