TAB ONE

Cover Page & Certified Designation Letter

CENTERSTONE

APPENDIX C – COVER PAGE FOR GRANT APPLICATION

Criminal Justice, Mental Health and Substance Abuse Reinvestment Grant

PROPOSAL INFORMATION	
Type of Grant:	Planning Grant X Implementation and Expansion Grant
Project Title:	
County(ies):	Manatee County, Florida
Preferred Project Start Date:	July 1, 2019
APPLICANT INFORMATION	
Type of Applicant	County Government [X] Consortium of County Governments [ ] Managing Entity [ ] NFP Community Provider [ ] Law Enforcement Agency [ ]
Applicant Organization Name:	Centerstone of Florida, Inc.
Contact Name & Title:	Sean Gingras, Chief Financial Officer
Street Address	391 6th Avenue W
City, State and Zip Code:	Bradenton, Florida 34205
Email:	sean.gingras@centerstone.org
Phone:	(941) 782-4357
ADDITIONAL CONTACT	
Participating Organization Name:	
Contact Name & Title:	
Street Address	
City, State and Zip Code:	
Email:	
Phone:	

FUNDING REQUEST AND MATCHING FUNDS		
	Total Amount of Grant Funds Requested	Total Matching Funds:
Program Year 1	$78,696	$97,674
Program Year 2		
Program Year 3		
Total Project Cost	$78,696	

CERTIFYING OFFICIAL	
Certifying Official's Signature:	
Certifying Official's Name (printed):	Sean Gingras
Title:	Chief Financial Officer
Date:	February 5, 2019

MANATEE COUNTY
FLORIDA

January 29, 2019

Michele Staffieri, Procurement Manager
Department of Children and Families
1317 Winewood BLVD., Bldg. 6, Room 231
Tallahassee, Florida 32399-0700

Re: Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant #RFA112818HSET1/Designation Letter

Dear Ms. Staffieri,

In compliance with grant requirements, the Manatee County Board of County Commissioners designates Centerstone of Florida, Inc., to apply to the above named grant on behalf of Manatee County.

On January 17, 2018, at its regular meeting, the members of the Manatee County Public Safety Coordinating Council (PSCC), Advisory Board to the Manatee County Board of County Commissioners, met and discussed the Criminal Justice Reinvestment grant process and program proposed by Centerstone of Florida, Inc. The PSCC fully supported the program and recommended Centerstone to apply to the Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant on behalf of Manatee County.

Please accept this letter as Centerstone of Florida, Inc., Designation Letter.

Sincerely,

BOARD OF COUNTY COMMISSIONERS
OF MANATEE COUNTY, FLORIDA

Stephen R. Jonsson
Chairman

TAB TWO

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TAB THREE

Statement of Mandatory Assurances

CENTERSTONE

APPENDIX D – STATEMENT OF MANDATORY ASSURANCES

		Initial
A.	**Infrastructure:** The Applicant shall possess equipment and Internet access necessary to participate fully in this solicitation.	
B.	**Site Visits:** The Applicant will cooperate fully with the Department in coordinating site visits, if desired by the Department.	
C.	**Non-discrimination:** The Applicant agrees that no person will, on the basis of race, color, national origin, creed or religion be excluded from participation in, be refused the benefits of, or be otherwise subjected to discrimination pursuant to the Act governing these funds or any project, program, activity or sub-grant supported by the requirements of, (a) Title VI of the Civil Rights Act of 1964 which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended which prohibits discrimination the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended which prohibits discrimination in employment or any program or activity that receives or benefits from federal financial assistance on the basis of handicaps; (d) Age Discrimination Act 1975, as amended which prohibits discrimination on the basis of age, (e) Equal Employment Opportunity Program (EEOP) must meets the requirements of 28 CFR 42.301.	
D.	**Lobbying:** The Applicant is prohibited by Title 31, USC, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," from using Federal funds for lobbying the Executive or Legislative Branches of the federal government in connection with a specific grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal funds if grants and/or cooperative agreements exceed $100,000 in total costs (45 CFR Part 93).	
E.	**Drug-Free Workplace Requirements:** The Applicant agrees that it will, or will continue to, provide a drug-free workplace in accordance with 45 CFR Part 76.	
F.	**Smoke-Free Workplace Requirements:** Public Law 103-227, Part C-Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library projects to children under the age of 18, if the projects are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's projects provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for Inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1,000 per day and/or the imposition of an administrative compliance order on the responsible entity.	
G.	**Compliance and Performance:** The Applicant understands that grant funds in Years 2 and 3 are contingent upon compliance with the requirements of this grant program and demonstration of performance towards completing the grant key activities and meeting the grant objectives, as well as availability of funds.	
H.	**Certification of Non-supplanting:** The Applicant certifies that funds awarded under this solicitation will not be used for programs currently being paid for by other funds or programs where the funding has been committed.	
I.	**Submission of Data:** The Applicant agrees to provide data and other information requested by the Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center at the Florida Mental Health Institute to enable the Center to perform the statutory duties established in the authorizing legislation.	
J.	**Submission of Reports:** The Applicant agrees to submit quarterly progress reports and quarterly fiscal reports, signed by the County Administrator, to the Department.	

TAB FOUR

Match Commitment and Summary Forms

CENTERSTONE

APPENDIX H – COMMITMENT OF MATCH DONATION FORMS
(FOR THE ENTIRE GRANT PERIOD)

TO: (name of county) Centerstone of Florida

FROM: (donor name) Circuit 12 Court Administration-Manatee County

ADDRESS: 1051 Manatee Avenue

Bradenton, FL 34206

The following ___space,___equipment,___goods or supplies, and _X_services, are donated to the County ____ permanently (title passes to the County)___temporarily (title is retained by the donor), for the period July 1, 2019 to July 1, 2020 .

Description and Basis for Valuation (See next page)

Description	Value
(1) Personnel Services County Judge and County Assistant	$ 29,434
(2)_____	$_____
(3)_____	$_____
(4)_____	$_____
	TOTAL VALUE $ 29,434

The above donation is not currently included as a cost (either direct or matching) of any state or federal contract or grant, nor has it been previously purchased from or used as match for any state or federal contract.

(Donor Signature)	(Date)	(County Designee Signature)	(Date)
	1-30-19		1-31-19

Appendix H (cont.)

BASIS OF VALUATION

Building/Space

1. Donor retains title:

   a. Fair commercial rental value - Substantiated in provider's records by written confirmation(s) of fair commercial rental value by qualified individuals, e.g., Realtors, property managers, etc.

   b. (1) Established monthly rental of space $_____

   (2) Number of months donated during the contract _____

   Value to the project [b.(1) X b.(2)] $_____

2. Title passes to the County:

   Depreciation

   a. Cost of Fair Market Value (FMV) at acquisition (excluding land) $_____

   b. Estimated useful life at date of acquisition _____yrs.

   c. Annual depreciation (a./b.) $_____

   d. Total square footage _____sq. ft.

   e. Number of square feet to be used on the grant program _____sq. ft.

   f. Percentage of time during contract period the project will occupy the building or space 10_____%

   Value to project (e./d. X f. X c.) $

   Use Allowance

   a. To be used in the absence of depreciation schedule (i.e., when the item is not normally depreciated in the County's accounting records).

   b. May include an allowance for space as well as the normal cost of upkeep, such as repairs and maintenance, insurance, etc.

Equipment

1. Donor retains title: Fair Rental Value
2. Title passes to County:

   a. FMV at time of donation $_____

   or

   b. Annual value to project (not to exceed 6 2/3% X a.) = $_____

Goods or Supplies

FMV at time of donation

Personnel Services

1. Staff of another agency or organization:

   Annual Salary 52,461 Number of hours 2080 X 20% to be provided =$5,246

   241,882 Number of hours 2080 X 20% to be provided =$24,188

   Volunteer -- Comparable annual salary $ ____

   Annual Salary Number of hours 2080 X to be provided = $_____

APPENDIX H – COMMITMENT OF MATCH DONATION FORMS
(FOR THE ENTIRE GRANT PERIOD)

TO: (name of county) Centerstone of Florida, Inc.

FROM: (donor name) Manatee County Government

ADDRESS: 1112 Manatee Avenue West, Bradenton, FL 34205

The following ___ space, ___ equipment, ___ goods or supplies, and ✓ services, are donated to the County ___ permanently (title passes to the County) ___ temporarily (title is retained by the donor), for the period ___ to ___.

Description and Basis for Valuation (See next page)

Description	Value
(1) Personnel Services	$ 27,971.84
(2)	$
(3)	$
(4)	$
	TOTAL VALUE $ 27,971.84

The above donation is not currently included as a cost (either direct or matching) of any state or federal contract or grant, nor has it been previously purchased from or used as match for any state or federal contract.

1/3/19 (Donor Signature) (Date)

2/6/19 (County Designee Signature) (Date)

Appendix H (cont.)

BASIS OF VALUATION

Building/Space

1. Donor retains title:

   a. Fair commercial rental value - Substantiated in provider's records by written confirmation(s) of fair commercial rental value by qualified individuals, e.g., Realtors, property managers, etc.

   b. (1) Established monthly rental of space $_____

   (2) Number of months donated during the contract _____

   Value to the project [b.(1) X b.(2)] $_____

2. Title passes to the County:

   Depreciation

   a. Cost of Fair Market Value (FMV) at acquisition (excluding land) $_____

   b. Estimated useful life at date of acquisition _____ yrs.

   c. Annual depreciation (a./b.) $_____

   d. Total square footage _____ sq. ft.

   e. Number of square feet to be used on the grant program _____ sq. ft.

   f. Percentage of time during contract period the project will occupy the building or space _____ %

   Value to project (e./d. X f. X c.) $_____

   Use Allowance

   a. To be used in the absence of depreciation schedule (i.e., when the item is not normally depreciated in the County's accounting records).

   b. May include an allowance for space as well as the normal cost of upkeep, such as repairs and maintenance, insurance, etc.

Equipment

1. Donor retains title: Fair Rental Value
2. Title passes to County:

   a. FMV at time of donation $_____

   or

   b. Annual value to project (not to exceed 6 2/3% X a.) = $_____

Goods or Supplies

FMV at time of donation

Personnel Services

Manatee CJ Program Coordinator $18,647.44
Manatee Health Care Services Manager $9,324.40

1. Staff of another agency or organization:

   Annual Salary Number of hours 2080 X to be provided = $ 27,971.84

2. Volunteer -- Comparable annual salary $ _____

   Annual Salary Number of hours 2080 X to be provided = $_____

APPENDIX H – COMMITMENT OF MATCH DONATION FORMS
(FOR THE ENTIRE GRANT PERIOD)

TO: (name of county) Centerstone of Florida

FROM: (donor name) NaphCare and the Manatee County Sheriff's Office

ADDRESS: _____

Manatee County Jail

The following ___ space, ___ equipment, ___ goods or supplies, and X services, are donated to **Centerstone** _____ temporarily (title is retained by the donor), for the GRANT PERIOD.

Description and Basis for Valuation (See next page)

Description	Value
(1)Personnel Services (in kind)	$ 40,269.32
(2)	$
(3)	$
(4)	$
	TOTAL VALUE $

The above donation is not currently included as a cost (either direct or matching) of any state or federal contract or grant, nor has it been previously purchased from or used as match for any state or federal contract.

2/1/19 (Donor Signature) (Date)

2/1/19 (County Designee Signature) (Date)

Appendix H (cont.)

