

INDIVIDUAL PLACEMENT AND SUPPORT

Request for Funding 2021-004 Informational Webinar

May 13, 2021

Kelsi Linville, Division of Mental Health and Addiction

Theresa Koleszar, Bureau of Rehabilitation Services

INFORMATION

- ▶ It is anticipated there will be \$350,000 available for equitable distribution to up to four Community Mental Health Centers (CMHCs) who are interested in becoming ‘Early Adopters’ of IPS.
 - ▶ Mental Health Block Grant funds
- ▶ The agreement shall be for a period of 17 months with anticipated start date of **October 1, 2021**, and terminating on **February 28, 2023**, and may be renewed through reapplication and new proposal, based upon available funding.

DATE	ACTION
May 11, 2021	RFF released
May 13, 2021	Webinar - RFF overview
May 21, 2021	RFF questions due
May 28, 2021	State written response to questions will be posted
June 14, 2021	RFF proposals due
July 9, 2021	Award letters sent
October 1, 2021	Contract effective date

INFORMATION

- ▶ Any questions regarding this RFF must be submitted in electronic format to:
kelsi.linville@fssa.in.gov
- ▶ Please keep questions brief and of high priority.
- ▶ Please utilize the following subject heading for emails regarding questions:

Questions: RFF 2021-004 Individual Placement and Support

- ▶ Responses to all questions will be posted at <https://www.in.gov/fssa/dmha/funding-information/>

**Questions Due May 21, 2021
4:30 p.m. Eastern Time**

SUBMISSION (ELECTRONIC) MUST INCLUDE:

- ▶ Cover Letter
 - ▶ Written proposal
 - ▶ Completion of the *IPS Application Checklist*
 - ▶ Completion of the *Budget Summary*
 - ▶ Completion of the *Respondent Information*
 - ▶ Agency organizational chart showing the location of employment services within the agency and listing each staff who will be involved with IPS
 - ▶ Required letters of support, or written assurance, as applicable
- ▶ Respondents interested in providing these services to FSSA/Division of Mental Health and Addiction should submit an electronic proposal to:

Kelsi Linville
Family and Social Services Administration
Division of Mental Health and Addiction Adult Services
Email Address: kelsi.linville@fssa.in.gov

Proposal Due June 14, 2021
4:30 p.m. Eastern Time

TARGET POPULATION/ELIGIBLE APPLICANTS

TARGET POPULATION:

- ▶ Individuals with mental health diagnoses who are served by a Community Mental Health Center and who are eligible for Indiana Vocational Rehabilitation services

RFF APPLICANT ELIGIBILITY

1. Community mental health centers (CMHCs), licensed by DMHA, and
2. CMHC is an approved VR services provider for the provision of employment services OR provide written assurance that CMHC will register to become a VR provider of employment services within 45 days after notice of award.

SCOPE OF WORK

- ▶ VISION: How to shift from a medical model of treatment to a recovery model that includes employment as an integral part of wellness
- ▶ Facilitate the employment of individuals with mental health conditions through the implementation of Individual Placement and Support (IPS)
- ▶ The fastest and most efficient way to help people with serious mental illness get and keep jobs is by using the Evidence Based Practice of Individual Placement and Support
 - ▶ 25 randomized controlled trials showed a significant advantage for IPS, with a mean of 56% achieving competitive employment vs 23% for those in the cohort without IPS
 - ▶ Medicaid expenditures are reduced by 20-40% for those that work, per various studies

Indiana Data Division of Mental Health and Addiction

7/1/2018 - 6/30/2019 (Data compiled from CMHC reports)			
Total Number of Adults Served	Employed - Competitively Employed Full or Part Time (includes Supported Employment)	Not employed	Not Available
80,578	20,688	58,747	1,143
	26%	73%	1%

Indiana Data Vocational Rehabilitation

- ▶ The percentage of individuals with mental illness, over a five -year period of time (2020 is partial year), who were closed out of VR services
 - ▶ rehabilitated/obtained employment = **24.14%**
 - ▶ other than rehabilitated = **75.86%**
- ▶ Of those individuals who were rehabilitated/obtained employment, breakout of weekly hours worked:

Full Time 35+ Hours	Part Time 21-34 Hours	Part Time 16-20 Hours	Part Time 11-15 Hours	Part Time 6-10 Hours	Part Time 1-5 Hours
19%	28%	30%	14%	5%	4%

