# Attachment J: Refugee Mental Health Initiative – Capacity Building (ReMHI-CB)

**Use of form:** Use of this form is mandatory. If the requested information is not provided, the Department will be unable to process your application. Personal information you provide may be used for secondary purposes [Privacy Law, §15.04(1)(m), Wisconsin Statutes].

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| **Application #** 437004-G23-0002025 | | Legal Applicant/Organization Name | | |
| **Section 1: Attachment Instructions**   1. Complete the separate Application Form. 2. Enter your organization’s Legal Applicant/Organization name in the space provided above. 3. Read all sections of this attachment in its entirety. 4. Enter your Organization’s Legal Application/Organization name, Project County, and Funding Amount Requested in the spaces provided above Section 6. 5. Read all grant requirements in Section 6 and respond to the corresponding application questions in the space(s) provided for each question. Application responses must be written in the designated box for each question using 11- point Roboto font, single-spaced. (Hint: Text can be copied from a separate document and pasted into each answer box if preferred. To make a carriage return with an answer box press Shift + Enter.) The Applicant’s response to each question or sub-question must not be longer than 300 words. If responses are longer, reviewers will stop reviewing after 300 words. Any responses not formatted as indicated above will be reformatted by the above guidelines and evaluators will only review the content that fits the criteria above after it is reformatted. The length and formatting only apply to questions 1-6 as found in Section 6. Requirements 7 and 8 must be responded to using separate files as indicated below. 6. Ensure that your projectdoes not exceed the maximum funding allowed for your project area, as listed in Section 3. 7. Ensure that your project serves only the eligible population as outlined in Section 4; delivers all required services, and that you have described your project’s provision of any allowable services, as outlined in Section 5. 8. If your organization seeks to provide projects funded other programs you may copy and paste your answer to any question between attachments only if your answer is exactly and equally applicable in each of the projects and areas. | | | | |
| **Section 2: Program Description:**  **Refugee Mental Health Initiative – Capacity Building (ReMHI-CB)**  The Wisconsin Department of Children and Families’ (DCF) Bureau of Refugee Programs (BRP) funds the ReMHI-CB program within the ReMHI and Refugee Health Promotion (RHP) programs, through grants it receives from the federal Department of Health and Human Services, Office of Refugee Resettlement (ORR). BRP awards funds to subrecipients that provide services to refugees and other eligible participants as described in [ORR Policy Letters](https://www.acf.hhs.gov/orr/policy-guidance/policy-letters), [ORR Dear Colleague Letters](https://www.acf.hhs.gov/orr/policy-guidance/dear-colleague-letter), and [45 Code of Federal Regulations (CFR) Part 400](https://www.ecfr.gov/current/title-45/subtitle-B/chapter-IV/part-400#400).  The ReMHI-CB program funds activities and services that build the capacity of mental health providers in order to increase the availability and improve the quality of mental health services for refugees, as described in [ORR Policy Letter 20-05](https://www.acf.hhs.gov/sites/default/files/documents/orr/pl_20_05_rhp_transitions_to_rss6_1.pdf), [ORR Policy Letter 22-06](https://www.acf.hhs.gov/sites/default/files/documents/orr/orr-pl-22-06-refugee-mental-health-initiative-within-the-refugee-health-promotion-program-2021-12-08.pdf), and [ORR Dear Colleague Letter 22-08](https://www.acf.hhs.gov/sites/default/files/documents/orr/orr-dcl-22-08-refugee-health-promotion-mental-health-fy2022-funding.pdf).  The goal of the ReMHI-CB program is to increase the capacity of statewide mental health services to serve refugee populations appropriately and effectively. ReMHI-CB projects should increase the capacity of mental health providers to respond to the complex mental health needs of refugees, including but not limited to:   1. Trauma from the refugee experience, which could include personal experiences related to witnessing violence, effects of war, or experiencing loss and grief. 2. Persecution due to their race, ethnic background, gender, gender identity, sexual orientation, religion, cultural traditions or political affiliation. 3. Difficulty adjusting to a new culture after resettlement, family separation issues, employment related issues. 4. Chronic or terminal disease, diagnosed or undiagnosed mental health disorders, or other mental health concerns such as depression, anxiety, PTSD, or disassociation.   BRP makes ReMHI-CB funding available only to licensed healthcare providers that provide mental health-related services to refugees or similar populations.  The term “refugee” as used in this form includes individuals owning any of the eligible immigrant statuses listed in the Section 4 of this attachment. | | | | |
| **Section 3: Awards and Funding Levels**  BRP seeks to award funds for one to two ReMHI-CB projects that provide mental health capacity building services to mental health providers in Wisconsin.  If BRP has no approved applications, BRP may choose to re-allocate ReMHI-CB funds to other programs, or it may choose to repost and repeat the request for application process.  The funding listed below includes estimates based upon the current availability of federal funding. BRP reserves the right to adjust final ReMHI-CB awards according to the availability of federal funding. | | | | |
