

***Long-Term Care Quality Investment Pilot***  
***Pre-Application Conference***

***November 29, 2022***

## Agenda

- Introduction of team members on call
- Discuss background and context of this effort
- Review objectives, limitations of funding, and guiding principles
- Read eligibility requirements and attestations
- Review permitted interventions within menu of options
- Review selection process
- Walk through application, including budgetary component and timeline
- Discuss reporting requirements
- Review submitted questions and provide time for additional questions
- Preview vendor registration office hours
- Thanks & adjourn

## Background – context for this effort

- CDC has provided the Department with funding to support long-term care facilities in their COVID-19 response, to build and maintain their infection prevention and control infrastructure necessary to support resident, visitor, and LTCF healthcare personnel safety.
- Using a portion of these funds, the Department is standing up a Quality Investment Pilot, in which \$11.7M will be provided to LTCFs (incl. SNFs, ALFs, PCHs, and ICFs) to invest in the following three areas:
  - Workforce development & retention
  - Infection prevention & control
  - Emergency preparedness

# Pilot objectives and rules for how funding can/cannot be used



## Objectives of this Quality Investment Pilot

- Enable facilities currently receiving COVID-19 funding and support (for example, through LTC-RISE) to transition from this support and build resilience
- Invest in facilities who can benefit the most from these dollars and support them in improving their quality of care
- Demonstrate that investments in these areas can be financially advantageous



## Funding rules (according to CDC)

- Cannot duplicate any support already being provided with federal dollars
- Dollars available through July 2024 or one year after the end of the federal public health emergency, whichever comes first
- Dollars cannot be used for incentives
- Dollars **cannot be used for facilities in Philadelphia**
- At least ~50% of funds must be provided to SNFs

# Background – guiding principles



## **Target funds to high-value interventions**

- Target funds to interventions that have proven value
- Provide each facility with sufficient funds to accomplish intervention



## **Be driven by fairness and equity**

- Allocate funds in a way that reduces health disparities and promotes health equity for all residents and staff in facilities in Pennsylvania
- Strive to ensure application process is accessible for facilities with less resources



## **Promote transparency around criteria**

- Provide visibility into what criteria will be used to determine funding, for facilities before they apply
- Ensure criteria are clear and understandable



## **Ensure reasonable administrative requirements**

- Be aware of time and effort required for facilities to apply for and report on funding

# The following are attestations facilities must agree to before submitting their application

- Facility is enrolled in LTC RISE quality improvement project, by Friday December 9, 2022. **This means that by Friday December 9, a facility must have had at least one virtual meeting with the RISE partner in their respective region and that there must be a verbal commitment from the facility to remain engaged with RISE through the duration of the quality improvement work.**
- Facility is not located under Philadelphia's jurisdiction
- Facility is financially solvent enough to use funds across performance period
- Facility is registered as a vendor with the Department by the date of application submission
- Facility shall co-invest 20% of total requested funding amount into the same interventions, unless facility has less than or equal to 30 licensed beds on the Department of Health or Department of Human Services' facility list as of June 2022, in which case the co-investment is waived
- Individuals required to sign the contract with the Department are also signatories
- Facility shall provide progress report in format specified by the Department, as deliverables, in order to receive further installments
- Facility ownership is committed to dedicating the necessary time and resources to oversee that funds shall contribute to improved long-term staff and resident wellbeing
- Facility has involved or informed residents or families in the development of the application, and will do so about interventions through this Pilot, if awarded the Grant
- Facility is not requesting reimbursement for an intervention that they have already spent funds on, or they have received Federal funding for
- All interventions conducted by facilities must meet all necessary approvals and regulators (for example, CMS guidance, building approvals, manufacturer's guidance)

### **Tracks 1-4: Workforce Interventions to Improve Retention and Build Resiliency**

- Track 1.A: Identify managers for training in key business enhancing areas
- Track 2.A: Identify existing staff for clinical skill certification training
- Track 3.A: Identify an Infection Prevention Champion
- Track 3.B: Hire a certified full time Infection Preventionist
- Track 4.A: Identify an Emergency Preparedness Champion
- Track 4.B: Hire a Full Time Emergency Preparedness Coordinator
- Tracks 3.B and 4.B are only available to facilities with 120 or more licensed beds