RFF FOCUS ON EARLY ADOPTERS OF IPS

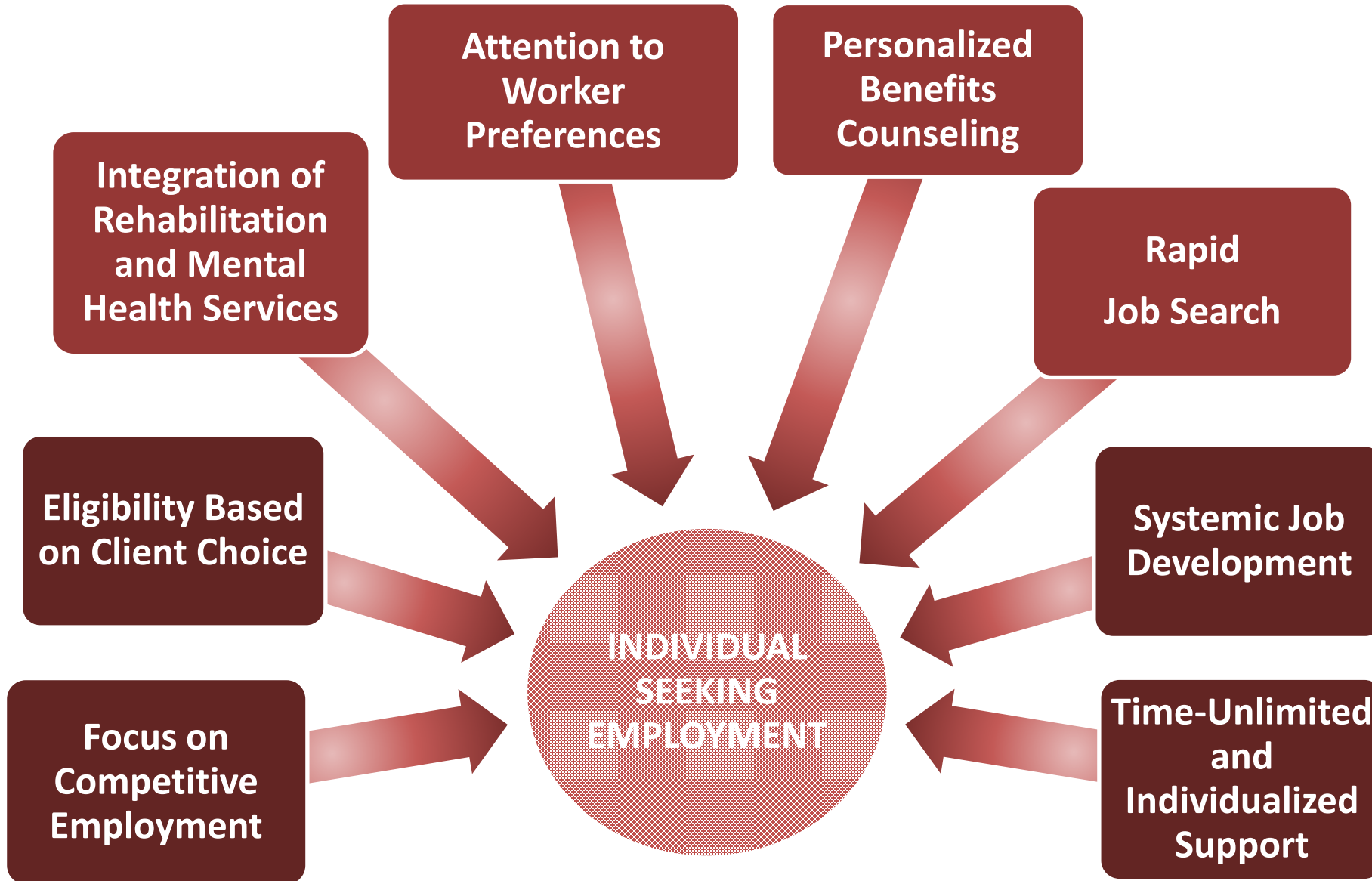
- ▶ The Division of Mental Health and Addiction and Vocational Rehabilitation have been working jointly since 2019 to improve competitive employment outcomes for individuals with mental health diagnoses. DMHA and VR are working on increasing competitive employment because employment leads to better health, and unemployment leads to poor health and social disconnection.
- ▶ Long term goal is to establish employment programs (IPS) statewide
- ▶ Beginning with CMHCs who are committed to be 'early adopters'
 - ▶ Will assist CMHCs in the implementation of IPS