| **Project Area** | **Minimum Projects** | | **Maximum Projects** | **Maximum Total Funding for All Projects** |
| Statewide | 1 | | 2 | $100,00 |
| **Section 4: ReMHI-CB Eligible Participants**  ReMHI-CB projects should not provide direct services to refugees. ReMHI-CB projects should provide capacity building services to organizations that provide mental health services directly to refugees or other individuals with any of the following immigrant statuses:   1. **Individuals paroled as refugees or asylees under** §212(d)(5) of the Immigration and Nationality Act (INA); 2. **Refugees** admitted under §207 of the INA; 3. **Asylees** whose status was granted under §208 of the INA; 4. **Cuban and Haitian entrants**, in accordance with the requirements in [45 CFR § 401.2](https://www.ecfr.gov/current/title-45/subtitle-B/chapter-IV/part-401#401.2); 5. **Certain Amerasians** from Vietnam who are admitted to the U.S. as immigrants pursuant to §584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1988 (as contained in §101 (e) of Public Law 100-202 and amended by the 9th provision under Migration and Refugee Assistance in Title II of the Foreign Operations, Export Financing, and Related Programs Appropriation Acts, 1989 (Public Law 100-461 as amended)); 6. **Individuals subjected to a severe form of trafficking** who have been certified by the United States Department of Health and Human Services (HHS) under The Trafficking Victims Protection Act of 2000, Pub. L. No. 106-386, Division A, 114 Stat. 1464 (2000); 7. Certain **Iraqi and Afghan Special Immigrant Visa holders** (SIV) pursuant to the Defense Authorization Act for Fiscal Year 2008, Public Law 110-181; 8. **Afghan Special Immigrant Parolee** as described in [ORR Policy Letter 22-02](https://www.acf.hhs.gov/sites/default/files/documents/orr/ORR-PL-22-02-Additional-ORR-Eligibility-Categories-and-Documentation-Requirements-for-Afghan-Nationals.pdf) and [ORR Policy Letter 22-10](https://www.acf.hhs.gov/sites/default/files/documents/orr/ORR-PL-22-10-ASA-eligibility_0.pdf); 9. **Afghan Special Immigrant Conditional Permanent Resident** as described in [ORR Policy Letter 22-02](https://www.acf.hhs.gov/sites/default/files/documents/orr/ORR-PL-22-02-Additional-ORR-Eligibility-Categories-and-Documentation-Requirements-for-Afghan-Nationals.pdf) and [ORR Policy Letter 22-10](https://www.acf.hhs.gov/sites/default/files/documents/orr/ORR-PL-22-10-ASA-eligibility_0.pdf); 10. **Afghan Humanitarian Parolee** as described in [ORR Policy Letter 22-02](https://www.acf.hhs.gov/sites/default/files/documents/orr/ORR-PL-22-02-Additional-ORR-Eligibility-Categories-and-Documentation-Requirements-for-Afghan-Nationals.pdf) and [ORR Policy Letter 22-10](https://www.acf.hhs.gov/sites/default/files/documents/orr/ORR-PL-22-10-ASA-eligibility_0.pdf); and 11. **Lawful permanent residents** who previously held one of the statuses identified above.   Applicants should prioritize capacity building services to organizations who serve refugees with the most persistent, pressing, or underserved health mental health needs. | | | | |
| **Section 5: Required and Allowable Services:**   1. **Required Activities and Services**   Applicants are required to provide activities and services as described in [ORR Policy Letter 20-05](https://www.acf.hhs.gov/sites/default/files/documents/orr/pl_20_05_rhp_transitions_to_rss6_1.pdf), [ORR Policy Letter 22-06](https://www.acf.hhs.gov/sites/default/files/documents/orr/orr-pl-22-06-refugee-mental-health-initiative-within-the-refugee-health-promotion-program-2021-12-08.pdf), and [ORR Dear Colleague Letter 22-08](https://www.acf.hhs.gov/sites/default/files/documents/orr/orr-dcl-22-08-refugee-health-promotion-mental-health-fy2022-funding.pdf). Approved applicants must:   * 1. Provide activities and services that build the capacity of mental health providers and increase the availability and improve the quality of mental health services for refugees. All ReMHI-CB activities and services must be:      1. client centered,      2. trauma-informed,      3. strengths-based, and      4. culturally and linguistically appropriate.   2. Meet monthly with the State Refugee Health Coordinator (SRHC) and BRP. Collaborate with SRHC and BRP staff on information dissemination, networking, and technical assistance.   3. Use an equity lens to develop services and activities that support refugees’ access to high-quality mental-health services regardless of their race, religion, gender identity, sexual orientation, disability, or other characteristic(s). This includes:      1. Review existing programming with an equity lens to identify and eliminate barriers that may prevent the full participation of some groups.      2. Practice inclusion through purposeful collaboration and engagement with ethnic communities to inform service design and delivery.      3. Design programming to respond to existing gaps in mental health services for refugee populations   ReMHI-CB activities and services must not duplicate services provided by the ORR-funded Preferred Communities program to families who are co-enrolled in both programs.   1. **Allowable Activities and Services**   Applicants may provide any of the bellow listed Allowable activities, and must follow these guidelines when implementing these ReMHI-CB activities:   * 1. Increase mental health literacy, through activities to      1. Identify and conduct outreach to mainstream mental health providers versed in trauma informed services to determine potential partners for the program.      