SAMHSA Pre-Application Technical Assistance Webinar for FY 2019 Suicide Prevention Lifeline Crisis Center Follow-Up Expansion Grant Funding Opportunity Announcement (FOA) No.: SM-19-008

Thursday, January 24, 2019
2:00-3:30pm Eastern Time
Dial In: 888-972-6892

Conference Number: PWXW8656718
Passcode: 7439516

Please Stay By
Webinar will begin shortly

If you are experiencing technical difficulties, please press *0
SAMHSA Pre-Application Technical Assistance Webinar for FY 2019 Suicide Prevention Lifeline Crisis Center Follow-Up Expansion Grant Funding Opportunity Announcement (FOA) No.: SM-19-008

Thursday, January 24, 2019 2:00-3:30pm Eastern Time
Dial In: 888-972-6892

Conference Number: PWXW8656718  Passcode: 7439516

Richard McKeon, Ph.D.,
Branch Chief
Portland Ridley
Public Health Advisor
Center for Mental Health Services
Suicide Prevention Branch
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services

Thursday, January 24, 2019
2:00-3:30pm Eastern Time
Parklawn Building, Rockville, MD
Welcome!

Webinar is being recorded

Webinar recording and slides will be posted on Suicide Prevention Resource Center (SPRC) website at www.sprc.org

It will be posted through March 11, 2019
Agenda

SAMHSA Pre-Application Technical Assistance Webinar:
FY 2019 Suicide Prevention Lifeline Crisis Center Follow-Up Expansion Grant
Funding Opportunity Announcement (FOA) No.: SM-19-008

1. Purpose
2. Eligibility and Award information
3. Required Activities and Expectations
4. Budget and Funding Restrictions
5. Application Evaluation Review Criteria
6. Application and Submission Process
Suicide Prevention Lifeline Crisis Center Follow-Up Expansion Grant is to provide an integrated hub that:

- ensures systematic follow-up of suicidal persons who contact a National Suicide Prevention Lifeline (NSPL) Crisis Center
- provides enhanced coordination of crisis stabilization, crisis respite, and hospital emergency department services
- enhances coordination with mobile onsite crisis response
Award Information and Appropriations

- Funding Opportunity Title: Crisis Center Follow-up Expansion
- Funding Opportunity Number: SM-19-008
- Due Date for Applications: March 11, 2019 (no later than 11:59 PM EST)
- Anticipated Available Funding: $672,383
- Estimated Number of Awards: 2
- Estimated Award Amount: Up to $336,192 per year
- Cost Sharing/Match Required: No
- Length of Project Period: Up to 3 years
Eligibility is limited to National Suicide Prevention Lifeline (NSPL) crisis centers that provide 24/7 coverage.
Elements: Air Traffic Control (ATC) model

- Qualified crisis centers meet standards of and participate in the NSPL
- 24/7 clinical coverage with an identifiable single point of contact covering a defined region
- Ability to deploy mobile crisis services and secure same-day/next day outpatient clinical services
- Sufficient personnel to make triage decision, including acute patient access
Required Activities

1. provide 24/7 coverage to screen and assess all callers for suicide risk, SMI, SED, and co-occurring mental/substance use disorder

2. provide central coordination of crisis management, using real-time data to track the location and status of individual in crisis, and assure a “warm hand-off” has occurred to the next service provider

3. develop/implement protocol includes initiating contact within 24 hours of a referral or a care transition, and maintaining contact for up to 90 days after the initial contact
4. develop MOU with at least one hospital. Must address the referral process, point of contact, timely info sharing, & protocol for sharing aggregate info and administrative data with the NSPL crisis center

5. establish partnership with local law enforcement to divert individuals with mental health crises from criminal justice settings into mental health treatment settings; education officers about mental illness & strategies for effectively responding to individuals in crisis.
6. When community-based mobile outreach exists in the community, develop a collaborative partnership with a program that can provide outreach on a 24/7/365 basis and upon contact by the NSPL Crisis Center.

- The program should have Protocols for triage/screening for suicidality and de-escalation/resolution; coordination with medical and behavioral health services; crisis planning and follow-up; and protocols for sharing information and data with the NSPL Crisis Center.
7. Establish a partnership with the state Suicide Prevention Coordinator and state mental/behavioral health agency. For a listing: [https://www.sprc.org/states](https://www.sprc.org/states)

8. *If applicable*- collaborate with and link to a Certified Community Behavioral Health Clinic (CCBHC) within the state (*if there is a CCBHC in your State*) to increase access to behavioral health services for individuals at risk for suicide.

Allowable Activities

- Establish Systems Review Workgroup to provide guidance and support to the NSPC crisis center

- Integrate peer support services into crisis system of care

- Establish partnership with facility/agency who provides short-term crisis stabilization of individual referred by the NSPL center
Allowable Activities (cont.)

- Develop/implement/enhance an electronic system of status and disposition of linkage/referrals for individuals who contact the NSPL center.

- Develop/implement/enhance system to schedule intake and outpatient appointments within 24 hours after the initial call to the NSPL crisis center.

- Provide follow-up to suicidal persons who access the NSPL Crisis Center through other means, including the use of technology (e.g., chat, text).
Questions?

This webinar is being recorded.

