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To: County Adult Protective Services Agencies  
County Aging Unit Directors  
County Aging and Disability Resource Center Managers  
County Departments of Human Services Directors  
County Mental Health Coordinators/DHS 34 Certified Agencies

From: Charles Warzecha, Deputy Administrator  
Division of Public Health

## Department of Health Services Dementia Crisis Innovation Grants: Round Two

### Introduction

The Department of Health Services (DHS) is pleased to announce Round Two of the Dementia Crisis Innovation Grants (Round Two) for counties or county consortia interested in improving the dementia capability of their current crisis response systems. Many counties have coalitions focused on Adult Protective Services (APS), crisis response, and building dementia-capable communities. Round Two provides an opportunity to integrate and expand those coalitions to focus specifically on dementia capability in crisis response. Awardees will be expected to work collaboratively with a broad base of local stakeholders in understanding current procedures and resources for supporting people with dementia, developing crisis prevention strategies and coordinating crisis response capabilities by identifying gaps and needs and creating local solutions to improve their systems.

This 18-month opportunity is open to new applicants as well as to applicants that were awarded a Round One Dementia Crisis Innovation Grant (Round One). Counties that received an award under Round One that choose to apply for a Round Two grant must propose new activities to improve dementia crisis response beyond those included in the first round of grants. Funding under Round Two is available for the period July 1, 2017, through December 31, 2018.

### Background and Purpose

In February 2014, DHS released a [Dementia Care System Redesign Plan](#) (Plan) to address gaps in the current care delivery infrastructure, including community and crisis services for people with dementia. The Plan, developed with input from many partners, advocates a model for dementia-capable mobile crisis response focused on treating people in place whenever possible, clarifying roles and responsibilities for crisis response and stabilization, and addressing the need for appropriate placement options for people with dementia in crisis.

Since then, DHS staff have talked with counties and county consortia, visited facilities, and conducted surveys to gain a better understanding of current practice. The results indicate that dementia-related crisis response varies considerably, with approaches differing in terms of agency configuration,

relationships among partners and the level of dementia expertise and capacity in the crisis response system. Effective solutions, when found, have been developed locally and have typically involved cooperation among a variety of stakeholders, including county APS and crisis response systems, care facilities, law enforcement, managed care organizations, and others. Also important are adequate training, an understanding that behavior is often a way to communicate needs, and planning with prevention in mind.

In 2016, Round One grants were awarded to six applicants. Along with making improvements in their local dementia crisis capacity, awardees gather previously uncollected data and generate ideas, tools and information that will be instructive in efforts to improve dementia-capable crisis response statewide.

Dementia Crisis Innovation Grants are intended to encourage community-based approaches to achieving a more dementia-capable crisis system. DHS is seeking proposals that will improve local dementia-capable care and crisis systems and will lead to:

- A more coordinated, dementia-capable approach to supporting persons with dementia in crisis.
- An understanding of how to assess and plan for persons with dementia as a way to avoid or de-escalate crises.
- Shared strategies to anticipate and capably respond to crisis in the best interest of the individual.
- Local/regional care and crisis systems that emphasize stabilization-in-place and use emergency transfers as a last resort for persons with dementia experiencing a crisis.
- Collaboration, communication and trust among all parties who have a role to play in responding to and caring for persons with dementia who experience crisis.

### **Available Funding**

DHS has allocated \$300,000 for Round Two grants to help spur continued progress in the development of local dementia-capable care and crisis systems that anticipate the care needs of people with dementia. These funds will need to be spent within the 18-month grant period with no ability to carry over funding beyond that timeframe.

Grants will be awarded through a competitive application process, with funding divided among the top successful applicants based on the scoring of their proposals and requested funding. At least 50% of the funding under Round Two will be reserved for new applicants, i.e. applicants who did not receive an award under Round One.

### **Eligible Applicants**

County human service departments, social service departments, and departments of community programs or other county entities are eligible to apply on behalf of county or regional crisis coalitions in which they participate. The applicant county/coalition must currently have a crisis unit that is certified under Wis. Admin. Code ch. DHS 34, Subchapter III. Key members of the coalition must express willingness, in writing, to participate in the project before an application will be accepted.