BASIS OF VALUATION

Building/Space

1. Donor retains title:
   a. Fair commercial rental value - Substantiated in provider's records by written confirmation(s) of fair commercial rental value by qualified individuals, e.g., Realtors, property managers, etc.
   b. (1) Established monthly rental of space $_____
      (2) Number of months donated during the contract _____
      Value to the project [b.(1) X b.(2)] $_____
2. Title passes to the County:

   Depreciation
   a. Cost of Fair Market Value (FMV) at acquisition (excluding land) $_____
   b. Estimated useful life at date of acquisition _____yrs.
   c. Annual depreciation (a./b.) $_____
   d. Total square footage _____sq. ft.
   e. Number of square feet to be used on the grant program _____sq. ft.
   f. Percentage of time during contract period the project will occupy the building or space _____%

   Value to project (e./d. X f. X c.) $_____

   Use Allowance
   a. To be used in the absence of depreciation schedule (i.e., when the item is not normally depreciated in the County's accounting records).
   b. May include an allowance for space as well as the normal cost of upkeep, such as repairs and maintenance, insurance, etc.

Equipment

1. Donor retains title: Fair Rental Value
2. Title passes to County:
   a. FMV at time of donation $_____
      or
   b. Annual value to project (not to exceed 6 2/3% X a.) = $_____

Goods or Supplies

FMV at time of donation

Personnel Services

1. Staff of another agency or organization: ***Healthcare Personnel currently contracted by NaphCare to Manatee County Sheriff's office***

   Annual Salary Number of hours 2080 X to be provided = $ 40,269.32

Amount	FTE	Position
$ 8,501.28	0.100	Mental Health Professional
$13,269.41	0.100	Health Services Administrator
$18,498.63	0.200	Discharge Planner

2. Volunteer -- Comparable annual salary $ _____

   Annual Salary Number of hours 2080 X to be provided = $_____

Appendix I - MATCH SUMMARY

(for the entire grant period)

Date - 02/05/19

County - Manatee County

Type of Grant - Planning Grant

Match Requirement Percentage - 100%

Total Match Required for the Grant $ 78,696

Match Committed:

Cash	$
In-Kind	$ 97,674
Total	$ 97,674

Comments:

Prepared By Jane Rosebore

Approved By

TAB FIVE

Statement of Problem

CENTERSTONE

Tab 5: Statement of Problem

Section 3.8.5: Statement of the Problem

3.8.5.1. Description of the Problem in Manatee County

Centerstone Florida, the designated applicant on behalf of Manatee County, proposes the ***Manatee Reinvestment Planning Project (MRPP) Collaborative.*** The ***MRPP Collaborative*** is a coordinated planning effort to support adult individuals involved in the criminal justice system who also have mental health and co-occurring substance use conditions. The ***MRPP Collaborative*** will leverage countywide resources to shift identification, care, and treatment of affected individuals from jail to treatment and support services in the community. Manatee County is poised to take meaningful action to address the growing concerns to public safety, increased spending in the judicial justice system, and human toll on justice-involved individuals whose behavioral health conditions go undetected and untreated. The prevalence of individuals with mental illness involved with the criminal justice system is a critical issue in Manatee County. The ***MRPP Collaborative*** will provide a plan to address this critical issue: a plan for the future that envisions a just community where people living with mental illness and/or substance use disorders can recover and lead fulfilling lives.

Manatee Reinvestment Planning Project (MRPP)

Target Population:
Adults (18+) who have a mental illness, substance use or co-occurring disorder and are in or at risk of entering the criminal justice system.

Preliminary work to address the problem began almost a decade ago when, in 2011, the Manatee Public Safety Coordinating Council (PSCC) first identified the need for a long-range plan to stop the cycle of offenders who repeatedly enter the criminal justice system and who present with symptoms of MI, COD, and associated risks such as homelessness. Through this CJMHAS planning grant, the ***MRPP Collaborative*** and its partnering agencies will now have the resources to take action. Utilizing the results of the project's comprehensive needs assessment and Sequential Intercept Mapping exercise led by the CJMHAS TAC, the ***MRPP Collaborative*** will harness the resources, expertise, and groundswell of community support for system-wide change and a better future for affected individuals - and the entire Manatee community.

a. Extent and Impact of the problem

Nationally, correctional facilities lack effective behavioral health services (e.g., limited certified counselors, insufficient treatment duration) and become economically overburdened by efforts to effectively rehabilitate individuals with mental illness or COD due to budgetary constraints, space limitations, etc. (SAMSHA, 2005; Sung et al., 2010). The number of individuals with serious mental illness (SMI) in jail or prison across the

country is estimated to be triple the number of individuals with SMI in hospitals. Inmates with mental illness cost the criminal justice system more money, stay incarcerated for longer periods of time, and present more management problems, (e.g., aggression, destructive behavior, suicidal risk) than other inmates. Additionally, inmates with mental illness who receive inadequate behavioral health services, are at increased risk of victimization, risk deteriorating mental health conditions during incarceration, and are more likely to recidivate (TAC, 2010; NAMI, 2016). Those with COD are less likely to receive and comply with treatment and medication, and have poorer outcomes than those with MI alone (Herbeck et al., 2005) Close to 2 million people with mental illness are booked into jails each year, with the vast majority serving sentences for minor crimes and non-violent offenses (NAMI, 2016). Untreated mental illness not only affects the health and emotional well-being of inmates; it affects the safety and welfare of law enforcement staff members, and the entire community (chart right).

Studies show increasing numbers of incarcerated individuals with behavioral health problems and serious psychological distress, as compared to five or ten years ago (AbuDagga et al, 2016; Bronson and Berzofsky, 2017). It is estimated that between 20% - 25% or 1 in 4 jail inmates have a SMI or report symptoms that meet threshold for serious psychological distress. More people in prisons and jails are likely to present with symptoms of serious psychological distress at much greater rates, than the general public (BJS, 2017). This is especially pronounced among jail inmates. Upwards of 60% or approximately two-thirds of jail inmates (higher than their prison counterparts) reported either current serious psychological distress, or a history of mental health problems (BJS, 2017). Yet, only a third of individuals identified with or having a history of MI, SUD, or COD, and/or experiencing serious psychological distress in jails were reported as receiving treatment, underscoring the strong need to divert people at risk away from jails to appropriate services in the community at the earliest possible points in time (BJS, 2017; TAC, 2014).

b. Impact of Trauma on Target Population

Increased attention impact of trauma among individuals in prisons and jails is on the rise. For many justice involved adults, traumatic experiences that occur in childhood (i.e., adverse childhood experiences or ACEs) have been linked to a range of problems in adulthood, including higher rates of MI, SUD, and behavioral problems which may be worsened by incarceration, or in some cases induced by it (Wallace et al., 2011). Additionally, higher rates of trauma are associated with increased violence and victimization in prison (Miller & Najavits, 2012). These findings have prompted efforts in jails and prisons to screen for ACEs and create trauma-informed justice environments (Bartos, 2016). In 2018, Manatee participated in the launch of a three-county initiative to become a trauma informed community under the name "Peace4Manasota." Initial steps in this multi-phase effort included distribution of a survey across health, behavioral health, child welfare, criminal justice, and education agencies to query agency awareness of the presence of trauma in the populations they serve and their capacity to respond to traumas when identified. 111 surveys were distributed across health, behavioral health, human service, criminal justice and education non-profit and for-profit agencies for the purpose

of: 1) assessing the types of childhood traumas experienced in the people they serve; 2) identifying education and prevention opportunities; and 3) assessing provider's capacity to identify, prevent, or mitigate exposure to trauma. The data collected is currently under analysis. The Manatee County Sheriff's Office (MCSO) has expressed a strong interest to screen for ACES in the jail population and in creating a trauma-informed/trauma responsive justice environment. The ***MRPP Collaborative*** will work with the MCSO, NaphCare (the jail health care provider) and courts to develop a process to screen for ACEs in these population, and create training opportunities to increase understanding about the impact of trauma on jail/court participants to lead to more successful incarcerations and outcomes.

c. Access to Mental Health Care & Impact on Target Population

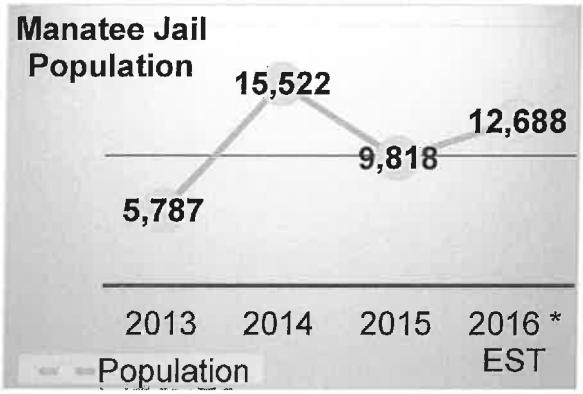
Accessing mental health care is a challenge throughout the state of Florida. According to Mental Health America's (MHA) State of Mental Health Report (2018), Florida ranked 44 out of 50 on access to mental health care (measured by access to insurance, access to treatment, quality and cost of insurance, access to special education, and workforce availability). In comparison to prior years, Florida's standing in access to behavioral health care has *declined* from 42 in 2011 to 44 in 2018 (MHA, 2018) (Note: states with lower access to care have higher numbers). Comparing state's rates of incarceration using 2015 data reported by the non-profit criminal justice research and advocacy group, *The Sentencing Project*, with MHA's access to mental health care rankings, there was a strong positive correlation between rates of adults in the criminal justice system and lack of access to mental health care, i.e., states with the least access to mental health care had the highest rates of incarceration. **Florida ranked in the top tier** of **providing poor access** to care and having the **highest rates of incarceration** (MHA, 2018). While access to treatment is a state-wide challenge, one of the ***MMRP Collaborative's*** goals will be to identify local treatment and recovery support resources for the target population and facilitate cross-agency/cross-system referral and information sharing between criminal justice and behavioral health systems (See Objective1, Section 3.8.6.2.).

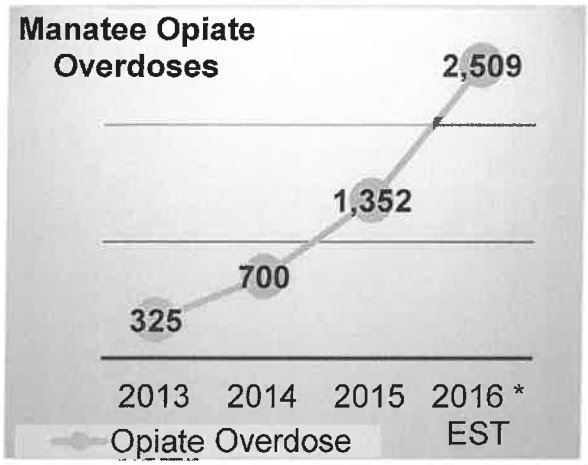
d. Trend Analysis

Between 2013 and 2016, the Manatee inmate population increased 168% (see chart next page), coinciding with the rise of Manatee's heroin epidemic and indicating an expected increase of inmates with substance use disorders (MCSO, 2016; Bradenton Herald, 2015). An analysis of opiate overdoses over the same period reflects a 316% increase from 2014 to 2015 (MCSO, 2016) (see chart next page). These upward trends suggest a growing jail population in need of behavioral health interventions.

It is important to note that estimates of actual need have been hampered by lack of adequate updated technology (e.g., electronic health record (EHR), Health Information Exchange (HIE) to track inmates identified and/or treated for mental illness, SUD, or COD by the former Manatee Jail medical care provider in contract with the county. Paper-based screening and record keeping resulted in many unidentified, undiagnosed,

and untreated incarcerated individuals. A new health/behavioral health care contractor (NaphCare) was selected effective 1/1/2019 and has already implemented an EHR). According to available data on Manatee's approximately 9,800 annual population based on prior and current inmates obtained from the Manatee County Sherriff's Office (MCSO) using inmate self-report, or from notation in criminal history records reveals a 3% (290) increase in inmates reported as having a diagnosed serious mental illness, **compared to 20-25% on average nationally;** 36% (3,500) had an SUD, **compared to 66% nationally;** and 31% (90) had a COD, **compared to 76% of inmates with mental illness nationally** (MCSO 2018; TAC, 2014). Out of 48 homeless inmates 15% were reported to be experiencing emotional distress compared to **33% of homeless inmates nationally** (NAMI, 2007). The marked discrepancies between national averages and local reports of MI, SUD, and COD in the Manatee jail population underscore the timeliness and importance of ***MRPP's*** proposed needs assessment and data analytic activities.





