



## **Blue Cross Blue Shield of Massachusetts Foundation 2023–2025 Advancing Community–Driven Mental Health Grant Program**

### **Funding Overview**

The Blue Cross Blue Shield of Massachusetts Foundation (BCBSMA Foundation) will fund a new initiative to train community–based organizations to provide their community members with low–intensity mental health services and support.

The BCBSMA Foundation’s mission is to ensure equitable access to health care for all those in the Commonwealth who are economically, racially, culturally, or socially marginalized. The BCBSMA Foundation organizes its work into three focus areas within this mission: coverage and care, behavioral health, and structural racism and racial inequities in health.

Access to behavioral health services continues to be a significant challenge in Massachusetts, as it is across the country. There is a behavioral health workforce shortage, and at the same time, there is an increased need for behavioral health services, thereby amplifying the demand for behavioral health professionals.<sup>1</sup> Concerns about the need to increase the linguistic, racial, and cultural diversity of the behavioral health workforce to better meet the needs of those seeking care also persist.<sup>2</sup>

As longer–term solutions to address the behavioral health clinical workforce shortages are developed, it is critical to expand our view of the role that trained, non–clinical individuals can play in meeting the basic behavioral health needs of individuals throughout the state. There are evidence–based practices that have primarily been implemented in countries other than the United States that we can adopt to expand access to mental health services in Massachusetts. These programs are often referred to as “low–intensity psychological interventions.” These interventions can be delivered by community members who have been trained in the delivery of basic mental health services without the intensive training than is required of individuals traditionally considered part of the clinical behavioral health workforce (e.g., social workers, licensed mental health counselors, psychologists, psychiatrists). The rationale underpinning these interventions is also that community members who have been appropriately trained and supervised can effectively deliver low–intensity mental health interventions that are more socially and culturally relevant for those in their communities.

**Advancing Community–Driven Mental Health**, the Foundation’s new grant program in behavioral health, will utilize a community–based intervention known as Problem

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<sup>1</sup> See, for example, <https://www.wbur.org/news/2022/02/15/boston-behavioral-health-hospitals-clinics> and <https://www.bluecrossmafoundation.org/publication/behavioral-health-during-first-year-covid-19-pandemic-update-need-and-access-0>.

<sup>2</sup> See for example, <https://www.nami.org/Blogs/NAMI-Blog/March-2022/Addressing-the-Lack-of-Diversity-in-the-Mental-Health-Field>

Management Plus (PM+)<sup>3</sup>. PM+ is designed to support community members exposed to adversity in their day to day lives learn tools and skills to manage mental health stressors and provide community-based referrals for community members who are at risk of developing or are currently experiencing severe mental health challenges.

A recent survey reported that 35% of Black and 33% of Hispanic respondents are more likely to seek information on mental health outside of the health care system and to prefer providers with similar life experiences, compared to 25% of White respondents.<sup>4</sup> In alignment with those findings, the PM+ program aims to overcome traditional barriers of access to mental health services, especially for economically, racially, culturally, or socially marginalized individuals. It allows staff members of a community-based organization to deliver mental health support in the community, focusing on teaching basic concepts and skills that enable individuals to address and deal with issues of immediate concern to them.

The goal of this program is two-fold:

1. Improve access to community-based mental health services for individuals experiencing mild to moderate mental health distress and practical problems of daily living.
2. Develop the skills of a non-clinical workforce to support community members in addressing mild to moderate mental health distress and practical problems of daily living.

Under this grant program, the BCBSMA Foundation and its collaborators (Partners in Health, The Family Van, and the Institute for Community Health) will provide training, technical assistance, coaching, and implementation support to organizations that are interested in developing and implementing Problem Management Plus (PM+) services within their organizations.