### **Grant Requirements**

At a minimum, grant recipients will be expected to:

- Address crisis response and stabilization of people with dementia within the broader context of crisis services for all populations.

- Involve a broad range of potential partners (e.g., crisis services, APS, law enforcement, human services, mental health services, aging services, tribal agencies, corporation counsel, care facilities, home care providers, ADRCs, MCOs, hospitals, other health care providers, etc.).
- Describe how the project will address specific needs of residents of the service area (e.g., tribal nations, isolated rural residents, and racially and ethnically diverse populations).
- Assess the current capacity of the crisis system to respond to persons with dementia in crisis, including a review of crisis practice, policy, and protocol for providers and crisis responders.
- Develop a strategy to improve crisis planning, response, and stabilization for persons with dementia.
- Describe project plans using “SMART” objectives that are specific, measurable, achievable, relevant and time-bound.
- Prioritize stabilization-in-place as the initial response to crisis for people with dementia.
- Identify current and potential funding sources.
- Plan for sustainability of coalition efforts.
- Describe and report on measures of success regarding stated project outcomes.
- Gather data elements required for quarterly reporting to DHS.
- Report results and share their experience with DHS and other counties and coalitions.

### **Suggested Activities**

Each applicant’s proposal should be based on local circumstances, willing partners, and planned accomplishments. In developing their plans, applicants are encouraged to include strategies that have been successfully used by mental health crisis response and others. Examples include targeted training, meaningful crisis planning, coordination of resources, and provision of stabilization supports, referrals and follow-up.

The following list provides examples of activities applicants could include in their proposals. The list is neither mandatory nor exhaustive and we encourage creativity from applicants.

- Expand current crisis coalitions to include a wider range of stakeholders to participate in improving dementia capacity of the crisis system.
- Engage a project manager or facilitator to coordinate the project and build consensus among stakeholders.
- Conduct a comprehensive inventory and analysis of local dementia care resources to identify gaps and needs, including needs related to tribal nations and diverse populations in the service area.
- Develop protocols and agreements to clarify roles for crisis responders and care providers.
- Develop screening instruments, crisis plan formats, or other tools to assist in crisis prevention, response, and stabilization for persons with dementia.
- Assess the training needs of local crisis responders and care providers and create and implement a targeted plan for addressing identified needs.
- Prioritize communication strategies among partners that will facilitate success and continued improvements, including a process for incident review and necessary process adjustments.
- Articulate an ongoing plan with strategies to continually improve dementia care, crisis prevention, and crisis capacity.
- Improve person-centered, trauma-informed response while using least invasive and least restrictive measures.
- Establish a lasting learning collaborative to encourage ongoing information exchange in the interest of long-term innovation in crisis response.

### **Collaboration with DHS**

The primary purpose of these grants is to help counties improve their crisis response systems in a collaborative way. In order to achieve broader impact, the awardees' experiences will be shared with others who also want to improve their systems. DHS expects those receiving grants to collaborate in the sharing of promising practices by:

- Reporting on reliable and valid measurements of success to track achievements.
- Participating in discussions about their projects, strategies to overcome barriers, and results with DHS staff and other awardees.
- Identifying training and technical support needed for project success.
- Formulating ways to continue collaborative efforts beyond the grant period.
- Providing information that DHS can use in a toolkit to help others navigate similar local collaborative efforts toward dementia-capable crisis response.

### **Application and Award Procedures**

Applications for funding must be received no later than 4:00 p.m. (Central Time) Monday, June 5, 2017.

To apply, eligible applicants must complete the required application and forms that accompany this memorandum and submit them electronically to Kathleen Steele in the Bureau of Aging and Disability Resources, Division of Public Health at [Kathleen.Steele@dhs.wisconsin.gov](mailto:Kathleen.Steele@dhs.wisconsin.gov).

Questions may be addressed to Alice Page, Adult Protective Services Coordinator, at [Alice.Page@dhs.wisconsin.gov](mailto:Alice.Page@dhs.wisconsin.gov).