Utilization data on behavioral health services in the jail general is equally limited due to lack of updated technology (e.g. electronic medical records). Reports indicate 22 of the 440 (5%) of individuals in the Manatee jail diagnosed with an SMI had access to mental health treatment, 4% with SUD had access to substance use treatment, and 6% with COD accessed treatment services. The number of inmates seen by the health contractor's psychiatrist for evaluation and medication management between 2013 and 2017 increased by 21%, while inmates receiving therapy/supportive counseling decreased by 18% over the same three year period (see chart below).

Suicide rates have been increasing in people with mental illness in jails and prisons, (e.g., suicide rates for inmates with mental illness doubled over the past 20 years (NCIA, 2010).

Manatee County In-Jail Mental Health Services				
Visit type	**2013**	**2017**	**% Change**	**Considerations**
Psychiatric Services	1,479	1,796	21%	More sensitive assessments
Therapy Services	10,265	8,400	-18%	Capacity Issue

Source: Manatee Health Services Report, 2018

Suicide is recognized as a critical problem within the corrections environment. In Manatee's jail, there was a 75% increase in suicide attempts reported in the years between 2013 and 2017 (see chart below).

Manatee Jail Suicide Attempts				
Statistic	**2013**	**2017**	**% Change**	**Considerations**
Attempted Suicides	4	7	75%	Severity

Source: Manatee Health Services Report, 2018

It is important to note that major risk factors that make someone more likely to consider suicide include untreated mental illness (especially depression) and substance abuse (National Suicide Prevention Resource Center, 2018).

These trends will be a focus for closer analysis in the needs assessment phase of this proposed planning initiative. With electronic health records now operable in the Manatee jail, the ***MRPP Collaborative*** will have access to more accurate assessment and service utilization data and reports (e.g., screening and behavioral health assessments, types of diagnoses, medication orders (e.g., use of psychotropic medications, "sick-calls," suicide risk alerts, (See Objective 3, Section 3.8.6.2, and Performance Measure 6, Section3.8.6.4). Through the project's needs assessment phase, it is expected that ***over twice as many*** individuals with mental illness, SUD, and COD will be identified in the target population, more closely mirroring national averages. Using national projections, an estimated **1,900 inmates annually are expected to be identified through the *MRPP Collaborative's* needs assessment as having a mental illness; 6,500 SUD; and 1,500 COD**.

e. Target Population to be Served

Based on current Manatee County jail demographics, the target population for this grant is estimated to be 72% male and 28% female, with 63% white, 26% African American, and 11% Hispanic individuals (MCSO, 2019). Men and African Americans are over-represented in the target population compared to Manatee County's general population which is 48% male and 8% African American (MCSO, 2016, US Census Bureau, 2015). The target population was selected due to concern over increasing jail census and high number of adults suspected as having MI, SUD, or COD, as well as socioeconomic disparities, including homelessness, income inequality, unemployment, etc. The 2018 HUD point in time counted 1192 total homeless individuals across Manatee and Sarasota counties, with 545 from Manatee. Of the nearly 1,200 homeless individuals in the region, 13% were reported as having an SMI, and 10% an SUD (Suncoast Partnership, 2018). Among homeless populations, individuals who have an MI and COD are more likely to be arrested, have longer incarcerations, and higher rates of recidivism than those without MI and COD (NHCHC, 2012). 54% of Manatee County jail inmates identified as homeless self-reported abusing alcohol or drugs, and 11% self-reported mental health issues (MCSO, 2019). Additional risk factors affecting the target population; include: recent release from jail, reentry into the community from state

prison, history of involvement with the criminal justice system, and history of victimization or abuse.

f. Geographic, Socioeconomic Factors Impacting Target Population

Urban Manatee County is located on Florida's southwest coast 50 miles south of Tampa bordering DeSoto, Hardee, Hillsborough, Polk, and Sarasota Counties. Manatee has a population of 375,888 people with a median age of 47.7. 71.5% of the population is white; 8.74% African American; 16.1% Hispanic (US Census, 2015). Annual estimates show the County gained 10,000 residents between 2016 and 2017, making it the 44th fastest growing county in the U.S. between 2010 and 2017, and the 15th most populated county in Florida.

Manatee has a median household income of $51,748, and is less than the median annual income in the United States. 43% of its households live below the poverty level (HCS, 2017). Moreover, Manatee's income equality gap between its wealthiest and poorest residents is growing. 47,005 out of 371,806 people live below the poverty line, a number that is lower than the national average of 14% (US Census Bureau, 2015). Nationally, Manatee ranks 137th in income inequality among 3,000 counties (Sommeiller et al., 2015). The median property value in Manatee County is $300,000, up 12% from 2017, with average costs for rentals up 5% over last year making finding affordable housing a challenge (Sarasota Herald Tribune, 2018).

Coinciding with its growing population, the opioid crisis has greatly impacted Manatee County at levels prompting it to be referred to as an "epidemic." Manatee County sits within the greatest impacted district of Florida accounting for a majority of District Twelve's death overdoses, child removals, and Narcan administrations respectively. Heroin-related deaths increased 120% from 2014 to 2015, and overdose incidents increased nearly 100% during the same timeframe across all socioeconomic backgrounds (see graph above) (FDLE 2015; MCSO, 2016). The Medical Examiner's Office reported a record number of autopsies from heroin and fentanyl overdoes, with over half of them (64 out of 105) performed in Manatee County (ME Report, 2017). Another consequence of the hard hitting drug epidemic in Manatee has been the high rate of child removals from home due to substance use. Over the last 3 years, the County has fluctuated between first or second among Florida's 67 counties for the highest percentage of children removed from their homes because of concerns to their welfare. Of the 447 Manatee children removed in 2017 by CPS, more than half were related to substance use, with 50% age 5 and under (Bradenton Herald, 2018).

The socioeconomic factors described above exponentially add to increased strain on behavioral health resources, hospitals, social service agencies, schools, housing providers, law enforcement, emergency services, and other public safety departments.

g. Priority as a community concern

In 1993, Manatee County established a Public Safety Coordinating Council (PSCC) to monitor the status of correctional facilities, evaluate the effectiveness of current criminal justice programs in meeting public safety need, and plan for the development of additional criminal justice programs that will improve the criminal justice system in Manatee County.

In 2007, a state-wide report indicated that over 125,000 people with mental health disorders were booked into Florida jails. The PSCC began to examine what that statistic meant for Manatee County. In 2008, the Council noted that there were 21,747 arrests in Manatee County alone resulting in the jail operating considerably over capacity. Of these arrests, a significant number were due to the actions of people who were believed to be mentally ill, not taking medications, abusing alcohol or drugs, or a combination of the two. Upwards of 50% of the jail population were reported to have related drug offenses and process violations.

In 2011, the PSCC convened criminal justice stakeholders to discuss offenders who repeatedly entered the criminal justice system for low level municipal ordinance violations, and who often presented symptoms of mental illness, SUD, COD, and associated risks such as homelessness. They identified the need to divert non-violent individuals with these conditions from the criminal justice system at the earliest points possible. They also identified the need for a long-range plan to reduce this cohort's growing presence in the Manatee jail, reduce their high rate of recidivism, and avoid a looming crisis of overcrowded conditions.

Priority as a Community Concern
• Increased arrest rates
• Jail population growth
• Increased dependency on emergency & crisis services
• Skyrocketing child welfare removals
• Major demographic shifts
• Increased rates of homelessness
• Opioid epidemic
• Flat growth in behavioral health funding
• Lack of service coordination
• Unmet health & behavioral health needs

Since then, a confluence of demographic and environmental forces (including those described above in Section f. *Geographic, Socioeconomic factors impacting population)* have converged to underscore the timeliness and urgency of the proposed ***MRPP Collaborative*** planning grant activities. Through funding provided by a CJMHAS Reinvestment Planning Grant, commitment to action by Manatee's Public Service Coordinating Council, and groundswell of community support (See Tab 8 – Letters of Commitment), the ***MRPP Collaborative*** will mobilize the community in a coordinated strategic planning effort to systematically address community concerns and produce a roadmap to enhance/expand treatment, recovery, and alternative diversion opportunities for individuals of the target population.

3.8.5.2. Analysis of the Manatee Jail current population

The Manatee County Jail has an active daily census of 1,000-1100 inmates. Individuals who have been placed under arrest are first transported to the Central Jail located on

the grounds of the Main Jail in Palmetto. The physical plant is comprised of two buildings that hold 35 pods. Medical services has a pod of its own with 28 beds. The majority of inmates come from within Manatee County, under city or county jurisdiction.

An analysis of 2013-1016 Manatee jail census shows a 168% increase from 2013-2014, coinciding with the rise of Manatee's heroin epidemic and an expected increase of inmates with SUD (MCSO, 2016; Bradenton Herald, 2015). In response to the increase noted in substance use, the jail opened a Recovery Pod (RP) with a bed capacity of 70 (40 male and 30 Female). Inmates who self-identify with a drug/alcohol problem may request to participate. Eligibility is determined by the Jail Classifications Unit and may include criteria related to current and past criminal history, disciplinary history, security level, and medical clearance. People with a history of violence, and sexual offenders are not admitted to the program. In 2018, the RP served a total of 139 females and 126 males (these may be duplicated numbers as inmates are allowed multiple opportunities to participate). Recidivates (inmates from the RP cohort who re-offended in 2018 after release) included 15 females and 7 males. The RP is a voluntary program providing inmates with drug and alcohol addiction problems access to faith-based programs. Days are structured offering a variety of recovery-oriented meetings and courses on life skills, anger management, employability skills training, and parenting. AA and NA meetings are available. Inmates can stay on the RP for up to 90 days and must complete a set number of 12-week classes. Due to limited space, there is typically a waiting list for both male and female dorms.

3.8.5.2.1. Screening and assessment to identify target population

Consistent with the intent of the CJMHSA planning grant, the ***MRPP Collaborative*** will work with the new health care provider of the Manatee County jail to increase use of evidence-based screening and assessment protocols, such as the Correctional Mental Health Screen (CHMS), Alcohol Use Disorders Identification Test (AUDIT-10), Drug Abuse Screening Test (DAST-10), PHQ-4, and ACE assessment. Based on screening results, the Level of Service/Case Management Inventory (LS/CMI) assessment, a Risk-Needs-Responsivity tool to identify criminogenic risk, service needs, and individual responsivity (i.e. biopsychological factors influencing responses to treatment/rehabilitation), and to assist service planning will be suggested. Since healthcare is a contracted service by county government, Manatee's Health Care Services Manager will be engaged in identifying screening tools to be used upon arrest and at points during an individual's stay. All screening results will be entered into the inmate's EHR.

Screening and assessment for the portion of the target population who is at risk, but not yet involved with criminal justice will be facilitated during the planning grant period through the continued training of law enforcement personnel in *Crisis Intervention Team (CIT)*, a program to increase law enforcement capacity to respond to behavioral health crises. Centerstone has and will continue to participate in the delivery of CIT training. Other stakeholders (e.g. housing providers, social services, healthcare, etc.) will

continue to be offered *Mental Health First Aid (MHFA)* trainings facilitated by one of Centerstone's five *MHFA* certified trainers.

Additionally, as a required deliverable of the planning grant, the ***MRPP Collabortive*** will work with local health and behavioral health service providers, the courts, corrections services, law enforcement agencies, housing, employment and other recovery service providers to compile and share data regarding criminally-involved individuals with behavioral health issues in their care and create a shared data-base.

Screening activities will be used to identify those cohorts most likely to realize positive change from proactive interventions at various interception points across criminal justice agencies, identify high utilizers of services across multiple agencies and systems, and develop planning and advocacy priorities to fill gaps in the local service system.

