

Notice of Funding Opportunity
“Recovery for All - It’s Never Too Late”
Lifespan Recovery-Oriented System of Care for Older Persons
with Opioid and/or Stimulant Use Disorders

As part of the Kentucky Opioid Response Effort (KORE), the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) will award up to four Recovery for All grants. Although Kentucky has made strides in improving treatment access and awareness for young to middle aged adults, little has been done for older persons. For the purposes of this funding opportunity, “older persons” are those who are age 55 and older. In Kentucky, this population subset is projected to grow disproportionately to younger populations. Consistent with the increase in population will be the increased prevalence in substance use disorder, with rural areas being hit the hardest.

Recovery for All grants will be awarded to a) increase access to and utilization of the three FDA-approved medications to treat Opioid Use Disorder (MOUD) among older persons, b) reduce unmet OUD/Stimulant Use Disorder treatment need and recovery support among older persons, c) provide targeted outreach and assertive engagement to older persons, and d) prevent opioid-related overdose deaths among older persons. Competitive applications will also propose a multi-pronged approach including education and awareness to decrease stigmatization and discrimination experienced by older persons. This includes integration of overdose prevention training as well as education on medication misuse and polypharmacy risks of the older persons population. Applications proposing services that reduce racial inequities are strongly encouraged.

Identifying appropriate community partnerships and resources will allow for the development of a recovery-oriented system of care that spans the lifetime of clients. Partnerships for this Recovery for All grant should include, but are not limited to, Area Agencies on Aging and Independent Living (AAAIL), Senior Centers, primary care offices, behavioral health treatment providers, health departments, hospitals, and Long Term Care Facilities, Home Health Agencies, Law Enforcement, Department of Community Based Services (DCBS), places of worship, and Assisted-Living Communities. Collaborative community partnerships are strongly encouraged to provide a “whole-patient” approach for the treatment of older persons with OUD/Stimulant Use Disorder. Furthermore, the voice and experiences of older persons with OUD/Stimulant Use Disorder and those in recovery should be included in decision-making and the implementation process.

Evidence-based models utilize MOUD, deliver evidence-based screening and assessment, provide assertive engagement and early intervention, coordinate care, integrate families, include harm reduction strategies (e.g., naloxone prescribing), support treatment retention, and are recovery-oriented. The following resources review services for older persons and provide examples of evidence-based treatment models:

TIP 63: Medications for Opioid Use Disorder
https://store.samhsa.gov/system/files/sma18-5063fulldoc_0.pdf

Substance Use Treatment for Older Adults
<https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/substance-use-treatment-older-adults>

Substance Abuse Among Older Adults
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4146436/>

Provider Readiness & Implementation Checklist
<https://www.thenationalcouncil.org/integrated-health-coe/resources/>

Primary Care-Based Models for the Treatment of Opioid Use Disorder
<https://annals.org/aim/fullarticle/2589794/primary-care-based-models-treatment-opioid-use-disorder-scoping-review>

Treatment of Stimulant Use Disorders
https://store.samhsa.gov/product/Treatment-of-Stimulant-Use-Disorder/PEP20-06-01-001?referer=from_search_result

Applicant Eligibility

- Lead applicant must be a nonprofit organization with 501c3 status. * For-profit agencies may partner as a sub-awardee or sub-recipient of the nonprofit organization
- Behavioral health treatment providers must be licensed as an AODE and BHSO facility
- Community Mental Health Centers must be licensed as an AODE
- Applicant must have at least two (2) years of experience serving individuals experiencing OUD/Stimulant Use Disorder and their families
- For Community Mental Health Centers, funds awarded under this grant mechanism must be used to provide services in locations within the counties for which your Board is duly recognized as the Regional Community Mental Health Center
- Vendor Code from the Finance Cabinet *
 - <https://finance.ky.gov/services/eprocurement/Pages/doingbusiness.aspx>
- Kentucky Secretary of State Vendor Code *
 - <https://onestop.ky.gov/Pages/default.aspx>

* Please be prepared to provide documentation within 14 business days of award notification.

Award Information

- Federal Funding Source: The Substance Abuse and Mental Health Services Administration (SAMHSA; TI083283-01)
- Funding Mechanism: Grant funding from KDBHDID
- Award Ceiling: \$110,000
- Budget: Submit a 12-month budget with an anticipated start date of December 1, 2020
- Cost Sharing/Match Requirement: No
- Service Delivery Data: To begin no later than 30 days from receipt of contract.
- Reporting Requirements: Awardees must submit monthly progress reports and participate in client-level longitudinal data collection using the Government Performance and Results Act (GPRA) tool. For an overview of the GPRA data collection requirement, please see the following:
<https://chfs.ky.gov/agencies/dbhdid/Documents/KOREGPRAManualforProviders20.pdf>

Funding parameters

Grant funds may pay for the following:

- Non-billable or start-up staff time and recovery support services, to include Peer Support.
- Supplement existing activities. “Supplement” is defined as adding new programmatic components or capacity to existing activities.
- Pay for a building lease, but not beyond the project period.
- Creating hardcopy educational materials for distribution and redesigning current materials to ensure they meet the needs of older persons.

Grant funds may not pay for the following:

- Supplant current funding of existing activities. “Supplant” is defined as replacing funding of a recipient’s existing program with funds from a federal grant.
- Pay for the purchase, construction, or renovation of any building or structure to house any part of the program.
- Support non-evidence-based treatment approaches.

Multi-Tiered Review and Selection Process

Proposals will be screened to ensure minimum eligibility requirements have been met. Proposals meeting minimum eligibility requirements will be assessed by the KORE review panel and funded on a competitive basis.