2. Conduct outreach and provide educational opportunities for refugees to learn about mental health and emotional wellness to decrease stigma about, and increase access to, mental health services. Workshops may be provided by a CHW or outside subject matter experts.      3. Develop Wisconsin-specific training curriculum for mainstream providers on refugee mental health or other related topics that respond to provider-specific needs; and/or partner with local refugee resettlement agencies and/or ethnic community-based organizations to provide such trainings. Where possible, training curriculum should be developed using existing and nationally organized training curriculum for mental health providers working with refugees.      4. Provide training for interpreters specific to mental health and/or partner with local refugee resettlement agencies and/or ethnic community-based organizations to provide such trainings.      5. Provide Wisconsin-specific trainings to mainstream mental health providers in the services areas of refugee resettlement agencies.      6. Increase the pool of Mental Health First Aid (MFHA) instructors in the refugee resettlement network by sponsoring MFHA certification training fees. New MHFA instructors who received sponsored fees are expected to conduct trainings that build mental health capacity in refugee communities and among refugee-serving providers.   2. Coordinate mental health care, through activities to      1. Develop direct linkages between mental health service providers and refugee-serving organizations to ensure a well-coordinated referral process.      2. Develop and implement strategies to mitigate cultural and language barriers to mental health services. | | | | |
| **Continue to Section 6 to Complete the Application Questions below.** | | | | |

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| Legal Applicant/Organization Name | |
| Project County | Funding Requested  $ |
| **Section 6: ReMHI-CB Application Questions** | |
| 1. **Requirement:** Applicants must have experience providing direct services to refugees and working on projects that serve the goals of this grant, each within the last three years. | |
| **(200 points)**  **1. Question:** Provide a brief description of your organization’s history of providing services to refugees, including ReMHI-CB required or allowable services. Summarize projects similar to ReMHI-CB that your organization has operated within the last three years. If refugee services will be a new service for your organization, indicate other related program(s)/project(s) your organization has provided to refugees or similar participant communities, and how your organization is prepared to expand your services to refugees. | |
| **1. Answer** | |
| 1. **Requirement:** The project must be designed to meet the greatest need(s) of the eligible refugees in the community where the project will occur, while adhering to the grant specific requirements as outlined in Sections 2, 4, and 5 of this Attachment. | |
| **(100 points)**  **2. Question:**   * 1. What are the greatest needs of mental-health service provision related to ReMHI-CB that your organization has identified and seeks to address through your project? What other needs has your organization identified? Your answer should indicate *why* ReMHI-CB grant funded project is needed by refugees in your project’s service area.   2. Explain the method(s) your organization used to identify the greatest ReMHI-CB related needs (examples may include but are not limited to previous service history, formal research, a community needs assessment, or surveys of previous or potential participants). If your organization has not conducted any process to identify the greatest ReMHI-CB related needs, explain how your organization will expedite its identification of such needs prior to implementing an ReMHI-CB project? | |
| **2. Answer**  a**.**  b. | |
| **3. Requirement:** The Applicant’s project must be designed to clearly adhere to the required and allowable services listed in Section 5, while effectively delivering high-quality, equitable, and respectful services that respond to the needs identified in Question 2. | |
| **(300 points)**  **3. Question:**   * 1. List and describe each ReMHI-CB services that your organization will provide to address the needs you identified in Question 2. Be detailed in the specific activities of your project and reference the required and allowable services (as applicable) listed in Section 5. Explain how these activities and services address the needs you identified in Question 2.   2. What are the goals and outcomes that are expected to be achieved through the activities or services listed in question 3.a.? Goals and outcomes should be S.M.A.R.T. (Specific, Measurable, Achievable, Relevant, and Time-bound).   3. How will your organization ensure the project delivers high-quality, effective, equitable, understandable, and respectful services that are responsive to the diverse needs of refugees and mental-health providers? How will you ensure service delivery is comprehensive to the needs you identified in Question 2, and are provided timely?   4. Describe the timeline of your project, including whether services will be provided throughout the entire first project period and the subsequent two project periods. If some or all services will not be made available throughout the entire project period, explain why, and state the start and end dates (real or projected) for each service.   