3.8.5.2.2. Analysis of Admitted Persons with Mental Illness, SUD, COD

Due to the lack of an electronic health record, an analysis of Manatee's jail population results in many unidentified, undiagnosed, and untreated incarcerated individuals, with population estimates falling dramatically below national averages (See above Section d. *Trend analysis*). Projections indicate that of Manatee's approximate 9,800 annual population, as many as 4,600 individuals are *not* being properly identified and treated for behavioral health conditions, and will most likely have poorer health and behavioral health outcomes during their incarceration, be at greater risk for suicide, violence, and behavioral outburst. They will also be at higher risk of re-arrest. (Lynch et al., 2015). In 2015, only 3,800 of 9,800 (38%) of the annual jail population were identified as having mental illness, SUD, or COD, compared to the national average of 74% (MCSO, 2015, 2016; Peters et al., 2015). Since current needs assessment data points to a significant difference between the number of Manatee inmates identified with behavioral health needs and national norms, the ***MRPP*** will work closely with NaphCare, the new Manatee Jail medical care contractor, the Manatee County Sheriff's Office, the County Health Care Contract Manager for inmate health care, and relevant community partners to immediately initiate a new needs assessment methodology to clearly delineate the target population for strategic planning purposes. Through this process, more accurate data will be available to identify true MI, SUD, COD need in the target population.

3.8.5.2.3. Analysis of Contributing Factors Affecting Population Trends

The Manatee County Jail population experiencing mental illness, SUD, and COD is affected by gaps in the criminal justice system's capacity to respond to and facilitate treatment for the target population. Despite successes in improving communication and coordination between mental health/substance use treatment providers and criminal justice agencies, continued challenges (e.g. increases in the homeless population and drug arrests/deaths, outreach barriers particular to the target population, complex treatment needs) present potential barriers to accurately identifying the target population and providing them with diversion alternatives, as well as contributing to a jail that is disproportionately populated by individuals with unidentified/unaddressed mental

illness, SUD, and COD based on national prevalence. A number of other factors affecting the target population include: lack of capacity/adequate staffing in the criminal justice and behavioral health systems; increasing demands on emergency and crisis services by people with mental health and substance use disorders; lack of affordable housing; un/under-employment; un-detected trauma; lack of health insurance or access to other benefits; stigma; and recidivism. In addition, while Manatee County behavioral health providers, law enforcement, courts, and emergency care providers make significant efforts to communicate and coordinate services for the target population, lack of formal structures to systematically identify gaps or barriers to accessing community-based treatments and recovery supports will continue to fail not only to offer more effective alternatives to incarceration, they will fail to reduce re-entry and recidivism of adults with behavioral, mental, and substance use disorders and criminal justice involvement. Within the jail, behavioral health services are limited (e.g. limited availability of treatment staff, need for improved information-sharing and data collection infrastructure) risking deterioration of behavioral health conditions during incarceration, and recovery goals to go unmet while in jail, and upon release.

3.8.5.2.4. Target Population Risk Factors for Entry/Re-entry

The target population is vulnerable to criminal justice entry or re-entry due to risk factors frequently associated with mental illness, SUD, and COD, including antisocial behavior, personality pattern, and cognition, as well as substance use (Andrews & Bonta, 2010) (see chart right). According to national averages, 54% of inmates with a national illness recidivate, placing an estimated 6,900 Manatee individuals with mental illness released over the last 2 years at risk of recidivating (MCSO, 2016). Substance use is also a significant criminogenic risk factor. Nationally, 95% of substance using offenders return to substance dependency and up to 80% commit a drug-related offense upon release, with 68% of individuals with COD and a criminal justice history recidivating (NADCP, 2002). Using these national rates, an estimated 800 individuals with COD in the target population cohort incarcerated at Manatee jail are at risk of re-arrest following release. Additional risk factors expected among the target population include association with others who have criminal histories, conflict and/or lack of positive family/marital relationships, poor school/work performance, and limited leisure/recreational activities (see chart right). Target population individuals who have been recently released from jail or have a history of criminal justice involvement are more likely to re-enter the criminal justice system than individuals without previous criminal justice system involvement. Those with criminal records have difficulty accessing needed behavioral health treatment due to ineligibility for benefit assistance programs, housing instability, and employment barriers all negatively impact outcomes for ex-offenders and increase recidivism.

Criminogenic Risk Factors
History of antisocial behavior
Antisocial personality pattern
Antisocial cognition
Antisocial associates
Family and/or marital factors
Poor school/work performance
Limited anti-criminal leisure
Substance abuse
Source: Andrews & Bonta, 2010

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TAB SIX

Project Design and Implementation

CENTERSTONE

Tab 6: Project Design and Implementation

Section 3.8.6: Project Design and Implementation

3.8.6.1.1. Planning Council/Committee Composition

The Manatee County Public Safety Council (PSCC) PSCC has been designated by the Manatee Board of County Commissioners to serve in the role of CJMHSA Planning Council. In full compliance with s.384.657 the Council includes all 20 statutory-required criminal justice, behavioral health providers, consumers, family members, and community stakeholders, in full compliance with s. 394.657 (see chart right).

Manatee County PSCC Composition	
Council Position	Current Stakeholder
Chief Assistant State Attorney	Ed Brodsky
Public Defender	Lawrence Eger
Circuit Court Judge	Deno G. Economou
County Court Judge	Charles P. Sniffen
Chief Correctional Officer	Daniel Kaufman
Sheriff	Richard Wells
Chief of Police	Melanie Bevan
State Probation Circuit Administrator	Stephanie DiTroia
Legal Court Administrator	Walt Smith
Board of County Commissioner	Reggie Bellamy
Probation Manager	Jennifer Burgh
Director of Mental Health Agency	Melissa Larkin-Skinner
Director of Substance Abuse Treatment Agency	Alfred James
Homeless or Supportive Housing Representative	Leslie Loveless
DJJ- Director of Detention Facility	Eris Womack
DJJ- Chief of Probation	Virginia W. Donovan
DCF- Substance Abuse & Mental Health Program Office Representative	Susan Nunnally
Primary Consumer of Mental Health Services	Under Recruitment
Primary Consumer of Substance Abuse Services	Patricia Ries
Family Member	Colleen Thayer

3.8.6.1.2. CJMHAS Planning Council Role and Activities

The CJMHAS Planning Council role will include maintaining a comprehensive referral network and encouraging community agency collaboration and communication toward the development of a shared database of services available to the target population. The Council will advocate for enhanced behavioral healthcare and collaboration among criminal justice entities and behavioral healthcare providers, and support proposals for treatment capacity expansion for the target population. Council members will participate in the SIM workshop and in activities leading up to the finalization and implementation of the strategic plan. Consumer roles include providing insight on the gaps/deficiencies in effective criminal justice system response to individuals with MI, SUD, or COD, and perspectives on addressing these gaps/deficiencies through best practice peer models. The Planning Council will review the status of grant deliverables and benchmarks, discuss emerging issues, and

upcoming events. Additional Planning Council duties may be determined upon funding according to community priorities and ***MRPP*** design/implementation needs.

In the previous 12 months, the PSCC convened quarterly, for a total of 4 meetings. The PSCC agenda regularly includes updates on Manatee County jail census, Drug Court, State Pre-Trial and Drug Offender Program, Juvenile Justice/JAC census, County Pre-Trial Interventions, Probation, the Supervised Release Program, and updates by Centerstone on Marchman Acts, Baker Acts, acute care and de-tox admissions, in-jail behavioral health services, FACT team, and Crisis Center caseloads.

3.8.6.2. Project Design, Goals, Strategies, Milestones & Key Activities

The purpose of the ***MRPP Collaborative*** is to launch/lead a coordinated planning effort that results in a comprehensive strategic plan to, by design, divert Manatee County adult individuals involved in the criminal justice system who also have mental health, substance use, and/or co-occurring substance use conditions from incarceration to evidence-based treatments in the community. ***MRPP Collaborative*** objectives, goals, strategies, milestones, key activities/tasks, and stakeholders reflect DCF objectives outlined in the RFA and align with the MJMHSA Coordinating Planning Council mission and statutory requirements.

Proposed planning grant activities unfold in three major phases: a needs assessment phase to delineate the target population and identify service capacity; a gap analysis and opportunity generation phase for best practice implementation and priority setting (SIM); and a strategic plan development phase that addresses the needs of the target population through the establishment of specific objectives, tasks, and activities with a focus on identified priority areas from the SIM. Specific project objectives, strategies and key activities are outlined on the next page.

***MRPP Collaborative* Objectives, Key Activities/Tasks, and Responsible Parties**
Responsible Stakeholders (RS) (See LOCs, Tab 6)
Centerstone of Florida (CFL); Manatee County Jail (MCJ); Target Population & Family Members (TPFM); CJMHSA Planning Council; Criminal Justice System (CJS): Law Enforcement (Bradenton Police Department, Palmetto Police Department, Manatee County Sheriff's Office, Courts (12th Judicial Circuit Court, State Attorney), and other CJS stakeholders as LOCs are secured; **Community-Based Organizations & Social Service Agencies (CBO/SSA)**: Suncoast Partnership to End Homelessness, Florida Department of Health, NaphCare Correctional Health Services, Goodwill Industries of Manasota, and other CBOs/SSAs.
Objective 1: ***Develop and submit a strategic plan in accordance with required template to initiate systemic change for diversion of adults 18+ with behavioral health conditions in jail and other criminal justice settings to community-based interventions at intercept points***
Task 1.A. Conduct thorough needs assessment to establish accurate identification of the target population currently in criminal justice settings (e.g. jails, courts, probation) **Task 1.B.** Determine alignment of needs assessment with national/state average norms **Task 1.C.** Identify current behavioral health/support service capacity & gaps **Task 1.D.** Identify intercept points for target population **Task 1.E.** Identify/evaluate best practice models for implementation **Task 1.F.** Establish priority areas for action **Task 1.G.** Assemble/identify resources for action implementation **Task 1.H.** Evaluate strategic planning activities and contract deliverables on a quarterly basis to determine success in meeting project milestones and adherence to ***MRPP*** timeline; issue reports to oversight and advisory bodies; solicit feedback
Objective 2: ***Engage and nurture collaborations among stakeholders to develop a community-wide strategic plan, advocate for system reform, and provide ongoing oversight and continuous quality improvement of MRPP Collaborative activities***
Task 2.A. Convene stakeholders, including invited subject matter experts, clinicians, researchers, and potential funders to engage in planning action discussions and implement recommendations/strategies of strategic plan **Task 2.B.** Encourage cross-agency and cross-system visits (including jail, courts, and treatment settings) to increase stakeholder awareness and sensitivity **Task 2.C.** Conduct regular meetings, define stakeholder roles and expectations, establish decision-making protocols **Task 2.D.** Provide opportunities for team building, cross-system trainings, and knowledge exchange on emerging best/promising practices on criminal justice and behavioral health topics **Task 2.E.** Encourage strategic alliances among stakeholders to develop innovative service delivery models, leverage existing resources, and employ best practice criminal justice diversion strategies by design **Task 2.F.** Facilitate formal development of MOU's and legally binding agreements among agencies to deliver and coordinate services

Task 2.G. Facilitate shared data collection/sharing/reporting among partners on identified target population and community service capacity to facilitate efficient linkages to behavioral health interventions and supports.
Objective 3: (Additional Proposed Objective) ***To develop more effective and efficient processes to identify and track individuals in the Manatee County jail who present with behavioral health symptomology and have experienced childhood trauma***
Task 3.A. Implement validated screening and assessment tools/protocols on admission effectively and efficiently assess/identify all inmates for presence of mental illness, substance use disorder, and/or co-occurring symptoms and document in HER **Task 3.B.** Conduct ACEs screening with inmates using validated instrument and share findings with Manasota Trauma Informed Workgroup. **Task 3.C.** Identify nature and frequency of electronic reports to enable collaborative data collection, analytics, and shared benchmarking among key partners to more accurately assess need within target population, track and evaluate service utilization for strategic planning and continuous quality improvement. **Task 3.D.** Mobilize/advocate for local capacity and enhanced community resources across criminal-justice, behavioral health, social service, and community-based systems **Task 3.E.** Utilize data collection and analytics in a continuous feedback loop to inform the strategic planning process, future service implementation, and success of recommended strategies/solutions in addressing community concerns

3.8.6.2.1. Manner in which needs assessment will be conducted

Determining the true need of the target population and full scope of the problem confronting the Manatee community and its local systems will be a major focus of initial planning grant activities. To date, accurate estimates of actual need have been greatly hampered by 1) lack of electronic technology to adequately track inmates who are identified or treated for mental illness, SUD, or COD in Manatee's jail; and 2) lack of a coordinated and systematic process for data collection within and across criminal justice and behavioral health systems. As part of the needs assessment process, existing behavioral health and support service capacity will be inventoried and cross-walked with population need for purposes of identifying service gaps, and setting priorities for service enhancement/expansion.

