COE- Nursing Facilities

May 4, 2022
3 pm EST

Please Stand By – This webinar will begin shortly.

To access the audio portion of this webinar,

https://www.zoomgov.com/j/1610403703?pwd=dXl4Ny85NU9SZ2VoSTNlZnM1d2p5dz09

Application Link: https://www.samhsa.gov/grants/grant-announcements/sm-22-011
Basic Information

Estimated Award Amount: Up to $4,962,223 per year

Length of Project Period: Up to 3 years

Due Date: June 20, 2022

Anticipated Start Date: September 30, 2022
Program Purpose

The purpose of this program is to establish a training and technical assistance center that serves as a national center of excellence to build capacity that supports focused resource development and dissemination, training and technical assistance, and workforce development to staff in nursing facilities who serve individuals with Serious Mental Illness (SMI), Serious Emotional Disturbance (SED), Substance Use Disorders (SUD), or Co-occurring Disorder (COD).

SAMHSA expects that this will

1. Strengthen and sustain effective behavioral health practices and achieve better outcomes for nursing home residents with SMI, SED, SUD, or COD
2. Ensure the availability of evidence-based training and technical assistance addressing mental health disorder identification, treatment, and recovery support services. Training and technical assistance is needed to support facilities in improving care for this population.
Eligibility

- Eligible applicants are domestic public and private nonprofit entities.
- All non-profit entities must submit documentation of their non-profit status in Attachment 8 of your application.
- Cost sharing/match is not required in this program.
Required Application Components

• Budget Information (NOFO, p. 17)
• SF-424A
• Budget Justification and Narrative – See Appendix L (p. 68)
• Project Narrative – no longer than 10 PAGES (p. 18)
• Attachments 1-8 (see p. 18 for page limitations)
• Attachment 1: Letters of Commitment from participating organizations
• Attachment 2: Data Collection Instruments/Interview Protocols
• Attachment 3: Sample Consent Forms
• Attachment 4: Project Timeline (see p. 23)
• Attachment 5: Biographical Sketches and Position Descriptions – See Appendix G (p. 53)
• Attachment 6: Letter to the SSA - See Appendix J (p. 60)
• Attachment 7: Confidentiality and SAMHSA Participant Protection/Human Subjects Guidelines – See Appendix D (p. 45)
• Attachment 8: Documentation of Non-Profit Status – See p. 19 for acceptable documentation
All applicants must register with NIH’s eRA Commons in order to submit an application. This process takes up to six weeks. If you believe you are interested in applying for this opportunity, start the registration process immediately. Do not wait to start this process.

SEE APPENDIX A FOR DETAILED INSTRUCTIONS
• Applicants are required to complete **four (4) registration processes**:
  
  – Dun & Bradstreet Data Universal Numbering System (DUNS number) Please review the information in Appendix A on the DUNS number transitioning to a new Unique Entity Identifier (UEI) effective April 2022;
  
  – System for Award Management (SAM);
  
  – Grants.gov; and

  – eRA Commons.

• If you have already completed registrations for DUNS, SAM, and Grants.gov, you need to ensure that your accounts are still active, and then register in **eRA Commons**.

SEE APPENDIX A FOR DETAILED INSTRUCTIONS
The goals of the COE-Nursing Facilities are:

• Increase the awareness, knowledge, and skills of the nursing facilities workforce caring for the needs of residents with SMI, SED, SUD, or COD.

• Ensure the availability and delivery of publicly available, free of charge training and technical assistance to the nursing facilities.

• Accelerate the adoption and implementation of evidence-based interventions and systems level changes allowing for the successful management and care of people residing in a nursing facility who have SMI, SED, SUD, or COD.

• Foster regional and national alliances among culturally diverse practitioners, researchers, policy makers, family members, and residents of nursing facilities to assist in the successful implementation of nursing facilities interventions that promote the care and management of residents with SMI, SED, SUD, or COD.
Required Activities

- Conduct a **needs assessment**, within four months of the grant award, based on available quantitative information such as demographics, diagnosis, age range of residents, length of stay for those with and without behavioral health diagnosis as well as any available information on staffing levels, turnover rates and other variables that might impact capacity for providing quality services for individuals with behavioral health conditions. The needs assessment shall also include a qualitative component from a sample of inputs from staff and residents currently working or residing in nursing facilities.

