## Incentive Interest form



Please fill out this form to provide DBHR with more information about your agency and level of interest in either participating as a Supported Employment (SE) or Supportive Housing (SH) fidelity reviewer (along with the DBHR Trainer) or your agency's interest in receiving a fidelity review.

Maximum consideration payable for participation in the FCS Cross-Site Learning Collaborative is \$7,500 for option #1 (sending reviewers) or \$7,500 for option #2 (hosting a review and sending a reviewer) or \$5,000 for option #3 (host a follow-up review) and shall be inclusive of all expenses and indirect costs.

Note: Follow-Up Reviews are available to agencies which have already participated in a baseline review.

1	Contact information			
Agency Name:				
Contact name				
Email				
For option #2 or #3, Address of Intake form)	f location to be reviewed (	agency contractin	g address will be entered on Contracto	
Address line 1				
Address line 2 (Optional)				
au.			710.0	
City		State	ZIP Code	
Unique Entity Identifier (UEI) fo	rmally DUNS #	Statewide Vendo	r Number	
Mark all that apply:				
Licensed Community Behavioral Health Agency		Clubhouse	Clubhouse	
Government Agency		Employment and or Housing Provider		
FQHC		Non-Profit C	ommunity Based Organization	
Peer Run Organization		Other:	·	
0				
2	Agency informat	ion		
Does your agency provide FCS s occurring (mental health and su Due to the funding source only agawarded contracts.	ibstance use) disorders?		alth and/or co- Yes No th and/or co-occurring disorders will be	
In order to identify which learni Agency is interested in improvir	=	-	ndicate which FCS service your	
Supported Employment		Supportive H	ousing	

HCA82-0356 (06/21) Page 1 of 3

Have you or someone from your staff participated in a fidelity reviewer's (FR) training? Contracts will not be distributed to agencies that have not completed a fidelity reviewer's training. Additional trainings will be offered throughout the 2022-2023 calendar years and your agency can be added to the queue once the FR training is completed.

Yes. If so, please f	ill out the information below:					
Date attended:		Name of trainee:				
No, Will attend future training event						
Please indicate how long your Agency has been providing any type of SE or SH Services?						
Date of your agency's fully executed contracted with Amerigroup to provide FCS services						
3	Select your optio	on				

## Option #1—Participate on fidelity review teams

By agreeing to participate as a reviewer you are committing to being part of a team that will participate in two fidelity reviews across Washington. This time commitment can be up to 30 hours per review. In addition to fidelity reviews, participants are also expected to:

- Participate in pre-planning call(s) for the fidelity review
- Prep work for the review such as chart reviews, marketing materials, etc.
- Travel to other agencies if social distancing measures allow for it (Travel coordination will occur within your own organization and is part of the reimbursement costs associated with this project)
- Provide consensus input on scoring
- Write sections of the draft fidelity review report

## Option #2—host baseline fidelity review and send staff to participate on one fidelity review team

By agreeing to participate in an internal fidelity review; your agency is committing to hosting a multiple day fidelity review with a team of individuals from other regions across Washington. In addition, assign one individual staff to participate in one fidelity review for purposes of learning the principles of EBP associated with PSH or IPS SE services. During this period of time, you are expected to:

- Participate in a pre-planning call(s) for the fidelity review
- Ensure a method to share personal health information needed for the Fidelity Review
- · Schedule interviews with personnel, participants, and key stakeholders pertinent to the fidelity review
- Provide a schedule with interviewee names to lead DBHR reviewer at least two weeks prior to the review
- Provide agency materials that support the components of the fidelity review at least two weeks prior to the fidelity review
- Other activities outlined in option #1.

## Option #3—host follow up fidelity review

By agreeing to host a follow-up Fidelity Review your agency is committing to a multiple day fidelity review with a team of individuals from other regions across Washington. The follow up reviews are provided to agencies who have completed a baseline review between 2022-2023

- Participate in a pre-planning call(s) for the fidelity review
- · Schedule interviews with personnel, consumers, and key stakeholders pertinent to the fidelity review
- · Provide a schedule with interview names to state trainer at least two weeks prior to the review
- Provide agency materials that support the components of the fidelity review at least two weeks prior to the fidelity review.

Learning			sideration payable for participation in the ,500 for option #2 or \$5,000 for option #3			
Opt	i <b>on 1:</b> Send staff to two o	cross-site fidelity re	eviews or			
<b>Option 2:</b> Host a fidelity review at your agency (at the site of your choosing) and send one staff to a fidelity review at a different agency.						
Option 3: Host a follow-up fidelity review at your agency where the baseline review was conducted.						
We would prefer to complete this option:						
	□In Person	□Virtual	☐Hybrid (Supported Employment)	□No Preference		
Please s	submit this completed for	orm to: HCAEmpA	ssist@hca.wa.gov			