Applications will be scored by an evaluation committee and ranked according to the numerical scores received. DHS reserves the right to reject any or all applications, negotiate award amounts, request clarification on budget detail, and negotiate specific goals with the selected applicants prior to entering into an agreement. Award recipients will be notified by July 6, 2017.

cc: Area Administrators/Human Services Coordinators  
Area Agencies on Aging  
WI County Human Services Association

## APPLICATION INSTRUCTIONS

### Dementia Crisis Innovation Grants: Round Two

Applicants must include the following elements in their applications, in the order outlined below. The maximum score is 100; the maximum number of points for each section is indicated below.

To be considered complete, applications must include a cover sheet, project narrative, project work plan, budget worksheet, and letters of support and commitment. The cover sheet, project work plan, and budget worksheet must be submitted on the [form provided](#).

Unless otherwise indicated, the application instructions are the same for new applicants as well as for applicants who were awarded a Round One grant. However, for certain sections in the “Project Narrative,” the instructions provided differ for the two types of applicants.

**1. Cover Sheet (not scored)**

Complete the cover sheet.

**2. Project Narrative (Maximum 70 points total)**

The project narrative section may not exceed 20 pages. The content must be prepared in standard (letter) format with 1-inch margins and 12-point standard font.

**a. Current Status of the Crisis System (15 points):**

**i. New Applicants**

Describe the current coalition that forms the basis of the core workgroup that will be collaboratively involved in the grant, its focus, and history of success. Describe the purpose of the coalition, its membership, and how it operates.

Describe the relationship between Adult Protective Services and the certified DHS 34 crisis response agency, including historical collaborations in providing crisis response for persons with dementia. Discuss how crisis response for this population is currently managed, i.e., hours of operation, who responds to crisis, and what resources are at your disposal for stabilization or emergency placements.

Provide information about the type and frequency of crisis calls received for persons with dementia. Describe the typical response to those calls and any supports used to stabilize crisis situations, as well as any follow-up activities. Discuss obstacles to providing crisis response for this population.

**ii. Applicants with a Round One Dementia Crisis Innovation Grant**

Describe how the innovation grant award was used to improve the status of your crisis system, including improved policies and procedures and changes in protocol or strategies for responding to crisis. Report on how the plan outlined in your original application was adjusted through your collaborative process to meet your objectives regarding coordination activities, communication among partners, prevention efforts, and responses to crisis. Describe any new resources that were developed, especially in regard to stabilization-in-place for those with dementia in crisis or resources willing to accept people in crisis.

**b. Project Activities (45 points):**

**i. New Applicants**

Describe the specific activities your project will include to meet the stated grant requirements, together with any additional activities you plan to include in the project. Indicate as clearly as possible the individuals, agencies, and organizations that will be involved in the project and what their respective roles and responsibilities will be. Creative and locally responsive activities are encouraged.

**ii. Applicants with a Round One Dementia Crisis Innovation Grant**

Describe the new activities your project will include to meet the stated grant requirements, together with any additional activities you plan to include in the project. Clarify how these activities will expand and/or improve upon the accomplishments of the first Dementia Innovation Grant Award. Indicate as clearly as possible the individuals, agencies, and organizations that will be involved in the project and what their respective roles and responsibilities will be. Creative and locally responsive activities are encouraged.

**c. Anticipated Achievements under the Grant (10 points):**

Describe the goals and accomplishments that you hope to achieve as a result of the project activities. In particular, address the anticipated impact on the care for persons with dementia, coalition partners, and others in your county/consortium. Address the ways you will ensure that you meet the DHS requirement for local collaboration. Be sure to include “SMART” objectives for the project that are specific, measurable, achievable, relevant, and time-bound.

**3. Project Work Plan (10 points)**

Using the Project Work Plan template, indicate the objectives, key tasks, timelines and measures of success for each of the activities outlined in the Project Narrative. Attach additional sheets if necessary.

**4. Budget Worksheet (10 points)**

Complete each section of the Budget Worksheet. Requested items should clearly relate to the proposed activities. Attach additional sheets if necessary.

**5. Letters of Support or Memoranda of Understanding (10 points)**

Include letters of support or memoranda of understanding from your current coalition partners and other planned participants in your proposed project. Letters must include a description of the nature and scope of each member’s anticipated roles and responsibilities.