

Concept Paper
Building Resilience for Children and Youth in TRIE Communities (BRY)
Release Date: September 24, 2021

Overview

Emotional and behavioral difficulties among youth are often not recognized and remain untreated in many communities (Bringewatt & Gershoff, 2010). The importance of timely mental health care for children and youth has become even more urgent during the COVID-19 pandemic (Browne et al., 2021; Hofmann, 2021). In response to health inequities and the emotional and behavioral health effects of the pandemic, the New York City-wide (NYC) Taskforce on Racial Inclusion and Equity (TRIE), sponsored by City Hall, has designated “TRIE Neighborhoods” within thirty-three (33) disproportionately impacted neighborhoods with significant racial and economic disparities in health outcomes as identified by NYC (a list of the TRIE neighborhoods and their corresponding zip codes is included in Appendix A.) The TRIE Neighborhoods initiative seeks to support local information-sharing, organizing, and resource coordination while providing real-time feedback to NYC to ensure a strong response and recovery¹.

An intervention model with the potential to strongly support mental health needs in TRIE communities is Connections to Care (C2C), an initiative that was first implemented across fourteen (14) NYC Community Based Organizations (CBOs) and Mental Health Providers (MHPs) between 2016 and 2021.² The program funded partnerships between CBOs and MHPs to bolster mental health awareness and skills among CBO staff and emphasized community networking and enhanced resource access. The focus of the C2C model is on developing CBO staff’s capacity to recognize and begin to address participants’ mental health needs with evidence-based tools, and to connect them with mental health providers when necessary (Stevens, 2020).

Purpose of the Proposed RFP

Public Health Solutions (PHS), on behalf of the New York City Department of Health and Mental Hygiene (DOHMH), is releasing this concept paper for the following purpose: DOHMH, in cooperation with the Mayor’s Office for Economic Opportunity³ (NYC Opportunity or NYCO), intend to adapt the C2C model for community organizations working with youth and their families in 33 TRIE neighborhoods. DOHMH and NYCO therefore propose to issue a Request for Proposals (RFP) for non-profit community-based organizations (e.g., serving one or more Mayor's Taskforce on Racial Inclusion & Equity (TRIE) neighborhood(s) within the five boroughs, with genuine relationships with community stakeholders and residents). As part of their program application, CBOs will designate a mental health provider organization such as a clinic, hospital, community-based provider or agency that they will partner with to handle referrals for clinical evaluations and interventions. Mental health provider partners will also provide coaching and consultation to facilitate mental health and related issues.

¹ <https://www1.nyc.gov/assets/civicengagement/downloads/pdf/CBO-Invitation-Letter-RFI-3-17-21.pdf>

² https://www.rand.org/content/dam/rand/pubs/corporate_pubs/CP800/CP857-2017-01/RAND_CP857-2017-01.pdf

³ <https://www1.nyc.gov/site/opportunity/index.page>

The Goals of the Proposed RFP

Under the broad goal of increasing mental health awareness and services for TRIE neighborhood youth (ages 5-21), the goals of the proposed RFP are to:

1. Expand mental health knowledge, skills and strategies among CBO staff that will enhance their capacity to identify and address mental health needs among community youth and their families.
2. Enhance CBO capacity to identify and deliver evidence-based interventions to meet participant mental health needs.
3. Develop a strong partnership with their MHPs to refer youth for mental health and related services when appropriate and enhance the effectiveness of the CBO referral process to a local mental health provider through strategies such as warm handoffs and service coordination.
4. Coordinate activities, as appropriate, with other TRIE community initiatives such as the Young Men's Initiative (YMI), the NYC Civic Engagement Commission (CEC) and Brothers and Sisters Thrive.

Eligibility Requirements

Community-based organizations must be a 501(c)(3) non-profit organization with proven experience and expertise delivering high-quality programming for the targeted children and youth populations (ages 5-21), and their families.

Applicants should demonstrate the following:

- Strong capacity to effectively recruit, serve and retain community children and youth in program activities and be able to meet related contract requirements;
- A physical program site where program activities will be focused; and
- Strong capacity to effectively partner with other organizations

Preferred qualifications of key staff of the CBO grantee:

- The program director(s) must have strong leadership skills and at least five years of successful, similar experience working with the target population. Key staff should have successful experience providing services to children, youth and their families in a culturally sensitive manner;
- Fiscally sound and capable program management. Experience managing government grants or contracts is preferred;
- Organizations should have experience collecting performance data and tracking outcomes as well as experience using performance data to manage and continuously improve operations;
- Organizational leadership should be available to play an effective role in developing, implementing, and overseeing the program;
- Requisite financial strength and resources to handle the administrative and fiscal implications of a DOHMH award.

