

### 3.8.4 Tab 4: Project Narrative

#### 3.8.4.1 Statement of the Problem:

**Criminal justice involved adults with mental illness and co-occurring substance use disorders who are indigent and uninsured, have difficulty accessing behavioral health services in Lake County.** Without treatment and support to address mental illness, substance use and criminogenic needs, these individuals experience re-arrest, re-hospitalization, illness and even death (Screening and Assessment of Co-occurring Disorders in the Justice System, SAMHSA, 2015). Early intervention and treatment strategies are recommended by SAMHSA for the U.S. Justice system to reduce recidivism. Seventy-four percent of state prisoners, 63% of federal prisoners and approximately 49% of jail prisoners meet criteria for a co-occurring disorder. The citizens of Lake County, Florida remain committed to diverting individuals with mental illness and co-occurring substance use disorders from incarceration. Despite recent gains in securing funds for behavior health needs in Lake County, Circuit 5, from both state and federal sources, mental health services for the indigent and uninsured are not adequate to meet the needs of the community. Only one-third of those with serious and persistent mental illness receive state funded services according to Florida Council for Community Mental Health. Lake County Board of County Commissioners (BOCC) has benefitted from prior Reinvestment Grant Funding as a Grantee, and has moved the county forward in building partnerships and programming to address this problem. Lake County BOCC chose LifeStream as the service provider for the Forensic Community Services Team, the jail diversion behavioral health program that was funded through previous grants. At this time, the BOCC has requested that LifeStream apply directly for the funding as Grantee, with full confidence that our partnership will continue, to the benefit of the citizens of Lake County.

The latest census data for Lake County estimates the population is 325,875 in a mix of small urban and rural communities. This represents a trend in growth of 9.7% over the past 5 years (US Census Bureau, 2016). Racial identity is reported to be 84.3 % white, 10.8% Black and 14.4 % Hispanic. Other racial identities are 2% or less. There are approximately 34,000 veterans in this population and immigrants make up about 8%. Poverty is at 13.8%. Between 2010 and 2014, 9.7% of citizens under age 65 were disabled. Per capita income and median income are below the state average. In 2013, the personal income per capita was \$9,983, less than the corresponding average across the country and \$6,715 less than the statewide average (US Department of Commerce, Bureau of Economic Analysis, 2014). The county is a federally designated health care shortage area for primary care, dental care, and mental health care. The National Center for Education Statistics reports that 20.5% of the residents of Lake County are functionally illiterate. These ongoing issues of changing population, poverty and growth challenge the entire infrastructure of Lake County.

### **3.8.4.1.1 A nalysis of the current population of the jail:**

A point in time survey completed on September 12, 2016 revealed that the Lake County Jail had a census of 739 individuals: 636 males; 429 identifying as white, 207 identifying as black; 103 females; 90 identifying as white and 13 identifying as black. No other races or ethnicities were reported. Considering that the ethnic make-up of the county includes 14.4% Hispanic population these statistics bear further investigation to insure that services will be culturally appropriate.

#### **3.8.4.1.1.1 The screening and assessment process used to identify the Target Population(s):**

Individuals are screened at Booking and again by the Medical Services Team. Nurses complete a standard assessment designed for, and in use by detention programs nationally to screen for past history and/or current psychiatric problems including current medications for physical and mental health problems. If an individual is known to have a treatment history or reports such, a release of information is requested so that the Jail's Licensed Counselor can contact the treatment provider for information. Many of these individuals have a treatment history with LifeStream, as the contracted community behavior health provider receiving state funding through Lutheran Services Florida (LSF).

#### **3.8.4.1.1.2 The percentage of persons admitted to the jail that represents people who have a mental illness, substance abuse disorder, or co-occurring mental health and substance abuse disorders:**

Current data from Lake County Jail reveal that 15% of the inmate population is prescribed a psychotropic agent. Eighty-five percent (85%) of those receiving psychotropic medication have a history of impulse control deficits secondary to either mood disorder or personality disorder. Fifteen percent (15%) meet the criteria for a severe and persistent mental illness such as Schizophrenia or Bipolar Disorder-Type I, while 10% of those individuals are co-morbid for both a substance use disorder and a severe/persistent mental illness. Between 60% and 70% of the general population of the jail meet criteria for a substance use disorder. Approximately 5% of inmates are receiving antipsychotic medication, 7% are prescribed anti-depressants, and mood stabilizers are given to 7% of the inmates. Individuals experience medication changes upon incarceration if the medication that they have been prescribed in the community is not on the jail's formulary. This can lead to deterioration of functioning and an increase in symptoms for some.

There is also expressed bias by some in the jail that many individuals are malingering in order to get some kind of medication or special attention or treatment.

From January, 2016 through July, 2016, with an average daily census of approximately 752 Inmates, the Licensed Mental Health Practitioners at the jail, Howard Lawrence and Mary Tressler, have evaluated and documented on 3,994 inmates for urgent and routine mental health contacts. The Psychiatrists, Dr. Perez and Dr. Gnagy, evaluated and documented on 495 Inmates. Fifteen Inmates were transferred to State Psychiatric Hospitals for either competency restoration or as Not Guilty by Reason of Insanity. Thirty-four inmates were Baker Acted, upon release, during this span and transferred to LifeStream.

#### **3.8.4.1.1.3 An analysis of observed contributing factors that affect population trends in the county jail:**

Over 10,000 people are homeless in Central Florida, and homelessness is a risk factor for incarceration. Arrests of women have increased steadily related to substance use problems. Services in the jail are limited as are re-entry services and as a result, criminogenic risks may not be identified and addressed. Opiate use is increasing as evidenced by an increase in the number of drug overdoses from two in 2013 to fifteen in 2014 in Circuit 5. After a spike in 2014, Baker Acts in Lake County decreased for 2015 just as Crisis Intervention Training (CIT) and other interventions have increased.

#### **3.8.4.1.1.4 Data and descriptive narrative that delineates the specific factors that put the Target Population at-risk of entering or re-entering the criminal justice systems:**

Untreated mental illness, untreated substance abuse issues, homelessness, lack of employment, lack of family support, lack of transportation and criminogenic risk factors such as criminal thinking and associating with those involved in criminal activities, puts the targeted group at risk of recidivism to jail or prison. Nearly 50% of individuals with serious mental illness are untreated in any 12-month period. Lake County is considered to be at full employment, making it difficult for people to find jobs that require limited or little skill and 55% of those enrolled in FCST are unemployed at time of admission. Public transportation is becoming more available, but routes are extremely limited. The economic cost of associated consequences from drug use in the state of Florida related to incarceration is \$1,077,450,638.

**3.8.4.1.2 Implementation and Expansion Applicants Only - Provide a concise analysis of the Target Population, including the projected number of individuals to be served. Demonstrate how the identified needs are consistent with the priorities of the Strategic Plan:**

The target population for this expansion grant is adult residents of Lake County, male and female, with misdemeanor and/or non-violent felony offenses and a history of, or presentation with moderate to high mental illness/co-occurring disorders and moderate to high criminogenic risks and needs. In their revised Strategic Plan for 2013 through 2018, the Public Safety Coordinating Council identified an objective **“to keep people who come into contact with law enforcement because of mental illness from becoming unnecessarily enmeshed in the criminal justice system.”** This proposed expansion project will increase the number of individuals served from 25 to 35 at any given time, with expectation of a six to nine month program course and the opportunity for longer enrollment for aftercare services up to an additional year. A minimum of 70 will be served annually with a total of 210 receiving FCST services by the end of the three-year grant period.

### **3.8.5 T a b 5: Project Design and Implementation:**

#### **3.8.5.1 For both Planning Grants and Implementation and Expansion Grants, a description of the planning council or committee, including:**

The Lake County Public Safety Coordinating Council (PSCC) was established in 2005 as a sub-committee of the Board of County Commissioners, with membership formed according to the statutory requirements. Presently, Mike Graves, Public Defender for Circuit 5 is Chair of the Council. Several new appointments were made recently and the BOCC is actively recruiting qualified individuals to fill the few vacant seats, anticipating a full council by the October 13, 2016 meeting.

