Addressing Alzheimer's Disease in Indian Country
IHS Funding Opportunities

Technical Assistance Webinar: Cooperative Agreements NOFO

Elder Health Team
Division of Clinical and Community Services (DCCS)
Indian Health Service
April 21, 2023

NOTE

- The information contained within this presentation is intended as only to supplement and provide guidance for the Notice of Funding Opportunity as published on Grants.gov and the Program Award Application available on the Alzheimer's Grant Program web page. In all cases those sources remain the official record for the requirements for application

- External, non-IHS links included in this presentation do not constitute official government endorsement on behalf of the Indian Health Service (IHS). The IHS makes no representations regarding the quality, content, completeness, suitability, adequacy, sequence, accuracy or timeliness of such information and disclaims any responsibility for errors

- All webinars are recorded

Overview

- 2023 funding opportunities

- Background

- Walk through key parts of NOFO

- Funding opportunity resources

- Other IHS dementia activities

- Questions

The IHS Elder Care Team

Jolie Crowder, PhD, MSN, RN, CCM;
National Elder Care Consultant, DCCS

Valerie Jones, MPA, MA;
Elder Health Care Data Coordinator, DCCS

Bruce Finke, MD;
Geriatrician, IHS Elder Health Consultant

The Funding Opportunities

Cooperative Agreements

- Funding Announcement Number: HHS-2023-IHS-ALZ-0001
- Eligibility: Tribes, Tribal Organizations, and Urban Indian Organizations. *Cannot be an existing Dementia program awardee.*
- Federal Register Publication: Addressing Dementia in Indian Country: Models of Care
- Funding Amount: Awards of between $100,000 and $200,000 per year for 2 years
- Anticipate 6 awards
- Application period end date: June 27, 2023

Program Awards

- Eligibility: IHS Service Units working in partnership with the Tribe(s) and Nations that they serve under the condition that the Tribe(s) or Nations served by the IHS Service Unit have elected not to apply for a Cooperative Agreement (above)
- Application Materials: Program Award Information & Fillable Application Template
- Funding: Awards of either up to $50,000 **or** up to $200,000 per year for two years
- Anticipate up to $600,000 in awards
- Application period end date: June 12, 2023

Cooperative Agreements - Addressing Dementia in Indian Country: Models of Care

Background *Pages 1-4*

- Dementia affects lives in every tribe and tribal community

- Most risk factors are more common and can be used to identify those at risk

- Many individuals go unrecognized, undiagnosed, and untreated until revealed by a crisis

- Diagnosis should most often be made in primary care, but many primary care providers lack the confidence, knowledge, and/or tools to make the diagnosis

- Specialty referral can be helpful in some cases but often access is a barrier, and impacts timely recognition and diagnosis

Background *Pages 1-4*

- Recognition and diagnosis lead to services, time to plan, and better quality of life

- Effective management is inter-disciplinary and requires collaboration across organizations and between clinic and community, particularly aging services

- Families & patients are often left to coordinate complex care and services

- Care for persons living with dementia must include care for their caregivers, who experience disproportionate negative mental and physical health outcomes, cost, and burden

Background *Pages 1-4*

- Emerging models and approaches to comprehensive care exist with increasing evidence to support adoption and/or adaption

- Collaborative and coordinated care models examples

  – UCLA Alzheimer's Dementia Care Program

  – Care Ecosystem

  – MIND at home

- Existing evidence-based interventions focused on people living with dementia <u>and their caregivers</u> with some documented success in tribal communities

  – REACH II, REACH into Indian Country

  – Savvy Caregiver for Indian Country

  – BRI Care Consultation

- Dementia Friendly Communities

Background *Pages 1-4*

- Enrollment in collaborative care programs associated with:

  – Reductions in behavioral symptoms of dementia

  – Improved functioning and quality of life

  – Less frequent use of acute medical services

  – Decreases in caregiver burden

- One size does not fit all

- Few tested or implemented in tribal communities

- Most will require adaptation to account for rurality, workforce, infrastructure, access, culture, and more

Effective models for addressing dementia in Tribal and Urban Indian communities will be supported by evidence and will emerge from development, adaptation, and evaluation in those communities.

Purpose *Page 3*

To support the development of comprehensive and sustainable (models of) dementia care and services in Tribal and Urban Indian communities that are responsive to the needs of persons living with dementia and their caregivers.