- Develop a report that catalogs **currently available literature** on effective, and where possible, evidence-based practices in the management of behavioral health conditions in the context of nursing facilities and/or other similar institutions.

- Create a **technical expert panel** (TEP) that meets at least quarterly to provide guidance and recommendations regarding COE products and offerings. The (TEP) will review evaluations from COE offerings and will identify gaps in products as well as make recommendations on improvement with attention to evidence-based practices where they exist for the residents of facilities. The TEP shall include at least eight members with expertise in, but not limited to: behavioral health (including mental health and substance use), psychopharmacology, long-term care advocacy, nursing home administration, and behavioral health recovery. TEP composition shall be inclusive and diverse and include both a SAMHSA and CMS representative, a family member, and a person with lived experience or in recovery.
• Develop and implement a robust communications plan to disseminate information about the COE to nursing facilities. Communications shall include introduction to the COE and updated information about current and planned training and technical assistance resources.

• Develop a simple and clear evaluation process so that each intervention developed receives feedback regarding the learning activity. Evaluation shall be reported to SAMHSA and CMS.

• Provide quarterly reports (e.g., analytics, metrics) to the TEP and to CMS and SAMSHA regarding training, downloads and viewing of core and other trainings, selected learning community development and participation and consultations.

• Within 6 months develop and offer core trainings and begin to provide consultation to facilities.

• Post all COE products on a publicly accessible website that can track traffic and downloads.
Develop a program framework and implementation plan to guide the delivery of resources and training to nursing facilities using the following two tiers:

**Core services:**
- Develop a set of **basic core nursing facility resources** to educate staff on mental health and substance use awareness training for SMI, SED, SUD, and COD. Online video modules must be developed that are available on-demand at the convenience of the user. These core resources shall include a focus on presenting examples of successful recovery of persons with lived experience with attention to what elements helped the individuals obtain and sustain recovery. This shall be a priority focus for year 1.
- Develop a set of core resources that outline the **basic assessment of and basic treatment interventions** for commonly occurring types of mental illnesses and substance use disorders that are likely to be seen in nursing facilities.
- Develop **fact sheets** that are companions to above resources and serve as checklists and reminders that can be posted in staff common areas.
- Ensure that all core service resources are oriented toward the full range of staff that work in nursing facilities with a special focus on appropriateness to **technician and aide level staff**.
• Consultation Services:
  • Provide direct consultation as requested on specific issues to nursing facilities. Consultation shall be available throughout the duration of the grant and shall be defined by the requestor so that specific recommendations for management can be provided. Demand for consultation will be managed throughout so that reasonable responsiveness is given to requestors and is balanced against the time available to provide consultation. These consultations shall be summarized and available on the COE website. Examples of consultations may include issues such as: development of partnerships with community providers for opioid use disorder treatment; management of specific concerns about use of antipsychotic medications; behavior management techniques for specific residents. Consultation may be on-site or virtual and is likely to require the development of a cadre of experts in behavior management, psychopharmacology, nursing education, facility administration, prevention, substance use disorder identification and treatment.
Allowable Activities

- By Year 2, develop and offer selected trainings that are accredited **continuing education units** (CEs/CEUs) and continuing medical education (CMEs) for various health and behavioral health providers including, but not limited to, physicians, pharmacists, nurses, social workers, licensed therapists and counselors, substance use providers, and licensed nursing home professionals.

- Provide a cohort learning community experience for groups of at least 10 facilities that express interest in a particular topic. Examples of selected topics may include training and technical assistance addressing the treatment of residents with trauma and PTSD, personality disorders, or opiate use disorder.

- Provide resources to facilities to screen for suicidal ideation, suspected drug overdoses, pain management, and other behavioral health concerns.

- Provide training in the development of referral pathways to community-based providers for residents with SMI, SED, SUD, or COD who cannot receive needed mental health and/or substance use services in a nursing facility.

- Provide access to local substance use and mental health organizations to convene meetings within nursing facilities and make available both print and online resources.
Recipients are required to report performance on the following measures:

- **Workforce Development (WD2):** The number of people in the mental health or related workforce trained in mental health-related practices/activities that are consistent with the goals of the grant.