Proposed Program Information

The selected CBOs (BRY Community Partners) will be responsible for the following:

Designating Dedicated Staffing

The selected CBOs will designate staff to receive a series of trainings and consultation sessions from DOHMH and technical assistance partners. In addition, CBOs will designate in their applications, a local mental health provider (MHP) who will provide coaching and consultation to the BRY community partner CBO staff and an enhanced pathway for referrals through warm handoffs and service integration. MHPs may include hospitals, mental health clinics, substance use providers, community healthcare centers with the capacity to deliver the services required.

Preferred organizational qualifications of the Mental Health Provider (MHP) partner include

- Mental Health Provider partners must be an Article 31 clinic
- Licensed clinicians to provide relevant clinical behavioral health services in a culturally sensitive manner;
- High levels of expertise and experience in the mental health interventions and trauma-informed care, particularly as applied to the youth, children and families;
- Successful experience partnering and collaborating with non-mental health organizations;
- Successful experience providing technical assistance, clinical supervision, and support to non-medical CBO partners

Implementation

After CBO selection is confirmed, BRY CBO staff will meet with DOHMH and technical assistance staff to discuss their community and their CBO's readiness and capacity to meet youth mental health needs. Further, they will attend a series of onboarding webinars and in-person consultations with DOHMH and technical assistance partners to orient participants to the program and receive necessary forms and procedures including an implementation toolkit.

Attending Training

Selected CBO staff will attend sessions in foundational skills (e.g., mental health awareness, youth mental health difficulties, motivational interviewing, problem solving interventions) supplemented by more specialized skills training (e.g., stress management and resilience for youth, parenting skills). In addition, select staff will participate in a borough wide "learning collaborative" with other BRY partner CBOs regarding model implementation, mental health interventions and other relevant topics to share best practices and implementation improvements.

Data Reporting

A data reporting mechanism will be determined by DOHMH prior to program implementation. Data reporting will not include personal health information (PHI) but may require deidentification of referral information for HIPAA compliant transmission. BRY CBOs will track program implementation through two reports that highlight qualitative and quantitative reporting (monthly and quarterly). Qualitative data will highlight implementation of staff trainings, coaching and supervision for staff, and implementation of interventions or strategies to better serve participant needs. Quantitative variables will include client level indicators (which may include the number participants reached, the number of participants screened and aggregate screening results, the number of participants referred and aggregate referral outcomes, numbers of crisis cases) staff level indicators (number of CBO staff trained in BRY model components,

implementing counseling sessions and BRY supportive programs, and receiving coaching and supervision) and demographics of participants served, respectively, as well as other relevant variables. Data will be reported to DOHMH monthly and quarterly.

Community Partnerships

BRY is building a community partnership network with cross agency programs serving TRIE communities. CBOs will communicate and coordinate, as necessary, with TRIE community partners including the Young Men’s Initiative (YMI) and the Civic Engagement Commission (CEC).

Resources provided by DOHMH and technical assistance partners

1. Implementation toolkit to help guide BRY CBOs during the initial 3–6-month period of program implementation
2. Foundational and supplemental training (as described above). When possible, DOHMH and technical assistance partners will develop new trainings as additional youth mental health needs are identified
3. Learning collaborative for participating CBOs and mental health providers
4. Technical Assistance: DOHMH will provide procedural support throughout the program in terms of staff training, support for policies and procedures, data reporting and referral and resource access
5. Enhanced access to resources through referrals and resource navigation (NowPow or UniteUs)

Proposed Term of Contracts

The anticipated start date for these contracts is March 1, 2022. The minimum contract term is three years, which consists of three budget periods. After the initial budget period, options to amend for second and third budget periods are subject to determination by DOHMH, funding availability, and CBO performance.

Proposed RFP Timeline

The following is an overview of the proposed RFP timeline for the forthcoming Building Resilience for Children and Youth in TRIE Communities (BRY) RFP.