An updated database of community resources and service provider expertise and capacity will also assist the Planning Council in achieving its objective to maintain a comprehensive referral network and facilitate effective linkages between and among criminal justice and behavioral health providers.

MRPP's Project Manager will oversee the implementation of all grant deliverables and activities, including the needs assessment. Utilizing the research staff (e.g., data collectors, analysts, social scientists) of Centerstone Research Institute (CRI), the research and evaluation an arm of Centerstone, and working in tandem with the CJMHSA Planning Council, local government and service provider partners,

the ***MRPP Collaborative*** will outreach to the critical agencies who interact with the target population to engage their participation in needs assessment activities (see chart right).

Needs Assessment Data Sources
• Manatee County Sheriff's Office
• Bradenton Police Department
• Palmetto Police Department
• Manatee EMS
• NaphCare
• Manatee County Health Department
• Judicial Circuit 12
• Local Hospital ERs
• Consumers
• Family Members
• Centerstone Crisis Services
• Local CBOs

The needs assessment will be accomplished by using a number of methodologies, including: focus groups, key informant interviews, community meetings, document review, and existing administrative and/or census data analysis. Where data elements are missing (which is anticipated given previously stated lack of electronic health information available on inmates prior to 1/1/2019), CRI has the expertise in identifying proxies for incomplete or missing data elements using a systematic process of investigating the population/community of interest and the state of current resources such as knowledge, abilities, interests and approaches pertinent to the focus of the needs assessment. CRI's approach to conducting a needs assessment enhances strategic planning and the ability to identify/justify the need for a specific program or service, determine the type(s) of content or service to enhance/expand treatment capacity.

Quantitative Data Analysis:

Data collected through the needs assessment will include both quantitative and qualitative measures to fully-capture information on the target population. Quantitative data will include: 1) numbers of individuals with substance abuse and/or mental illness who are receiving corrections services and level of offense (e.g. incarceration, probation, parole, misdemeanor, felony, and nature of crime – violent or non-violent); 2) In-jail screening results for behavioral health conditions, diagnoses, psychotropic medications, suicide attempts, "sick calls", types of behavioral health services issued by NaphCare; 3) County arrest rates; 4) Baker and Marchman Act rates; 5) ER visits and police calls for mental health and substance abuse concerns; 6) Mobile Crisis Team utilization; 7) In-patient De-tox, CSU, Acute Care admissions); 8) ME reports; 9) County health service reports (including monthly report issued by the Manatee County Jail Medical contract manager) 9) At-risk factors such as homelessness, child removals, etc.

Qualitative Data Analysis:

Key informant interviews will be conducted using a brief open-response survey tool to collect anecdotal data from service providers. Focus groups will be held with stakeholders to garner input about their perceptions, opinions, beliefs, and attitudes. Qualitative data will also be used to gather local provider feedback regarding gaps in services, effectiveness of currently available services, local capacity for providing effective interventions, and recognized best practices for improving local substance

abuse and mental health treatment and recovery and diversion to treatment for the target population. Cross-walking the points of intersection by the target population with criminal justice and behavioral health intervention will be a component of the qualitative analysis for the purpose of identifying proactive interventions and implementation of evidence-based models that improve treatment outcomes and divert the target population along the various intercept points (e.g. law enforcement/emergency services, initial detention/first appearance, courts/jails, re-entry, and community corrections).

Identification/Classification of Available Services:

Identification of existing mental health, substance use, and related crisis, support and recovery services available in Manatee County is a planning grant (see **Section 3.8.6.2.** Objective 2, Task 2F). Outreach to 211, NAMI, Centerstone's Call Center, the Florida Suicide Prevention Coalition, DCF, Central Florida Managing Behavioral Health Network, JFCS of the Suncoast, Florida Behavioral Health Council and to entities that maintain other databases and lists of behavioral health and related resources available to Manatee County residents will be used to populate ***MRPP Collaborative's*** database, evaluate availability of treatment resources, and pinpoint areas of unmet need.

Leveraging the information from existing databases and referral sources will avoid inefficient duplication and provide service capacity information for the SIM workshop where participants will map points of interception between the criminal justice and behavioral health systems for the target population and evaluate unmet areas of behavioral health need.

Through this process, the CJMHSA Planning Council and the Manatee Behavioral Health Stakeholder Consortium will have the information they need to recommend modified or new service models and/or evidence-based interventions that can more effectively divert the target population from a criminal justice trajectory to a treatment track.

3.6.2.2.2. Methodology to identify, coordinate, share funding and related resources, and recommend organizational or structural change

Manatee County has a strong history of cross-system collaboration and a multi-tiered process in place to create community awareness, generate support, and engage stakeholders on issues affecting public safety. The Manatee County PSCC is an advisory body to the Board of County Commissioners. The PSCC identifies opportunities for improvement in the criminal justice system, make recommendations on policy decisions, and leverages federal, state, local funding, foundation and other grant opportunities.

Members of the PSCC also serve as the CJMHAS Planning Council, and is comprised of key criminal justice officials, including the Chief Judges, State Attorney, Public Defender, Probation, Clerk of the Courts, County Sherriff and representatives of local law enforcement and emergency services. Additional Planning Council members

represent the leadership of local government and Manatee's leading health, behavioral health and social service providers, and advocacy organizations.

In addition, Manatee County's behavioral health and criminal justice stakeholders come together regularly through a structure of standing committees and consortia that support collaborative planning and problem solving, share resources, and establish joint-ventures across the systems. This includes quarterly meetings of the Manatee County Acute Care Committee that is comprised of representatives from health and behavioral health providers, law enforcement, emergency medical services, state, regional, and county government, consumers, family members, and transportation providers. The Committee monitors and updates the County Transportation Plan, identifies and addresses barriers in the system (e.g., capacity constraints), and recommends corrective action. The Transportation Plan is undergoing revision in 2019 with an added focus on diversion by design. The Committee reviews crisis and emergency service utilization reports, including Baker Acts, Marchman Acts, mobile crisis response, CSU and acute care admissions, de-tox admissions, as well as discusses emergent issues that affect public health and safety, e.g., the impact of the opioid epidemic.

The newly formed Manatee Behavioral Health Stakeholders Consortium (BHSC) is comprised of a diverse membership that includes professionals, administrators, clinicians, and researchers in the areas of behavioral health, child welfare, social service, criminal justice, education, and policy. Upon award of the CJMHAS Reinvestment Planning Grant, the Manatee BHSC is poised to become the body responsible for implementing the SIM action plan and for tracking the progress of the recommendations that emerge from the ***MRPP Collaborative***. Both the Acute Care Committee and the BHSC will be kept abreast of ***MRPP*** findings and are well-suited positions to make recommendations on policy reform, service coordination, and future strategies/models to increase service capacity through innovative partnerships and inter-agency agreements that emerge from ***MRPP*** activities. The planning grant Project Manager will be a regular attendee at both Acute Care and BHSC meetings.

Additional ad-hoc committees/workgroups of the BHSCC and/or Acute Care Committee, and CJMHSA Planning Council members will be formed as the need may arise for smaller working discussions and action-planning.

Equipped with necessary data and a formal strategic plan, Manatee County's existing multi-tiered coordinating structures of government and representatives from the diverse swath of community stakeholders that comprise the region are ready to embark upon a process of systemic change to better serve individuals identified as the priority population in this grant application.

3.8.6.2.3. Strategy for project design & implementation

The MRPP Collaborative is a 1-year planning initiative to divert adults with mental illness/COD who are in or at risk of entering the criminal justice system by linking them to behavioral health and support services in the community. Project deliverables will

extend over 3 over-lapping phases: an assessment of target population need and community service capacity, a Sequential Intercept Mapping exercise, and development of a comprehensive strategic plan.
Through the needs assessment process, partnering agencies will be able to explicitly define the target population and pinpoint the scope/extent of need. Cross-walking need with services across the intercept points, action priorities will be identified. Overlapping with needs assessment activities, Planning Council members and other community criminal justice and behavioral health advocates, consumers, and family members will participate in a SIM workshop. The ***MRPP Collaborative*** has secured the commitment of Mark Englehardt, Director of the CJHAS TAC at the University of South Florida. Mr. Englehard has agreed to lead the process upon funding (see letter of commitment from Mr. Englehardt, Tab 8 LOC).

Sequential Intercept Mapping (SIM):

The ***MHRP Collaborative*** will utilize the CJMHAS TAC to engage stakeholders in the SIM exercise. SIM is a dynamic, interactive tool to assess resources, gaps and opportunities at each of five "intercept points." The SIM will identify and address systemic barriers, identify gaps in services, recommend solutions/interventions at each of the 5 points of intercept of the target population with the criminal justice system and identify specific intercept points.

The SIM process unfolds over a 2 day period and results in a focused action plan that identifies specific priority areas and decision-makers/persons with responsibility for delineated tasks to move priorities to the implementation stage. It includes recommendations for resources to support capacity expansion using evidence-based behavioral health treatment interventions.

It is essential that the SIM action plan be integrated with all other planning initiatives in the county, such as the Suncoast Partnership to End Homelessness Continuum of Care, Manatee County Public Safety Council, Health Advisory Committee, Manatee Behavioral Health Stakeholders Consortium, County Transportation Plan, the County Central Receiving Plan, and other relevant planning initiatives that may emerge.

The newly formed Manatee Behavioral Health Stakeholders Consortium (BHSC) will be considered as the responsible body to implement the SIM action plan through the formation of workgroups on identified priorities.

Strategic Plan Development:

In collaboration with the CJMHAS Planning Council members and stakeholders, ***MRPP's*** Project Manager will lead the development of a need-based, data-informed strategic plan to increase Manatee County's capacity to divert adults with MI, SUD, COD from arrest, prosecution, or incarceration and into treatment and support services. The strategic plan will be grounded in needs assessment findings and SIM action priorities, and will comply with the requirements of Appendix A of the RFA. The

Manatee Strategic Plan will include all required components and will be formatted and outlined as indicated in the RFA, including but not limited to project goals, strategies, milestones, key activities and persons responsible.

In addition, the strategic plan will include the following elements deemed important:

Identification of professional development needs: The ***MRPP Collaborative*** will offer opportunities to participate in local training, seminars, webinars, conferences and certification programs on evidence-based practices and relevant topics. (e.g., The Twelfth Circuit offered a full day seminar in 2018 on emerging trends and policy challenges for diversion hosted by Judge Quartermaine). Participation in the DCF peer training and certification program and/or in NAMI's Family-to-Family training will be strongly encouraged.

Inclusion of evidence-based practices: The ***MRPP Collaborative*** will identify progressive data-driven models and practices, which by design, divert individuals in the target population from jail to treatment, and encourage their adaption by local behavioral health providers.

Modification of existing treatment services: The needs assessment will be used to evaluate current treatment services offered to the target population. Recommendations by the ***MRPP Collaborative*** may include suggest adjustments or enhancements of existing service models to incorporate evidence-based interventions.

