

KATHY HOCHUL Governor ANN MARIE T. SULLIVAN, M.D. Commissioner

Expansion of Peer Bridger Services Q&A

- Can you please clarify if this also includes Article 28 / Article 31 inpatient facilities?
 Answer: An Article 28 facility with a psychiatric inpatient unit that also has Article 31 licensure may apply; Bridging is to be offered to individuals transitioning from the psychiatric inpatient unit.
- 2. Can Article 28 facilities subcontract with a community-based organization who has a history of providing peer Bridger services to provide services within the hospital?
 Answer: The Article 28 facility will hire peer Bridgers directly and receive support beginning in implementation through a Peer Bridger Technical Assistance initiative intended to provide training, supplemental supervisory support, learning collaborative and regular technical assistance to the Bridgers and those in
- 3. Does this opportunity require that the applicant hire salaried peers, or would contracting for peer services with a qualified agency be allowable? In the latter instance, the expense would be on a contractual line.

supervisory and program direction positions.

Answer: The funding stipulates that the awardee must directly hire Peer Bridgers.

4. Can the funding be used to expand our current CPEP Peer Bridger services by hiring a third peer? We would be able to CPEP & inpatient psychiatric unit within NYP-Weill Cornell.

Answer: The funding will be used to hire three Peer Bridgers for an inpatient Article 28 psychiatric unit as well as cover associated costs with bridging in the community. While programs may be complementary, this funding will not supplement another program and funds must be used as stipulated in the RFP.



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5. Can the funding be used for additional support services outside of the peer salary and transportation costs? Our current program has a Social worker & a Physician integrated in to it and it has proven to be beneficial in the success of our program.

Answer: The funding supports the salary of three Peer Bridgers as well as costs associated with Bridging in the community, including but not limited to transportation and material costs that can support relationship-building. The funding does not support additional support or treatment services.

6. Will this funding source allow use of peer bridgers to support patients be discharged from CPEP and inpatient units, or is this solely intended to support patients transitioning from inpatient units? Our hospital system sees value in adding bridgers to support patients from both care settings, and would like to confirm this would be allowable.

Answer: No. The funding is intended for Peer Bridging from inpatient units.

7. Is it allowable to request one peer bridger, or is it required to request funding for three?

Answer: One Peer Bridger alone is not conducive to this model; the funding will be used to hire three Peer Bridgers to support people transitioning from inpatient settings into the community.

8. Is it allowable to split the hires between different hospital locations within our Article 28 network of hospital sites?

Answer: Peer Bridgers should be afforded adequate time and opportunities to build meaningful relationships with those they are supporting. As such, applicants must demonstrate how they intend to implement the model in a way that is conducive to relationship-building, including the approximate number of people each Bridger will support, time spent with individuals, how they will continue to support them in the community, how they will split their time within locations if indicated, and so on. The preference is that Peer Bridgers are in one location to avoid being the only Peer staff



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on a unit. Best practice indicates one peer worker in any program increases burnout and impacts retention.

9. Are the peers permitted to interface with patients that have significant psychiatric history but are in the hospital in a non-behavioral health area (e.g. inpatient or emergency non-behavioral health area)?

Answer: No. The Bridgers are intended to support individuals who are transitioning from a psychiatric inpatient unit to the community.

10. Can this funding source be used to sustain existing peer bridger services funded by an OMH award, and to build on the staffing model by funding one additional peer bridger to focus on filling gaps in existing capacity and other areas of the hospital? This would enable us to support cross coverage.

Answer: This funding is to be used solely to support the hiring of three Bridgers that will help individuals transition from psychiatric inpatient units in Article 28 hospitals and costs associated with continued support in the community. It is not intended to supplement funds for other Bridger services or fill gaps in other areas of the hospital.

11. Please confirm if MWBE forms are required with submission of the grant.

Answer: MWBE forms are not required at the time of submission of your application.

12. Can the applicant Article 28 facility subcontract to an established peer program to fulfill the requirements or does the Article 28 facility have to hire the peers directly?

Answer: Awarded Article 28 facilities cannot subcontract for this purpose, and they will hire peer Bridgers, directly.