## **Tracks 5-7: Infrastructure Interventions to Improve Infection Prevention Control and Emergency Preparedness**

- Track 5.A: Telehealth kiosks
  - Track 5.B: Improve internet access or Wi-Fi connectivity
  - Track 5.C: Cellphones or walkie talkies
  - Track 5.D: Call bell system
  - Track 5.E: Software
  - Track 6.A: Purchase HEPA filter
  - Track 6.B: Upgrade HVAC system
  - Track 6.C: Improve circulation and airflow opportunities
  - Track 6.D: Airflow Analysis
  - Track 7.A: Install handwashing stations
  - Track 7.B: Install hand sanitizer stations
  - Track 7.C: Divide non-single occupancy rooms
  - Track 7.D: Create or improve biocontainment units
  - Track 7.E: Upgrade visitation spaces
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- Tracks 6.C, 7.A, 7.C, 7.D, and 7.E require a quote to be submitted with the application
  - Track 6.D is required when applying for tracks 6.B or 6.C



## Review selection process

- The Department is committed to allocating these funds in a way that will reduce health disparities and promote fairness for all residents and staff in facilities in Pennsylvania. Therefore, facilities will be ranked solely based on the following:
  - Social Vulnerability Index (SVI) based on census tract level data and
  - Number of Medicaid days (applicable to SNFs) or Supplemental Security Income (SSI) residents (applicable to PCHs and ALFs).
- The Department will award grants to the highest-ranked facilities up to the amount of the budget included in the facility's application with a maximum award of \$2000 per bed, up to \$300,000 per facility. The funding will be allocated in pools by facility type, proportional the number of facilities enrolled in LTC RISE.



## ***Walk through application***

# Discuss reporting requirements

- Awarded applicants shall submit written mid-term report of progress, issues, and activities to the Department within 180 days after the Grant Agreement effective date
- Awarded applicant shall submit a final written report within 30 calendar days after the end date of the Grant Agreement
- Department will evaluate the impact from interventions in all awarded facilities to better understand best practices to advise any potential future resiliency building opportunities
- Facilities will be required to collect and track certain measures as directed by the Department related to specific interventions and provide information to Department upon request
- The Department will work closely with awarded facilities to provide progress report templates, conduct resident and staff surveys, and other data collection tools that will be specific to each intervention
- The Department may also conduct pre-planned site visits to observe progress of infrastructure enhancements
- Additional evaluation activities may be conducted at the discretion of the Department

***Walk through pre-received questions and  
answer additional questions***

***ra-DHLTctransform@pa.gov***

# Preview vendor registration

## **COMMONWEALTH VENDOR REGISTRATION PROCESS & RESOURCES**

In order to become a Department of Health Vendor, your facility must be registered to do business as a Non-Procurement Vendor with the Commonwealth Office of the Budget. The process is also known as SAP Vendor Registration.

If you are not yet a registered vendor, you are encouraged review the following guidance pieces before beginning the application. In this program, healthcare facilities are considered prospective Grantees.

## **VENDOR REGISTRATION TUTORIAL & GUIDE**

The first link is a written step-by-step guide to the registration process. The second link will take you to a video tutorial of the process.

- <https://www.budget.pa.gov/Services/ForVendors/Documents/non-procurement-registration-guide.pdf>
- <https://web.microsoftstream.com/video/400e52c1-e51a-4eec-985b-3ed6f0230fce?list=studio>

## **REGISTRATION FORM**

When you're ready to begin the application, you can use this link to get to the application by clicking on "Non-Procurement".  
<https://www.budget.pa.gov/Services/ForVendors/Pages/Vendor-Registration.aspx>

## **NON-PROCUREMENT VENDOR HELP**

As a prospective Grantee, you may have additional questions. The Commonwealth Office of the Budget maintains a website outlining

[Non-Procurement Vendor Help \(pa.gov\)](#)

# Preview vendor registration office hours

## OFFICE HOURS

To provide you with “face-to-face” support, the Department will host four virtual Office Hour sessions with a representative of the program.

- 03:00-04:00 PM Thursday, December 1, 2022
- 03:00-04:00 PM Tuesday, December 6, 2022
- 03:00-04:00 PM Thursday, December 8, 2022
- 03:00-04:00 PM Tuesday, December 13, 2022

Microsoft Teams meeting

**Join on your computer, mobile app or room device**

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*Thank you*