Identification of legislative, policy, social, and other barriers: Through the project's needs assessment, SIM, and strategic planning activities, the ***MRPP Collaborative*** will identify potential legislative issues, policies, or other system barriers that serve as obstacles to successfully diverting individuals from the criminal justice system to treatment services. The Collaborative will bring these barriers to the attention of the Planning Council, BHSC, and other groups involved in legislative advocacy to develop strategies needed to modify or remove such barriers.

The Project Manager will regularly report on the status of the strategic planning process at Planning Council and BHSC meetings. When completed, the plan will be presented to the CJMHAS Planning Council and Manatee PSCC for review, input, and final approval.

3.8.6.2.4. Strategy for coordination, communication & data sharing

The Project Manager will serve as the primary point of contact and communications "hub" for the ***MRPP Collaborative***.

Communication across agencies and stakeholders will occur throughout the duration of the ***MRPP Collaborative.*** A written update highlighting project deliverables and other information of interest will be prepared by the Project Manager on a monthly basis and

shared via email with CJMHSA Planning Council members. Conference calls and informal communication will be frequent to keep all parties informed and engaged. The Planning Manager will work closely with Manatee county government and liaise on a regular basis with the county's designated project point person. A report-out on ***MRPP*** activities and deliverables will be a standing agenda item for Acute Care, BHSC, and all relevant county government, behavioral health, and other community meetings. Scheduled presentations will be made at the quarterly meetings of the Manatee Public Safety Council/ CJMHSA Planning Council, and wherever invited to ensure Manatee constituents are aware of the project and to solicit public comment. Council meetings are open to the public and convene with all Council members engaged in participation through designated agenda items, invitation for input, and spontaneous involvement by all agencies/organizations and stakeholders involved in the Collaborative.

Agencies/organizations and other stakeholders will also communicate via shared performance measure data to assist in decisions regarding project activities across the 3 phases, and will include (but not limited to) project effectiveness, strategy, and quality improvement. Decision making will be collaborative and occur during scheduled planning meetings. All decisions will be made in compliance with applicable laws (e.g., Florida's Sunshine Law, County Ordinance). Any further decision making protocol, deemed as necessary will be determined upon grant award.

SIM workgroup champions will be responsible for conducting monthly meetings with their members and reporting on progress toward achieving action goals to the BHSC.

Section 3.8.6.4 Performance Measures

MRPP's Collaborative proposed targets and methodologies address all specified measures outlined in the RFA and will be used to monitor the planning grant (See Table below).

MRPP Performance Measures, Targets, Methodologies
Performance Measure 1: ***Completion of a comprehensive needs assessment, including clear delineation of target population***
Target: Complete within 90 days of execution of grant agreement
Methodology A: ***MRPP*** will cultivate relationships and identify point of contact within Sherriff's Office, NaphCare and other key stakeholders **Methodology B**: MRPP will contract with USF Senior Research Fellow to review existing data, liaise with NaphCare to identify behavioral health data elements/reports and timeline; identify process for identifying ACEs/trauma in target population **Methodology C:** MRPP will develop plan for data collection/focus groups/key informant interviews for needs assessment **Methology D**: MRPP will execute plan for data collection/focus groups/key informant interviews for needs assessment **Methology E**: MRPP will issue report on needs assessment results
Performance Measure 2: ***Conduct a Sequential Intercept Mapping (SIM) workshop through CJMHSA Tec Center to map key points of intercept, identify best practices, and establish implementation priorities/action steps***

Target: Complete within 90 days of execution of grant agreement
Methodology A: Centerstone to contract with Mark Englehardt **Methodology** B: MRPP to schedule 2-day workshop and identify/invite Manatee Public Safety Planning Council, CJMHSA Planning Council, BHSC, project partner agencies, consumers, family members, and other community stakeholders **Methodology C:** CJMHSA Tec to create intercept map, identify strengths, needs, and priorities for action, utilize results of mapping as foundation for strategic plan development **Methodology D:** MRPP to work with BHSC on formation of workgroups around priorities for action with identified "champions" **Methodology E:** MRPP will work with CJMHSA to identify funding opportunities/resources for identified priorities and plan to leverage resources
Performance Measure 3: ***Establishment of formal partnerships between law enforcement, homeless services, treatment providers, recovery-oriented support services***
Target 1: First meeting of CJMHSA Planning Council and presentation to Manatee BHSC within 30 days of grant award
Target 2: Partnership agreements signed by 3 agencies within 60 days of execution of final grant agreement
Methodology A: MRPP will maintain minutes of meetings that document participation, content, and frequency **Methodology B**: MRPP will arrange expert consultation and education on specific approaches and evidence-based treatment interventions, diversion strategies, recovery-oriented services, impact of ACEs/trauma Methodology C: MRPP will facilitate entry into legally binding, formal partnerships by a minimum of 3 agencies to provide and coordinate services
Performance Measure 4: ***Completion of strategic plan through collaborative process that incorporates SIM recommendations***
Target: Final plan produced within 365 days of execution of final grant agreement in compliance with requirements of Appendix A of the RFA, including, but not limited to plan goals, strategies, milestones, key activities and persons responsible
Methodology A: MRPP will establish and disseminate a work plan and schedule of meetings, work groups and other activities for implementation of strategic plan and disseminate to PSCC, CJMHSA Planning Council, BHSC, and community stakeholders. **Methodology B**: MRPP will submit quarterly reports on strategic plan progress to CJMHSA Planning Council and BHSC **Methodology C**: MRPP will produce comprehensive strategic plan to present to CJMHSA Planning Council for review, input, and approval **Methodology D**: CJMHSA Planning Council Chair will present strategic plan to Public Safety Coordinating Council for final approval and presentation to County Board of Commissioners
Performance Measure 5: ***Implementation of data sharing, collection and reporting methodologies among partners and CJMHSA TAC***
Target: Signed letters of agreement among and between partners within 90 days to share data and information through a shared database

Methodology A: ***MRPP*** will assess community partner(s) capabilities and identify barriers and opportunities **Methodology B:** ***MRPP*** will develop agreement(s) for key partners around data collection and sharing/reporting protocols **Methodology C**: MRPP will identify and encourage adoption of best practices and lessons learned from other CJMHSA grantees and other systems **Methodology D**: MRPP will arrange training on best practices for data sharing for local partners and community stakeholders
Performance Measure 6: (Additional Performance Measure) ***Identification and implementation of data-driven systems for needs assessment, continuous quality improvement and collaborative service planning activities for individuals in correction settings with behavioral health conditions***
Target: Identification of 3 models within 270 days of execution of final agreement
Methodology A: ***MRPP*** will identify programs serving individuals with behavioral health conditions in criminal-justice settings that employ technology to identify and track at-risk inmates **Methodology B**: ***MRPP*** will arrange knowledge-exchange webinars for stakeholders to share best practice technology-driven data collection/sharing/reporting activities to improve behavioral health outcomes in criminal justice involved populations **Methodology C**: ***MRPP*** will identify resources to support implementation of data driven systems for continuous quality improvement and collaborative service planning for target population among and between interested community partners **Methodology C:** ***MRPP*** will work with stakeholders to ensure a solid, sustainable infrastructure for data collection/sharing for on-going needs assessment and service planning for the target population

Additional Performance Measure Alignment

The sixth locally developed performance measure, *Identification and implantation of data-driven systems for needs assessment….*, will provide a much needed tool and infrastructure to support this strategic planning process and for future planning and service expansion and implementation projects.

The ***MRPP Collaborative*** will utilize output and outcome data to measure the project's effectiveness in achieving performance measures indicated above. Data will be collected by the ***MRPP*** Project Manager and be shared with project partners and key stakeholders, the CJMJSA Planning Council, BHSC, and interested community groups for other planning initiatives.

Section 3.8.6.5 Capability and Experience

3.8.6.5.1. Capability, experience & organizational capacity of applicant & participating organizations

Centerstone Florida, the designated applicant on behalf of Manatee County has the capability and experience to meet the RFA objectives including: 1) Experience in establishing diversion programs designed to increase public safety, avert increased criminal justice spending, and improve treatment accessibility and effectiveness for the target population (Centerstone Florida has successfully operated the CJMHSA

Reinvestment Funded SRQ Comprehensive Treatment Court program since 2017); 2) Leadership in creating and facilitating collaborative projects among key stakeholders; and 3) Utilizing evidence-based tools, programs, and models to identify and provide comprehensive treatment and support services for the target population.

Applicant Organizational Capability: Centerstone Florida is a not-for-profit, community-based behavioral health organization with 60+years' experience providing a full array of services for adults with MI, SUD, and/or COD, including individuals in or at risk f entering the criminal justice system (see Selected Centerstone Services chart right). Centerstone Florida, an affiliate of one of the nation's largest non-profit healthcare organizations *(Centerstone of America, Inc.)* operates 6 facilities in the Suncoast region serving 15,000+ individuals annually. The agency maintains a $42million operating budget and employs a culturally diverse staff of over 500 professionals, including therapists, case managers, psychiatrists, social workers, nurses, etc. Centerstone Florida maintains accreditation by the Joint Commission and has received multiple recognitions for programmatic excellence (see Centerstone Recognitions chart right).

Selected Centerstone Services
Mental Health Treatment and Recovery
Inpatient Addiction & Mental Health
Substance Abuse/Addiction Services
24/7 Emergency Addiction Care
Medication Therapy
MAT & Detox
Psychological Testing and Respite
Psychiatric Assessments & Testing
Individual, Group, & Family Counseling
Crisis Services
FACT
24/7 Rape Crisis Center and Hotline
Family Support & Assistance

Centerstone Recognitions
Central Florida Behavioral Health Network Platinum (Optum) and Gold (Wellcare) Provider Awards
Tampa Bay Business Journal's #1 Nonprofit for Crisis Resources, 2013

Experience: Since 2004, Centerstone and its affiliates have successfully administered $170 in federally funded projects (e.g. SAMSHA, DOL) serving similar populations (e.g., adults with mental illness or COD and/or in or at risk of entering the criminal justice system). Centerstone Florida has partnered with drug courts for 15+ years, including the Manatee Drug Court since 2001 and for the Sarasota County Drug Court since 2013 providing SUD treatment, case management, counseling, relapse prevention, and psychiatric evaluations. Centerstone Florida also provides in-jail behavioral health services (eg., psychiatric evaluation, medication management, counseling, evidence-based treatments, and follow-up care) to incarcerated individuals in the Sarasota and Manatee Jails through collaboration and coordination with the Twelfth Judicial Circuit, Armor Correctional Health Services, and the county. (Note: the in-jail services contract in Manatee ended in 12/2018 when the Armor contract with the county ended).

Centerstone Florida was awarded a CJMHAS Reinvestment Implementation Grant in March 2017 for the Sarasota Comprehensive Treatment Court (CTC). Developed by Judge Erika Quartermaine, this post-booking best practice model, CTC served 136 individuals in its first year (March 2017 – March 2018) resulting in outcomes exceeding contract targets, such as an 88% reduction in arrests during enrollment, a 77%

reduction in arrests a year after program completion, 100% placement in stable housing, 97% diversion from state mental health treatment facilities, and reduced mental health symptomatology for 80% of participants. Between 2009 and 2011 Centerstone Florida, in partnership with local drug courts, operated the Sarasota County-funded Adult Jail Diversion Project (AJDP) and provided treatment, counseling, medication management and psychiatric services to individuals with MI, SUD, or COD to divert individuals, reduce recidivism, and increase access to treatment.

Centerstone is an active member on numerous cross-system coordinating behavioral health planning and advisory groups in the Twelfth Judicial Circuit, including the Manatee County Behavioral Health Stakeholders Consortium, Acute Care Committee, Public Safety Planning Committee, Health Care Alliance, Drug-Free Manatee, Suncoast Partnership to End Homeless Continuum of Care Executive Committee, Family Safety Alliance, and new Manasota Workgroup for a Trauma Informed Community.

