Northwest Regional Telehealth Resource Center and the Telehealth Alliance of Oregon

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Non-profit:

- Pacific Northwest University of Health Sciences
- University of Utah Health Clinical Neuroscience
• Audio and video are muted for all participants
• Use the Q&A feature to ask questions
• Moderator will read questions to the speaker
• Presentation slides are posted at https://nrtrc.org/sessions. Recordings will be posted after the conference.
Grant Assistance – Tips and Tricks to finding and securing grant funding

• Moderator: Chris Tamarin
• Presenter:
  – Dana Satterwhite, Grant Consultant, Learn Design Apply, Inc.
Grant Basics: Tips and Tricks to Getting the Grant and Current Relevant Grant Programs Overview
April 16, 2020

Dana Satterwhite – Grant Consultant, Learn Design Apply, Inc.
Agenda:

1. Overview of LDA and PGAP
2. General Grant Tips/Tricks
3. What Makes A Great Proposal
4. FCC COVID-19 Telehealth Program
5. USDA RUS-DLT Round Two Overview
6. Questions
Learn Design Apply, Inc. (LDA) is a grants consulting and management company with 50+ years combined experience in grant management and writing, program development and relationship management with underserved communities, technology firms and healthcare providers in the USA.

Industry leader specializing in identifying, securing, and managing grant funding in partnership with clients in private, non-profit, and public sectors.

Our experienced team of funding and business development specialists provide a comprehensive range of services, uniquely tailored to our clients’ goals.
Service Offerings

Grant Newsletter and Information Webinars
Specializing in Federal, State, and Foundation Funding Sources
Post-Award Project Implementation and Management Assistance

Individual and Organization Registration Assistance With:
  • Dun & Bradstreet
  • System for Award Management (SAM)
  • Grants.gov

Professional Grant Writing and Editing
Funder Prospecting and Guidance
Public Sector Sales Support (Enterprise)
Procurement Guidance

https://www.learndesignapply.com/
Poly Grant Assistance Program –
dedicated grants support for Poly customers

- Education and training on grant programs
- Help determine eligibility and competitiveness
- Assist with identifying needs and project development
- Help develop overall funding strategy
- Comprehensive grant application assistance
- Post-funding support through project implementation
It’s rarely about the telehealth technologies….

It’s all about how those technologies address a need

• What are the problems you face?
• Quantify those problems
• Explain how the technologies and other line items in your budget address those problems
• Articulate general benefits
• Project specific outcomes
Avoid “Square peg – Round hole!”

Tips for Grant Success…

• Identify your specific needs
• Quantify those needs
• Design a Project to address those needs
• Identify partners who will strengthen your project
• Articulate general benefits
• Project specific outcomes

Most importantly… find a grant that’s the right fit for you!
COVID-19 Telehealth Program - out now!
What’s it All About?

The COVID-19 Telehealth Program will provide in funding to help health care providers provide connected care services to patients at their homes or mobile locations in response to the novel Coronavirus 2019 disease (COVID-19) pandemic.

The Program will provide immediate support to eligible health care providers responding to the COVID-19 pandemic by fully funding their telecommunications services, information services, and devices necessary to provide critical connected care services until the program’s funds have been expended or the COVID-19 pandemic has ended.
The FCC COVID-19 Telehealth Basics

- **Due Date:** Rolling: funding will continue until the program’s funds have been expended or the COVID-19 pandemic has ended.
- **How Much:** $200 million
- **Award Size:** Up to $1M in funds
- **Priorities:**
  - Program is limited to nonprofit and public eligible health care providers that fall within the categories of health care providers noted in application guide
  - Providers should plan to provide immediate support responding to the COVID-19 pandemic

*Submission – Online: [https://www.fcc.gov/covid-19-telehealth-program](https://www.fcc.gov/covid-19-telehealth-program)*
Examples of eligible services and devices:

• Telecommunications Services and Broadband Connectivity Services: Voice services, and internet connectivity services for health care providers or their patients.

• Information Services: Remote patient monitoring platforms and services; patient reported outcome platforms; store and forward services, such as asynchronous transfer of patient images and data for interpretation by a physician; platforms and services to provide synchronous video consultation.

