

Examples of Services and Supports Typically Provided by the Family Support Services (FSS) Program

- Any services or supports eligible for Medicaid must be submitted to Medicaid before Family Support Service funding sources are used.
- Respite care funding for person(s) chosen by the family (not a parent, guardian or other individual living in the home)
- Adaptive equipment including ramps, specialized eating utensils, bath chairs, therapy equipment and other items that directly relate to the individuals disability and not covered by insurance
- Sensory and skill development items
- Special dietary and personal care items
- Counseling and training not covered by insurance
- Medical mileage and co-pay support
- Other services to support the needs related to the disability of the individual



Our Vision

We serve for a lifetime.



Our Mission

By listening to those we serve, we strive to provide a lifetime of meaningful supports to optimize and enrich relationships.

Office Hours
Monday - Friday
8:00 a.m. - 4:00 p.m.
419.332.9296
www.scbdd.org



SCBDD

1001 Castalia Street, Fremont, Ohio 43420



Sandusky County Board of Developmental Disabilities (SCBDD)

Family Support Services

A support program for qualifying families providing services and supports to individuals with developmental disabilities.

We Serve for
a Lifetime



About Sandusky County's Family Support Services Program

Family Support Services (FSS) provide financial assistance to eligible families, helping them care for a child with disabilities in their home. This program aims to enhance the child's quality of life by fostering unique skills, supporting ongoing development and maintenance, promoting health and safety, and addressing specific care needs associated with the individual's diagnosis.

FSS funding is not guaranteed and allocated based on availability. Priority is given to requests that address health, safety, and other identified critical needs.



Who Can Receive FSS Funds?

FSS funding is available to SCBDD eligible individuals who are between the ages of birth and 22 years, living in the family home, and actively participating in Early Intervention services or primary/secondary educational programs.

For more information about FSS, or to receive an application packet, please contact:

Community Connections Coordinator, 419.332.9296 ext. 132 or ext. 137

What Determines Whether or Not Requests Are Funded?

- Family is eligible for services after application has been received and approved
- The County has funds available
- Items requested are disability related and support the needs of the individual
- The items or service cannot be funded by other sources
- The request is consistent with SCBDD policy and procedure and family support services philosophy
- Requests must be submitted and approved before services or purchases occur

Allocation of FSS Funds

A family with one eligible individual may receive up to \$1,000; families with two or more eligible individuals may qualify for up to \$1,500.

The FSS program is administered by the SCBDD and supported by local levy funds.



Steps for Requesting Family Support Services

1. An individual must be SCBDD eligible and live in their family's Sandusky County home full time.
2. Complete an FSS application – once completed the family will receive an approval letter.
3. Complete a request form
 - a. If the request is approved a purchase order is opened with the auditor and the family will receive an approval form. No services or items may be purchased prior to this approval notice.
 - b. If request is denied a letter will be sent with further information regarding the denial.
4. After services are provided, submit receipts, respite form/time sheet, or mileage form for reimbursement by the 15th of the following month.
5. Receipts, respite forms, and mileage forms should be turned in monthly to avoid a purchase order being closed, and not being able to be reimbursed. Once a purchase order is closed, SCBDD can not reimburse a family.
6. The request process is quarterly; all requests are only good for 3 months. (i.e. Jan - March, April - June, July - Sept., Oct. - Dec.)