# DSAMH Mini-Grants to Expand Treatment Capacity to Engage and Serve High-Risk Populations with Opioid and/or Stimulant Use Disorders

**Program Summary**

The Department of Health and Social Services (DHSS), Division of Substance Abuse and Mental Health (DSAMH), is charged with developing evidence-based strategies to address the opioid and stimulant use epidemics. This application packet introduces DSAMH's framework for awarding State Opioid Response (SOR) funding to providers of direct services to individuals at risk for or with opioid use disorder (OUD) and stimulant use disorder (STUD). This aligns with DSAMH's broader efforts to:

- Decrease opioid overdoses statewide through development and expansion of projects and resources focused on low threshold access to treatment and targeted referral systems.
- Improve understanding of and engagement and retention in OUD/STUD treatment for those currently accessing the system by enhancing and expanding current prevention, treatment, and recovery services for patients, families and communities.
- Identify and engage high risk populations in treatment through universal screening and direct, efficient referral of individuals with OUD/STUD and others affected by the illness to existing treatment and recovery services.

DSAMH hopes to effectuate these goals through a tiered system of funding opportunities: the Tier Award Payment (TAP) program. The three tiers focus on:

- Tier 1: universal substance use disorder (SUD) screening protocols,
- Tier 2: active engagement and re-engagement services to boost retention in SUD services and improve safety and recovery outcomes, and
- Tier 3: innovative evidence-based and high impact SUD treatment and overdose prevention programming that targets underserved and high-risk populations.

This mini-grant application is designed to fund **Tier 2** and **Tier 3** projects. Figure 1 provides an overview and example project elements for the tiers.

| Figure 1. Overview of Tiers 2 and 3 Funding Opportunities |
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| **Tier 2** |
| Objective<br>- Projects that strengthen initial and ongoing engagement of individuals with OUD/STUD, including those who are actively using substances, to link or retain them into care and promote their safety<br><br>Core Components<br>- Evidence-based patient-centered engagement strategies<br>- "Outside the four walls" approaches<br>- Ability to help clients navigate and bridge support across levels of care<br>- Capacity to sensitively, nonjudgmentally, and effectively respond to substance use-related lapses<br>- Stronger focus on client safety including naloxone access and distribution<br>- Addressing social determinants of health (SDOH) related barriers to treatment engagement<br>- Connecting uninsured clients to Medicaid coverage when appropriate<br>- Medications for Opioid Use Disorders (MOUD) education for clients with OUD |

- Participation in learning collaborative meetings and customized technical assistance

Prerequisites
- Must have process in place to identify individuals with OUD/STUD

Project Examples
- Community-based evidence-based engagement teams and efforts focused on engaging individuals not yet in treatment and/or retaining current clients into care
- Treatment planning protocols to address SUD/co-occurring disorders for those in Institutions for Mental Disease (IMDs) receiving mental health services
- Building internal clinical capacity to accept referrals for clients with co-occurring SUDs
- Registry development in primary care for tracking engagement and referrals activities
- Monitoring and tracking referrals to treatment, specialty care, and treatment
- Exchange of clinical information with treatment providers for patients engaged in SUD treatment
- Client education protocols and motivational interviewing to support MOUD engagement
- Projects and policies to engage and re-engage clients who are actively using (e.g., readiness groups) or who lapse
- Naloxone education and distribution protocols
- SDOH screening and strategies/projects to address social needs (e.g., provision of transportation)
- Operational partnerships to MOUD providers and linkages for appropriate patients
- Linkages to Medicaid enrollment services
- Discharge planning that includes warm handoffs – when appropriate – to MOUD and other evidence-based SUD services
- Implementation of trauma-informed and trauma-specific interventions to enhance engagement

Data Collection Requirements
- Number of clients receiving MOUD-focused education sessions
- Number of clients provided naloxone prescriptions or naloxone kits
- Description of new strategies to address social needs
- Description of operational partnerships with MOUD providers
- Number of MOUD referrals
- Number of clients linked to Medicaid enrollment services
- Reporting on customized programmatic measures – agreed upon by applicant and DSAMH – based on the objectives of the specific program

| Tier 3 |
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Objective
- Projects that expand access to evidence-based services – including Medications for Opioid Use Disorder (MOUD) – to individuals with OUD/STUD with special focus on those with elevated overdose risk and underserved populations, such as individuals with justice involvement, pregnant and postpartum women, transition-aged youth, and individuals with past overdose.

Core Components
- Expansion of service availability and/or on-demand access (e.g., same day access protocols, 24/7 service delivery)
- Prioritization of MOUD as the gold standard of OUD treatment
- Outside the four walls approaches
- Focus on underserved population with elevated overdose risk
- Ability to actively engage and promote safety among persons currently using substances
- Evidence-based SUD services that match treatment environment
- Participation in learning collaborative meetings and customized technical assistance

Prerequisites
- Must meet Tier 2 requirements identified above.