• Internet Connected Devices/Equipment: tablets, smart phones, or connected devices to receive connected care services at home (e.g., broadband enabled blood pressure monitors; pulse-ox) for patient or health care provider use; telemedicine kiosks/carts for health care provider site.
FCC Covid Telehealth Grant: Eligibility Explained

Interested health care providers must complete several steps to apply for funding through the COVID-19 Telehealth Program. There are three steps interested providers can take immediately to prepare to apply for the COVID-19 Telehealth Program:

<table>
<thead>
<tr>
<th>Registration Steps</th>
<th>Estimated Time to Complete</th>
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<tbody>
<tr>
<td><strong>Step 1:</strong> Obtain an eligibility determination from the Universal Service Administrative Company (USAC);</td>
<td>5-10 minutes to complete registration. 1 hour to receive a confirmation.</td>
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<tr>
<td><strong>Step 2:</strong> Obtain an FCC Registration Number (FRN); and</td>
<td>5-10 minutes Immediate Confirmation</td>
</tr>
<tr>
<td><strong>Step 3:</strong> Register with System for Award Management (SAM).</td>
<td>30-90 minutes to complete registration. SAM can take up to two weeks to activate your organization’s account.</td>
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</tbody>
</table>
RUS-DLT (Round 2) – out now!

Rural Utilities Services Distance Learning and Telemedicine
What’s it All About?

The DLT Grant provides funding for interactive “real time” distance learning or telehealth projects that provide rural residents with access to content and/or services, helping to bridge the digital divide.
The DLT Basics

• CFDA: 10.855
• Due Date: July 13th, 2020
• How Much: TBD – funds will be carried over from Round 1. RUS will also add $25M from the Cares Act associated with Covid19.
• Matching Funds: 15% of the Federal Request *(about 13% of total project costs)*
• Award Size: Up to $1M in funds
• Priorities: Special Consideration Points Given For –
  • Opportunity Zones
  • Substance abuse (including opioid, not limited to opioid)
  • STEM Education
  • COVID-19 Response (details in following slide)

*Submission – Grants.gov *(recommended!!)* or hard copy
RUS-DLT Round Two – COVID19 Focus

• Program goal: to encourage and improve telemedicine and distance learning services in rural areas through the use of telecommunications, computer networks, and related advanced technologies to be used by students, teachers, medical professionals, and rural residents.

• Additionally, all projects are advised to discuss the ways that their DL or Telemed project impacts the Covid19 response, preparation or mitigation. This does NOT need to be healthcare specific (i.e. providing distance learning to students displaced from school due to the pandemic, providing remote training to HC workers regarding Covid19, etc.).
Eligible Expenditures

- Capital Expenditures – interactive distance learning or telemedicine equipment, video infrastructure, ancillary core network devices necessitated by the project, internal wiring, software, licensing, digitally connected peripheral devices and associated services.
- Up to 20% of the budget can be spent on broadband related expenditures
- Cloud Services, if adequately defined and justified

Let’s Cut to the Chase!

Ineligible Expenditures

- Recurring Expenses – transmission costs, existing operational costs, salaries, benefits, contractual, supplies, etc.
- No Indirect Costs! No Evaluation Costs!
- Unrelated technology purposes -- this is not a grant for tons of PCs/Tablets... the main purpose is for the interactive video. Peripherals that help deliver content or services via the video transmission are provisionally eligible

Licensing/software and services must be associated with an endpoint in the budget
Who Can Apply?

Various forms of eligibility

1. **Organizational Eligibility** – For Profit, Non-Profit, Tribal Entity, State or Local Org, Schools, Universities, Community & Technical Colleges, Libraries, Pre-K’s, Clinics, Health Care Centers, Hospitals/Clinics, Workforce Development Offices, First Responders.... *It’s easier to tell you who is NOT eligible (federal orgs, sole proprietors. orgs. in coastal barrier zones).* Fiscal Agent (applicant) MUST have a DUNS and active SAM registration.

