The Celia Lipton Farris and Victor W. Farris Foundation

Connected Care Telehealth Initiative

Background

Healthcare providers are rapidly expanding telehealth services because of the Coronavirus pandemic. This shift is transforming how the field is responding to client needs and reshaping how it delivers behavioral health care. The Farris Foundation is eager to help organizations respond to immediate community needs and leverage technology to improve healthcare access and services for the future.

Goals

The goal of the initiative is to support practical, "building block" projects that help behavioral healthcare organizations expand their capacity to serve clients during the Covid-19 crisis and better integrate telehealth into their behavioral health services. It also recognizes the opportunity to support the professional development of behavioral health staff in a period of crisis and recovery.

Grants will range from $20,000 to $50,000 per year for project support.

Timeline

2020 Activity	Date
Announcement	August 5
Concept Proposals Due	September 1
Concept Proposal Decisions	September 21
Full Proposals Due	October 16
Grants Announced	Early November

Background

> *Now more than ever, we need to find ways to stay connected with our community. No one should feel alone or without the information, support, and health they need.*

The global COVID-19 pandemic is a watershed moment in public health. It lays bare our failures as a society to care for the most vulnerable, and shines a bright light where we can do much better. It is heartening to see how quickly organizations have responded to the ongoing crisis and have begun to transform the way they use technology to increase access to care and improve health.

Advocates of telehealth are rallying organizations to approach telehealth not as simply an adjunct to care, but as an integrated, evidence-based component of the standard of care.

The Connected Care Initiative seeks to build on this momentum and help organizations demonstrate what this emerging concept means in their day-to-day work. Grants will support efforts that are both practical and visionary such as:

- reducing avoidable hospital use by increasing patient access to services not otherwise available and/or increase specialty expertise of primary care providers and their staff in order to increase availability of specialty care services.
- improving care coordination across a continuum of behavioral health care.
- increasing collaboration within organizations, among providers, and support organizations through telehealth programming.
- replicating or enhance of evidence-based interventions.

Funding will support organizations at two levels of capacity:

Maturing Telehealth Providers. The Maturing track is designed for organizations that have more recently begun to integrate telehealth into their operations. Grants in this category will help organizations launch discrete projects that help them get to the "next level" of capacity as they define it. Maturing Applicants will have established some reimbursement mechanisms for telehealth services, demonstrated staff and departmental cooperation in implementing telehealth services, and have a recent history of successful technology adoption and integration.

Grants in this category will help organizations address gaps in healthcare delivery by:

- developing new telehealth extension strategies and reaching out to new client groups;
- overhauling workflows and improving coordination of care;
- Improving telehealth data analytics, data transparency, data governance, documentation standardization, process and outcome metrics that evaluate access to care, cost effectiveness and overall patient/provider experiences;
- improving screening, virtual assessment, diagnostic, or monitoring services.

Telehealth Innovators. The Advanced or Innovation track is designed for organizations further along in their implementation of virtual care approaches.

Grants in this category will help organizations with committed teams test, learn, and share best practices and:

- explore new collaborations and partnerships, involve new allies, and create new roles and relationships;
- collaborate with other professionals to develop telebehavioral health resources in the community;
- experiment with novel structures and systems that strengthen services in different ways;
- replicate, redesign, scale-up, disseminate or refine promising new approaches that meet client needs.

Professional Development. The Foundation is eager to consider requests that focus on professional development in both Maturing and Advanced categories of funding. Grants will fund innovative efforts that use telehealth to build and extend programs, resources, and practices that promote workforce wellness, learning, and job satisfaction. Grants will support efforts that:

- promote team development and interprofessional collaborative practice;
- build and formalize new methods/tools, technologies, platforms for learning, communication, sharing, support and collaboration;
- increase telehealth competency of staff;
- develop continuing education opportunities that offer training and mentorship in behavioral health for staff with less access to such programs;
  promote interprofessional training and collaboration that reduces cultural barriers to care or help facilitate patient care that addresses both medical and behavioral health needs.

Eligibility

The Foundation defines behavioral telehealth broadly. It includes basic telecommunication tools as simple as phone calls, text messages, emails, videoconferences, or more sophisticated online health portals that allow patients to communicate with their providers.

Eligible applicants include direct providers of healthcare services and support organizations of direct providers targeting underserved individuals and families in low-income communities. Applicants include community health centers, community mental health centers, rural health clinics, consortia of health care providers, not-for-profit hospitals, and other non-profit behavioral health organizations that provide direct services.

Lead applicants must have a core mission that focuses on behavioral health. The Fund will give priority to projects in the fields of addiction, trauma, depression, and other mental health disorders. Fields of developmental disabilities, and traumatic brain injury are less of a priority in

the pilot phase of the initiative. Organizations that do not specialize in behavioral health are encouraged to work in collaboration with a community partner that does.

What will it fund?

Proposal elements and budget submissions may include, but are not limited to:

- Consultation, planning, feasibility research
- Professional or technical staffing expenses for defined start-up/transition period
- Implementation costs for third party vendor support. (i.e. software upgrades/enhancements).
- Provider education, training, case consultation, peer support
- Program coordination, outreach, monitoring, and evaluation

Grant Types

The Fund will award grants up to $50,000 per year to implement projects that help organizations increase access to care and build capacity in telehealth.

If proposed over multiple years, projects will be expected to have annual benchmarks, which will be confirmed at the time of the initial grant, and will be conditions for each successive year of funding.

Grants will favor organizations that have done their homework and have deep insight about a particular challenge or opportunity. Projects will have action plans that build on existing momentum, respond to clearly defined needs and opportunities, and have identified measurable activities and outcomes.