5. Describe the target population(s) to be served each year. Estimate the number of mental-health providers to be served, their location, the services they provide to refugees, and the estimated demographics (nationality, ethnicity, age, sex, etc.) of the refugees they serve. How long do you expect mental-health providers be served (one year, three years, etc.)?   6. Identify the way in which your organization will have access to the population to be served. Explain how your organization will conduct outreach to potential participant mental-health providers.   7. Specify the city (or cities) and county (or counties) in which refugees will be served. Describe the mode(s) of service delivery (on-site, virtual, or combination of each) and the venue(s)/location(s) in which services will be provided. Explain why each method and location has been chosen.   8. Describe how you will assess the specific needs of the mental-health providers you will serve. When providers’ needs are beyond what your organization can address directly, explain how you will make external referrals to partner agencies or connect the providers’ to external resources?   9. Explain who will staff the activities and services to be provided. What duties will they be responsible for? Is there a need to recruit and train staff? If so, what position(s) will you recruit for and when do you expect the position(s) to be filled? How will you ensure all current or new staff receive appropriate training?   10. Who will oversee this grant for your organization and ensure the requirements of the grant are followed? Describe your organization’s Quality Assurance (QA) plan to ensure that services provided are high-quality, appropriate, and effective. How will you ensure your services and activities comply with contractual, state, and federal requirements? Explain your method for internal monitoring and follow-up within your agency. If your organization will subcontract with a partner agency for any activities of the project, name the partner agency, describe the duties for which they will be responsible, and how you will ensure they comply with all requirements previously listed.   11. What is the estimated cost per-provider to be served in your project? Explain how you calculated this cost. | |
| 1. **Answer**   a.  b.  c.  d.  e.  f.  g.  h.  i.  j.  k. | |
| 1. **Requirement**: Applicants must collect data on program/project outcomes and report them to BRP, including both narrative summaries and quantitative data. BRP will provide reporting forms and will provide technical assistance when necessary to improve quality data collection. | |
| **(100 points)**   1. **Question**: 2. How will you ensure project data and outcomes are properly documented? 3. How will your organization measure the success of services and activities provided? Explain what methods your organization will use to measure outcomes and how your organization will evaluate and use that data to inform your project’s implementation. 4. Indicate how your organization will ensure it is able to provide monthly reports in a timely manner while complying with DCF reporting requirements. | |
| 1. **Answer**   a.  b.  c. | |
| 1. **Requirement:** Applicants must collaborate with other programs or partners in order leverage existing community resources, efficiently use grant funds, and solve barriers to service delivery. Applicants must ensure that they do not duplicate services provided to participants co-enrolled in other BRP-funded projects. | |
| **(100 points)**   1. **Question:** 2. What other organizations or programs will you collaborate with in the implementation of your ReMHI-CB project, and why? If your organization does not have an established collaboration, what collaboration(s) will it explore during the life of this project? 3. How will your organization ensure that ReMHI-CB services are not duplicative of other services provided by other BRP-funded projects? | |
| 1. **Answer**   a.  b. | |
| 1. **Requirement:** Applicants must submit one budget proposal for the first year of the project, using the form provided by BRP. The Applicant must submit only one budget and it must be comprehensive of all grants and projects for which the Applicant is applying. The costs for each grant must comply with all requirements of [45 CFR § 75](https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-75), be clearly separated in the budget document, and listed in their designated columns. If staff time, supplies, or other expenses will be shared between two or more programs, the Applicant must separate those costs per program, while ensuring that program funds are spent only on costs related to that program. The Applicant must include all expenses to be paid by program funds and must ensure that all expenses add up to the total amount requested for each program. The applicant must answer all questions in the budget narrative tab. The amount of funding requested will not be used to determine the application score for this section. This section will be graded on completeness, the extent to which expenses match the proposed project, and to which the budget narrative explains the expenses. BRP may choose to partially fund the Applicant’s project based on the funds available and how well the budget is justified by the project design, as reflected in the Applicant’s responses to the questions in this attachment. | |
| **(100 points\*\*)**   1. **Action:** Complete your budget using the form provided and submit it with all other required application documents. Name the Budget file “Appendix 2: Budget - (Your Organization Name)”.   **\*\*Your response will be scored on the completion of the budget and budget narrative, not on the amount of funds requested in your application.** | |
| **Total Points Available 900 points** | |