



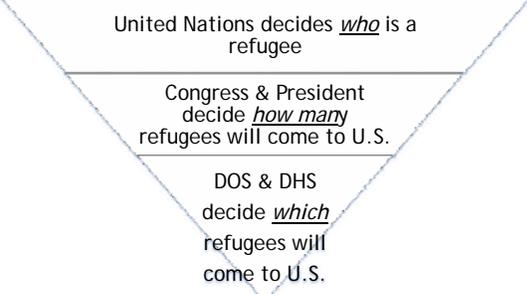
EXPECTATIONS OF MAJOR PLAYERS INVOLVED IN REFUGEE RESETTLEMENT

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EXPECTATIONS OF MAJOR PLAYERS IN REFUGEE RESETTLEMENT BEFORE ARRIVAL IN U.S.

- United Nations
- Congress and the President
- Department of State
- Department of Homeland Security

BEFORE ARRIVAL IN U.S.



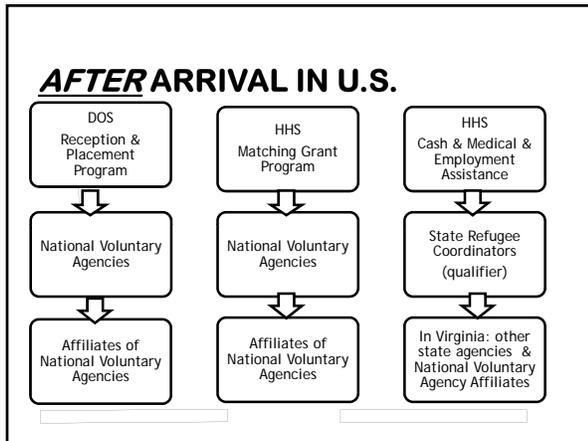
United Nations decides *who* is a refugee

Congress & President decide *how many* refugees will come to U.S.

DOS & DHS decide *which* refugees will come to U.S.

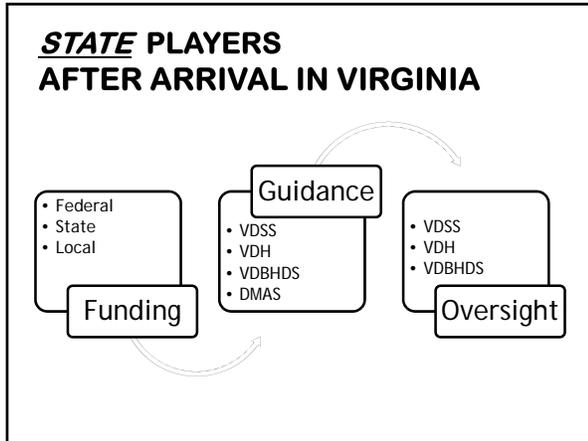
**EXPECTATIONS OF MAJOR PLAYERS
IN REFUGEE RESETTLEMENT
*AFTER ARRIVAL IN U.S.***

- Department of State
- Department of Health and Human Services
- National Voluntary Agencies

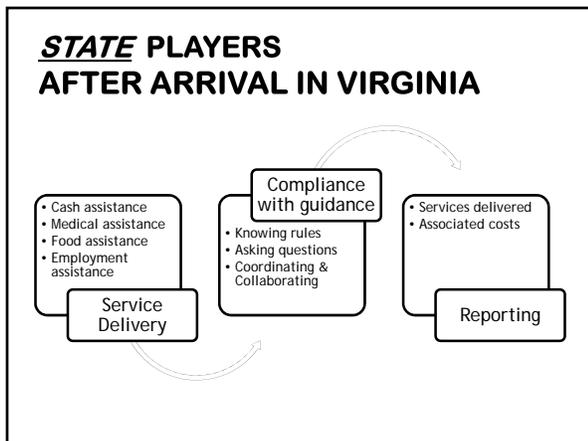


**EXPECTATIONS OF
MAJOR *STATE* PLAYERS
AFTER ARRIVAL IN VIRGINIA**

- Department of Social Services
- Department of Health
- Department of Medical Assistance Services
- Department of Behavioral Health and Developmental Services



- EXPECTATIONS OF
MAJOR *LOCAL* PLAYERS
AFTER ARRIVAL IN VIRGINIA**
- Local departments of social services
 - Local health districts
 - Local community services boards
 - Affiliates of national voluntary agencies
 - Other community service agencies



WHO ARE THE MAJOR PLAYERS?

- DSS - Office of Newcomer Services
- VDH - Newcomer Health Program
 - Local Health Departments
- DBHDS - Office of Cultural and Linguistic Competency



WHO ARE THE MAJOR PLAYERS?

- VOLAGs - Voluntary Agencies



VDH - NEWCOMER HEALTH PROGRAM

● Mission - *The mission of the Virginia Newcomer Health Program is the surveillance, prevention and control of identified public health problems among newcomers entering the Commonwealth of Virginia.*



VDH - NEWCOMER HEALTH PROGRAM

- Coordinate with CDC and LHDs (local health districts) on matters related to Refugee Health Screenings and issues/diseases of public health concern
- Monitor LHDs to ensure screenings are completed following appropriate protocols and are done within federally required timeframes
- Work closely with ONS on all matters related to refugee health

VDH - NEWCOMER HEALTH PROGRAM

- Attend policy meetings with ONS and resettlement providers
- Provide guidance on health related disaster preparedness
- Together with ONS participate in workgroups consisting of LHD nurse staff and refugee resettlement case management staff to improve communication, resolve issues and develop best practices