Awardees will:

- Plan and implement a comprehensive approach to care and services for persons living with dementia and their caregivers, that addresses:
    1. Awareness and recognition
    2. Accurate and timely diagnosis
    3. Interdisciplinary, person-centered assessment
    4. Management and referral
    5. Support for caregivers

- Develop (collaboration with the Alzheimer's Grant Program) best and promising practices, tools, resources, reports and presentations to share with others

- Identify and implement reimbursement and funding streams to support sustainability

A comprehensive approach to addressing dementia requires partnerships and collaboration across boundaries, services, service lines, and organizations. *Page 3*
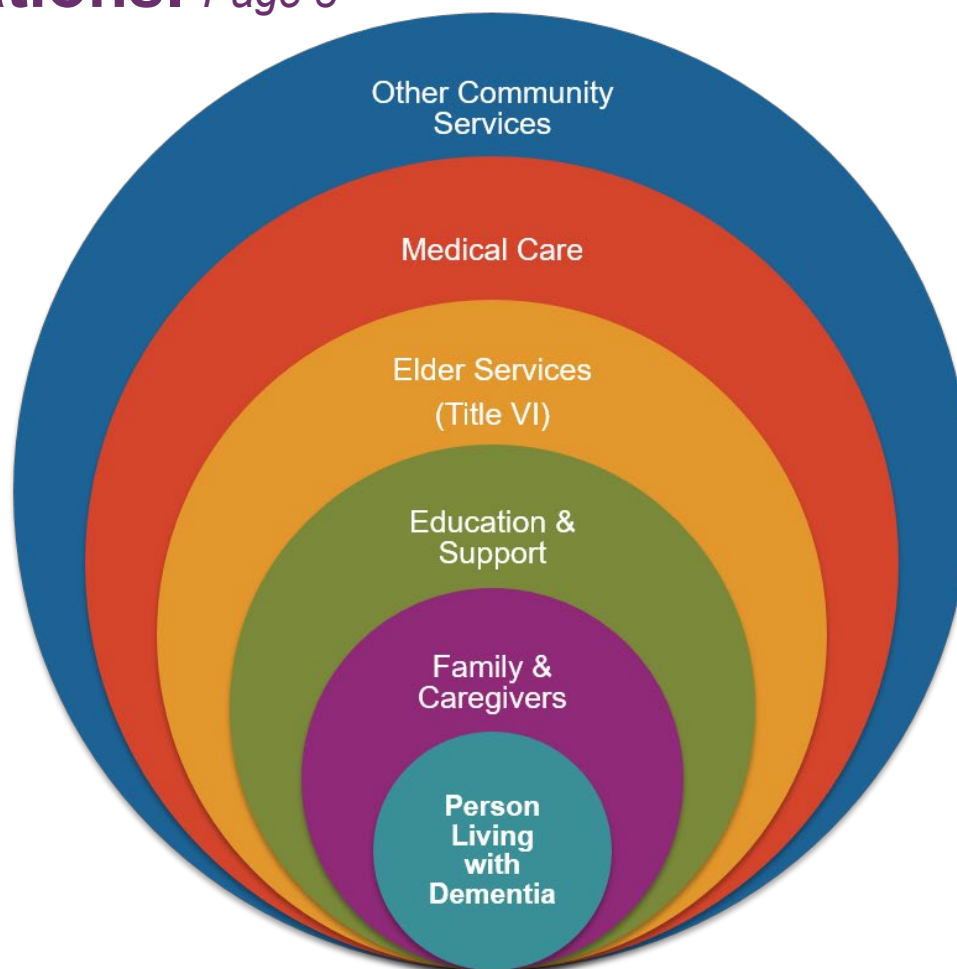
5 Key Elements of Comprehensive Care – Drivers *Pages 3-4*

Awareness & Recognition

Opportunities in the community and clinic to increase awareness Understanding risk factors for dementia Reduce stigma

Accurate & Timely to Diagnosis

Early recognition and diagnosis. Capability to diagnose in primary care, with specialty care as a resource as needed for complex cases. Patient & family aware of diagnosis

Interdisciplinary, Person Centered Assessment

Clinical, functional, and social assessment Identification of needs / gaps in care

Management & Referral

Slow progression Care planning & advanced care planning Anticipate and address challenges Resources to meet needs / gaps Assemble support

Support for Caregivers

Identification and Care for the Caregiver is integral to care for the person living with dementia

Cooperative Agreements - Substantial IHS Involvement *Pages 8-9*

- Collaborate on project planning, implementation, and assist with tools and resources

- Coordinate with Alzheimer's Grant Program in the dissemination of tools, support, implementation experience, and presentations to others

- Convene regularly (not more than monthly) to share experience and progress with other awardees

- Links to public and private potential collaborators

- TA from Alzheimer's Grant program including evaluation and sustainability planning

- IHS will coordinate reporting (e.g., identified metrics utilized, achieved goals, identified best practices, etc.)