**3.8.5.1.1 Composition of the planning council or committee:**

Current members are as follows:

<b>MEMBER</b>	<b>ROLE</b>	<b>BUSINESS AFFILIATION</b>
Brad King	State Attorney	State Attorney, Fifth Judicial Circuit of Florida
Michael A. Graves	Public Defender	Public Defender, Public Defender's Office
Lawrence Semento	Chief Circuit Judge	Lake County Circuit Judge, Fifth Judicial Circuit of Florida
Terry Neal	Chief County Judge	Lake County Judge, Lake County Court
Major David Mass	Chief Correctional Officer	Major of Criminal Justice Operations, Lake County Detention Center
Major Wayne S. Longo	Sheriff	Major of Administrative Services Division, Lake County Sheriff's Office
Welton Cadwell	Chairperson of the Board of County Commissioners	Commissioner, Lake County Board of County Commissioners
Charles Broadway	Police Chief	Chief of Police, Clermont Police Dept.
Vacant	Representative of the Substance Abuse Program Office and the Mental Health Program Office of the Dept. of Children and Families	
Vacant	Primary Consumer of Mental Health Services	
Vacant	Primary Consumer of Substance Abuse Services	
Vacant	Family member of a primary consumer of community-based treatment services	
Barbara Wheeler	Representative from an area homeless program	Executive Director, Mid Florida Homeless Coalition, Inc.
Captain Kenneth Coleman	Director of the detention facility of the Dept. of Juvenile Justice	Director, Department of Juvenile Justice
Rick Bedson	Chief probation officer of the Department of Juvenile Justice	Chief Probation Officer, Circuit 5, Department of Juvenile Justice
Gary Cooney	Local Court Administrator	Deputy Court Clerk, Lake County Courthouse
Jon Cherry	Director of a community mental health agency	President/CEO, LifeStream Behavioral Center, Inc.
Susan S. Cizmada	State probation circuit administrator	Circuit Administrator – Circuit 5, Florida Department of Corrections
Tony Deaton	Director of county probation	Chief Probation Officer, Lake County Probation Services Division
Karen Rogers	Director of a local substance abuse treatment program	Substance Abuse Program Director, LifeStream Behavioral Center, Inc.
Iris E. Clas	Representative from a county and/or state jobs program	UF IFAS Extension Advisory Committee

**3.8.5.1.2 Planning council's activities, including the frequency of meetings for the previous 12 months and future scheduling of meetings:**

PSCC meets quarterly on the second Tuesday of the month; then the FCST Taskforce Committee meets quarterly; the grant manager for the County along with the FCST Supervisor and Director meet as needed. She will continue to be the liaison for the County as we transition from the County BOCC to LSBC as the Grantee. Jon Cherry, CEO of LifeStream is a standing member of the PSCC and Karen Rogers, Program Director for Adult Clinical Services at LifeStream was recently appointed to the Council. Meetings were advertised as required under the Sunshine Statutes and held four times over the past year at the State Agriculture Center and Extension Office in Lake County on July 14, 2105, October 13, 2015, January 12, 2016 and April 12, 2016.

Partners and stakeholders provide reports of activities related to diversion, re-entry efforts in their organizations and the community, resources are shared, and consensus built. The current CJMHSA program and the Forensic Case Management program at LifeStream provide updates and shares data along with CIT planning and data on training.

**3.8.5.2 NOT APPLICABLE**

**3.8.5.3 Implementation and Expansion Grants Only:**

**3.8.5.3.1 Provide a copy of the existing Strategic Plan, which must include at minimum, all of the elements in Appendix A:**

The current Public Safety Coordinating Council Plan was formatted and accepted prior to the development of this application and generally meets the format requirements. The elements identified to be included in the cover page have not all been formulated by the Council and this will be addressed as part of the Agenda at the next meeting, October 13, 2016. The cover page provided includes Historical Accomplishments, Identified Strengths, and Challenges We Face. Vision, Mission, Values and Service Models have yet to be specified. Performance measures were added to the Plan, as they were not included in the original version developed.

## APPENDIX A

### Goal #1:

Objective #1:	To strengthen existing and new partnerships; to improve the efforts of every agency to maintain a data keeping system that enhances both administrative efficiency and system-wide policymaking.			
	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
1.1	Continue quarterly Public Safety Coordinating Council meetings to discuss jail overcrowding and progress on strategic plan goals.	Meetings held and Minutes published	<ul style="list-style-type: none"> <li>• All Members.</li> </ul>	Ongoing: Quarterly
1.2	Continue to publicly advertise and invite additional community partners, business leaders and interested citizens to attend the Council meetings.	Minutes including the presence of new members	<ul style="list-style-type: none"> <li>• BCC Council Staff</li> </ul>	Ongoing
1.3	Council will act as a forum to facilitate increased communication and cooperation between justice agencies regarding the statistical information needed from each agency to successfully apply for collaborative grants, show program outcome measures and improve processes.	Minutes detailing discussion and action items.	<ul style="list-style-type: none"> <li>• All Members</li> <li>• Statistical Sub-Committee -- look at FTA tracking</li> </ul>	Ongoing Establish at/by first 2014 meeting

Objective #2:	To keep people who come into contact with law enforcement because of mental illness from becoming unnecessarily enmeshed in the criminal justice system. (Intercept I)			
	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
2.1	Increase number of CIT trained law enforcement and community partners by having each department/agency commit to sending at least one officer/staff to CIT training each year. Offer CIT training for Judges and Attorneys.	Sign-in sheets for attendance; compilation of data detailing new departments involved.	<ul style="list-style-type: none"> <li>• LifeStream</li> <li>• Sheriff's Office/ Municipalities</li> <li>• State Attorney / Public Defender</li> <li>• Court Admin.</li> </ul>	Minimum of twice a year
2.2	Create a Mobile Response Team consisting of CIT trained law enforcement, and counselors to respond in incidents of suspected mental illness and provide opportunity for therapeutic intervention vs. arrest when appropriate.	Full implementation of BJA grant in South Lake County	<ul style="list-style-type: none"> <li>• LifeStream</li> <li>• Sheriff's Office / Municipalities</li> </ul>	If grant funding is awarded
2.3	Increase information sharing of offender history and treatment status; ensuring compliance with all HIPPA rules. Examine what information is available to first responders and if it could be updated. (example: currently enrolled with FCST)	Complete training for LEO and Behavior Health Partners. Increased enrollment in Smart 911 by consumers. Increased consents in place.	<ul style="list-style-type: none"> <li>• LifeStream</li> <li>• Probation</li> <li>• Law Enforcement Sub-Committee</li> </ul>	Establish at/by first 2014 meeting



Objective #3:	To enable more defendants to be assessed and released at the earliest possible point with the support and supervision they may need to remain safely in the community and return to court as directed. (Intercept II & III)		
	Task	Performance Measure	Projected Completion Date
3.1	Decrease arrest time and involvement with the criminal justice system by utilizing civil citation for first time misdemeanants.	Increased number of civil citations over previous years.	<ul style="list-style-type: none"> <li>• State Attorney</li> <li>• Law Enforcement</li> <li>• Clerk</li> <li>• Sub-Committee</li> </ul> Establish by first 2015 meeting
3.2	Submit mental health notes from the jail, on a separate document, for 1 <sup>st</sup> appearance so the Judge can approve provisional representation by the Public Defender's Office.	Data from Court Administrative Services and Court Liaison on number of notifications sent.	<ul style="list-style-type: none"> <li>• LCSO Jail</li> <li>• Medical Staff – Armor</li> <li>• Court Admin. – Clerk</li> <li>• Public Defender</li> </ul> Immediately: Ongoing
3.3	Continue to utilize the Forensic Community Services Team with appropriate referrals and seek additional funding for program sustainability and expansion.	Maximize referral opportunities to meet minimum number served in FCST (70 annually)	<ul style="list-style-type: none"> <li>• LifeStream</li> <li>• LCSO Jail / Armor</li> <li>• Probation</li> <li>• State Attorney / Public Defender</li> </ul> Ongoing
3.4	Research using automated court reminders calls to decrease technical violations on failure to appear. Implement if feasible.	Options presented to the PSCC for recommendation to BOCC.	<ul style="list-style-type: none"> <li>• Clerk</li> <li>• Sub-Committee</li> </ul> Establish by first meeting of 2015
3.5	Explore successful Pre-Trial Release programs in Florida. Explore use of electronic medical records. Examine capability to track Failure to Appear history. Seek grant funds. Develop and implement a Pre-Trial Release program.	Presentations to PSCC with results of searches; Data available for review. Pre-trial release practices implemented.	<ul style="list-style-type: none"> <li>• Probation</li> <li>• LCSO Jail / Bail Bondsman</li> <li>• State Attorney / Public Defender</li> <li>• Court Admin.</li> <li>• Sub-Committee</li> </ul> Establish at/by first 2016 meeting
3.6	Continue use of the pre-trial intervention program.	Number of PTIs per year compared to prior years.	<ul style="list-style-type: none"> <li>• Probation</li> <li>• State Attorney</li> <li>• Clerk / Court Administration</li> </ul> Ongoing
3.7	Continue use of the "rocket docket".	Number of individuals processed through this system annually.	<ul style="list-style-type: none"> <li>• Court Admin.</li> <li>• State Attorney / Public Defender</li> <li>• Clerk</li> </ul> Ongoing