RFF FOCUS ON EARLY ADOPTERS OF IPS

Employment Is A Health Intervention

- ▶ DMHA and VR are working collaboratively with and across agencies and departments to create policies and funding methods to support IPS. **CMHCs who are interested in becoming early adopters of IPS are eligible to respond to this RFF.**
- ▶ Indiana is eligible to receive subject matter expert hours through the U.S. Department of Labor to plan for and implement IPS.
- ▶ The early adopters of IPS will assist the state in determining the long-term braiding and sequencing of various sources of funding to support persons with mental health diagnoses to obtain and maintain competitive, integrated employment.
- ▶ In addition to block grant funds and a specialized VR funding structure, the early adopters will receive technical assistance and training with the support of the federally funded subject matter experts assigned to Indiana.
- ▶ The technical assistance and training will involve CMHC leadership, clinical and employment personnel, and persons with lived experience to work together to implement the eight principles of IPS, leading to systemic change in how mental health services are provided.

IPS BASED UPON EIGHT PRINCIPLES

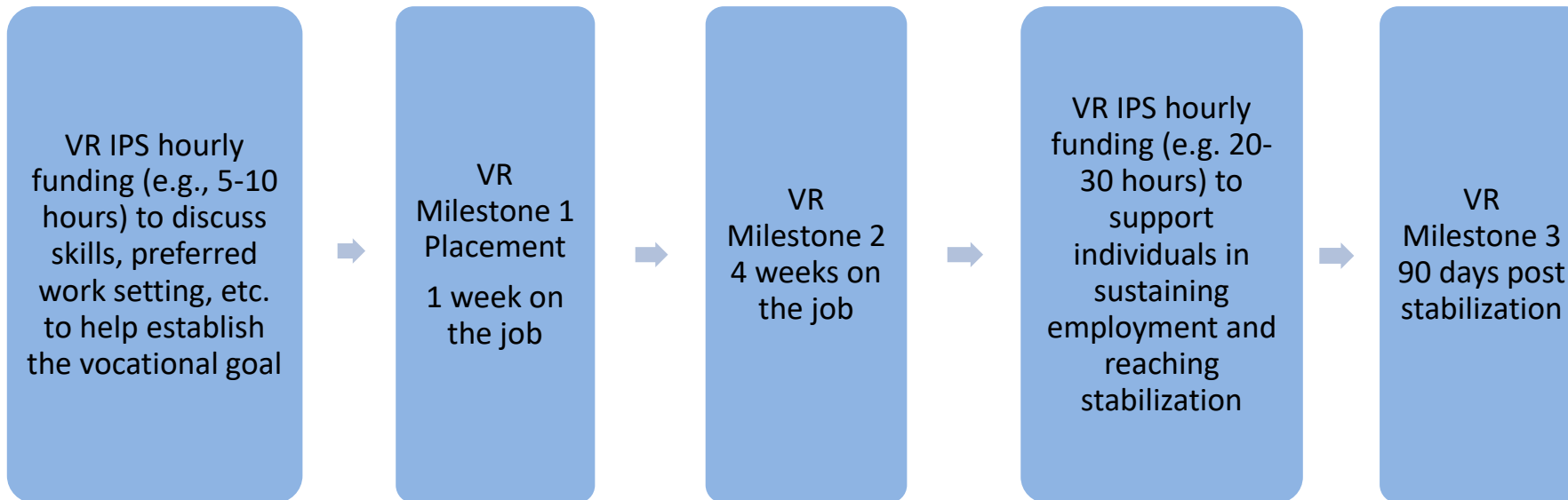


EARLY ADOPTERS: VR FUNDING

- ▶ VR will fund employment services with a combination of milestone payments and hourly IPS service funding.
 - ▶ Milestone rates are outlined in the [VR Employment Services Manual](#).
- ▶ Hourly VR IPS funding will be paid at the same rate as Medicaid Rehabilitation Option (MRO) “skills training”.
- ▶ While early adopter CMHCs will provide feedback to define this unique VR IPS hourly service more specifically, it is expected that this service will be used to support VR eligible individuals with mental health conditions in developing a career profile and obtaining supported employment services (for those with the most significant disabilities) or short-term on-the-job supports.
- ▶ Additionally, VR IPS hourly services may be utilized to support extended services for youth with the most significant disabilities. The VR IPS hourly service may be used to support employment related activities for individuals not eligible for MRO funding.

