

Long Term Care Quality Improvement Initiative
Request For Applications (RFA) 0708140813
Questions and Answers

Is this the RFA that has been promoted by DOH over the last year to help fund regional collaboratives to improve pressure sores?

This is the first RFA on the use of CMP (Civil Money Penalty) funds and the Department reserves the right to assess other uses. Regional collaboratives are an eligible activity under this RFA.

Will there be a different pool of funds available for regional quality improvement collaboratives, or other quality improvement efforts, for long term care providers?

Civil Money Penalties fund this RFA. Nursing homes, collaboratives, and other long term care providers and stakeholders are eligible to apply. It is unclear at this point if there will be another pool of funding for regional quality improvement efforts.

Is this an extension of another or ongoing RFA?

The Long Term Care Quality Improvement Initiative is not an extension of another RFA.

Will applications be equally considered provided they are submitted during the required time frame, or do you recommend providers try to file early on in the application period for optimum consideration?

Applications will be accepted on a rolling basis beginning April 11, 2008 through May 19, 2008 at 5:00pm. All applications will be equally considered provided they were received within the required timeframe.

Please clarify when DOH will begin receiving applications. Is it still April 11 as the start date for a rolling period, or is it now May 19 as the start date and deadline?

The Department will begin receiving applications on a rolling basis beginning April 11th. Only the ending due date was changed. All applications must be received by 5:00pm on May 19, 2008 at the address specified in the RFA.

The RFP states that "All applicants must be currently licensed as a nursing home in NYS, and be certified as a Medicare/Medicaid provider..." Our corporation is comprised of one hospital and two nursing homes. Each nursing home has a separate Medicare/Medicaid provider number as one is a hospital-based LTC facility and the other is a free-standing LTC facility. Can we submit separate applications for each nursing home?

Yes. Each nursing home must meet the eligibility requirements of current licensure as a New York State nursing home, and certification as a Medicare/Medicaid provider. Every nursing home that meets the eligibility requirements may submit an application and project proposal.

Four nursing home provider associations have entered into a partnership. We have a specific agenda to provide educational programs and information for free to all nursing homes to enhance their own quality improvement activities. Would one association or perhaps all in this collective, be an appropriate applicant to this RFA as outlined by the second definition in this section?

Section II of the RFA states that non-nursing home applicants will have entered into a project that benefits nursing home residents in facilities certified as a Medicare/Medicaid nursing home provider in New York State. Any non-nursing home entity meeting that requirement may apply.

On page 16 of the RFA, under A, Application Content 1. "the applicant is to identify a collaborative partner". Also on page 18, 2nd paragraph it reads, "Applicants that apply as a consortium..." and on page 19 under C. Review & Award Process, third paragraph, "If the lead applicant is other than a nursing home..." Is collaboration mandatory for this initiative? If not, is collaboration considered a priority?

Individual nursing homes may apply, in accordance with the eligibility requirements found on page 3, Section II, "Who May Apply". Collaboration is not mandatory. All applications, whether submitted by a nursing home or non-nursing home entity, are evaluated and scored competitively in accordance with the criteria set forth in the RFA document.

Are Transitional Care Units eligible to apply?

Transitional Care Units are considered a non-nursing home entity and may apply providing the following eligibility requirement is met:

If an applicant is not a nursing home, the applicant will have entered into a project that benefits nursing home residents in facilities certified as a Medicare/Medicaid nursing home provider in New York State

Is there a limit to the number of nursing homes that can attend a program given by a non-nursing home applicant?

The Department does not set a minimum or maximum limit to the number of attendees or participants in a project.

How should a consortium application to be submitted?

Instructions on how to apply can be found in the RFA document on page 10, and 16-19. On the Application Coversheet (Attachment 2, pgs. 24-25), indicate that the application is a Non-nursing home organization and follow the instructions.

Is it helpful for applicants to reference other applicant's projects so that DOH can better understand how an award for one project might be amplified?

Every application should be written clearly and concisely, following the guidelines and length requirements as set forth in the RFA. If the applicant believes that referencing another applicant's project would best describe the impact of the applicant's project, then they are free to include that information. Each application is evaluated and scored on its own merit. Applications are not grouped together for review based on their relationship to each other.

On page 3 in the first paragraph, eligible nursing homes must have had deficiencies, but does the application project have to address a deficiency or can it address other areas?

According to federal guidelines, funds awarded must be applied to the protection of the health or property of residents in nursing facilities that the state or the Centers for Medicare and Medicaid Services (CMS) finds deficient. The proposed project does not have to address a specific deficiency. Projects must meet at least one of the four objectives outlined on page 3 of the RFA document.