Eligibility & Application *Pages 9-13*

Eligibility

- Tribes, Tribal Organizations, and Urban Indian Organizations

- No cost sharing

- Tribal resolution or draft resolution – final *prior to award*

- Proof of non-profit status when applicable

Application

- Access the application from Grants.gov

  – Funding Announcement Number: HHS-2023-IHS-ALZ-0001

- No late applications accepted

- Submit early

  – *If you submit early, your organization will have a chance to fix problems/errors (as long as this is done by the due date)*

Parts of the Application *pages 13-14*

- Application forms:
  - SF-424, Application for Federal Assistance
  - SF-424A, Budget Information – Non-Construction Programs
  - SF-424B, Assurances – Non-Construction Programs.
  - Project Abstract Summary form (1 page)
- Project Narrative (not to exceed 10 pages).
- Budget Narrative (not to exceed 5 pages).
- Work plan chart
- Tribal Resolution(s), if applicable
- Letters of Support from organization's Board of Directors (optional)
- 501(c)(3) Certificate, if applicable

- Biographical sketches for all Key Personnel
- Contractor/Consultant resumes or qualifications and scope of work
- Disclosure of Lobbying Activities (SF-LLL), if applicable
- Certification Regarding Lobbying (GG-Lobbying Form)
- Copy of current Negotiated Indirect Cost (IDC) rate agreement (required to receive IDC)
- Organizational Chart
- Documentation of current Office of Management and Budget (OMB) Financial Audit, if applicable

Requirements for App and Budget Narratives *Pages 14-18*

- Follow the format guidelines – font, page length, margins, etc.

- Pay close attention to the evaluation criteria when writing narratives

- Page limits for the project narrative are guidelines, not requirements

- 3 parts to project narrative (pay attention to details & be responsive):

  – Part 1 – Program Information

  – Part 2 – Program Planning and Evaluation

  – Part 3 – Program Report

- Budget narrative – 5-page max – hard limit

  – Provide sufficient detail to fully explain each item especially "Other"

  – Must match the SF-424A

Application Review & Evaluation *Pages 24-27*

- Pay attention to scoring criteria and requirements!

- Write for outside reviewers not familiar with program or community

- Succinct, concise, and thorough – don't duplicate between documents and attachments

- 100 possible points

  – Introduction and Need for Assistance - 10 points

  – Project Objective(s), Work Plan, and Approach - 30 points

  – Program Evaluation - 30 points

  – Organizational Capabilities, Key Personnel, and Qualifications - 20 points

  – Categorical Budget and Budget Justification - 10 points

Objective Review Committee (ORC) Process

- Incomplete applications and applications that are not responsive to the administrative thresholds (budget limit, period of performance limit) **will not be referred** to the ORC

- Applications that pass screening are peer reviewed by a panel of at least three people, who assess and score each application independently

- Then, the peer review panel will convene to discuss the merits of the applications

- A series of policies and assurances are in place to maintain a fair, objective process based on material facts in the applications and without conflicts of interest for the peer reviewers

- The federal agency staff monitor and participate in this review

Notification and Reporting

- All applicants receive summary of review findings

- Notice of Award (NoA) is the (official) authorizing document for which funds are dispersed to the approved entities

  – Amount of Federal funds awarded
  – Purpose of the award
  – Terms and conditions of the award
  – Effective date of the award
  – Budget period
  – Period of performance

- Reports
  – Quarterly progress reports on template provided
  – Final report within 120 days of the end of overall grant period
  – Federal financial report within 90 days of budget period (12 months)
  – Final financial report within 12 days of end of overall grant period
  – Driver diagram developed in conjunction with IHS team
  – Requirement to share resources, tools, presentations, etc. to disseminate with others
  – Continuation of funding contingent on compliance with reporting requirements and performance achievement

What to do NOW to Prepare

- Items to check with your organization's grant/financial office now:

    - **SAM.gov**: Ensure your organization's SAM.gov is current.

    - **AOR**: Ensure your organization has an Authorized Organization Representative (AOR) and make sure they can submit the ALZ application. Also keep track of your AOR

    - **Grants.gov**: Ensure your organization is registered in Grants.gov.

        - Grants.gov is the site used to submit your 2022 applications.