<b>Objective #4:</b>		To increase resources required to facilitate successful re-entry and transition into the community from incarceration. (Intercept IV)		
	<b>Task</b>	<b>Performance Measure</b>	<b>Lead Person or Organization</b>	<b>Projected Completion Date</b>
4.1	Increase jail-prison education and vocational programs so that inmates leave with a marketable skill.	Increased number of offerings, hours, and participants	<ul style="list-style-type: none"> <li>• LCI</li> <li>• LCSO Jail</li> </ul>	Ongoing Assessment
4.2	Increase jail-prison therapeutic programs to include anger management, domestic violence, substance abuse, parenting, decision making, etc... Seek volunteer counselors or grant funding.	Increased number of volunteers and/or paid positions	<ul style="list-style-type: none"> <li>• LCI</li> <li>• LCSO Jail</li> </ul>	Ongoing Assessment
4.3	Establish offender benefits before returning to the community.	Increased number of individuals receiving interventions to assist with benefits over past years.	<ul style="list-style-type: none"> <li>• LCI / LCSO Jail</li> <li>• DCF Liaison</li> <li>• Re-Entry Coordinator</li> </ul>	Ongoing
4.4	Identify and link offender with community resources before release, including employment, housing, identification, treatment referrals, medication, etc.	Increased re-entry resources over past years as measured by number linked to services at release.	<ul style="list-style-type: none"> <li>• LCI / LCSO Jail</li> <li>• Re-Entry Coordinator</li> <li>• Re-Entry Task Force</li> <li>• Goodwill Employment Center</li> <li>• Workforce / LifeStream</li> </ul>	Ongoing

<b>Objective #5:</b>		To understand and improve the current system of probation supervision, violation and revocation. (Intercept V)		
	<b>Task</b>	<b>Performance Measure</b>	<b>Lead Person or Organization</b>	<b>Projected Completion Date</b>
5.1	Utilize graduated sanctions to decrease the number of technical violations.	Decreased number of offenders jailed for technical violations over past years.	<ul style="list-style-type: none"> <li>• Probation</li> <li>• Court Admin.</li> <li>• State Attorney / Public Defender</li> <li>• Clerk</li> <li>• Sub-Committee</li> </ul>	Establish at/by first 2016 meeting

**3.8.5.3.2 Provide a description of the Strategic Plan, including progress toward implementing the plan, when the plan was last reviewed or updated, and any challenges or barriers toward implementation:**

The plan was last updated in 2013 and was established at that time as a five-year plan with five objectives to be accomplished by the end of fiscal year 2018. It is periodically reviewed by the FCST Task Force, a PSCC subcommittee, continues to be utilized by that group and other planning subcommittees routinely. The Public Safety Coordinating Council Strategic Plan form consists of five objectives. The PSCC will strengthen partnerships to improve data collection and reporting that will inform policymaking and efficiency. All Action Steps toward the accomplishment of this objective are being taken. All Action Steps are also in progress for the objective of reducing incarceration of people with mental illness and lessening their involvement with the criminal justice system, a priority for this grant application. Focusing on all of the intercepts where individuals can be diverted from jail while remaining in the community and following through with court appearances and requirements is the council's third objective. Five of seven Action Steps are active with efforts increasing to address the others. Reentry remains a high priority for the safety council and they will focus on increasing resources for re-entry efforts. This is an area that needs more resources for successful action. Lastly, the council intends to focus energy on the system of probation in order to reduce violations and revocations. Implementation of the plan is proceeding as action steps are met with continued efforts by all responsible parties. Sustainability of existing programs and resources is essential to success in meeting these objectives.

**3.8.5.3.3 Provide a description of the project design and implementation:**

This project is an expansion of the existing Forensic Community Services Team which was established in 2011 and serves misdemeanor offenders, and those with non-violent felonies who have mental illness and co-occurring disorders. These are individuals for whom services might otherwise be unavailable. The team engages individuals in treatment, rehabilitation and support in order to reduce the risk factors that contribute to their criminal justice involvement. The team utilizes Assertive Community Treatment methods along with Cognitive Behavioral Therapy and strengths based case management to get people on the road to successful recovery. Expansion is focused on increasing the number served annually by increasing staffing levels and expanding the use of evidence based practices to treat trauma, which has been identified as a significant clinical issue for 100% of the program participants, through the course of service delivery. Sustainability of this program is essential to the

jail diversion efforts in Lake County, which are clearly a priority according to the Public Safety Coordinating Council's Strategic Plan. For that reason, the sustainability plan is incorporated as a specific objective for the grant.

**3.8.5.3.3.1 Project goals, strategies, milestones, and key activities toward meeting the objectives outlined in Section 2.2. Applicants must include at least one objective in addition to those outlined in Section 2.2 and may propose tasks in addition to those specified in the RFA:**

See TABLE 1 Next Page

**3.8.5.3.3.2 Organization and key stakeholder responsible for each task or key activity necessary to accomplish the objectives:**

See TABLE 1 Next Page

**TABLE 1: GOALS, OBJECTIVES, TASKS, KEY ACTIVITIES AND RESPONSIBLE PARTIES**

<p><b>GOAL OF THE PROGRAM-</b>                  Increase access in Lake County to treatment and support for Criminal Justice involved adults with mental illness and co-occurring substance use disorders through the provision of evidence based, trauma-informed services that address and reduce criminogenic risks and needs.</p>		
<p><b>Objective 1- Establish Programs and Diversion Initiatives</b> that increase public safety, avert increased spending on criminal justice, and improve the accessibility and effectiveness of treatment services for the Target Population(s) within three (3) months of execution of the final Grant Agreement.</p>		
<p><b>Tasks- Objective 1</b></p> <p>A. Establish legally binding agreements with all participating entities to establish programs and diversion initiatives for the Target Population,</p> <p>B. Provide, directly or by agreement, an information system to track individuals during their involvement with the Program and for at least one year after discharge, including but not limited to, arrests, receipt of benefits, employment, and stable housing.</p> <p>C. Implement strategies that support the Grantee's project.</p>	<p><b>Key Activities- Objective 1</b></p> <p>A. Update existing MOUs to include new areas of collaboration; Establish MOUs with new partners. (e.g. Armor Services- the contracted, in-jail medical provider)</p> <p>B. Revise/expand current data collection spreadsheet that is analyzed by Dr. H. Potter, Program Evaluator ensuring relevant data points are tracked. Explore conversion to a simple database program to more easily manage information at the FCST program level; share this tool with the Sheriff's department. Inquire about existing tools used by other similar programs.</p> <p>C. Continue and expand provision of behavior health services to individuals being diverted from incarceration through the FCST program. Include new partners in the project and provide linkage to new community resources (e.g. housing, employment, ARF, clinical trial programs)</p>	<p><b>Responsible</b></p> <p>LifeStream reps, CEO; partners reps.</p> <p>LifeStream FCST &amp; IT; Evaluator; Sheriff Dept.</p> <p>LifeStream, internal and external partners; PSCC members; LSF</p>

<p>D. Expansion Activities</p>	<p>D. <u>Expand</u> the number of individuals served annually from 50 to 70.  <u>Expand</u> the number of staff members providing services to accommodate higher number served adding to case management, peer, MD and therapist FTEs  <u>Expand</u> clinical services to include specific trauma treatments using EBPs. Train clinicians in Seeking Safety and Eye Movement Desensitization and Re-processing.  <u>Expand</u> the length of program involvement to one year for those individuals in need of Aftercare services through FCST before transitioning to other programs for continued recovery.</p>	<p>LifeStream FCST</p> <p>LifeStream FCST supervisor and therapist</p> <p>FCST all staff</p>
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**Objective 2 – Collaboration**  
Create and encourage collaboration among key stakeholders in implementing and providing ongoing oversight and quality improvement activities of the Grantee’s project.