EARLY ADOPTERS: VR FUNDING

- ▶ For individuals who are eligible for MRO or other funding sources, VR IPS hourly service funding may support employment services that are not billable under those other funding options.
- ▶ Basic VR funding structure for IPS early adopter CMHCs:



INITIAL TECHNICAL ASSISTANCE AND TRAINING

- ▶ Each CMHC will engage in the following technical assistance and training (provided by federally funded subject matter experts) **during the first 6 to 8 months**
 - ▶ Two-day training/Technical Assistance (within 30 days)
 - ▶ Day 1: Half day kick-off, meeting with leadership, IPS for mental health teams, joining a vocational unit meeting
 - ▶ Day 2: One-day job development training
 - ▶ Two-day training/TA (Virtual) (within 30-60 days)
 - ▶ Day 1: Engaging people in the employment process, developing the career profile, disclosure and job supports.
 - ▶ Day 2: Fidelity Overview
 - ▶ One-day training/TA (Virtual) (within 30-60 days)
 - ▶ Day 1: IPS Supervisor's training and documentation for IPS.
 - ▶ Two-day baseline fidelity review (6-8 months after site kickoff)

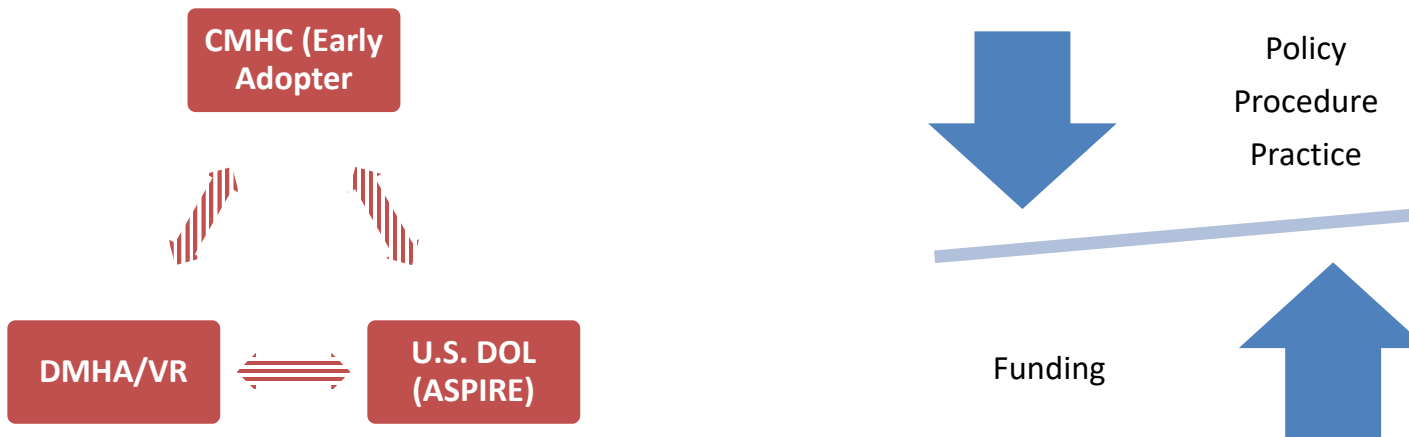
COMMITMENT TO IPS = COMMITMENT TO FIDELITY

- ▶ IPS is an evidence-based practice and **must be implemented with fidelity**.
- ▶ Each early adopter CMHC will have a **baseline fidelity review** (within 6-8 months from site kickoff). Annual fidelity reviews will occur during the term of the project.
- ▶ Information from this fidelity review **will inform further training and technical assistance needs** of the CMHC.
- ▶ The Supported Employment Fidelity Scale has been validated, meaning that **programs with higher fidelity scores have been shown to achieve higher employment outcomes** for IPS clients.
- ▶ The IPS Supported Employment Fidelity Scale is a guide for program leaders and practitioners to **improve their programs so that more people work**.