### **About Problem Management Plus**

Problem Management Plus (PM+)<sup>5</sup> was developed by the World Health Organization (WHO) as a “low-intensity psychological intervention” to address mental health treatment gaps in low- and middle-income countries. PM+ enables people without formal clinical training to manage common mental health conditions for adults living in or experiencing adversity and aims to reduce problems that community members identify as being of concern to them. PM+ has been implemented by Partners in Health in four countries (Rwanda, Peru, Mexico, and Malawi), and by The Family Van in Massachusetts. Emerging global evidence demonstrates the efficacy of PM+ in reducing psychological distress when delivered to

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<sup>3</sup> <https://www.who.int/publications/i/item/WHO-MSD-MER-16.2>

<sup>4</sup> [https://www.bcbs.com/the-health-of-america/reports/racial-disparities-diagnosis-and-treatment-of-major-depression?utm\\_source=pr&utm\\_medium=article&utm\\_ID=&utm\\_term=&utm\\_content=national&utm\\_campaign=mental\\_health\\_month](https://www.bcbs.com/the-health-of-america/reports/racial-disparities-diagnosis-and-treatment-of-major-depression?utm_source=pr&utm_medium=article&utm_ID=&utm_term=&utm_content=national&utm_campaign=mental_health_month)

<sup>5</sup> <https://www.who.int/publications/i/item/WHO-MSD-MER-16.2>

individuals or groups.<sup>6</sup> The Foundation recognizes the importance of integrated mental health and substance use disorder treatment. However, as a low-acuity intervention, PM+ is designed to address mild mental health symptoms related to depression and anxiety. For conditions of a higher level of acuity--serious and persistent mental health issues and/or co-occurring mental health and substance use disorders--an organization providing PM+ must have relationships with other behavioral health organizations to whom they can refer individuals.

In Massachusetts, we are fortunate that various services address behavioral health needs within a community context, such as mental health first aid, certified peer specialists, recovery coaches, and community health workers. The intent of PM+ is not to compete with these other services but to equip additional community-based organizations and existing staff with new skills and strategies to address common mental health conditions and reduce problems that clients identify as concerns.

#### **How does PM+ work?**

PM+ provides a brief, individual mental health intervention for adults. It includes one initial assessment session, and five intervention sessions focused on four strategies:

- (1) stress management,
- (2) problem-solving,
- (3) behavioral activation, and
- (4) strengthening social support, as well as planning to stay well.

The approach is client-led (clients choose the problems they would like to address) and involves learning problem management skills alongside coping strategies to better manage and reduce the mental health impacts of adversity. In combining these strategies, PM+ can address mental health symptoms (e.g., stress, fear, anxiety, depression, feelings of helplessness) and, where possible, solve practical problems (e.g., unemployment, interpersonal conflict in the family).

#### **About the Advancing Community Driven Mental Health Grant Program**

This is a multi-year grant program (2023-2025). The first year is a planning year with funding available up to \$100,000 per organization. Years two and three are implementation years with funding available up to \$150,000 yearly.

Letters of Inquiry (LOI) are due August 9, 2022, at 12 Noon EST and can be accessed through the online application portal. Those selected to proceed will be asked to submit a Full Proposal in early October 2022. Awards will be announced in late December 2022 (see timeline below for additional information.)

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<sup>6</sup> See, for example, <https://jamanetwork.com/journals/jama/fullarticle/2583388>

## **Program Overview and Goals**

The goals of this program are two-fold:

1. Improve access to community-based mental health services for individuals experiencing “mild to moderate” mental health distress and practical problems of daily living
2. Develop the skills of a non-clinical workforce to support community members in addressing mild to moderate” mental health distress and practical problems of daily living

## **Phase 1 (Year One): Program Planning and Staff Training**

During the planning year, funded organizations will identify two to three staff members to participate in the project; one of these staff members should be designated as the program implementation lead within the organization to champion the responsibilities outlined in the following infrastructure development section. Two critical elements of this funded program are infrastructure development and staff training.

### Infrastructure Development includes:

- Integrating the PM+ project into the organization’s existing program structure;
- Developing appropriate workflows and systems for implementation of PM+, including adaptation of the intervention and materials as needed to the local context of the organization, to be led by each organization;
- Identifying a clinical referral pathway for acute/severe mental health and/or substance use disorder needs;
- Identifying a licensed clinician that can provide clinical supervision to staff members participating in the program; and
- Developing program success measures and metrics, in collaboration with other grant partners and the Institute for Community Health, the program evaluator.