<b>Tasks- Objective 2</b>	<b>Key Activities- Objective 2</b>	<b>Responsible</b>
<p>A. Participate in planning council or committee meets regularly;</p>	<p>A. Attend Quarterly PSCC meetings with reports; Quarterly FCST Task Force meetings; monthly LifeStream/County Liaison meetings. Quarterly reports to the BOCC and DCF; Monthly Measures of success to LifeStream QI meetings.</p>	<p>LifeStream CEO, Adult Serv. Dir., FCST supervisor; BOCC; County Liaison</p>
<p>B. Assesses progress of the project based on established timelines and review attainment of goals;</p>	<p>B. Monthly review of timeline activities to ensure compliance;</p>	<p>LifeStream FCST Super. &amp; Director; Task Force</p>
<p>C. Makes necessary adjustments to implementation activities, as needed.</p>	<p>C. Update timeline with approval if needed. Report staff changes to county and state. Respond to requests for information.</p>	<p>LifeStream Contract Coordinator; FCST</p>

<p>D Utilize program evaluation data to monitor progress of the program.</p>	<p>D. Make quality improvement changes as needed to improve the effectiveness of the program.</p>	<p>Supervisor; Director  Evaluator; supervisor</p>
<p><b>Objective 3- Sustainability</b> Establish sustainability of the FCST program in order to continue delivery of behavioral health services to the target group following the end of CJMHSR Reinvestment Grant funding Opportunities.</p>		
<p><b>Tasks- Objective 3</b></p> <p>A. Maximize acquisition of benefits by those participants who are eligible for benefits and have not completed applications.</p> <p>B. Obtain authorizations or prior approvals for services according to the requirements of payors.</p> <p>C. Collaborate with Lake County, Lutheran Services Florida and others to identify funding to support and sustain the program beyond what can be billed directly for treatment, case management and rehabilitative services.</p> <p>D. Re-work program design in year three, (if needed) in order to meet the requirements of new funding sources for sustainability.</p> <p>E. Expand FCST as a re-entry services provider if funding becomes available.</p>	<p><b>Key Activities- Objective 3</b></p> <p>A. SOAR train Case Management staff. Begin investigation of benefit status upon referral.</p> <p>B. Begin third party billing where possible.</p> <p>C. Apply for new funding opportunities as they come available through grants, foundations, private donors, county revenue dollars, etc.</p> <p>D. Utilize data collected throughout the life of the grant to support applications for funding, showing cost savings and successful outcomes of the project.</p> <p>E. Apply for Re-entry funding if available. Partner with stakeholders (e.g. county DOC and state FDC)</p>	<p><b>Responsible</b></p> <p>FCST Supervisor, CM, Prog. Ass't; LSF</p> <p>FCST Program Staff</p> <p>LifeStream Development Office; Lake County BOCC; LSF</p> <p>FCST, Development office; Evaluator; County Mgr.</p> <p>LifeStream; County; PIP; FL FDC</p>

**3.8.5.3.3.3 How the planning council or committee will participate and remain involved in Program implementation or expansion on an ongoing basis:**

The FCST task force which is a subcommittee of the Public Safety Coordinating Council will continue to meet quarterly and as needed. Participants are also invited to program “graduations” which provides motivation for continued investment in the program as outcomes are demonstrable in this setting. Partners will also remain engaged as they participate in referring individuals to the program, collaborate in monitoring, as with probation and respond to requests for information and data. FCST staff members and leadership attend relevant community meetings and the give and take in partnership benefits all. The program reports directly to the PSCC currently as a contracted service provider. As LifeStream makes the transition to grantee, if the funding is awarded for this expansion project, we will meet with the county representatives from public safety, accounting, grants management and others to better understand the processes that have been in place and to continue collaborative data sharing.

**3.8.5.3.3.4 How the agencies and organizations involved will communicate throughout the lifetime of the project, detailing the frequency of planned meetings, and the decision making process to ensure successful implementation:**

Communication among partners and stakeholders is essential to the success of this project. Formal meetings are in place daily for team members; weekly contact with probation through an officer who is assigned to this specialty caseload and who co-locates in the FCST office once per week and quarterly task force and PSCC meetings. Meeting invitations are sent to all involved parties with recurring appointments annually through the lifetime of the grant. Public meetings are advertised as required. Staff members are assertively engaged in meeting individuals face to face for collaboration and conference calls are utilized when necessary. Decisions regarding programmatic issues will be handled by the program supervisor and chain of command as needed. Chain of command is respected with regard to interactions and decisions involving partner concerns. Clinical decisions are made with input from the clinical leadership in the program while criminal justice matters are referred to the appropriate parties.

Additionally, having a presence in the courtrooms and jail keeps communication fluid and direct. Memoranda’s of Understanding



reinforce the need for communication and information exchange between partners and stakeholders.

**3.8.5.3.3.5 The plan to screen potential participants and conduct tailored, validated needs-based assessments. Include the criteria to be used, specific screening tool(s) and validity specific to the Target Population:**

FCST will screen any referral that meets the basic eligibility and will assist with information and referral for those who do not. Currently referrals come from Lake County Jail; Circuit Court Judges in Lake County (who might refer or order individuals into the program); County Probation (misdemeanor offenses) and State Probation (felony offenses); Office of the Public Defender; Office of the State Attorney; other LifeStream programs and through family members and word of mouth.

Eligibility criteria for the program include adult residents of Lake County (18 and over), with moderate to high mental health issues, co-occurring disorders and moderate to high criminogenic risk factors. Screenings will be conducted in a variety of settings according to the intercept point for diversion. The screening tools used have been tested successfully for the target population. Locations include Lake County Jail, LifeStream's Inpatient Hospital, Crisis Stabilization Unit, the Addictions Receiving Facility, Detoxification, Central Receiving Facility, Residential SUD Program (Adult Choice), Residential Co-Occurring Program (Recovery Choice) , and at the FCST Office in Tavares.

For inmates referred while still incarcerated, a case staffing is held at the jail with the referring Licensed Mental Health Counselor, Howard Lawrence. The FCST screener Michelle French then meets the inmate and conducts a semi-structured interview; provides information to include risk and benefits of the program and expectations for successful completion, and administers a GAIN short screen instrument. This science-based tool is among those recommended for behavior health screening to identify the presence of mental illness, substance use problems, anxiety and antisocial characteristics. Additional screening instruments which are also used include screening for trauma using the PCL 5 (Weathers, Litz, Keane, Palmieri, Marx, & Schnurr; National Center for PTSD, 8/14/2013) and LEC 5 (Weathers, Blake, Schnurr, Kaloupek, Marx, & Keane; National Center for PTSD, 10/27/2013) and Ohio Risk Assessment System (ORAS), a risk assessment measure of the likelihood of re-offending. The ORAS is also in use by Lake County Office of Probation, which facilitates understanding

and communication between professionals from both the behavioral health and supervision sides regarding the referred individuals' risk of re-offending. The Texas Christian University Drug Screen V, developed by the Institute of Behavioral Research, Fort Worth, Texas, is used to assess substance abuse risk and need. All FCST staff members understand criminogenic risk and needs and the screening instruments used by the program contribute to their understanding of each person and the development of a plan for their participation in the program that will lead to future success.

Special Risk factors are identified such as pregnancy, children in dependency, IV drug use, trauma and veteran history and motivation for treatment and assistance is identified. The instruments are scored and data verifies if the referral meets the program criteria and if the person desires to voluntarily participate. A recommendation is then made to the jail diversion team and the team discusses the case. Planning and coordination with the jail diversion Court Liaison then facilitates communication at the arraignment hearing if that is the intercept point, about the individual's acceptance into the program. Those individuals who meet the eligibility criteria and pose the greatest risk for returning to the criminal justice system will be offered assistance.

**3.8.5.3.3.6 How the Program will coordinate care to increase access to mental health, substance abuse and co-occurring treatment and support services and ancillary social services (i.e., housing, primary care; benefits, etc.):**

FCST is designed as a comprehensive service program where a multidisciplinary team utilizes assertive and motivational strategies to engage individuals in treatment, providing medication, counseling, case management and peer support services. The program is time limited with focus on stabilizing the individual, assisting them in meeting requirements of the criminal justice system, accessing benefits and resources and transitioning them to on-going care in the most appropriate community or private programs to meet their unique needs. Treatment, rehabilitation and support services are directly provided by the team according to Forensic Assertive Community Treatment practices. Treatment professionals on the team include the supervisor, a Licensed Clinical Social Worker; therapist, who is a Registered Mental Health Counselor Intern, and the Program Psychiatrist. A Licensed Practical Nurse assists the Psychiatrist with vitals, medication orders and administration of injectible medications.

Ancillary services available to participants of this program will be accessed through coordination by the FCST program case management. These services will address needs in the four recovery domains of housing, health, purpose and community. They include 1) integrated primary health care through our Wellness Integration Network (WIN) clinic; 2) rental housing through LifeStream's Hope Springs Apartments, Shelter Plus Care vouchers and community housing; 3) Linkage to Workforce Central Florida, Goodwill employment training; Achievement, Independence and Mastery Skills (AIMS) psychosocial rehabilitation program and Labor Ready for employment and/or vocational assistance; 4) both Patient Assistance and Indigent Drug Program for psychiatric medication and 5) LifeStream's residential mental health or substance abuse treatment if that level of care is needed by an individual. Open beds in our housing continuum will be utilized for immediate housing for individuals in housing crisis or for those re- entering the community from jail or state hospital until permanent housing can be found. The FCST will provide supportive housing and supportive employment according to the ACT model of care.