Project Examples
- Expand 24/7 and same day access to MOUD (including within Opioid Treatment Programs)

- Implement Office-Based Opioid Treatment (OBOT) with efficient initiation of buprenorphine prescribing
- Assertive outreach teams with focus on harm reduction teams and social determinants for pre-recovery
- Build out of new internal levels of care to reduce handoffs between providers
- Innovative partnerships with the criminal justice system to prevent overdose and facilitate access to MOUD among justice-involved individuals
- New or expanded evidence-based co-occurring (mental health/SUD) services
- Contingency management programs or other innovative approaches to treating STUD
- Mobile MOUD and harm reduction teams/clinics
- Build specialized services that actively engage and effectively serve high-risk cohorts with elevated overdose risk (e.g., older adults, construction and trade workers, food service workers)

Data Collection Requirements
- Reporting on customized programmatic measures – agreed upon by applicant and DSAMH – based on the objectives of the specific program
- Client-level GPRA data collection at baseline, follow-up, and discharge is required for individuals receiving treatment services

**Eligible Applicants**
Eligible applicants include outpatient medical practices (including primary care practices, Federally Qualified Health Centers, women's health practices, infectious disease practices, and outpatient psychiatric practices), Institutes for Mental Disease, behavioral health/mental health treatment organizations, Accountable Care Organizations, and other health and human services providers that serve individuals with opioid and/or stimulant use disorders.

**Technical Assistance**
DSAMH is hosting two virtual technical assistance webinars for potential applicants to provide an overview of and answer questions on the mini grant opportunity. The virtual webinars will be offered on the following dates/times.

- Monday May 24, 2021 – 10:00am-11:00am est – register here: https://healthmanagement.zoom.us/meeting/register/tJ0sduuppz8sEtM1wVbnU3gww7tqvKN0Yhrm
- Tuesday, May 25, 2021 – 5:00pm-6:00pm est – register here: https://healthmanagement.zoom.us/meeting/register/tJAvd-yppj4sHdAlqZhKhXgQyQ_nwgRh1Hu

DSAMH will also release Tier 2/3 Resource Guides that identify best practices, sample projects, and performance metrics that align with this mini grant opportunity. Resource guides will be posted to the DSAMH website in late May 2021.

**Application Submission Process**
This grant opportunity has a rolling deadline. **Applications received by August 31, 2021, will be reviewed and considered for funding in the next cycle.** Questions and final applications should be submitted by email to DSAMH.ORT@Delaware.gov.

**Funding**
Funding is being provided through DSAMH's State Opioid Response (SOR) grant from SAMHSA for the period of July 1, 2021 to September 29, 2022 or five quarters (Quarter 1: July 1, 2021 to September 29, 2021;[1] Quarter 2: September 30, 2021 to December 31, 2021; Quarter 3: January 1, 2022 to March 31, 2022; Quarter 4: April 1, 2022 to June 30, 2022; Quarter 5: July 1, 2023 to September 29, 2022.] Funding is contingent upon availability.

- Tier 2 applicants can request up to $100,000 (approximately $20,000 per quarter)
- Tier 3 applicants can request up to $500,000 (approximately $100,000 per quarter)
- Applicants that apply for both Tiers 2 and 3 ("hybrid" applicants) can request up to $600,000. Quarterly disbursements will be based on when the provider transitions to and is able to meet Tier 3 program requirements.[2] Providers that apply for Tier 2 only can apply for Tier 3 at a later time if funding remains available.

Award totals will vary based on multiple factors, including the number of unduplicated patients for whom the applicant proposes to provide services, the likely impact of the applicant's project on clinical outcomes and the communities it serves, and the applicant's degree of focus on priority populations at disproportionate risk for OUD and STUD. Contract award(s) may be extended subject to the availability of SAMHSA SOR grant or other funds and pending satisfactory performance and continued need.

The first quarterly disbursement will be made after award in July 2021. Subsequent quarterly disbursements will be contingent upon submission of monthly project reports that meet the data collection requirements outlined in each applicant's agreement. Project reports must be submitted within 10 days of each month. Instructions for data reporting and submission will be detailed in agreement between DSAMH and the awardee.

**Solicitation, Application Review, and Award Timeline**
Below provides an estimated timeline for mini grant application review and award processes for projects starting on July 1. These timelines are subject to change.

- Mini grant solicitation release – May 19, 2021
- First rolling application deadline[3] – June 14, 2021
- Application review completed by review committee – June 21, 2021
- Awarded applicants selected – June 25, 2021
- Agreement finalized – June 30, 2021
- Projects begin – July 1

**Please contact DSAMH.ORT@Delaware.gov if you have any questions.**

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[1] This quarter is shortened due to the end date of the federal fiscal year.
[2] For example, a provider may design their program to meet Tier 2 requirements for July to December 2021 (two quarterly disbursements of up to $20,000) and then transition to Tier 3 from January to September 2022 (three quarterly disbursements of up to $100,000).
[3] DSAMH will accept applications as early as May 20, 2021.