- **Types/Targets of Practices (T1):** The number of programs/organizations/communities that implemented specific mental health-related practices/activities that are consistent with the goals of the grant.

- **Types/Targets of Practices (T4):** The number of programs/organizations/communities that implemented adaptations of evidence-based practices (EBPs) to incorporate the special needs of unique populations or settings because of the grant.

- **Training (TR1):** The number of individuals who have received training in prevention or mental health promotion.

Recipients must periodically review the performance measures they report to SAMHSA (as required above), assess their progress, and use this information to improve the management of their grant project. Recipients are also required to report on their progress addressing the goals and objectives identified in your Project Narrative to the GPO every six months.

The project performance assessment should be designed to help you determine whether you are achieving the goals, objectives, and outcomes you intend to achieve and whether adjustments need to be made to your project. Performance assessments should also be used to determine whether your project is having/will have the intended impact on behavioral health disparities.
Funding Restrictions

The funding restrictions for this project are as follows:

• No more than 20 percent of the grant award for the budget period may be used for data collection, performance measurement, and performance assessment expenses.

• The indirect cost rate may not exceed **8 percent** of the proposed budget. Even if an organization has an established indirect cost rate, SAMHSA reimburses indirect costs at a fixed rate of **8 percent** of modified total direct costs, exclusive of tuition and fees, expenditures for equipment, and sub-awards and contracts in excess of $25,000.

• **SAMHSA recipients must also comply with SAMHSA’s standard funding restrictions, which are included in Appendix I (p. 59)**
Application Evaluation Criteria

**Section A:** Statement of Need (20 points – approximately 1 page)

**Section B:** Proposed Approach (35 points – approximately 5 pages)

**Section C:** Staff, Management and Relevant Experience (30 points – approximately 3 pages)

**Section D:** Data Collection and Performance Measurement (15 points – approximately 1 page)
Section A: Statement of Need

1. Identify the burden of behavioral health issues in nursing homes and provide a clear, concise statement of the service gaps, barriers, and other problem(s) and how the nursing home workforce are integral to the solution. Identify the source of the data.

2. Describe your organization’s knowledge of evidence-based interventions and systems level changes allowing for the successful management and care of people residing in a nursing facility who have SMI, SED, SUD, or COD.
Section B: Proposed Approach

1. Describe the goals and measurable objectives (see Appendix E) of your proposed project and align them with the Statement of Need described in A.2. Complete the table on page 22 related to training and consultations.

2. Describe how you implement the Required Activities in Section I. In particular, address how you will work to build capacity in nursing homes that supports focused resource development and dissemination, training and technical assistance, and workforce development to staff who provide services to individuals with SMI, SED, SUD, or COD.

3. In Attachment 4, provide a chart or graph depicting a realistic timeline for the entire 3 years of the project period showing dates, key activities, and responsible staff. These key activities must include the requirements outlined in Section I. [NOTE: The timeline cannot be over two pages and should be submitted in Attachment 4.] The recommendation of pages for this section does not include the timeline.
1. Describe the experience of your organization with similar projects and/or providing culturally and linguistically appropriate, state-of-the-art, research-based training and technology transfer activities, including the provision of behavioral health training/TA to nursing homes. Identify any other organizations that will partner in the proposed project. Describe their experience with similar projects and their specific roles and responsibilities. If applicable, Letters of Commitment from each partner must be included in Attachment 1 of your application. If you are not partnering with any other organization(s), indicate so in your response.

2. Provide a complete list of staff positions for the project, including the Key Personnel (Project Director) and other significant personnel. Describe the role of each, their level of effort and qualifications to include their experience in behavioral health and providing training to nursing homes and familiarity with the various culture(s) and language(s) within the workforce.
1. Provide specific information about how you will collect the required data for this program and how such data will be utilized to manage, monitor, and enhance the program.
Questions?

Program Contact:

Shary M. Jones
Center for Mental Health Services
Shary.jones@samhsa.hhs.gov

To download the presentation slides, please select ‘File’ at the top left of your screen. Then select ‘Transfer’ to access the File Transfer box. Then you can select and download the file.