A phase approach following the Trans-theoretical, or Stages of Change model, is utilized in order to provide the individual opportunities to see their own progress and to be affirmed and rewarded for their positive movement in recovery. This, along with individual treatment team meetings to review treatment plans, team interventions to supportively confront problems with program engagement and behaviors such as relapse to substance use, provide maximum opportunity for individuals to successfully complete the program.

**3.8.5.3.3.7 How law enforcement will assess their current process at intercept points, capacity, and how they intend to implement or expand diversion initiatives (e.g., processes, training, etc.:**

FCST serves as the central coordinating program for CJMHSA initiatives in Lake County and as such has partnered with county leadership to take the lead role in hosting stakeholder meetings, Sequential Intercept Mapping (SIM) and other training and education events relevant to jail diversion. Participation in CIT training by law enforcement leadership presents opportunities for them to consider processes and how greater awareness of behavior health problems can affect interventions and create safer outcomes for those involved. The FCST program, under the Reinvestment funding, provides a CIT Coordinator to the county.

FCST schedules, plans and coordinates the Crisis Intervention Training (CIT) advisory group and provides CIT to law enforcement agencies in Lake and Sumter Counties. The Lake County Sheriff's Office and 13 municipalities have been invited to task force meetings and to send patrol officers, correctional officers, dispatch and others through the training. Updates are also made available annually and Mental Health First Aid for law enforcement and corrections is being offered.

It is a goal of the program to have individuals from all law enforcement agencies trained and several municipalities have committed to ensuring that there are CIT officers on each shift. The Lake County Sheriff's organization and two municipal law enforcement agencies participated in the SIM held on March 31 and April 1, 2016 at the FCST office. Other Law Enforcement agencies are participating in the development of Mobile Crisis services in south Lake County. Analysis of participation of law enforcement agencies in the various CJMHSA activities is the county finds that 9 out of 13 have been active to some degree with Leesburg and Clermont having the highest involvement outside of the Sheriff's Department. Two municipalities in the county contract their law enforcement with the Sheriff.

Use of the Sequential Intercept Mapping for Lake County provides understanding of the needs and gaps in services and processes for diversion. This map can then be used as a common language for all concerned parties and periodic review of the map and the recommendations that followed mapping will act as a compass for the initiative. Those involved in the mapping exercise this year shared their commitment through frank and open communication during the process. There are several examples of how the partners are involved in improvements at each Intercepts. Commitment to diversion at Intercept 1 is demonstrated by the participation of the majority of law enforcement agencies in the county sending officers to CIT and the inclusion of personnel from Dispatch, which is operated by the Sheriff's Office. Clermont Police Department has committed to expanding CIT training so that there are enough trained to cover every shift. That department has also signed an MOU committing to participation in mobile crisis. To increase diversion at Intercept 2, Correctional officers in the jail are being trained as well as court personnel. Permission for the FCST Court Liaison to be routinely present in Misdemeanor Court is further confirmation of the commitment to CJMHSA initiatives was demonstrated by participation of law enforcement agencies in a recent re-mapping of the intercepts and current strategies for diversion. This event was facilitated by Mark Engelhardt from the

Florida Mental Health Institute at the University of South Florida who provided a report to the County. Results of that mapping inform plans for this grant application and will be utilized by the PSCC for future recommendations to the BOCC for budget considerations to fund interventions at identified intercepts and related grant applications. Results of the re-mapping will be shared with all Lake County LE organizations, whether they participated in the two day event or not, in order to improve communication and understanding within the system and encourage buy-in and future participation in planning meetings.

#### **3.8.5.3.3.8 NOT APPLICABLE**

**3.8.5.3.4 A description of the strategies an Applicant intends to use to serve the Target Population, including a description of the services and supervision methods to be applied and the goals and measurable objectives of the new interventions. Interventions may include, but are not limited to:**

##### **3.8.5.3.4.1 Specialized responses by law enforcement agencies:**

The synergy of utilizing several strategies and the resources available through a variety of dedicated community partners will contribute to the success of this expansion program. As noted above, CIT is available, supported and encouraged in Lake County and the training will be delivered by LifeStream and partners through the planning and collaboration of the FCST CIT Coordinator. A Mobile Crisis Service is being implemented in the south area of the county through a Bureau of Justice Assistance grant. This service is in collaboration with law enforcement agencies and mental health staff will respond on scene as requested by through emergency dispatch and law enforcement responders.

##### **3.8.5.3.4.2 Centralized receiving facilities for individuals evidencing behavioral difficulties:**

Centralized receiving facilities for individuals evidencing behavioral difficulties are available through LifeStream and persons needing inpatient MH or SUD treatment, voluntary or involuntary will be evaluated. Level of care assessments are part of the process, as well as assessment of suicide/ homicide risk. LifeStream is actively involved in LINC/Zero Suicide initiative and is training staff members, including those in FCST, in the Question, Persuade and Refer (QPR) and QPR-Treat practices

#### **3.8.5.3.4.3 Post-booking alternatives to incarceration:**

Post-booking alternatives to incarceration are in place through the FCST and will continue under the program's expansion through this grant funding. The program's Court Liaison communicates with the Judges, State Attorney and Public Defender regarding available diversion alternatives for those identified as having behavioral health challenges that are contributing to their criminal justice involvement. Referral to the program results in a brief period of incarceration and continued community supervision with behavior health services for those returning to jail for violation of probation.

#### **3.8.5.3.4.4 New court programs, including pretrial services and specialized dockets:**

New court programs, including pretrial services and specialized dockets are in development in Lake County. Presently there are no specialty courts or specialized dockets in Lake County, but planning is underway through Court Administrative Services in Circuit 5, under the recommendation of Judge Briggs and the leadership of Judge Nacke for a Veteran's Court. Those individuals who do not meet the criteria for that court but who have served in some capacity, whether honorably or dishonorably discharged will be able to access the FCST program as long as they meet basic program requirements such as residency and misdemeanor or non-violent felony offenses and the presence of moderate to high risk factors and mental health/co-occurring disorders. Pretrial intervention through referral to FCST has not been used extensively in Lake County but it is a welcome strategy and referrals will be screened within 24 hours during business hours, to facilitate pretrial interventions.

#### **3.8.5.3.4.5 Specialized diversion programs:**

FCST is designed as a diversion program and operates as such by assisting individuals into treatment, providing support and linking them to resources at all points of interception according to the sequential intercept map that is unique to Lake County. Additionally, LifeStream provides other prevention and intervention programs in the Jail and community and through the Treatment Alternatives for Safer Communities program. Although these are not technically diversion programs, they do provide opportunities to disrupt the patterns of behavior that contribute to the development of criminal thinking and behavior.

**3.8.5.3.4.6 Intensified transition services that are directed to the designated populations while they are in jail to facilitate their transition to the community:**

The Jail Screener and Court Liaison from the FCST are on the front line of services directed to transitioning individuals from jail to community. When a referral is made to the program, which often happens during a court appearance, the Jail Screener begins the process of gathering releases, information and assessment. Interviews are conducted in the jail and the Screener maintains contact with the individual by visiting and providing information about the program services and program expectations for the person's participation.

Lake County has a strong grassroots initiative to develop Re-entry services for those returning from incarceration at all levels. FCST is involved in that planning along with other community representatives from Partners Investing in People, a not for profit group focused in this effort. While not identified as a re-entry program, FCST provides assistance in line with principles from the Transition from Jail to Community model with the exception that treatment is not provided by the FCST program to individuals while they are in the jail.

**3.8.5.3.4.7 Specialized probation processes:**

Lake County Probation has identified Kristin Mabry as the Probation Officer assigned to any probationers who will be participating in the FCST program. Communication between Officer Mabry and the team is based on mutual trust and respect. Clear consents for the release of necessary behavioral health information are in place in all cases. Officer Mabry visits with her clients at the FCST office at a scheduled time. Other program activities are also occurring during these visits and this enables all to see her as a vital team member. Solidifying the collaboration in this way gives a message that all team members are on the same page, so to speak, in terms of recovery planning and supports with the individual.

**3.8.5.3.4.8 Day-reporting centers:**

This has not been identified as a need in Lake County at this time.

