

Suicide Prevention Support for Health Care Clinics Working with Michigan's Health-Disparate Populations

Request for Proposals due September 15, 2020

The funding organizations sponsoring this initiative have a longstanding interest in promoting access to quality care and supporting efforts to improve community health status. We're joining forces to assist health care clinicians and behavioral health specialists implement sustainable, evidence-based practices that address the growing epidemic of suicide in Michigan.

About the Funders



The *Michigan Health Endowment Fund* works to improve the health and wellness of Michigan residents and reduce the cost of health care, with a special focus on children and seniors. More information about the Health Fund can be found at mihealthfund.org.



Blue Cross Blue Shield of Michigan and the Blue Cross Blue Shield of Michigan Foundation (the philanthropic affiliate of Blue Cross) have a long history of commitment to increasing access to health care in partnership with safety net health care providers. We have a unique social mission to help ensure access to high-quality medical care for all Michigan residents. We strive to provide leadership, advocacy and resources to reduce barriers and promote quality health for uninsured and underserved people in Michigan. For more information, visit bcbsm.com/innovations and bcbsm.com/foundation.



The *Children's Foundation*, an independent community foundation for children, is the largest funder dedicated solely to advancing the health and wellness of children across the state of Michigan and beyond. Since 2011, it has distributed more than \$60 million in grant funding to more than 100 partners throughout the state. Improving the mental health of children and preventing suicide is an area of focus for the foundation. Since 2017, nearly \$3 million has been dedicated to this effort. Learn more at YourChildrensFoundation.org.



The *Ethel and James Flinn Foundation* is committed to improving mental health in Southeast Michigan by supporting and evaluating evidence-based practices. The foundation advances best practice treatment programs and early interventions that improve health outcomes for children, youth and adults. For more information, visit flinnfoundation.org.

We're requesting proposals from Michigan-based non-profit health care providers and organizations to develop projects that will decrease the rate of suicide attempts and deaths by identifying children and

adults who may be at risk, and addressing their needs for appropriate medical, social and behavioral services. Programs that focus on population groups experiencing health disparities due to income, age, gender identity and ethnic or racial characteristics are especially encouraged to apply.

Suicide Prevention Support for Health Care Clinics Working with Michigan's Health-Disparate Populations provides one-time grants to begin new demonstration projects, or significantly enhance or expand existing projects. Projects must be grounded in an evidence-based suicide prevention model. Grantees may employ technology, systems, staff, and clinical processes that focus on identifying suicide risk and intervening with appropriate care for health-disparate children and adults in Michigan.

Background

Suicide is a large and growing public health concern in the U.S. and in Michigan, affecting all age groups and some population groups more than others. It's often associated with mental health disorders, but research from the Centers for Disease Control and Prevention shows that more than half of people who died by suicide didn't have a known mental health condition. CDC's National Center for Health Statistics shows a total of 7,133 deaths by suicide in Michigan from 2014 through 2018.

Michigan Violent Death Reporting System data for 2014 -2017 reported:

- At every age, men were more likely than women to die by suicide.
- The Michigan age-adjusted suicide rate was 13, but the rates vary by race, ranging from 3.9 for Asian Americans to 24.8 for Native Americans.
- Firearms were used in half of all suicide deaths in Michigan, but women were more likely to use poison.

There is no single cause of suicide. It's a complex issue that is often the result of feelings of hopelessness and despair. Multiple circumstances can lead to suicide, including problems with personal relationships, substance use, physical health, job or financial situation, legal concerns, housing stress and recent or anticipated crisis.

The current COVID-19 pandemic has heightened current and future needs for behavioral health services, especially among people relying on the health care safety net. The recent white paper from Pine Rest Christian Mental Health Services cites — among other things — the impact of the economic downturn, isolation and quarantine, increased substance use, insomnia and lack of community gatekeepers as factors that could all lead to increased deaths by suicide. Some groups of Michiganders are especially at risk for a behavioral health crisis due to COVID-19's impact, including health care providers, children and adolescents, older adults, veterans, the LGBTQ community and those with autism spectrum disorder.

In light of these threats, it's imperative to act. While its causes are complex and determined by multiple factors, the goal of suicide prevention is to reduce the factors that increase risk and increase the factors that promote resilience.

Access to health and behavioral health care services is critical for people at risk of suicide. To be most effective, care should take place within a targeted process that supports suicide prevention through strong leadership, workforce training, systematic identification and assessment of suicide risk, implementation of evidence-based treatments, continuity of care and continuous quality improvement.

Addressing suicide ultimately means addressing its root causes on the family, community and the health system, the latter of which has an important role to play.

Program aim

The funders will support projects in up to 12 organizations in Michigan over 18 months to identify and implement actions to prevent suicide attempts and reduce suicide deaths.

Suicide Prevention Support for Health Care Clinics Working with Michigan's Health-Disparate Populations provides resources for suicide prevention programs in primary care, acute medical and behavioral health settings, though these providers may collaborate closely with social services, schools, faith-based and veterans' organizations or others. The initiative seeks to identify and assist children and adults interacting with the health or behavioral health system; it isn't targeted toward public awareness campaigns or health education or community hotlines. By offering patients high-quality suicide care, these organizations can reduce suicide risk among some of the most vulnerable individuals.