Can you please clarify information in the introductory paragraph of the RFA 0708140813, "In accordance with federal guidelines and advice, funds awarded must be applied to the protection of the health or property of residents in nursing facilities that the state or the Centers for Medicare and Medicaid Services (CMS) finds deficient. We encourage applicants to look at creative ways to use these funds." Does this mean that applicants must be facilities with some special "deficiency" designation, or may any skilled nursing facility apply?

Any skilled nursing facility that has been found deficient may apply. There is no requirement that the facility must have a special deficiency designation. A deficiency can have occurred at any scope/severity, and at any time.

On page 3, I. Introduction, 4th line, "In accordance with federal guidelines and advice, funds awarded must be applied to the protection of the health or property of residents in nursing facilities that the state or the Centers for Medicare and Medicaid Services (CMS) finds deficient." Is funding limited to those specific nursing facilities that have received CMS deficiencies?

Any skilled nursing facility that has been found deficient by CMS or the State may apply. There is no requirement that the facility must have a special deficiency designation. A deficiency can have occurred at any scope/severity, and at any time

Page 3 of the RFA states that federal guidelines state that funds must be applied to nursing facilities that the State or CMS find deficient. Does this mean that a deficiency free facility is ineligible?

Any skilled nursing facility that has been found deficient by CMS or the State may apply. A deficiency can have occurred at any scope/severity, and at any time.

Must CMS find a facility deficient in order to apply?

According to federal guidelines, funds awarded must be applied to the protection of the health or property of residents in nursing facilities that the state or the Centers for Medicare and Medicaid Services (CMS) finds deficient. The proposed project does not have to address a specific deficiency. Projects must meet at least one of the four objectives outlined on page 3 of the RFA document.

Page 19, B: Application Format

1. What is the page length limit for the Impact Statement?

The Impact Statement should be no longer than one page.

2. Is the overall 16 page limitation (exclusive of attachments etc.), increased by the number of pages allowed for the Impact Statement?

Yes. Including the Impact Statement, the page limitation (exclusive of attachments) is 17 pages.

On page 16, item 4.c., what will the Gap Analysis need to include?

See page 16, item 4.d., for a description of the contents of the gap analysis.

Can we submit more than one project under more than one heading? For example, we have a data project as well as a project involving improving resident experience. The funding request for both would not exceed what's available.

Yes. A proposed project may meet one or more of the quality improvement objectives.

On page 18, can you explain or give examples of how a project will "support clinical process development"?

Page 18 indicates that funding may NOT be used to support clinical process development. Examples of clinical process development include, but are not limited to, the review and revision of existing policy and procedure in order to improve the quality of care in a specific clinical area, or researching alternative methods of delivering care. Funding is expected to be applied to the implementation of quality improvement projects, not the development of clinical processes.

On page 21, item 6, what are the RFA requirements for the project's internal evaluation design?

Requirements for the project's internal evaluation are described on page 17 of the RFA, item 7, "Evaluation Plan".

On page 4 the first paragraph states the project needs to address "an opportunity for significant improvement", how will this be determined and by whom?

The applicant will propose a project that addresses an issue with an opportunity for significant improvement based on the gap analysis. It is the applicant's responsibility to present the gap analysis and supporting information in a manner that clearly illustrates the opportunity for significant improvement. Reviewers will score each application's merit, including the Statement of Need and gap analysis, according to the Review Criteria as set forth in the RFA document.

In Section III on pg 5, it is mentioned that funding for structural improvements will only be approved if part of an overall change in program or process. Would the grant support some purchase of movable equipment as needed to implement a dining initiative?

The components of each application's budget, such as structural improvements and equipment, will be reviewed for appropriateness and relevance to the proposed project. Each component must be necessary for implementation of the quality improvement project. Excluded items will be removed from the budget before scoring. See page 17-18 of the RFA document for examples of excluded items.

Would painting of the unit dining areas be considered as part of the budgeted expense?

No, painting would not be considered an eligible budget expense.

On page 18 the 4th paragraph details ineligible budget items. Can you define "...purchases of major pieces of depreciable equipment?" Is kitchen equipment i.e., steam tables, refrigerator, and serving carts an allowable cost under this RFA?

The components of each application's budget, such as structural improvements and equipment, will be reviewed for appropriateness and relevance to the proposed project. Each component must be necessary for implementation of the quality improvement project.