#### **3.8.5.3.4.9 Linkages to community-based, evidence-based treatment programs for the served Target Population:**

LifeStream operates a full continuum of CARF accredited behavioral health services which are evidence based, trauma informed and quality driven. While FCST is a fully integrated outpatient treatment program, utilizing evidence-based practices, case management services within the program link individuals to other parts of the continuum that are needed to support their recovery and minimize their criminogenic risks. These include Supportive Housing, Illness Management and Recovery through the AIMS program and Medication Assisted Treatment. Some services will be outside of the LifeStream continuum but will be vetted for appropriateness and proper licensing. For example, referrals to sober housing will only be made to homes that have been credentialed by the state. Recommendations for community support programs are made to those groups that have demonstrated effectiveness, such as 12-step programs or Celebrate Recovery.

#### **3.8.5.3.4.10 Community services and programs designed to prevent high-risk populations from becoming involved in the criminal justice system:**

A fully developed recovery plan for each individual in the program includes services or referrals to services that will address criminogenic risks and needs. In addition to the programs mentioned above which may be involved in the persons plan. Other areas of risk will be addressed in a variety of ways according to the individual's needs. Antisocial cognitions are targeted through the use of the thinking for a change curriculum. Therapeutic interventions, particularly group therapy, assist the individual in identifying risky relationships and the "people places and things" associated with criminal behavior and substance abuse. Expanding the program to incorporate Seeking Safety as a key intervention curriculum will also focus individuals on understanding high-risk behaviors, substance use and making positive alternative choices. Family and marital counseling is available through the therapeutic staff in the program or by referral to other therapists inside or outside of LifeStream, including faith-based counseling organizations if that is the person's preference. Referrals to vocational rehabilitation services, the AIMS program, local community colleges, technical schools and other resources are utilized to address education and employment issues. Individuals are encouraged to work whenever possible and assisted through



case management services and other community supports to find and keep employment.

#### **3.8.5.4 Performance Measures:**

**Applications must include a description of the manner in which the grant will be monitored to determine achievement of performance measures.**

**3.8.5.4.1 A description of the process for collecting performance measurement data, and any other state or local outcome data to measure project effectiveness.**

Results of the screening assessment include scores on screening tools, demographics, legal status, prior legal history and other factors like homelessness are gathered by the program/data Assistant, entered into spreadsheets and forwarded to Dr. R. H. Potter, Ph.D., who serves as our external reviewer. MOU's with partners, particularly Lake County Sheriff's Organization, provide for the sharing of data needed to track several outcomes

**3.8.5.4.2 Proposed targets and methodologies to address the measures specified in Section 2.4.2, for Implementation and Expansion Grants; and**

**2.4.2.1 Percent of arrests or re-arrests among Program participants while enrolled in the Program. Target- 30% or fewer** of program participants will be re-arrested while enrolled in the program. Booking reports are reviewed daily to ensure that no current or former participants have been arrested. Court dockets are also reviewed weekly prior to court to monitor for the presence of any current or former program participants. Methodology- treatment and case management to address criminogenic risks and needs.

**2.4.2.2 Percent of arrests or re-arrests among Program participants within one year following Program discharge. Target- 30% or fewer.** Methodology- treatment and case management to address criminogenic risks and needs.

**2.4.2.3 Percent of Program participants not residing in a stable housing environment at Program admission who reside in a stable housing environment within 90 days of Program admission. Target - 60%.** The FCST staff meets daily and gives report on status of participants including housing. Data is tracked and reported to the program evaluator. Methodology- Case management and supportive housing.

**2.4.2.4 Percent of Program participants who reside in a stable housing environment one year following Program discharge. Target - 80%.** Peer recovery specialist, data manager and supervisor make follow-up contacts by phone or through home visits, if residence is known, to determine follow-up status of program graduates. If individuals are on community supervision by the Office of Probation, the P.O. can be a source of information to the team. Methodology- Aftercare follow-up supports; benefits acquisition.

**2.4.2.5 Percent of Program participants not employed at Program admission who are employed full or part time within 180 days of Program admission. Target - 30%.** Methodology- case management; partnership building. Resources fairs. Linkage to Goodwill.

**2.4.2.6 Percent of Program participants employed full or part time one year following Program discharge. Target - 40%.** Methodology- Aftercare supports, case management.

**2.4.2.7 Percent of Program participants the Grantee assists in obtaining social security or other benefits for which they may be eligible but were not receiving at Program admission. Target - 80%.** Methodology-Case management; SOAR; documentation; release of medical records.

**2.4.2.8 Percent of Program participants diverted from a State Mental Health Treatment Facility. Target - 10%.** Methodology-treatment services including psychiatric management, medication, individual and group therapy, trauma treatment. SUD treatment.

**3.8.5.4.3 At least one additional proposed performance measure unique to the tasks outlined in the application, including proposed targets and methodologies:**

**2.4.2.9 Reduction in symptoms of PTSD pre-vs. Post-intervention** as assessed by the PCL-5 (which corresponds with the DSM 5 PTSD criteria) for those receiving intensive evidence based trauma treatment (EMDR or CBT for Trauma).

### **3.8.5.5 Capability and Experience:**

**For both Planning and Implementation and Expansion Grants, include a description of the Applicant's capability and experience in providing similar services, including:**

LifeStream is a fully licensed social services organization with a mission of **"Supporting Recovery, Promoting Health, and Creating Hope."** This mission is accomplished via a program of continuous quality improvement and offering a continuum of care that is trauma informed, cost effective, culturally competent, and includes quality treatment, education, care management, and rehabilitation services to children, adolescents, and adults. LifeStream services range from psychiatric hospitalization, detoxification, and residential programs to day programs and outpatient services for children, adults and seniors. Homeless services are available to pregnant and postpartum women and intact families at a 41-bed transitional living facility, through affordable housing for low-income families and in a 34-unit apartment complex. Homeless outreach and assistance is available at a homeless drop-in center, The Open Door, in Eustis. LifeStream functions as the only comprehensive behavioral healthcare facility between Orlando and Ocala. LifeStream originated as, and remains, a grass roots organization, with deeply imbedded relationships within its communities.

Since its incorporation in 1971, LifeStream is CARF accredited and has grown to 21 facilities, 52 programs, and has helped thousands of residents in Lake and Sumter Counties affected by mental illness and substance use disorders to achieve recovery and resiliency. LifeStream maintains numerous community partnership agreements and memoranda of understanding with state organizations, local government, including county, school boards and law enforcement, healthcare providers, hospitals, other community based social service organizations, and faith-based organizations. LifeStream has provided behavior health services to criminal justice involved individuals since beginning service delivery to Lake and Sumter counties through the provision of Forensic Case Management Services to those hospitalizes in state hospitals as Incompetent to Proceed or Not Guilty by Reason of Insanity. We have emerged as a leader in CJMHSA initiatives in our community and continue seeking state and federal grants to develop services for the affected individuals. The Forensic Community Services Team values a reputation for delivering effective, quality services in partnership with their colleagues in the criminal justice professions.

#### **3.8.5.5.1 Capability and experience of the Applicant and other participating organizations, including law enforcement agencies, to meet the objectives detailed in this RFA:**

As a result of effective communication, improvements in data gathering and exchange, and sharing a vision to divert individuals with mental illness/co-occurring disorders from incarceration LifeStream and partners

have demonstrated the capability to meet or exceed the objectives listed in this proposal. Outcomes achieved in the current grant funded program include a reduction of recidivism for people enrolled in the program to 15 % in the past year. Data collection by the sheriff's office has improved resulting in easier access to information such as that needed for grant applications. New partners have come to the planning table for the CJMHSA initiatives such as Chief Broadway from the Clermont Police Department and the Mascotte Police Department..

**3.8.5.5.2 Availability of resources for the proposed project:**

The current FCST program is staffed and housed in a location close to the courthouse with adequate space for personnel and activities. LifeStream has the capacity and administrative support resources to execute the expansion program and manage the grant funding and to meet reporting requirements and deadlines. The fiscal capacity also exists to provide the match requirements in capital and in-kind. The organization utilizes an electronic health record to document service delivery and monitor individual client outcomes. Company vehicles are in place as well as cell phones with data capability to enable staff to deliver services in the field.

**3.8.5.5.3 Anticipated role of advocates, family members, and responsible partners:**

Advocates, family members, peers and graduates of the program participate in task force meetings regularly, as do community partners and representatives from the managing entity, Lutheran Services Florida. They receive program updates and data reports and are involved in program planning activities. As a result of the involvement of these individuals, support for program enrollees has grown to include employment and housing opportunities and donations to the program for services and items that cannot be provided through grant funding. Bus tickets, Wal-mart gift cards, food for guests at meetings and training events are some of the things that donations have provided.

Partners in the project have provided referrals, space for screening applicants, meeting and training facilities, data, experts in the field to provide training and printing among other concrete and ideological supports.