Additional Partners: Partnering organizations have capability and experience to meet RFA objectives and ***MRPP Collaborative*** commitments (i.e., to conduct a needs assessment, compile a database of services and capacity to serve target population, share project data, facilitate a SIM, identify best practices, serve as linkage/referral sources, participate in a CJMHAS Planning Council, and engage in community education and training). **CJMHSA TAC:** Through a DCF contract, the TAC is an invaluable partner to Reinvestment grantees in assisting them toward fulfillment of project goals, including conducting the SIM as a MRPP contract deliverable. The CJMHAS TAC Director conducted a similar SIM in Sarasota in 2017 for Sarasota County. He has also worked closely with Centerstone Florida as a grantee and is knowledgeable about the community's strengths, barriers and opportunities. **Law Enforcement/Courts:** The **Twelfth Judicial Court** reduces recidivism and increases public safety through a number of specialty courts in Manatee County including its Drug Court. The **Drug Court** collaborates and coordinates with Centerstone Florida to divert SUD offenders to treatment providing judicial oversight, drug testing, case management, and counseling. **Manatee County Sheriff's Office** operates the county jail. It also operates several programs to reduce crime and increase public safety, including its *Leading Inmates to Future Employment (LIFE)* program. In partnership with Manatee Technical Institute (MTI), *LIFE* provides inmates with vocational and technical training opportunities and experience (e.g., carpentry, auto repair, food preparation) to prepare for transition back into the community. **Corrections** staff collaborate with community based treatment providers, faith-based organizations' and employment agencies to offer education and referral to

Additional Partners
• Manatee County Sheriff's Office
• Twelfth Judicial Circuit Court
• State Attorney's Office
• Bradenton Police Department
• Palmetto Police Department
• Suncoast Partnership to End Homelessness
• Florida Department of Health
• NaphCare Correctional Health Services
• Goodwill Industries of Manasota
• Manatee County Community Action Agency
• Health Services Alliance
• The Salvation Army
• CASL

treatment for inmates with SUD via the *Recovery Pod* program. Inmates enrolled in the program are housed in a 50-bed residential unit and attend classes and meetings, including recovery life skills, employment training, parenting, and faith-based classes. **Homeless Assistance**: **Suncoast Partnership to End Homelessness** is a coalition comprised of community leaders, law enforcement, and government officials dedicated to collaborating and coordinating services for homeless individuals in Manatee and Sarasota Counties. **Community Assisted and Supported Living (CASL)** provides housing, living skills training, and medication management for 400+ low-income adults annually with MI, SUD, or COD. **Health & Behavioral Health Providers**: **Florida Department of Health** in Manatee County offers a range of clinical services, disease control and prevention, and community health and wellness programs that aim to empower people of all ages to lead healthy, active lifestyles through health promotion, outreach, advocacy and engagement with community partners. The Department oversees contracts with health, behavioral health and corrections health care service providers. **NaphCare**, the new health in-jail health services provider has the electronic resources and Information Technology operation systems to identify and track inmate health/behavioral health needs and services delivered through on-demand, transparent information and communication. _ **Operation Par**, Inc. is a Florida-based non-profit that offers substance use treatment services and trains other service providers in implementing evidence-based practices. **Suncoast Behavioral Health Center** is a private psychiatric facility in Bradenton, Fl. Services to adults include acute inpatient care, a specialized affective disorder program, and partial hospitalization services. **Community-based Support Organizations: Goodwill Manasota** provides job skills training and employment opportunities to individuals who face barriers to employment (e.g., psychiatric disabilities, history of incarceration and/or chronic unemployment. **Salvation Army** provides group homes, emergency shelters, and social services in Manatee County. Located in Bradenton, Fl., they serve homeless, low income, and at-risk individuals. **First Step Peer 2 Peer** offers recovery coaching to adults with opiod addiction in Manatee County. It trains and connects peer coaches with county residents seeking substance abuse recovery services. **NAMI** is an advocacy and support organization for families with adult children experiencing MI or COD throughout Manatee and Sarasota Counties.

3.6.6.5.2. Availability of Resources:

Centerstone Organizational Capacity: Centerstone's extensive administrative, technological, clinical, and robust research resources ensure organizational capacity to perform all activities and meet grant requirements. The Finance and Accounting Department is experienced in grant contracts, billing, and audit procedures and will maintain all financial records and billing necessary under the grant. Staff with expertise serving criminal justice populations, evidence-based treatment for MI, SUD, and COD treatment and support programs, and other evidence-based practices will serve as resources to the ***MRPP*** Project Manager and CJMHAS Planning Council providing consultation/training whenever needed.

Centerstone's Research Institute (CRI) has a staff of 50 researchers ranging from data collectors to doctoral level social scientists. CRI has significant experience in conducting program evaluations and needs assessments, including over 75 community-based grant program evaluations and needs assessments for federal, state, and county funded projects. CRI needs assessments identify gaps, population/community needs, and assets, including analyses of existing community resources to develop effective solutions. CRI uses secondary data sources such as data from the CDC, state Public Health Departments and/or state mental health data and/or qualitative data from focus groups or in-depth one-one-one interviews.

Partnering Organizations Capacity: Partnering organizations mentioned above have the capacity to collaborate and support the activities essential to achieving ***MRPP*** goals. NaphCare, has provided healthcare services to incarcerated populations at federal, state, and county facilities since 1989. Their corrections-specific electronic operating system and electronic health record is fully customizable and utilizes standard proven architecture that scales with a facility's demands and provides a complete picture of a patient's care. Naphcare's information management system promotes accurate charting documentation and instantly tracks patients' diagnoses, care, and unique needs. Built directly into its system, NaphCare will be able to generate reports on any quickly and easily, providing invaluable information for the needs assessment activities of the MCPP and on-going CJMHAS Planning Council.

Levaraging the resources and expertise of its committed community partners, the CJMHAS TAC, and **Centerstone's** organizational capacity, ***MRPP*** will successfully lead a collaborative, data-driven strategic planning process that results in actionable next steps for the community to divert individuals involved in the criminal justice system who also have mental health and co-occurring substance use conditions.

3.8.6.5.3. *Role of Advocates, Family Members, and Other Partners*

Advocates, consumers, family members, health, behavioral health, and criminal justice community partners essential partners in the development and implementation of a strategic plan for Manatee County to divert individuals with behavioral health conditions from the jails by linking them to community services. Advocates, consumers, family members, providers, law enforcement, courts, local government and social services organizations will collaborate to support ***MRPP Collaborative*** objectives and participate in the needs assessment, SIM, and planning phases of the project. Advocates will help address policy and resource issues that may serve as barriers to diversion of the target population. Consumers and family members will raise awareness among stakeholders about the impact of stigma associated with mental illness and offender population, and how stigma adversely affects successful re-entry in the community. Consumers and family members will also be advocates for inclusion of peer and family best practices in the strategic plan. Leadership from the courts and law enforcement will add their expertise toward ensuring the strategic plan addresses public safety needs and that its recommendations are in compliance with Florida Department of Corrections policy and

state law. Naphcare, a national leader in correctional healthcare will be an invaluable resource to help assess the true need of the target population using its state-of-the-art electronic technology specifically developed for the corrections population.
All above parties and other members of the CJMHAS Planning Council will be expected to participate in the SIM workshop and other grant-related activities offered by the CJMHSA TAC, as well as any professional development activities offered by the ***MHRPP Collaborative***. Advocates, consumers, family members and all stakeholders will be encouraged to assist in advancing ***MRPP Collaborative*** goals by: developing/maintaining high-level relationships with participating systems/entities; deriving methodologies for collecting reporting and sharing data among partners; participating in the development of the strategic plan; supporting the implementation of the formal recommendations contained in the strategic plan; and participating in the performance assessment of the panning actions; and advocating for policies and resources to support system change.

3.8.6.5.4. Key Personnel

Centerstone Florida will retain the services of an experienced Project Manager to coordinate the activities of the ***MRPP Collaborative***. The role of the Project Manager will include serving as the primary point of contact for community agencies, the CJMHHSA TAC, and the CJMHSA Planning Council. This individual will have full responsibility for coordinating all activities of the planning grant, ensuring all contracted deliverables are met, inter-agency communications, and ensuring data collection and data sharing among stakeholders and agencies occur according to developed protocols. Upon notice of funding, Centerstone will engage the Project Manager through a 12-month contract coinciding with the planning grant timeframe. The consultant identified for the role is Giselle Stolper, a local behavioral health consultant. Ms. Stolper has over 30 years' experience in operating behavioral health service programs in large, urban areas with diverse populations and complex health and human service systems. She has a deep working knowledge of the behavioral health system on the Suncoast, having worked as a consultant for Centerstone Florida since moving to the Manatee-Sarasota area two years ago. She is an active participant on numerous behavioral health stakeholder committees and taskforces, including the recent workgroup established by the Sarasota Board of County Commissioners to reduce jail over-crowding. Since 2017, she has collaborated with the CJMHAS TAC in her advisory role to Centerstone's CJMHAS Reinvestment Grant for the Sarasota Comprehensive Treatment Court. In that role, she is a familiar face to Court Administration, Public Defender, State Attorney, and other court and law enforcement personnel throughout the Twelfth Circuit. Ms. Stolper is a full-time resident of Manatee County and an active participant in local government meetings, including those with county commissioners, local law enforcement, and county/city public officials from the Bradenton/Palmetto area.
The ***MRPP Collaborative*** will fall under the purview of Ms. Jane Roseboro, Vice President of Strategic Alliances at Centerstone Florida. Ms. Roseboro supervises the Sarasota Comprehensive Treatment Court, Centerstone in-jail mental health services in Sarasota, specialty court programs in Manatee and Sarasota Counties (e.g. Drug Court,

DUI Court), and 5 FACT Teams (including the Manatee County FACT). Ms. Roseboro holds a Bachelor's in Psychology and a Master's in Sociology with dual concentrations in addiction and family.

Section 3.8.6.6 Evaluation and Sustainability

3.8.6.6.1 Evaluation

MRPP effectiveness will be assessed based upon achievement of performance measure outcomes, along with qualitative measures of impact gathered from participating parties in the needs assessment, agency coordination, and strategic planning processes. The following methodology will be utilized to assess effectiveness of each project outcome.

Evaluation Measures		
Performance Outcomes	Assessment Methodology	Responsible Individual
Needs Assessment	Survey instrument developed Quality will be assessed through participating provider agency feedback on data elements and through completion of survey instrument Accuracy will be assessed through comparison of identified need to established measures for similar populations (e.g., national prevalence) and to other relevant data sets, and provider agency anecdotal feedback Report issued to CJMHSA Planning Council members, BHSC, key stakeholders, community partners on needs assessment results	Project Manager Centerstone Research Institute (CRI) Agency partners
Agency Coordination and Collaboration	CJMHSA Planning Council Members, and agency partners will quarterly qualitative feedback on the process and results of collaborative efforts Tangible evidence of coordination and collaboration will be used, including executed agreements, meeting minutes,	Project Manager Centerstone Florida community staff SIM Workgroup Champions BSHC Chair

	memos, monthly reports, partnership/joint venture efforts, and data sharing protocol established through planning process	CJMHSA Planning Council members Agency partners
Established Methodologies for Data Sharing and Reporting	Formal agreements will be developed to support inter-agency data sharing, collaboration, and reporting Agency service profiles will be developed and inventoried in a database for sharing CJMHSA Planning Council and community partners will provide feedback on process to develop agreements	Project Manager CJMHSA Planning Council members Agency partners
Stakeholder Engagement	CJMHSA Planning Council members and community partners will be asked to provide qualitative feedback on a quarterly basis regarding planning project activities, their perceptions of engagement in the process, and recommendations for improvement (if needed) Agency partners, Planning Council members and key community stakeholders will participate in training, seminars, webinars and other knowledge development activities offered by the MRPP Agency partners will participate in community presentations on the MRPP, focus groups, and other meetings related to the project Community partners will be champions for action priorities and workgroups	Project Manager Agency partners CHMHSA Planning Council members BHSC Chair Centerstone Florida community staff