### Staff Training

Participating staff members (2-3) will receive training based on the evidence-based PM+ curriculum, adapted for the Massachusetts environment as well as the experience and knowledge of the applicant organization. To develop the skills necessary to implement PM+, each staff member participates in approximately 40 hours of in-person and virtual training sessions and 15 hours of practicum or supervised practice. Each organization must be equipped to provide regular, ongoing supervision by a certified, licensed clinician to each participating staff once the program is implemented.

### Training Topics

- Depression, Anxiety, Stress
- Helping and listening skills

- Managing difficult problems
- Confidentiality
- Cultural and gender differences
- Other essential skills

### **Phase 2 (Years Two and Three): PM+ Intervention Implementation**

Trained staff members will identify and screen community members who could potentially benefit from the PM+ program using an evidence-informed, culturally appropriate screening tool. Once community members are determined to be interested and eligible through the assessment session, staff will conduct a series of 5 one-hour sessions to support them using the PM+ intervention they learned in Phase 1 of the program.

If it is determined that the community member needs specialized mental health or substance use disorder services, they will be referred to other behavioral health providers (within or identified by the organization hosting the PM+ program) for further support.

### **Training, Technical Assistance, Coaching, and Evaluation**

Organizations will be provided with training, technical assistance, mentorship, and coaching during the program planning and implementation phases. This will include supporting the organization to adapt some of the elements of the PM+ to be culturally responsive to the organization's specific community.

To support funded organizations in their activities, the Foundation will convene them a few times a year in a learning community to foster shared learning around implementing PM+ in their organization and community. Grant partners will be expected to share experiences in carrying out grant activities with their peers and bring their expertise to share with others.

### **Eligibility and Selection Criteria**

The Foundation will only consider organizations that meet the following criteria:

- Nonprofit organizations that primarily serve people who have been socially, economically, culturally, or racially marginalized.
- Community-based non-clinical organizations that provide direct social or community services to individuals and families.
- Community-based organizations with strong, trusting relationships with community members and cultural and linguistic ability to connect with constituency populations.
- Community-based organizations whose staff are reflective of their service population.

In addition, applicants must

- Employ or contract with a licensed mental health professional or have identified a partner organization with a licensed mental health professional that can serve as the clinical supervisor and participate in limited training to understand the PM+ model.
- Be willing to have 2–3 staff participate in the PM+ training both virtually and in-person.
- Be willing to participate in virtual and in-person implementation support meetings offered by program partners.
- Be willing to participate in virtual and in-person convenings facilitated by the Foundation.
- Be able and interested in partnering with the Foundation to evaluate the initiative, including data collection.

### **Program Partners**

This program will have three program partners that will support the Foundation in developing and implementing this project. *Partners in Health* and *The Family Van* will provide expertise, training, and curriculum development to help grant partners adopt and implement the PM+ model successfully. The *Institute for Community Health* will be responsible for evaluating the program.

- [Partners in Health](#)
  - Partners In Health (PIH)'s mission statement is to provide a preferential option for the poor in health care. PIH strives to achieve two overarching goals: to bring the benefits of modern medical science to those most in need of them and to serve as an antidote to despair.
  - PIH adapted Problem Management Plus (PM+), a psychological intervention developed by the World Health Organization (WHO) that non-specialists can deliver to address common mental health conditions in people affected by adversity. PIH adapted PM+ through a cross-site process and piloted it in Rwanda, Peru, Mexico, and Malawi from 2016 to 2021, and it continues to be delivered across all these settings.
- [The Family Van](#)
  - The Family Van's mission is to educate, counsel, and assist community members in strengthening and protecting their bodies, minds, and communities by increasing access to health care and improving the health of residents in Boston's most underserved communities. The Family Van empowers community members by improving health literacy and providing preventive screenings in a welcoming and non-judgmental environment.
  - In 2021, The Family Van launched Healthy Roads, a program adapted from the PM+ model to reduce the stigma of mental health care while increasing

access to high-quality, culturally, and linguistically responsive care. Healthy Roads helps those struggling with social isolation, stress, and adversity learn new coping, problem-solving, and help-seeking skills while also providing referrals to specialized care for those who are experiencing acute and severe mental health distress.