2. **Programmatic Eligibility** – Proposed use must be focused on **interactive** distance learning and/or telehealth projects that **provide benefits/services to end users in rural communities**

3. **Rural Eligibility** – Overall Project Rurality score of at least **20 points**

4. **Required Match** – Projects must match at or above **15%** of the federal requested amount (just over 13% of the overall project costs)
Types of Projects

- **School to School** – sharing teachers & courses, enrichment
- **School to Health Center** – school based health; prevention / wellness, mental health/substance abuse programming
- **School to Higher Ed** – dual enrollment, teacher training
- **Higher Ed to Higher Ed** – connecting satellite campuses to expand course offerings, bridging programs, workforce dev
- **Libraries & Other Community Centers** – lifelong learning, Adult Ed, Workforce development, Enrichment
- **Medical Centers to Clinics** – primary & specialty care delivery; CME
- **Clinic to Clinic or Hospital to Hospital** – sharing doctors, dentists, nurses or allied health professionals; sharing CME, wellness & prevention programs
- **Mental Health & Substance Abuse Clinics to anyone** – delivering behavioral health and/or substance abuse treatment, education, therapy, etc.
- **State/Local Orgs** – connecting the “local” organizations together to share employee learning / training (DOH, Head Start, WIBs, etc.)
Project Design

• Before you can begin constructing your project, you need to first articulate what your project is about!
  • Is it Distance Learning, Telemedicine or a combination of both?
  • What problems are you trying to solve through the use of these technologies?
  • Who is your target audience?

• Think on a broader scale!
  • Expand your thinking beyond your initial “focus” issue (ex: need for a Spanish Teacher)

• Identify potential project partners/participants that will benefit from the educational or health content or services you propose to delivery and/or receive
Design Examples

1. **Hub(s) & Spoke(spokes)** -- Content or service provider connecting to end user sites who will receive the content or services
   - Medical Center with Specialists to smaller hospitals or clinics without local specialists
   - Community College connecting to K12s to deliver dual enrollment

2. **Hub-End User to Hub-End User** – Sites that will provide experts to share content or services connecting to remote sites who will receive the content and services, and deliver back *different* content and services.
   - Rural High School with Mandarin teacher connects to another rural high school with a Spanish teacher. Students at both sites receive foreign language classes not available locally.
   - Rural hospital to Rural Mental Health & Substance Abuse clinic. Hospital connects to MHSA clinic for services not available locally. Clinic connects to hospital for Continuing Medical Education and training.
3. **Non-Fixed** – Occasionally, you have a hub site that wants to provide services or content to anyplace in a given geography. In this instance, your Objective Scoring is determined by the single HUB site. **Example:**

   - Visiting Nurse Services – a Home Health Org would like to send a visiting nurse to anyone within their service area (ex: 2 county area). The Home Health Org is the HUB and their physical location would be used to define rurality and poverty scores.

4. **Hybrid** – Sometimes a project will have both a fixed and non-fixed component. In those cases you score the non-fixed portion first, and then include it as a line item to be averaged in with your fixed site calculations. **Example:**

   - School District wants to put video endpoints in all rural schools to share instruction, but they also want to deliver home school courses to any students within the geography they cover.
   - CHC wants to connect to hospital for fixed site telemed, but also wants to connect on demand to any site that their EMS team visits within their coverage area.
Where to Start

1. SAM Registration
   • Do you have a SAM registration?
   • Is it active?
   • Is the POC still employed at your Organization?

2. Grants.gov
   • Are you registered and account associated with SAM?
   • Is your AOR authorized for submission in eBiz?
   • Create a workspace
## Major Grant Components

<table>
<thead>
<tr>
<th>Objective Scoring</th>
<th>Subjective Scoring</th>
<th>Required but not Scored</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Rurality – up to 40 pts</td>
<td>Needs &amp; Benefits – up to 30 pts</td>
<td>Executive Summary</td>
<td>Official Grant Budget &amp; Match letter/worksheet</td>
</tr>
<tr>
<td>Economic Need – up to 30 pts</td>
<td>Financial Info &amp; Sustainability</td>
<td></td>
<td>Certs / Assurances</td>
</tr>
<tr>
<td>Special Consideration – up to 10 pts</td>
<td>Statement of Experience</td>
<td></td>
<td>Proof of Legal Existence / Eligibility</td>
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<tr>
<td></td>
<td></td>
<td>Technology System Plan</td>
<td>State Rural Development Letter</td>
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Questions?

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