Activity	[Anticipated] Date
Release of Concept Paper for Building Resilience for Children and Youth in TRIE Communities (BRY)	September 24, 2021
Comments on Concept Paper due by/no later than	November 8, 2021, 3pm ET
Release of Building Resilience for Children and Youth in TRIE Communities (BRY) RFP	[November 16, 2021]
Virtual Pre-Proposal Conference	[November 2021]
Proposal Submission Deadline	[December 2021]
Proposed Awards Announcement	[January 2022]
Proposed Contracts Start Date	[March 1, 2022]

Funding and Anticipated Number of Contracts

The anticipated annual funding amount is \$3.3 million (approximately \$100,000 per CBO). PHS and DOHMH anticipate making up to thirty-three (33) awards. In addition, another \$3.3 million (approximately \$100,000 per MHP) will be made available to the local mental health provider selected by the BRY CBO. Actual funding levels will depend upon the availability of funds. The anticipated annual funding amount for CBO and MHP partnerships is \$6.6 million, or approximately \$200,000 per partnership. As noted, Mental Health Provider partners must be an Article 31 clinic. However, a CBO may nominate an Article 28 or Article 32 clinic as a second partner. Approval of this arrangement will be determined through a review of the CBO application and a review of clinic services by DOHMH.

Contact Information/Deadline for Questions/Comments

Please submit all comments regarding this Concept Paper for Building Resilience for Children and Youth in TRIE Communities (BRY) no later than November 8, 2021, 3pm ET to: BRYCP@healthsolutions.org

References

- Bringewatt, E. H., & Gershoff, E. T. (2010). Falling through the cracks: Gaps and barriers in the mental health system for America's disadvantaged children. *Children and Youth Services Review, 32*(10), 1291-1299.
- Browne, D. T., Wade, M., May, S. S., Maguire, N., Wise, D., Estey, K., & Frampton, P. (2021). Children's mental health problems during the initial emergence of COVID-19. *Canadian Psychology/Psychologie canadienne, 62*(1), 65-72. doi:10.1037/cap0000273
- Hofmann, S. G. (2021). The Impact of COVID-19 on mental health. *Cogn Behav Ther, 50*(3), 185-190. doi:10.1080/16506073.2021.1897666
- Stevens, C., Tosatti, E., Ayer, L., Barnes-Proby, D., Belkin, G., Lieff, S & Martineau, M. (2020). *Helpers in Plain Sight: A Guide to Implementing Mental Health Task Sharing in Community Based Organizations*. Retrieved from Santa Monica, California
https://www.rand.org/content/dam/rand/pubs/tools/TL300/TL317/RAND_TL317.pdf

Appendix A: NYC TRIE Neighborhoods and Corresponding Zip Codes

Borough	Neighborhood	Zip Codes
Bronx	Mott Haven and Melrose	10451, 10454, 10455, 10456
Bronx	Hunts Point and Longwood	10455, 10459, 10474
Bronx	Morrisania and Crotona	10456, 10459, 10460
Bronx	Highbridge and Concourse	10452
Bronx	Fordham and University Heights	10453, 10458
Bronx	Belmont and East Tremont	10457, 10458
Bronx	Kingsbridge	10463, 10468
Bronx	Parkchester and Soundview	10472, 10473
Bronx	Williamsbridge and Baychester, Edenwald	10466, 10467, 10468
Brooklyn	Bedford Stuyvesant	11205, 11206, 11216, 11221, 11233, 11238
Brooklyn	Bushwick	11206, 11207, 11221, 11237
Brooklyn	East New York and Starrett City	11207, 11208, 11239
Brooklyn	Sunset Park	11220, 11232
Brooklyn	Coney Island	11224, 11235
Brooklyn	Flatbush and Midwood	11226
Brooklyn	Brownsville	11212, 11233
Brooklyn	East Flatbush	11203, 11226
Brooklyn	Flatlands and Canarsie	11236
Manhattan	Lower East Side and Chinatown	10002, 10003, 10009, 10013
Manhattan	Morningside Heights and Hamilton Heights	10025, 10027, 10031, 10032
Manhattan	Central Harlem	10026, 10027, 10030, 10037, 10039
Manhattan	East Harlem	10029, 10035
Manhattan	Washington Heights and Inwood	10032, 10033, 10034, 10040
Queens	Queensbridge and Astoria	11101
Queens	Jackson Heights and East Elmhurst	11368, 11369
Queens	Corona	11368
Queens	Briarwood, Flushing South	11435
Queens	Kew Gardens and Woodhaven	11419, 11421
Queens	Woodhaven, Richmond Hill, South Ozone Park	11419, 11420
Queens	Jamaica and Hollis	11412, 11423, 11432, 11433, 11434, 11435, 11436
Queens	Queens Village	11429
Queens	Rockaway and Broad Channel	11691, 11692, 11693, 11694
Staten Island	St. George, Stapleton, Port Richmond	10301, 10303, 10304, 10310