Cooperative Agreements for 988 Suicide and Crisis Lifeline Crisis Center Follow-Up Programs

Pre-Application Webinar: Questions & Answers

5/23/2023, 2:00pm – 3:00pm EST

Background:

The purpose of the program is to expand efforts among Lifeline crisis centers to support individuals post-contact to provide continued support and linkages to decrease suicide risk by: (1) ensuring the systematic follow-up of suicidal persons who contact the 988 Suicide and Crisis Lifeline; (2) providing enhanced coordination of crisis stabilization, crisis respite, mobile crisis outreach (MCO) response services and other services on the crisis continuum of care; (3) reducing unnecessary police engagement, in line with Executive Order 14704 Advancing Effective, Accountable Policing and Criminal Justice Practices to Enhance Public Trust and Public Safety; and (4) improving connections for high-risk populations. Eligible applicants are crisis centers that are part of the 988 Suicide and Lifeline Crisis network and provide 24/7 services.

Questions and Answers:

1. **Question**: Can you please list the GPRA data collection points? Also, are they mandatory or based on client willingness to share?
   
   **Answer**: GPRA requirements are included in NOFO. They are required for reporting to SAMHSA but are aggregate level information (SPARS Indicators). You are required to collect, for example, how many individuals receive follow-up, but not individual information. These are quarterly measures.

2. **Question**: Page 23 notes that no less than 20 percent of the total award for the budget period must be allocated for coordination activities. Could you please define “coordination activities”? For example, is this specific to direct service provision and/or would this include establishing coordination agreements with community partners?
   
   **Answer**: This grant is an infrastructure grant rather than a service grant, so we are not collecting that level of data. These may include connections with PSAP, 911, etc. You would get to determine what those would be.

3. **Question**: Is it allowable to provide follow up services to at-risk persons who have accessed crisis services via other mechanisms (e.g., crisis walk-in clinic), or must they be individuals who have contacted 988?
   
   **Answer**: As this is a 988 grant, there should be a 988 connection to this. This would be through phone, chat, or text contacts as a base, minimum expectation for mechanisms to be included in this grant program.
4. **Question:** Do the MOUs need to reflect the Letters of Commitment within the application? Can we create MOUs with other organizations that did not send a Letter of Commitment?

   **Answer:** We do not have a cap on number of MOUs; we do require a minimum of 3 formal engagements, as listed in the NOFO.

5. **Question:** Regarding the statement in the RFA about insurance (Page 15: Reimbursements for the Provision of Services). Do we need to ask individuals in crisis about their insurance coverage as part of the screening process and/or bill those insurance companies?

   **Answer:** This is not a requirement for this grant.

6. **Question:** If we do not currently have a federally negotiated indirect cost rate, will we be able to negotiate an indirect cost with SAMHSA/HHS once/if awarded?

   **Answer:** Yes, and you may refer to page 79 of the NOFO for more specific NOFO on this. Feel free to reach out to Department of Grants Management with additional clarification requests.

7. **Question:** Where are the criteria "high to moderate risk based on 988 Lifeline’s suicide screening policies" (NOFO bottom of page 9) outlined?

   **Answer:** Lifeline centers received the newest suicide prevention policy from Vibrant in December; this is based on criteria from that policy.

8. **Question:** If we refer callers to our crisis counseling services after follow-up, could the grant pay for treatment?

   **Answer:** No, this funding is not to fund service provision post contact.

9. **Question:** Vibrant subcontracts are requiring follow-up and I believe many of the state contracts (with SAMSHA funds) are as well. What does SAMSHA see has the difference in this follow-up and that which is already being funded elsewhere? Is it partnering with other pieces of the crisis care continuum, the longer-term component? We are trying to determine how this budget would be separate from current services and budgets.

   **Answer:** There are components of this NOFO that are not required for other programs. You may take follow-up already provided and build upon it to further enhance care across the crisis continuum.

10. **Question:** Please describe the audience for the trainings on culturally responsive care and intersections with social determinants of health (Required Activity #6) – must these be open to the public/community at large?
**Answer:** You will, at minimum, work to train crisis center staff. You may share training with key partners where appropriate.