What the Foundation Looks for in a Project

The Foundation seeks to learn from projects that help develop innovative solutions that stretch beyond the basic technological implementation challenges of telehealth. It will look for projects that push organizations to approach the more challenging questions of access, equity, engagement, follow-up, accountability, feedback, and peer-to-peer support. The Foundation will reward creativity, experimentation, and a pioneering spirit.

We are looking for proposals that communicate:

A sense of urgency. The project is timely, rooted in specific behavioral health and organizational challenges, and would be recognized by peer organizations as a top priority.

Readiness for strategic action. Clarity about the role the organization or organizations seek to play in advancing practice. The applicant will use the funding to take meaningful steps toward a long-term vision.

Clear goals and objectives. The project has a strong outcomes and results orientation.

A learning orientation. The project addresses interesting questions about the challenges of the work that are useful to others.

Racial and gender equity. The project makes an effort to address racial and gender equity.

Eligibility Criteria

1. **Nonprofit organizations**. Applicants must be U.S. based non-profit organizations with approved IRS 501(c)(3) status or fiscal agents with a 501(c)(3) status. Collaborations may include organizations that do not have a 501(c)(3) designation.

2. **Target communities**. Provide the majority of its services in one the following communities:

    - Buffalo, New York
    - Northern New Jersey
    - Urban and rural counties in Maine
    - Palm Beach & Broward County, Florida
    - Northwest region, North Carolina
    - Santa Fe and Bernalillo County, New Mexico

3. **Behavioral health mission.** Lead applicants must have a core mission that focuses on behavioral health. The Fund will give priority to projects in the fields of addiction, trauma, and depression. Fields of long-term care, developmental disabilities, and traumatic brain injury are less of a priority in the pilot phase of the initiative. Organizations that do not specialize in behavioral health are encouraged to work in collaboration with a community partner that does.

4. **Local leadership**. Applicants that are based outside the target communities are encouraged to apply with a community partner.

5. **Match requirement**. There is no funding match requirement, but financial and in-kind contributions toward the project budget will strengthen the case for support.

6. **Organizational size.** The Foundation will favor requests that have potential to benefit the most staff and clients in a system, network, or community. We encourage small organizations to apply in coalition with other community partners. An individual organization may be included in multiple funding applications if it is part of more than one proposed collaborative project.

Use of Funds

Allowable costs. Funds may be used for personnel, meetings, supplies, project-related travel, and contractors or consultants. The Foundation prefers to support staffing and program expenses over equipment.

Indirect costs. The Foundation will support indirect costs provided they are fully justified.

Exclusions

- Academic research or writing
- General operating expenses
- Capital campaigns or improvements
- Conferences or one-time workshops
- Political lobbying
- Policy campaigns addressing reimbursement policies, regulation of licensure/certification, or state workforce monitoring.
- Fellowship or scholarship programs

Award Information

A. **Estimate of Funds Available and Number of Awards Envisioned**. The intent of the Foundation is to award a number of grants to selected proposals. Applicants may request $50,000 per year.

B. **Notification of Award Recipients.** Winning institutions will be notified no later than November, 2020. The list of grant recipients will be published on www.farrisfdn.org.

C. **Grantee Expectations**

Recipients of the Fund should expect and plan on the following:

1. **Peer Exchange**: The Foundation hopes that grantees can learn from each other. Grantees should expect to join calls or webinars with other grantees. The Foundation hopes that in the future it will be able to support possible in-person convening for peer exchanges (travel funding will be provided).

2. **Grant Reporting:** Grantees will be asked to provide short, mid grant updates as well as a final written report.

3. **Long-Term Tracking:** Grantees may be asked to fill out a survey or participate in follow-up calls after the project period.

How to Apply

The Fund will accept letters of inquiry for grants up to $50,000. The Foundation will be making continuation grants for up to two years total based on progress.

Letters of inquiry are due by 5:00 PM Eastern time on September 1, 2020.

Please use our **Online Application System** to register your organization (if you already have an account in our current system because of the last initiative, please log in to that one, you do not need to register again), and fill out the LOI form **(Access Code: farris).** No other forms of submission will be accepted.

Read the program description and online forms carefully to ensure your potential request is a sound fit with the fund and assess your readiness to apply at this time.

The Foundation will invite a limited number of full proposal applications for the October 16, proposal deadline by mid-September. Grants will be released in November.

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Frequently Asked Questions

Can a regional or national organization apply to replicate or pilot projects in one or more of the target communities?

We are open to all forms of collaboration as long as the proposal and project is led by an organization in the target community and has a set of long-term objectives.

The guidelines are broad. Do you have any examples of what issues are eligible?

At this early phase, the Foundation is open to learning how organizations would like to approach this work. We are paying particular attention to promising initiatives that:

- Approach telehealth not as simply an adjunct to care, but an integrated, evidence-based component of the standard of care.
- Use telehealth for prevention and health promotion as well as direct care.
- Broaden and deepen access for vulnerable populations.
- Explore additional tools that expand the range of telehealth practice.
- Address challenges for people that do not have computer or internet access.
- Address language and cultural barriers to behavioral health care.
- Leverage telehealth for substance use disorder treatment and access to specialty care.
- Reinforce strict compliance with state and county-specific laws, and the current practice guidelines of the field.
- Improve performance measures that capture the quality of care provided and improve patient feedback about the care they are getting.
- identify additional factors that promote telehealth acceptance, such as human-technology interaction, organization of the health care system, and social factors.

Thank you for your interest in this grant opportunity