Our hospital based SNF would like to provide a shaded and secure courtyard for use by our residents by converting an unused overhang/protected area. We would need to make this area wander- off proof, add plants/bushes better lighting, handicap benches, water spigot, electric outlets and picnic tables. We also have a small sunny area we could create

as a resident garden. We would incorporate outside programs weekly in our activity calendar. This also would be used as a place families could take residents out to as they have nowhere to take residents outside at present. My question is on page 18. Re: remodeling or modification of structure. What does this mean as relates to our proposed project?

The components of each application's budget, such as structural improvements and equipment, will be reviewed for appropriateness and relevance to the proposed project. Each component must be necessary for implementation of the quality improvement project. Funding for structural improvements will only be approved if a part of an overall change in program or processes.

On Page 18 / Paragraph 3 – it states,

“Ineligible budget items include: expenses covered by Medicaid / Medicare; purchases of major pieces of depreciable equipment (although limited computer / printing equipment may be considered) or remodeling or modification of structure; funds may not be used for standard state approved CNA training programs, Paid Feeding Assistant training programs, or to increase staff's compensation, salary, or wages.”

What is being considered to be major pieces of depreciable equipment?

“Depreciable equipment” is defined as any fixed and/or movable machinery, device, or apparatus that decreases in value over time. “Major depreciable equipment” would be that depreciable equipment which comprises more than 25% of the total of requested funding.

What limited computer / printing equipment may be considered under this RFA?

Computer/printing equipment that is integral to the proposed project, necessary for implementation, and does NOT meet the definition of “major depreciable equipment” may be considered for funding.

Our proposed project to implement an electronic medication and treatment administration record keeping system involves the purchase of lap tops, hand held scanners, and the installation of a wireless internet system. Will these items be considered eligible budget items as limited computer / printing equipment?

Computer/printing equipment that is integral to the proposed project, necessary for implementation, and does NOT meet the definition of “major depreciable equipment” may be considered for funding.

It is anticipated the major expense associated with our quality improvement initiative would be the staff time to develop a model dining program and training materials, and then train the staff. Would a percent salary of team members/ Department Managers be permitted in the budget? Also, if it is anticipated that nursing staff would need to be trained as a group for several hours at a time, would the cost of replacement staff be considered in the budget?

Grant funding may only be used to expand existing activities or create new activities. The funds may not be used to supplant funds for currently existing staff activities. Expenses incurred above and beyond what the applicant normally incurs, due solely to the new project, are generally allowable. For example:

- New full or part-time staff (such as a project director, nurse, occupational therapist, etc.) who work solely on the project;
- Current staff that spend all or a portion of their time on the project, and who therefore must be replaced with new staff. The amount of time that current staff spend on the project is an allowable expense if costs are incurred for replacement staff.
- Replacement staff to provide coverage on units when current staff are off the units completing training and other in-services that are an integral part of the proposed project.
- Compensation for overtime costs if staff work overtime on project activities. For example, if a full-time Medical Director works 10 hours per week on the project in addition to his/her normal full-time workweek, and the facility continues to pay the full-time salary to this person, the extra 10 hours per week can be charged to the project's budget.

On page 11, the RFA indicates work plan progress report, project evaluation report, and project impact statement will be required from the contractor on a quarterly basis. Are there examples or specific requirements for these reports?

The Workplan Progress Report, Project Evaluation Report, and Project Impact Statement are required of grant awardees on a quarterly basis during the contract period. Specific requirements and examples will be provided to applicants that are awarded grants during the contract development phase.

Can projects, submitted in response to this RFA, be underway at the time of application and use monies retrospectively for costs already incurred in said project, or must projects submitted for the RFA be brand new and begin on or after the contract's start date of July 1, 2008?

Each grant awardee will have a contract with a defined start date. Expenses incurred before the start date are not reimbursable. Expenses incurred on or after the contract start date that are part of the approved budget for the project are reimbursable. Applicants must document that expenses they submit for reimbursement were incurred on or after the contract start date.

Will awarded funding go directly to nursing homes?

Yes, if a nursing home is the applicant.

We are considering partnering with a local long-term care consortium to provide online modules on wound care prevention. Our academic organization currently has a for-credit online course on wound care and is looking to modify sections of this course to create noncredit modules. If grant funds are used to create these noncredit modules, will our academic organization lose ownership of the modules?

All products and deliverables, including but not limited to training and implementation materials, that are developed with funds awarded under this RFA are the property of the Department and the Department may modify, reproduce and distribute them in such fashion as it sees fit. However, the Department views these materials as being in the public domain. Therefore, anyone may modify, reproduce and distribute grant products and deliverables without the Department's permission.

When is the announcement of awards for RFA 0708140813 expected to be made? I see where the contracts are expected to begin on July 1, 2008.

We anticipate the announcement of awards in June 2008, but recognize that many factors exist that could result in a delay.