**3.8.5.5.4 Proposed staff, including Project Director, key personnel, and subcontractors who will participate in the project, showing the role of each and their level of effort and qualifications. Briefly discuss the responsibilities of each participating organization and how the Applicant proposes to fill staff positions and select subcontractors:**

LifeStream is fully responsible for the hiring and management of program staff for the project with our Office of Human Resources providing the administrative support for recruitment, background checks and orientation training. The program psychiatrist is the only contracted staff member and is not a full-time employee of the agency. He has been affiliated with LifeStream for 15+ years.

**Reinvestment Grant  
Proposed Staff and Level of Effort**

<b>Position</b>	<b>Level of Effort</b>	<b>Identified Staff Member</b>	<b>Qualifications</b>
Director		Karen M. Rogers, M.S.	LMHC
Supervisor	1.0 FTE	Sinead O`Hare, LCSW	LCSW
Therapist-(expansion)	1.0 FTE	Pamela Segura	Reg Intern, LMHC
Case Managers-(expansion)	2.0 FTEs	Tamelia Johnson 1 to be hired	B.A.
Jail Screener	1.0 FTE	Michelle French	A.A.
CIT Coordinator	1.0 FTE	Michael Smalt	A.A. Retired Deputy from Sheriff's office
Program Assistant	1.0 FTE	Danielle Durst	Diploma
Court Liaison	.50 FTE	Kyleen Fisher	Criminal justice Certificates
Nurse	.50 FTE	Jennifer Jiannone	LPN
Peer Recovery Coach-(expansion)	1.0 FTE	Jack Mason	Diploma and CNA
Psychiatrist/ARNP	.15 FTE	Dr Broyles	Licensed

### 3.8.5.6 Evaluation and Sustainability:

#### 3.8.5.6.1 Evaluation:

**For both Planning and Implementation and Expansion Grants, describe how the project's effectiveness will be demonstrated, including assessments of planning or implementation outcomes. Discuss how variables like stakeholder support and service coordination will be defined and measured. Describe the process for collecting performance measurement data, and any other state or local outcome data to measure project effectiveness in promoting public safety, reduction of recidivism and access to services and supports for the Target Population(s):**

Evaluation and collaborative partnerships will continue to maintain and build long term support resources to sustain the FCST by evaluating compliance and performance measures as related to program specific requirements through an automated data collection system, utilization management techniques, and onsite monitoring. A quality summary of all monitoring will be provided to the Task Force Advisory Committee quarterly for identifications of trend, program deficiencies and to recommend a unified strategy when necessary. Collecting, reporting and sharing data among partners will support continuity of care, identification of additional system efficiencies; will reduce duplication of services, and further minimize any gaps that lead to higher utilization or more costly services.

The report findings will be shared with Lake County BOCC, all community partners, elected and appointed officials, and by reporting such results at local community meetings. The outcome data to be collected and monitored is as follows; (1) Number of partnerships developed and strengthened to increase resources for CIT training, employment, education, and housing as demonstrated by development of a formal Memorandum of understanding, Cooperative Agreement, and data collaborative agreements for 3 months, 6 months and 1 year. Parties responsible to collect the data include LifeStream Behavioral Center, Lake County Board of Commissioners, and other collaborating agencies. (2) Recidivism rate of program participants to jail, prison or psychiatric hospital as defined by occurrence of re- arrest of participants after initial program involvement. Responsible parties to collect the data include Lake County Sheriff's Organization, LifeStream Behavioral Center, Lake County courts and probation. (3) Improved access to and effectiveness of mental health and substance abuse services for program participants as measured by participants' continued engagement with the program services in the first 90 days in the community and improved FARS scores. LifeStream Behavioral Center is the responsible party to collect the data.

(4) Detention bed utilization involvement as evidenced by the number of days pre-program vs. post-program involvement. Lake County's Sheriff's Organization is the responsible party to collect the data. (5) Admissions to state forensic institutes among program participants as evidenced by the number of participants re-offending and committed to state hospital during and one-year post program involvement. LifeStream is the responsible party collecting the data. (6) Individual's psychosocial status according to the GAIN assessment as evidenced by initial GAIN vs. GAIN follow up Assessment at 6 months and program discharge. The responsible party to collect the data is LifeStream Behavioral Center. (7) reduction in spending on psychotropic medications by the detention center medical services unit as evidenced by pre-program baseline year costs vs. post-program implementation costs (adjusted for inflation). The party responsible to collect the data is LCSO.

Data Systems are in place to organize information that is analyzed and interpreted by experienced staff and will be used to collect and track participant demographic information, and service linkage, utilization and engagement including treatment services received, housing placement, and forensic admissions. LifeStream utilizes an electronic medical record for documentation of all demographic, clinical and service provision data and will comply with HIPPA and HITECH regulations. Information collected for reporting services will be non-identifiable as to specific participant and will be securely maintained by program staff working at LifeStream Behavioral Center and Lake County. A specialized data collection team has formed with S. Glass, Lake County; D. Durst Program Assistant; Program Manager/ Taskforce Chair S. O' Hare; and an Academic partnership established through the University of Central Florida (UCF), technical assistance services. R.H. Potter, Ph. D , Director of research in the department of criminal Justice has acted and will continue to act as our external reviewer to insure that the grant requirements are met or exceeded. The data driven reports will be generated by a collaborative effort, and then analyzed by the UCF department of Research. Information will be shared meeting confidentiality regulations, informed consent and de identifying program participants.

Stakeholder support and service coordination will be defined and measured by tracking participation in monthly meetings, taskforce quarterly meetings and case staffing. Lake County and LifeStream establish and maintain policies and procedures that require employees to take responsibility for improving overall functioning of the agency and services utilizing data driven process improvement models such as total quality management. Continuous quality improvement results from performance of project and staff, systematic operations, evaluations of effectiveness and consumer satisfaction. Projected percentages or target numbers and the methodology to be used to report at the end of the year

2 areas follows; 70% reduction of re arrests among program participants reported through CJS data sharing; 210 individuals to be served by the program throughout three years, at 70 people per year, this is an increase from 150 per length of grant, increasing the maximum number of clients to be served to 35 at one time; reported through program counts; percentage increase from 60% to 75% in the number of law enforcement officers trained in the CIT model, documented through training rosters; 100% of program participants will receive increased access to services in comprehensive recovery based MHSA treatment, services that are community based, 80% fidelity to EDPs measured through fidelity tools; 80% of program participants will reside in a stable housing environment upon re entry into the community reported in quarterly reports; 10% reduction in lake county admissions to forensic state mental health treatment hospitals among the target population who would otherwise meet the criteria for forensic state mental health hospital admissions, reported I program statistical tracking, increase of 30% of program participants linked to social security benefits reported in program statistical tracking, 63% decrease in spending on participants jail days as measure of impact of purposed efforts to increase public safety and the percentage of cost avoidance or reduced spending in the criminal justice system (i.e. law enforcement, courts, jail bed days) cited in quarterly report of days diverted x cost per day; review and revise existing MOUs between LifeStream and lake county defining transportation plan for persons requiring involuntary examination; review and revise MOU between Lake county and the homeless coalition outlining planning strategies and housing alternatives.

#### **3.8.5.6.1.1 Implementation and Expansion Grants Only:**

**Estimate the effect of the proposed project on the Target Population related to the budget of the jail. The information must include:**

##### **3.8.5.6.1.1.1 An estimate of how the Program will reduce the expenditures associated with the incarceration of the Target Population:**

Diversion from incarceration for those with behavior health problems will happen at all Intercepts. Without detention, costs are reduced at all levels of the system in terms of manpower, use of facilities, administrative services, programs, medical supplies and medication, liability costs, etc. Earlier release of inmates with behavioral health problems, as a result of diversion programs accepting those individuals into services, reduces the number of days a



person spends in jail. This further ensures public safety by addressing risk factors for reoffending.

**3.8.5.6.1.1.2 The proposed methodology to measure the defined outcomes and the corresponding savings or averted costs:**

Lake County fiscal reports, which are public records, as well as data and information sharing between and among partners, will inform the outcomes of the grant and the cost savings incurred through the programs service delivery.