More information about fidelity will be provided to CMHCs who are awarded contracts from this RFF

FEEDBACK LOOP – IPS IMPLEMENTATION

- ▶ Indiana has a long-term goal of increasing the number of CMHCs that provide IPS to individuals that are served.
- ▶ In the short-term, early adopter CMHCs **will be provided enhanced funding** to support implementation of IPS within their organizations.
- ▶ **Early adopter CMHCs will be expected to provide feedback to the State on the local implementation, which will inform systemic alignment of policy and braiding and sequencing of funding to support a widespread IPS implementation long-term.**



INFORMATION

- ▶ Please see <https://ipsworks.org> for more information on IPS.
- ▶ See Indiana's draft strategic plan goals (RFF Attachment E) supporting IPS implementation and sustainability.
- ▶ Awardees under this RFF will be **expected to have employment staff in place** at project kickoff, estimated to be October 1, 2021.
- ▶ This agreement shall be for a period of 17 months with anticipated start date of **October 1, 2021** and terminating on **February 28, 2023**, and may be renewed through reapplication and new proposal, based upon available funding.
- ▶ It is anticipated there will be \$350,000 available for **equitable distribution to up to four** Community Mental Health Centers who are committed to becoming 'Early Adopters' of IPS.

FUNDING/ALLOWABLE COSTS

- ▶ Potential respondents shall develop a budget appropriate to their organization's capabilities to begin implementation of IPS.
- ▶ VR dollars may be braided with MRO dollars or other resources to support eligible individuals with mental health conditions who receive IPS services through the early adopter CMHCs.
- ▶ Please note the intention of awarding block grant funds through this RFF is **to provide seed money that will offset implementation costs** incurred in the adoption of a new evidence-based practice.
- ▶ One of the goals of Early Adopter CMHC sites is to allow the State **to refine the braiding and sequencing of funds to support IPS**, so funds awarded through this RFF will provide financial support during this refining process.

FUNDING/ALLOWABLE COSTS

ALLOWABLE COSTS

- ▶ Staff costs
- ▶ Equipment
- ▶ Costs of services provided directly to participants
- ▶ Indirect costs should not exceed 5% of the total cost of the allotted contract amount

SELECTION PROCESS AND CRITERIA

Organizations must submit a written proposal that addresses the following items to be considered for this opportunity:

- ▶ Have demonstrated capacity to maintain competent and well-trained staff to carry out program tasks. **Staff are onboarded by project kickoff**, estimated to occur October 2021.
- ▶ Have demonstrated **culturally competent range of services**.
- ▶ Demonstrate an **understanding of the need to address health disparities during services**, the ways health disparities negatively impact quality of life for populations at risk, and the impact health disparities have on the community.
- ▶ Have **demonstrated capacity for collecting program data** and submitting it in a monthly format. (See Attachment D for sample reporting format)
- ▶ In addition to submission of a written proposal addressing all eligibility criteria, and items above, **the following documents must also be completed and submitted** with the RFF response:
 - ▶ Completion of the *IPS Application Checklist* (Attachment A)
 - ▶ Completion of the *Budget Summary* (Attachment B)
 - ▶ Completion of the *Respondent Information* (Attachment C)

PROPOSAL REVIEW AND SCORE

Proposals will be evaluated based upon the proven ability of the respondent to meet the goals of the program in a cost-effective manner. Specific categories and criteria are:

Eligibility (Pass/Fail)

All eligibility criteria as outlined in “Eligible RFF Applicants” above must be met; applicants not meeting all criteria will not be considered for award

Completed written proposal (20 points)

Demonstrated capacity to train and maintain staff
Demonstrated culturally competent services
Demonstrated capacity for program data collection

IPS Application Checklist (48 points)

Letters of Support (12 points)

Include letter of support from CMHC agency leadership demonstrating commitment to become an early adopter of IPS

For current VR providers: Include letter(s) of support from local VR office(s) **-OR-**

If not a current VR provider: include written assurance that the CMHC will register to become a VR provider within 45 days of notice of award

Budget and Cost Effectiveness (20 points)

Budget is adequate to support the project
Costs are reasonable in relation to the objectives of the project
Budget supports actions needed for initial implementation of IPS.

ATTACHMENT A: IPS APPLICATION CHECKLIST

- ▶ Responses will be reviewed as part of the RFF evaluation process.
- ▶ Responses will assist DMHA in **identifying technical assistance and training needs** to support the early adopter CMHC to implement IPS.

IMPORTANT NOTE

It is **not** expected that respondents will have adopted all areas outlined in this checklist at the time proposals are submitted.

Early adopter CMHCs will work toward implementation of required components during the contract period of performance, with technical assistance provided by state and national partners.



NOTE: Any verbal answers provided during the webinar are not binding. Final responses to questions submitted in writing will be posted at <https://www.in.gov/fssa/dmha/funding-information/>

IMPORTANT DATES

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**THANK
YOU**

FOR A FANTASTIC RFP