Webinar recording and PPT slides will be posted at

Suicide Prevention Resource Center (SPRC) website at www.sprc.org

It will be posted through March 11, 2019
Budget

- Up to 336,192 per year (direct & indirect costs)
- Direct costs: Salaries, benefits, equipment, supplies, contractual, and travel
- Indirect costs: Administrative costs or “overhead” costs (i.e. central administrative services, electricity)
- Data collection, Performance Assessment: cannot exceed 15% of your annual budget
- At least 15% of annual budget: allocated to support hospital emergency room follow-up activity
Funding Restrictions

• Grants funds must be used to supplement and not supplant any other Federal, State, or local funds available to carry out activities under the grant.

• Must comply with SAMHSA’s standard funding restrictions (Appendix H)
• Grantees expected to submit a *Disparity Impact Statement*

• Adhere to National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health Care

Data Collection & Performance Measurement

- SAMHSA’s Performance Accountability and Reporting System (SPARS)
- Required Performance Measures
- Link performance measures and annual targets in proposed plan
- Project Performance Assessment
Performance Measures

- Number of individuals contacted through program outreach efforts
- Number of individuals screened for mental health or related interventions.
- Number of individuals referred to mental health or related services
- Number and percentage of individuals receiving mental health or related services after referrals
- Number of organizations, collaborating, coordinating, or sharing resources with other organizations as a result of this grant
- Number of suicide attempts and completed suicides at 6 month and 12 month follow-up
This webinar is being recorded.

Webinar recording and PPT slides will be posted at

Suicide Prevention Resource Center (SPRC) website at www.sprc.org

It will be posted through March 11, 2019
Overview of Project Narrative (Section A-D)

- Describes your project
- Includes the Evaluation Criteria
- Scored according to the quality of your response
- No longer than 10 pages
- Place the required information in the correct section
1. Identify geographic catchment area where the project will be implemented & the population(s) that will be impacted by the infrastructure development in the targeted systems or agencies.

2. Document the need for an enhanced & integrated crisis center approach to increase the capacity to effectively implement the required activities and delivery of crisis services.
Evaluation Criteria

Section B: Proposed Approach (40 Points)

1. Describe the goals and measurable objectives of the proposed project and align them with the Statement of Need outlined in A.2. Must include the performance measures from Section I-2.1, annual targets for each, and link them to the goals and objectives.

2. Describe how the Required Activities, as stated in Section I-2 will be implemented and how the goals and objectives will be achieved through implementation of these activities.

3. Provide a chart or graph depicting a realistic timeline for the entire three years of the project period, showing dates, key activities, and responsible staff.
1. Describe organization’s experience with similar projects & providing follow-up of suicidal persons who contact the NSPL crisis center. Also:

- Identify other organization(s) that will collaborate with you in the proposed project, including the local emergency department. Include letters of commitment from these collaborating organizations/agencies

- Include the MOU with the local emergency department
2. Provide a complete list of staff positions for the project, including the Key Personnel (Project Director) and other significant staff members.

• Describe the role of each, their level of effort, & qualifications, including their experience providing services to individuals at risk of suicide, and familiarity with their culture(s) and language(s).

• Project Director - must be 1.0 FTE level of effort
Evaluation Criteria

Section D: Data Collection & Performance Assessment (15 Points)

- Describe how required data will be collected
- Describe how data will be used to manage, monitor, and enhance program
- Describe how you will assess your performance
- Link performance measures & annual targets to the goals and measurable objectives in Section B: Proposed Approach

Data Collection & Performance Assessment Costs:
Cannot exceed 15% of annual budget
Budget Justification, Existing Resources & Other Support (other federal and non-federal resources)

- Submit Budget Table and Narrative Justification for each Grant Year
- Include other federal and non-federal Resources/costs
- Use the sample budget template in Appendix K
Appendix C: Confidentiality & Participant Protection and Human Subjects Regulations

• No page limit
• Use guidelines contained in Appendix C
• Respond to ALL seven elements in the guidelines
• Carefully review Protection of Human Subjects Regulations
Questions about Grants Management & Budget Issues

Eileen Bermudez
SAMHSA Division of Grants Management
PH: 240-276-1412
Email: FOACMHS@samhsa.hhs.gov
Questions?

This webinar is being recorded.

Webinar recording and PPT slides will be posted at

Suicide Prevention Resource Center (SPRC) website at [www.sprc.org](http://www.sprc.org)

*It will be posted through March 11, 2019*
All applicants must be registered with

- National Institutes of Health’s Electronic Research Administration (eRA) Commons grants system (Project Director/Principal Investigator must have an active eRA Commons account)
- System for Award Management (SAM)
- Grants.gov
- Dun & Bradstreet Data Universal Numbering System (DUNS)
Questions about Grants Management & Budget Issues

Eileen Bermudez
SAMHSA Division of Grants Management
PH: 240-276-1412
Email: FOACMHS@samhsa.hhs.gov
This webinar is being recorded. Webinar recording and PPT slides will be posted at Suicide Prevention Resource Center (SPRC) website at www.sprc.org. It will be posted through March 11, 2019.
For updates on this grant opportunities, check [http://www.samhsa.gov](http://www.samhsa.gov)

Sign up at [www.grants.gov](http://www.grants.gov) for e-mail notifications

The recording of this webinar and PowerPoint Slides through March 11, 2019 at [www.sprc.org](http://www.sprc.org)
SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities.

Portland Ridley, Public Health Advisor, Portland.ridley@samhsa.hhs.gov

www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) ● 1-800-487-4889 (TDD)