VDH - NEWCOMER HEALTH PROGRAM

- Provide written guidance to LHDs
- Train newly hired LHD staff and LHD staff in districts who do not currently serve refugees when refugees do resettle to those locations
- Provide technical assistance to LHDs as needed

LOCAL HEALTH DISTRICTS

- Work with local VOLAGs to assure timely scheduling of Refugee Health Assessments
- Provide guidance to local VOLAGs on refugee health related matters
- As time permits, consider attending local refugee related meetings

LOCAL HEALTH DISTRICTS

- Provide Initial Refugee Health Screenings
 - Health Assessment , History and Physical
 - TB testing and follow up
 - Lab testing (CBC, chemistries, U/A, Hepatitis, HIV, RPR, lead level if age appropriate, etc)
 - Stool Testing for Ova & Parasites for individuals who had contraindications to albendazole at pre-departure physical (pregnant women and children less than a year of age)

LOCAL HEALTH DISTRICTS

- Malaria testing per ORR guidelines
- Vitamins for adults and children 5 years of age and older with clinical evidence of poor nutrition and for ; vitamins for ALL children 6-59 months.
- Immunizations
 - Assess individual records and provide age appropriate vaccines required for adjustment of status (green card application)

LOCAL HEALTH DISTRICTS

- Make appropriate referrals for any issues discovered during the initial health assessment or issues which were noted on the overseas medical exam
- Provide follow up appointments for additional immunizations
- Complete I-693 paperwork for any refugee who presents to the LHD

LOCAL HEALTH DISTRICTS

- Be a good listener
- Advocate for refugees
- Help refugees to get off on a healthy start in their new home



The Department of Behavioral Health and Developmental Services System Orientation

Cecily Rodriguez.
Director, Office of Cultural & Linguistic Competency
November 2012

WHAT IS DBHDS?

DBHDS is Virginia's public mental health, intellectual disability and substance abuse services system is comprised of 40 locally-run community service boards (CSBs) and 16 state operated facilities. The CSBs and state facilities serve children and adults who have or who are at risk of mental illness, serious emotional disturbance, intellectual disability, or substance use disorders.

WHAT IS DBHDS?

A Community Services Board (CSB) is the point of entry into the publicly-funded system of services for mental health, intellectual disability, and substance abuse.

CSBs provide pre-admission screening services 24-hours per day, 7 days per week.

CSBs are typically operated by county or local governments.

- CSBs are not part of DBHDS.



DBHDS TRAINING CENTERS



- Central Virginia Training Center- Lynchburg, VA
- Northern Virginia Training Center
- Southeastern Virginia Training Center
- Southside Virginia Training Center
- Southwestern Virginia Training Center

DBHDS MENTAL HEALTH FACILITIES

- Catawba Hospital - Roanoke
- Central State Hospital- Petersburg
- Commonwealth Center For Children & Adolescents - Staunton
- Eastern State Hospital - Williamsburg
- Northern Virginia Mental Health Institute- Fairfax
- Piedmont Geriatric Hospital - Burkeville
- Southern Virginia Mental Health Institute- Danville
- Southwestern Virginia Mental Health Institute- Abingdon
- Western State Hospital- Staunton



WHAT WE DO- SYSTEM WIDE

Mental Health Services

CSBs offer varying combinations of six core services:

- Emergency services (mandated)
- Local inpatient services
- Prevention and early intervention services
- Outpatient and case management services
- Day support services
- Residential services



INTELLECTUAL DISABILITY SERVICES

The CSBs offer services for people with intellectual disabilities that support and affirm that all persons with intellectual disabilities and their families are participating and contributing members of their communities.

- Determination of eligibility for Mental Retardation Waiver Services
- Assistance in transitioning from state facility-based services to local community-based services
- Identifying and reaching out to potential consumers
- Assessing needs and planning services
- Linking and assisting individuals in obtaining needed services, supports, and resources
- Enhancing community integration

SUBSTANCE ABUSE SERVICES

Local Community Services Boards provide a wide array of prevention services to youth and family and crisis services for people with substance use disorders.

- Intensive inpatient treatment
- Traditional outpatient treatment
- Detox, housing, and residential services
- HIV prevention
- Community coalition for prevention
- In school/after school prevention

CHILD & FAMILY SERVICES

Works with children 3-12 who are experiencing emotional and behavioral problems.

- Case management
- Outpatient therapy
- Parent Education Groups
- Intensive In-home Services



INFANT & TODDLER CONNECTION



Statewide program that provides early intervention supports and services to infants and toddlers from birth to age 2 who are not developing as expected or who have a medical condition.

Evaluation and treatment planning are done as a team of professionals that include family.

OFFICE OF CLC - WHAT WE DO...			
Language Access	Diversity and Inclusion	Workforce Development	Resource Development
Signage Consultation	Resources for interviewing for cultural competence	Coalition building	Develop policy statements and briefs for CLC
Bilingual staff interpreter training	Toolkits for diversity recruitment	Training on topics related to CLC	Host communities of practice
Training on working with interpreters	Consultation on retention strategies	Succession planning	Templates for measuring performance
Capacity building for health literacy	Consultation on D& I organizational planning	Consultation on organizational planning	Develop community linkages

REFUGEE MENTAL HEALTH GRANT	
<ul style="list-style-type: none"> ● Survey to explore barriers to mental health services. ● Identify existing refugee mental health risk assessment tools that can be used by service providers. ● Research, collect, and develop training and educational materials on best practices when working with refugees with mental health issues 	<ul style="list-style-type: none"> ● Identify orientation materials related to mental health resources that can be used by refugee resettlement offices. ● Continue training for staff who interpret for refugee populations. ● Develop resource materials on publically funded mental health services and access to those services by refugees.