- Identify partners

- Leadership outreach (tribal resolution)

- Attend upcoming training opportunities

Funding Opportunity Resources

1. IHS Alzheimer's website: https://www.ihs.gov/alzheimers/

   – See "Planning Resources" on 2023 funding opp page: https://www.ihs.gov/alzheimers/fundingopps/2023fundingopp/

2. Grants.gov Website

   – Registration, application process

3. IHS Division of Grants Management

   – https://www.ihs.gov/dgm/

4. IHS Elder Care team consultations – email jolie.crowder@ihs.gov

Funding Opportunity Resources

Webinar Series to Support Tribal Capacity Building

IHS Alzheimer's Grant Program Webinar Series

Models of Dementia Clinical Care
Tribal Capacity Building

- Overview & comparison of existing models of comprehensive community and health system-based models of dementia care
- Clinical perspectives on the evidence-based Alzheimer's and Dementia Care (ADC) Program

April 25 @ 4:00 PM ET

David Reuben, MD
Geriatric Medicine Specialist
University of California, Los Angeles (UCLA)

Michelle Panlilio, DNP, MSN, NP
Geriatric Medicine Specialist
University of California, Los Angeles (UCLA)

REGISTER TODAY
http://bit.ly/3LYcuqo

Program info: https://www.ihs.gov/alzheimers/

- **1st Webinar –** April 25 @ 4pm Eastern Time
- **Register:** http://bit.ly/3LYcuqo

Funding Opportunity Resources

Contacts

Dr. Jolie Crowder
National Elder Services Consultant
Office of Clinical and Preventive Services
Division of Clinical and Community Services
Indian Health Service
5600 Fishers Lane, Mailstop: 08N34-A
Rockville, MD 20857
Phone: (301) 526-6592
Fax: (301) 594-6213
E-mail: jolie.crowder@ihs.gov

Donald Gooding
Grants Management Specialist
Indian Health Service, Division of Grants Management
5600 Fishers Lane, Mail Stop: 09E70
Rockville, MD 20857
Phone: (301) 443-2298
E-mail: Donald.Gooding@ihs.gov

Other IHS Dementia Activities

- **See:** https://www.ihs.gov/alzheimers/alztraining/

- **Join:** IHS Elder Care LISTSERV

- **Participate:** Clinical and Caregiver ECHOS supported by IHS Alzheimer's Grant Program

- **Learn:** Indian Health Geriatric Scholars (GeriScholars) and Other Workforce Efforts – *Stay tuned for applications early summer*

INDIAN + COUNTRY ECHO

Dementia Clinical ECHO
2nd Thursday of Each Month | 11:00AM - 12:00PM PT

Support for Indian Health Service, Tribal, and Urban Indian clinicians to strengthen knowledge and confidence to detect, diagnose, and manage care for American Indian and Alaska Native people living with dementia. Includes collaborative learning, case-based presentations, knowledge sharing, consultation, and support during virtual ECHO clinics. Topics include: stages of dementia, care planning, medications, management of challenging behaviors, culturally responsive holistic care, and more..

Funded by the Indian Health Service Alzheimer's Grant Program

Sign Up Today: HERE

Beginning May 11, 2023

INDIAN + COUNTRY ECHO

Dementia Caregiver ECHO
4th Thursday of Each Month | 11:00AM - 12:00PM PT

Free ECHO collaborative to learn, share knowledge and support during virtual ECHO clinics focused on staff who provide support for caregivers in the challenges they face in caring for individuals with dementia. Topics include: challenging behaviors, caregiver self-care, care planning and navigation, financial and physical safety, and mobilizing family resources.

Funded by the Indian Health Service Alzheimer's Grant Program

Sign Up Today: HERE

Beginning June 2023

Thank you!

For more about Alzheimer's disease and other dementias and the IHS Alzheimer's Grants Program, visit: https://www.ihs.gov/alzheimers

For more information, contact
Jolie Crowder, PhD, MSN, RN, CCM
National Elder Services Consultant
Division of Clinical & Community Services
Indian Health Service Headquarters
jolie.crowder@ihs.gov

Abbreviations

- **AI/AN** = American Indian/Alaska Native
- **AOR** = Authorized Organization Representative
- **COI** = Conflict of Interest
- **DCCS** = Division of Clinical and Community Services
- **DGM** = IHS Division of Grants Management
- **DTLL** = Dear Tribal Leader Letter
- **DUIOLL** = Dear Urban Indian Organization Letter

- **IHS** = Indian Health Service
- **NOFO** = Notice of Funding Opportunity (also known as FOA)
- **ORC** = Objective Review Committee
- **SAM.gov** = System for Award Management
- **UEI** = Unique Entity Identifier