- [Institute for Community Health](#)
  - ICH is a nonprofit consulting organization that provides participatory evaluation, applied research, assessment, planning, and data services. ICH helps health care institutions, government agencies, and community-based organizations improve their services and maximize program impact.
  - The Institute for Community Health (ICH) will evaluate the Advancing Community Driven Mental Health grant program.

#### Key Dates and Submission Requirements

Date	Activity
June 30, 2022	Request for <b><u>Letters of Inquiry (LOI) Released</u></b>
July 14, 2022	<b><u>Applicant Webinar about Letter of Inquiry 10:00 – 11:00AM EST.</u></b>
August 9, 2022	<b><u>Letters of Inquiry Due by 12 Noon EST.</u></b> A brief LOI to determine suitability for the Full Proposal round is due by 12 Noon EST. Please submit your answers to the LOI's questions via the <a href="#">Foundation's online portal</a> . You will receive an automated confirmation email once an LOI has been successfully submitted through the portal system.
The week of August 30, 2022	<b>Notifications:</b> All organizations that submitted an LOI will be notified as to whether or not they are invited to submit a Full Proposal.
October 2022 (Exact date to be determined)	<b><u>Full Proposals Due by 12 Noon EST (only for organizations whose LOIs have been accepted and invited to apply):</u></b> Please submit proposals via the Foundation's online portal.
December, 2022	<b>Grant Awards Announced</b>
January 2023	<b>Grant Program Begins</b>

All proposals are due by 12:00 p.m. on date of the deadline. Please note there will be no technical support available for the online portal after the noon deadline.

**Organizational Alignment (2500 characters)**

- What interests you about the PM+ model of service? How will it benefit your organization and the population you serve? How does it align with the mission of your organization?

**Service Model (3,000 characters)**

- What types of services does your organization provide? How are services provided? (i.e., one-time visits; returning for multiple services/visits; ongoing relationships)? How do you imagine PM+ fitting into your services and service delivery model?

**Population of Focus (3,000 characters)**

- What are the characteristics of the adult (18+) individuals that access your services? Please include in your answer your experience working with those who are economically, racially, culturally, or socially marginalized. Please indicate how many people your organization serves on an average month? Describe your ability to meet your service populations' language needs, including the languages your services are typically offered in.

**Outreach and Access (2,500 characters)**

- Describe how individuals know of the availability of your services. Once people know of your services, how do they access your services? (i.e., referrals, walk-ins, virtual, or another method?)

**Community Partnerships (2,500 characters)**

- Detail existing community-based partnerships, both formal and informal, and how these are aligned to your organization's service model. Though not a requirement, how would these partnerships potentially benefit from your organization implementing a PM+ program?

**Program Management and Staffing (3,000 characters)**

- Explain your current staffing capacity to implement this program. Who do you anticipate will be the organizational champions for this program? Who are the individuals that will lead this effort, and what factors most predict their ability to achieve success? Please include backgrounds of potential staff/current roles of staff who may be involved in implementing the project.

**Clinical Supervision (3,000 characters)**

- PM+ requires clinical supervision. Please describe your staffing relationship with licensed mental health clinicians in your community who may be interested in providing consulting supervision for the staff participating in this program. If you do





not presently have a relationship with licensed clinicians, what steps would you take to develop such a relationship?

**Referral to Next Level Care** (2,500 characters)

- Through the PM+ program, you may identify individuals who have more acute, serious mental health needs or substance use disorder needs that will require a referral. What mental health services and substance use disorder services exist within your organization or community that provides services for community members who may present with these needs? How will you develop or deepen your relationship with those providers to ensure timely access for community members you refer to them for treatment?

**Additional Documents**

- a. **Organization Budget:** Upload your organization's board or department-approved budget for the most recent full year.
- b. **Tax Exempt Letter**