Criteria	Possible Points
1. Mandatory Submission Requirements	Pass/Fail
2. Project Narrative Evaluation Criteria	
A. Organization qualification	20
B. Description of Need and population of focus	20
C. Description of program and services to be developed	40
D. Implementation/sustainability	10
E. Performance data collection	10
Total points possible for technical proposal	100

Project Narrative Evaluation Criteria

The Project Narrative Evaluation Criteria describes what the applicant intends to do with the project and will be reviewed according to the quality of responses to Sections A-E below.

A. Organization Qualifications (20 points)

The purpose of this section is for the applicant to provide a description of the organization's experience and qualifications generally, and specifically to the provision of treatment services for OUD/Stimulant Use Disorder.

1. Provide a brief description of your organizations' experience and qualifications to reach the population(s) of focus and provide the proposed services. *Note minimum experience stated in above Eligibility section.
2. Provide a brief description of the composition of the expected community treatment and recovery support team, indicating each member's role in service delivery, credentials, and whether or not they are currently employed or contracted through your organization.
3. Describe the implementation team, advisory structure(s), and feedback loops that will be put into place to implement this expansion initiative and improve through continuous quality improvement. Include the role of individuals receiving services and/or family members of individuals to inform the implementation process, as well as peer support specialist.
4. Identify and describe the necessary community partners/organizations to provide a Lifespan Recovery-Oriented System of Care, which will ensure access to the full continuum of trauma-informed services, taking into account compounded trauma of older adults as needed, including services such as outpatient, MOUD, individual, group, family, intensive outpatient, peer support, crisis (mobile and residential), case management, and utilizing the recovery capitol scale. Include a minimum of two letters of commitment from community partners who will provide referral and recovery supports.

B. Population of Focus and Statement of Need (20 points)

The purpose of this section is to identify the geographic area(s) in which the organization plans to deliver the treatment access expansion and the sites at which these services will be provided. If the applicant proposes to provide expanded treatment services in multiple distinct geographic areas, provide this information for each area.

1. Identify the geographic area(s) in which you plan to deliver the proposed expanded services, the physical location(s) at which these services will be delivered, and the current licensure status, if any, of the physical location(s).
2. Describe the need to expand the organization's OUD/Stimulant Use Disorder services to older persons in the proposed geographic service area(s).
3. Describe the outreach plan to target the older person population to include specific attention to the inclusion of racial/ethnic minority populations.
4. State the number of older persons (55+) with OUD/Stimulant Use Disorder served annually and the proposed increase in number served if awarded.

C. Description and Implementation of Program Services (40 points)

The purpose of this section is to assess readiness for implementation and to provide the following information regarding the proposed expanded treatment services.

1. Describe the project goals and state the measurable objectives of this proposed project. The following link provides guidance on writing goals and objectives:
<https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf>
2. Describe the community network which you intend to develop and how you will implement a coordinated structure in identifying older persons with OUD/Stimulant Use Disorder, engage them in treatment, and align ongoing appropriate multi-pronged community supports.

D. Implementation and Sustainability (10 points)

The purpose of this section is to provide evidence of a feasible sustainability plan and dissemination procedures.

1. Provide an implementation timeline. For each key activity (e.g., hiring, staff training, material development, outreach to and securing community partnerships, updating website to include information specific to older persons, planned service delivery start date) list the specific time-period during which it will occur.
2. Describe a sustainability plan that supports the delivery of treatment services beyond the 12- month award period.
3. Describe the applicant's plan for disseminating information to participating entities, the target service area, and the broader public regarding the applicant's program's activities, and lessons learned.

E. Performance Data Collection and Reporting (10 points)

To ensure accountability at all levels of service provision, the articulation and achievement of measurable outcomes is critical to help ensure that we are carrying out the most effective programming possible. At a minimum, applicants will be expected to collect and report data indicators and measures as described in this Notice of Funding Opportunity.

1. Describe your organizational procedures for collection and reporting of client demographic and service data using the Government Performance and Results Act (GPRA) tool. *See link to GPRA manual in Award Information Section
2. Describe how you will use data for planning, evaluation, and quality improvement purposes.

Mandatory Submission Requirements

1. Cover letter on agency letterhead.
2. Project abstract/summary of proposal.
3. Project Narrative Sections A-E.
 - Sections should be organized and labeled such that each is clearly identifiable to the reviewers (e.g., B-1, B-2, etc.)
 - Proposals must be double-spaced using Times New Roman 12-point font
 - Pages must be numbered consecutively from beginning to end of the Proposal Narrative
 - The page limit for the Proposal Narrative is 6 pages, excluding the cover page and attachments. Any narrative information that exceeds the 6 -page limit will be excluded from the review process
4. Detailed Budget Worksheet and Narrative using template provided.
5. A minimum of two letters of commitment for direct service provider organizations that will assist in increasing access to SUD treatment and a life span recovery-oriented system of care. Do not include letters of support.
6. Signed Attestation to Access to FDA-Approved Medications for Opioid Use Disorder form.
7. Copy of the 501(3)(c) IRS letter indication non-profit status.

All materials must be submitted in a combined PDF titled **KORE_Recovery4All_2020** and **the name of your agency** by email to kore@ky.gov no later than 5pm ET on **November 6, 2020**. For example, **KORE_Recovery4All_2020_AgencyABC**.

Questions:

Please submit questions regarding proposals to KORE at KimberlyD.Hillard@ky.gov or kore@ky.gov.