11. **Question:** Will those states/territories/tribal region that may derive the most benefit from this funding be given preference? (those with higher rates of deaths by suicide).
   **Answer:** If it is noted as such in the NOFO, yes. If not, it will be awarded according to scoring of application.

12. **Question:** Is there a specified frequency or number of follow-up calls to be attempted during the 90 day-12 month period?
   **Answer:** Follow-up must be made, at minimum 90 days post contact and up to 12 months post contact.

13. **Question:** Is a multiple PI (PD) arrangement possible, including a 988 staff member and a university based partner?
   **Answer:** You may engage multiple people for the grant, but must identify one PD.

14. **Question:** Eligibility question: if two 988 centers in one state work together to provide 24/7/365 coverage for that state, could they apply together on one proposal? Thank you.
   **Answer:** This is not part of the eligibility requirement; eligibility is 24/7 Lifeline Centers.

15. **Question:** I am wondering how to become a recognized 988 follow up center? We do not have one within 75 miles of our county. Are we qualified to apply, get funded and then become a 988 follow up center? Thank you.
   **Answer:** Eligibility is limited to any current 24/7 Lifeline Centers.

16. **Question:** Is the quarterly SPARS submission the totality of the GPRA requirements?
   **Answer:** For GPRA specific requirements, yes, SPARS indicators are the only requirements.

17. **Question:** If you hope to hire an individual to serve in the Project Director role, should you identify an acting Project Director/PI with the application and then update once the new hire is made?
   **Answer:** You may propose someone initially and then complete a post-award amendment after award for any changes.

18. **Question:** Follow up is described as 90 to 365 days. What are the criteria for following 365 days versus a shorter period?
**Answer:** This may be developed by the grantee in accordance with the Lifeline Safety policy.

19. **Question:** Will this meeting be available after it ends and will chat posed questions be published, in writing, as well?
   **Answer:** Yes, materials will be posted in the “Application Materials” section near the bottom of the [SAMHSA Grant Announcement](https://www.samhsa.gov).  

20. **Question:** I understand that this NOFO is only focused on building the infrastructure and not the services themselves. Are there any anticipated/forecasted grant opportunities that will fund the delivery of the 988 follow-up services themselves (e.g., salaries of staff providing these follow-up services and linkages)?
   **Answer:** We are unaware of any upcoming NOFOS immediately planned for the 988 & Behavioral Health Crisis Coordinating Office; check out [FY 2023 NOFO Forecasts | SAMHSA](https://www.samhsa.gov) for recently posted and forecasted Grant Announcements.

21. **Question:** I just searched the Lifeline new Suicide risk assessment policy and neither the term moderate nor high were located. Please clarify. thank you
   **Answer:** The NOFO has been updated to remove reference to “moderate” and “high” risk in accordance with the Lifeline Safety Policy.

22. **Question:** Can centers collaborate in the application?
   **Answer:** No, eligibility is limited to any individual current 24/7 Lifeline Center.

23. **Question:** How do you become a recognized Lifeline Center
   **Answer:** Visit [https://988lifeline.org/our-network/](https://988lifeline.org/our-network/) for info on this by clicking on "Become a Lifeline Crisis Center." If your organization is interested to join the Lifeline's network of crisis call centers, or if you are establishing a call center and hope to join the Lifeline, please contact Katie Stubblefield, Center Engagement Director, at [kstubblefield@vibrant.org](mailto:kstubblefield@vibrant.org).

24. **Question:** Page 9 of the NOFO states that there is a minimum staffing requirements of .2 FTE. However, in the grantee informational webinar, the presenter mentioned .5 FTE as the minimum staffing requirement. Would you please provide clarification on which one is correct?
   **Answer:** The correct minimum staffing requirement is 0.2 FTE as outlined on page 9 of the NOFO. The Key Personnel for these awards and the minimum level of effort (LoE) are:
   - Project Director with a LoE of 0.20 FTE
   - Data Administrator with a LoE of 0.20 FTE
25. **Question:** This grant is meant for infrastructure only not for staffing to provide actual follow up correct?

**Answer:** If you want to add center staff to provide follow-up, that is appropriate use of the funding. What you cannot use it for is clinically based services (such as CBT).