Grants, ranging from \$50,000 to \$75,000, will support elements of a comprehensive, evidence-based program over 18 months. A comprehensive program is one that includes these key components:

- All staff are trained in effective suicide care, including the specific protocols to follow and the delivery of collaborative suicide care
- Agreements are in place for referrals when necessary
- Safe transitions of care are established and ensured

Programs should utilize evidence-based models, such as **Zero Suicide**, **Youth-Nominated Support Team**, or other programs listed on the CDC and SAMHSA websites, the **Suicide Prevention Resource Center**, and the **National Action Alliance for Suicide Prevention** websites. All programs should include demonstrate elements such as:

- Leadership support
- Identification and assessment of suicide risk by clinical and nonclinical employees
- Training for staff to develop and use screening, triage assessment and patient management tools
- Safe transitions of care

The initiative will consider funding components of evidence-based programs such as:

- Telehealth to facilitate access to mental health evaluations in settings or locations where they may not be readily available
- Expansion of treatment to include additional services such as case management, care coordination with external providers, peer support specialists and other innovations that will help patients by increasing clinical touches, relationships and connections
- Training primary care providers to provide brief suicide prevention interventions, such as counseling on reducing access to lethal means and safety planning
- Establishment of referral agreements between providers to make sure patients have timely access to follow-up care

- Discharge planning procedures to identify and address patient barriers to accessing needed follow-up care

Studies show this investment can significantly increase the ability of staff to recognize suicide warning signs, assess suicide risk, engage at-risk individuals in treatment and produce hope and decreased suicidality in individuals receiving care.

Eligibility

Nonprofit organizations that provide direct treatment services are eligible. The initiative solicits proposals from organizations serving Michigan's health-disparate populations, including:

- Federally qualified health centers and look-alikes
- Rural health centers
- Tribal health centers
- Other safety net health clinics with capacity to bill third-party payers
- School-based and school-linked health centers with high need
- Veteran's Administration health care clinics

In addition to being one of the target organizations listed above, you must meet these additional criteria and submit documentation with the application:

- Be based in Michigan
- Be recognized by the Internal Revenue Service as a nonprofit organization
- Provide direct medical and behavioral health services
- Be in good standing on all previous awards from the funding partners

The following organizations and individuals **aren't** eligible to apply:

- For-profit organizations and organizations or individuals not located in Michigan
- Organizations whose executive staff includes employees from the funding partners or their immediate family members

Project selection criteria

The request for funds must be to initiate or expand a comprehensive program that focuses on suicide prevention as part of a larger behavioral health program.

The funders will select projects through a competitive application process using the criteria below. Financial resources for this initiative are limited, and the funding partners won't award multiple entities within the same organization.

Projects will be considered using the following criteria:

- Need in the community and target population served by the member organization

- Populations experiencing health disparities
- Use of an evidence-based suicide prevention model and components, including key components:
 - All staff trained in effective suicide care, the specific protocols to follow, and the delivery of collaborative suicide care
 - Create or ensure agreements regarding referrals are in place
 - Safe transitions of care are ensured
- Feasibility of the proposed project
- Potential impact of the proposed project
- Potential to be replicated and shared
- Sustainability plan for the project beyond the grant period

Program funds

The funders will select projects through a competitive application process using the criteria above. Financial resources for this initiative are limited; the funding partners won't award more than one program within an organization.

The funding partners have jointly allocated \$575,000 for this initiative. Projects will be funded up to \$75,000 each for up to 18 months. Grant funds will be available for salary support, program costs, supplies and other costs related to the project. Computer equipment, including hardware and software, won't be supported unless they're directly related to the aim of the proposed project. Other costs that aren't eligible under this solicitation include capital expenses and indirect costs.

Program timeline

- Request for Proposals opens August 3, 2020
- Full proposals due September 15, 2020
- Award notifications by Nov 20, 2020
- Funding begins January 4, 2021

Proposal application

Email applications in a single PDF to innovations@bcbsm.com by September 15, 2020. Put the name of your organization in the subject line of the email. We'll acknowledge receipt of applications by email within 72 hours. We can't accept paper copies. All instructions and application forms are available at bcbsm.com/innovations and bcbsm.com/foundation. Or, email us at innovations@bcbsm.com and we'll send them to you. To apply:

1. Download and complete the coversheet PDF.
2. Create a separate proposal document in Microsoft Word; make sure it addresses the following sections. You may write up to **10 pages, double-spaced. You must use 12-point font and 1-inch margins.**
 - a. Title of the project (10 words maximum)
 - b. Brief summary and purpose of the project (300 words maximum)
 - c. Why is addressing suicide important to your organization?
 - d. Total amount requested
 - e. Project goals and objectives — State the project objectives concisely
 - f. Community description — Please describe the targeted population of the project, including data on age, gender and racial and ethnic demographics. For the racial and ethnic populations that will be affected, provide your best estimate of the percentage of the total people of each population.
 - g. Description of the project and how the funding will support the objectives — Please include any current program efforts and recent funding relevant to the project.
 - h. Timeline and work plan to accomplish objectives
 - i. Expected impact — If possible, quantify the expected impact and how you will assess success. What measures will you collect to monitor and report your progress and outcomes?
 - j. Budget and budget justification for the project (not included in 10-page limit)
 - k. CVs, or resumes, of key staff and project leaders (not included in 10-page limit)

Questions? Send an email to innovations@bcbsm.com. Include the name of your organization in the email subject line.

References

CDC WISQARS: <https://www.cdc.gov/injury/wisqars/fatal.html>

Pine Rest Christian Mental Health Services, Preparing Michigan for the Behavioral Health Impact of COVID-19. April 22, 2020

Unpublished data, Michigan Violent Death Reporting System, June 2020.

Suicide Prevention Resource Center: <http://www.sprc.org/comprehensive-approach/effective-care>