**3.8.5.6.1.1.3 An estimate of how the cost savings or averted costs will sustain or expand the mental health, substance abuse, co- occurring mental health and substance abuse treatment services and supports needed in the community:**

Individuals with mental illness typically remain in jail twice as long as others. Any reduction in the number of days incarcerated will lead to a cost savings. Cost saving Data will be presented to the BOCC to support requests for funding from the county and will be prepared and presented as part of the communities' legislative requests for behavior health funding to support the FCST and other CJMHTSA programs. It will be utilized in grant applications. With estimates of the average cost of a Lake County jail bed at \$58 a day and an on average an additional \$30 per day for individuals with severe mental illness to \$88, a 180 day stay would cost \$15,840. Comparatively, FCST costs approximately \$34 per day. A 180 day program is \$6,120. Participation in the FCST by an offender with serious behavioral health problems coming out of detention an average 180 days sooner than without the program provides a cost savings to the county of \$9,720 per program participant. To date, since 2011 FCST served 156 individuals, saving the county approximately \$2 million.

**3.8.5.6.1.1.4 How the county's proposed initiative will reduce the number of individuals judicially committed to a state mental health treatment facility:**

The provision of comprehensive services to the target group and the expansion of the number enrolled create additional opportunities for diversion for those with non-violent felonies. Diversion from state hospital is an additional benefit the

program provides to the system. As individuals with mental illness are engaged in treatment, support and monitoring, the episodes of disorganized behaviors leading to arrest will decrease. Additional support and monitoring allows for early identification of decompensation and, hence, intervention prior to the development of a crisis.

#### **3.8.5.6.2 Sustainability:**

**For both Planning and Implementation and Expansion Grants address sustainability of the project. Describe the proposed strategies to preserve and enhance the community mental health and substance abuse systems. Describe how sustainability methods will be used and evaluated, including how collaborative partnerships and funding will be leveraged to build long-term support and resources to sustain the project when the state grant ends:**

Efforts toward sustainability have been initiated for the Forensic Community Services Team and will be continued moving forward into the implementation of this expansion grant. One potential avenue of funding is fee for service based care to those with benefits. Increasing the number of SOAR trained case managers at LifeStream, to expedite processing of SSI/SSDI applications with the local Social Security Administration Office in Leesburg, will result in more expeditious receipt of benefits by eligible FCST participants and the opportunity to bring Medicaid dollars into the program. At the close of the current grant period (ending 2017) and into the next, Medicaid/Medicare and other third party billing, where allowable, will partially support service delivery to covered individuals. The FCST program, which functions as a central coordinating project for behavioral health and criminal justice concerns in Lake County is presently gathering data on Medicaid eligibility for enrollees and tracking potential billing opportunities through this resource. Several cases are actively moving through SOAR. Medicaid billing of allowable costs in the FCST program will provide support for existing services, such as psychiatric and nursing visits and psychotherapy so that expansion grant funding can be utilized to increase infrastructure (e.g. additional FTE's and new evidence based practices). Comparison of actual costs to potential revenues is being undertaken by the fiscal department in collaboration with the program supervisor and Director. Certain activities such as travel, court liaison services and in-jail visits will not be reimbursable through traditional types of billing. This is where reliance on other more flexible sources of funding becomes important to the program. Federal funds have already been leveraged for other diversion related programs in Lake County and a mobile crisis service is in the implementation phase under a Bureau of Justice Assistance Grant for the southern part of the county. Funding was recently awarded to LifeStream, by SAMHSA, to begin Assisted

Outpatient Treatment under the Florida Statute governing outpatient commitment. For those with severe mental illness, whose illnesses prevent them from understanding their own need for treatment, facilitating that care, voluntarily or involuntarily, is a further step in reducing recidivism to jail and hospital.

Pursuit of grant funds is on-going through our office of development at LifeStream. Lake County supports LifeStream through direct funding as well as through partnership in projects and grants such as this. As the Grantee for previous Reinvestment Grants, Lake County BOCC demonstrated confidence in this partnership by contracting with LifeStream as provider of behavioral health services under the grant. LifeStream is working closely with Lutheran Services Florida, the Managing Entity for this area, to consider opportunities for partnerships in grant applications and the use of state funds to support and continue the FCST program following the end of this grant period. State and local grant opportunities will be pursued as they relate to this population and Lake County has successfully partnered with LifeStream to find or match funding in areas of common interest. The inclusion in this project budget of cash match funds demonstrates the level of commitment to the program sustainability. The taskforce will continuously look for alternative funding sources to keep the program in place once this Reinvestment Grant funding ends. We will investigate all potential financial resources needed to support the continuation of services.

#### **3.8.5.6.3 Project Timeline:**

**Provide a realistic and detailed timeline for each funding year proposed, indicating goals, objectives, key activities, milestones, and responsible partners. The timeline must include anticipated start and completion dates for each milestone, benchmark, and goal:**

Timeline for Project GOALS, OBJECTIVES, TASKS, KEY ACTIVITIES AND RESPONSIBLE PARTIES

Year 1	Year 2	Year 3	Timeline for Project Goals, Objectives, Tasks, Key Activities & Responsible Parties		
Lifetime of the Grant: Increase access in Lake County to treatment and support for Criminal Justice involved adults with mental illness and co-occurring substance use disorders through the provision of evidence based, trauma-informed services that address and reduce criminogenic risks and needs. <b>Grant award 11/20/2016</b>					
April 1, 2017 On-going with new Tasks added by 07/01/201			Objective 1- Establish Programs and Diversion Initiatives that increase public safety, avert increased spending on criminal justice, and improve the accessibility and effectiveness of treatment services for the Target Population(s) within three (3) months of execution of the final Grant Agreement.		
05/01/2017	On-going	On-going	Tasks- Objective 1 A. Establish legally binding agreements with all participating	Key Activities- Objective 1 A. Update existing MOUs to and add	Responsible Parties LifeStream reps, CEO; partners reps
07/01/2017	On-going	On-going	B. Provide an information system to track individuals	B. Revise/expand the current data collection spreadsheet.	LifeStream FCST & IT; Evaluator; Sheriff Dept.
On-going	On-going	On-going	C. Implement strategies that support the Grantee's project	C. Continue and expand provision of behavior health services to individuals being diverted	LifeStream, internal and external partners; PSCC members; LSF
By 03/31/2018	annual	annual	<u>D. Expansion Activities</u>	D. <u>Expand</u> the number of individuals served annually from 50 to 70.	LifeStream FCST
By 07/01/2017				<u>Expand</u> the number of staff members	LifeStream FCST supervisor
By 08/01/2017	On-going	On-going		<u>Expand</u> clinical services	Supervisor and therapist
By 04/01/				<u>Expand</u> the length of	FCST staff

Timeline for Project GOALS, OBJECTIVES, TASKS, KEY ACTIVITIES AND RESPONSIBLE PARTIES

2017				program involvement	
			Objective 2 collaboration Create and encourage collaboration among key stakeholders in implementing and providing ongoing oversight and quality improvement activities of the Grantee's project		
Month and Quart	Month and Quart.	Month and quart.	Tasks- Objective 2 A. Participate in planning council or committee meets regularly;	Key Activities- Objective 2 A. Attend all designated meetings	CEO,Dir., FCST supervisor; BOCC; County Liaison
03/31/2018	03/31/2019	03/31/2020	B. Assesses progress of the project	B. Monthly review of timeline activities to ensure compliance	Staff, Evaluator, DCF, task force,
Each quarter	Each quarter	Each quarter	C. Update timeline. Report staff changes Respond to requests for information	C. Makes necessary adjustments to implementation activities, as needed	FCST Supervisor; taskforce, PSCC
			. D Utilize program evaluation data to monitor progress of the program	D. Make quality improvement changes as needed	FCST, QI dept., DCF, Evaluator
Accomplish before end of 3 year grant period			Objective 3- Sustainability Establish sustainability of the FCST program in order to continue delivery of behavioral health services to the target group following the end of CJMHSR Reinvestment Grant funding Opportunities.		
Initiate by 07/2017	On-going	On-going	A. Maximize acquisition of benefits	SOAR train Case Management staff. Begin investigation of benefit status upon referral.	FCST Supervisor, CM, Prog. Ass't; LSF
On-going	On-going	On-going	B. Obtain authorizations or prior approvals for services	B. Begin third party billing where possible.	FCST direct service Staff
quarterly	Each quarter	Each quarter	C. Collaborate to identify funding to support and sustain the program beyond	C. Apply for new funding opportunities	LifeStream Development Office; Lake County BOCC; LSF

Timeline for Project GOALS, OBJECTIVES, TASKS, KEY ACTIVITIES AND RESPONSIBLE PARTIES

			what can be billed directly		
07/01/2019			D. Re-work program design in year three for new funding sources for sustainability.	D. Utilize data collected throughout the life of the grant	FCST, Development office; Evaluator; County Mgr.
07/01/2019			E. Expand FCST as a re-entry services provider if funding becomes available.	E. Apply for Re-entry funding if available. Partner with stakeholders (e.g. county DOC and state FDC	LifeStream; County; PIP; FL FDC