SIM Workshop for Mapping Intercepts	CJMHSA Planning Council members, agency partners, community stakeholders will participate in SIM workshop conducted by CJMHSA TAC Map points of interception in criminal justice system for individuals with MH, SA, COD needs Gaps analysis of behavioral health system capacity and processes for timely identification, screening, assessment and referral of target population Identify evidence-based practices for potential replication/implementation in Manatee community and funding opportunities for service expansion Identify barriers (training, financial resources, credentialed staff, structural/systemic obstacles) preventing organizations from implementing best practices and workarounds Synthesize information from SIM and issue final report including action plan/priorities Report on SIM priority progress at BHSC meetings	Project Manager CJMHSA Planning Council members BHSC Chair CJMHSA TAC Centerstone Florida community staff
Strategic Plan Development	CJMHSA Planning Council members partner agencies, and key stakeholders will be invited to evaluate progress of planning activities on quarterly basis, provide on-going qualitative feedback on project, including	Project Manager CJMHSA Planning Council members BSHC Consortium

	perceptions of engagement and suggested next steps CJMHSA Planning Council members, agency partners, key stakeholders, BHSC members will be briefed no less than quarterly on progress of MRPP. Draft strategic plan based on information collected and encompassing all required components will be produced and presented to the CJMHSA Planning Council for review, editing and formal adoption by end of project year CJMHSA Reinvestment Service Implementation application for project identified in strategic plan will be submitted in next funding cycle	SIM Priority Workgroup Champions

3.8.5.6.2. *Sustainability*

Manatee County stakeholders are engaged and motivated to address the growing concerns to public safety, escalating criminal justice costs, and erosion of human potential and productivity of individuals whose undetected/untreated behavioral health conditions keep them cycling in and out of courts and jails. The County Commissioners, Public Safety Coordinating Council/CJMHSA Planning Council and community stakeholders are confident that the MRPP Collaborative will be the catalyst to tackle these problems through its proposed collaborative strategic planning process. It is the expressed intent of the CJMHSA Planning Council and all those involved to build on the momentum created by the ***MRPP Collaborative*** and assemble the resources necessary to move to the next step: submission of an application for a CJMHSA Reinvestment Implementation and Expansion Grant following conclusion of this planning grant period. The ultimate goal of this effort is to launch a more effective county-wide support and treatment network for criminal justice system involved individuals with behavioral health conditions to successfully engage and divert them from incarceration to treatment in the community.

With involvement of the Coordinating Council, Centerstone, criminal justice system entities, and other participating organizations, ***MRPP*** will establish a sustainability plan, including identification of government grants (federal, state, local) and private foundation resources that can be used to develop new and enhanced service capacity

using evidence-based interventions/models. This process has already begun and will continue in and throughout the ***MRPP*** planning grant.

Preservation of new service models will be supported by infrastructure development beginning at project startup and continuing beyond the grant period (See Performance measure 6, Methodology C). ***MRPP Collaborative*** planning goals, objectives, and activities/tasks emphasize processes, system development, and evidence-based/best-practice training for stakeholders to ensure a solid, sustainable foundation for the project, and the continued planning and advancement system-wide of diversion/treatment capacity for the target population to resolve significant gaps in service coordination.

The Manatee Behavioral Health Stakeholders Consortium (BHSC) will provide the structure and momentum to sustain progress/results/recommendations contained in the SIM final report, and the accomplishments of the ***MRPP Collaborative*** beyond the life of the grant. Workgroups will continue to meet until the action steps established for their priority area(s) have been met and will report-out at each BHSC meeting. The BHSC Chair will ensure that active stakeholder engagement continues beyond the ***MRPP's*** duration. The BHSC will continue to communicate and advocate with current partners, and to potential future supporters, for implementation of the recommended actions contained in the strategic plan, and for on-going systemic change to meet the needs of the target population.

In addition, legally binding agreements established by stakeholders during the course of the grant period will continue to support on-going collaborative efforts, and will form the impetus for additional partnerships identified as critical to achieve ***MRPP Collaborative*** goals.

Collaborations will be preserved/enhanced via collective stakeholder engagement and implementation of the ***MRPP Collaborative*** sustainability plan. This plan will be the physical manifestation of the project's results and continue to garner sustained project support throughout the community.

Centerstone, Manatee County's lead agency/designated partner for the CHMHSA Reinvestment Grant, has an array of clinical, technical, research, and administrative resources that it will make available for project sustainability. A skilled accounting department, robust IT and data analytics resources, and the expertise of Centerstone's Research Institute will assist in supporting new infrastructure and information reporting systems that emerge from the activities of the ***MRPP***.

Funding for the ***MRPP Collaborative*** will be leveraged to ensure new services and infrastructure recommendations contained in the strategic plan are sufficiently resourced, and will form a strong case for securing continued funds for service growth in the future and long-term sustainability.

TAB SEVEN

Project Timeline

CENTERSTONE

Tab 7: Project Timeline

Section 3.8.7 Project Timeline

The ***MRPP Collaborative*** Timeline (see below) depicts a realistic and detailed timeline for the 1-year planning grant project, and indicates goals, objectives, key activities, milestones, benchmarks and responsible partners (See also Goals, Objectives, Milestones & Key Activities, Section 3.8.6.2.1) as well as anticipated start and completion dates for each milestone, benchmark, and goal.

Tab 7: Project Timeline		
Month After Funding	**Activity**	**Responsible Party**
Within 1 Month	Hire Project Manager Schedule meetings with CJMHSA Planning Council members & key stakeholders	Centerstone VP of Community Alignment Project Manager
Within 3 Months End of 1st Quarter	Convene CJMHSA Planning Council meeting Develop survey instrument for agency partners & begin needs assessment process to delineate target population Distribute survey instrument to agency partners Provide participating agency partners & stakeholders with required tracking criteria and assess their capacity needs Establish an information system to track data Conduct key interviews and focus groups Collect all data for needs assessment to delineate target population and inventory current service capacity Issue summary of findings from needs assessment Conduct SIM Workshop	CJMHSA Planning Council Chair Project Manager Centerstone Research Institute (CRI) CJMHSA TAC Agency partners

	Issue SIM Report to CJMHSA Planning Council & agency partners Form Workgroups on each SIM priority area, review tasks & identify Workgroup Champions Initiate Workgroup meetings Issue 1st quarterly report Establish 3 legally binding partnership agreements between (within 2 months/60 days)	
Within 6 Months End of 2nd Quarter	CJMHSA Planning Council Meetings 2 Track Priority Area Workgroup tasks/activities toward achieving action-plan goals Identify evidence based MH/SU treatment interventions & best practices Identify interception point(s) & select Model for diversion to reduce interactions with the criminal justice system using evidence-based intervention	Project Manager CJMHSA Planning Council Chair SIM Workgroup Champions
Within 9 Months End of 3rd Quarter	on evidence-based model CJMHSA Planning Council Meeting 3 Develop & disseminate concept paper to reduce interaction of target population with the criminal justice system Identify funding sources to support implementation of selected evidence-based service model Identify best practice models for data-driven system for on-going needs assessment, continuous quality improvement and collaborative service planning or individuals in correction settings with behavioral health conditions	Project Manager CJMHSA Planning Council Chair BHSC Chair Agency partners CJMHSA TAC Centerstone Data Analytics Department

Within 12 Months End of Planning Grant	Planning Council Meeting 4 Identify agency(s) to pilot model service implementation & potential funders Prepare proposal to submit to potential funders for pilot Complete draft strategic plan Seek CJMHSA Planning Council & partner agency feedback on strategic plan make adjustments as needed Prepare and submit final strategic plan based on ***MRPP*** findings and recommendations Develop a sustainability plan to ensure continuation of ***MRPP*** achievements Solicit stakeholder and agency partner input on project's efficiency/efficacy in meeting project goals Prepare and submit final project reports to oversight bodies	Project Manager CJMHSA Planning Council Chair CJMHSA TAC BHSC Chair Agency partners

TAB EIGHT

Letters of Commitment

CENTERSTONE

Neighborhood Services Dept
Health Care Services
1112 Manatee Avenue West
Bradenton, FL 34205
Phone: (941) 749-3030
www.mymanatee.org

January 31, 2019

Re: Letter of Commitment between Centerstone and Manatee County Government's Health Care Services of the Neighborhood Services Department

This document serves as a Letter of Commitment between the Neighborhood Services Department's Health Care Services of Manatee County Government and Centerstone of Florida, Inc., the designated applicant for the CJMHSA Reinvestment Planning Grant on behalf of Manatee County. The Neighborhood Services Department is dedicated to improving our community through programs that assist residents at all stages of life. Neighborhood Services supports initiatives to promote community-wide health and wellness activities that lead to improved health outcomes, including the management and oversight of vendor performance to provide quality physical and behavioral health services within the Manatee County Jail. Neighborhood Services is concerned about the unmet mental health and substance use treatment needs among adults (ages 18+) who are in, or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate community-based treatment services.

Manatee County Neighborhood Services is pleased to support this much needed and timely needs assessment and planning initiative. We agree to collaborate in the development of a Strategic Plan to implement systemic change for the identification, intervention, and treatment of adults who have a mental illness, substance use disorder, or co-occurring mental health and substance use disorders, and who interface with Manatee County's criminal justice systems. This agreement sets forth the intent of Manatee County Neighborhood Services to engage in a strategic planning process that will include a needs assessment, identification of points of intercept between this population and the criminal justice system using the Sequential Intercept Mapping Model (SIM), and recommendations to enhance/improve services throughout the County that divert individuals from judicial involvement to community-based service programs.

We, the undersigned, agree to participate in the CJMHSA Reinvestment Strategic Planning Project for Manatee County in *one or more* of the following areas:

- Participate, as appropriate, in activities to foster and increase collaboration among key stakeholders in developing a Strategic Plan, e.g., needs assessment, SIM, interviews with consultant(s), planning committee meetings;
- Participate in quarterly evaluations of the proposed planning activities to determine if Grant milestones are being met;
- Provide subject matter expertise to planning group participants to increase their understanding of the issues affecting the population;

PRISCILLA TRACE *District 1* | REGGIE BELLAMY *District 2* | STEPHEN JONSSON *District 3* | MISTY SERVIA *District 4* | VANESSA BAUGH *District 5* | CAROL WHITMORE *At Large* | BETSY BENAC *At Large*

- Participate, as appropriate, in community outreach education, and/or training activities provided by Centerstone, or others through for purposes of developing the Strategic Plan;
- Participate, as appropriate, in data sharing and information gathering efforts to support planning activities; and
- Participate in planning council/committee meeting to provide input and recommendations on program implementation based Strategic Plan, as appropriate.

This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant (Grant # RFA112818HSET1)

January 31, 2019

Joshua T. Barnett, MHS, MA, CPRP, ICCDP-Diplomate

Health Care Services Manager

Manatee County Government

USF UNIVERSITY OF SOUTH FLORIDA

January 22, 2019

Melissa Larkin-Skinner, MA, MBA, LMHC
Centerstone of Florida, Inc.
391 6th Ave W.
Bradenton, Fl. 34205

Dear Melissa,

It is my understanding that Centerstone of Florida, with the support of Manatee County Board of County of Commissioners and the Public Safety Coordinating Council, is pursuing a State of Florida Criminal Justice, Mental Health and Substance Abuse (CJMHSA) Reinvestment Grant released by the Florida Department of Children and Families Office of Substance Abuse and Mental Health (Grant # RFA112818HSET1).

Upon award, our USF CJMHSA Technical Assistance Center is prepared to conduct a Sequential Intercept Mapping (SIM) process and report for Centerstone and Manatee County. In brief, "SIM" is a best practice in cross-systems planning among the criminal justice system and the substance and mental health system. The SIM will build consensus, establish program priorities, identify evidenced-based treatment models and establish a concrete strategic action plan for persons with mental illnesses and substance use disorders involved in the local criminal justice system in Manatee County.

We are committed to working with Centerstone and all of the Manatee County stakeholders in developing your strategic plan . You can contact me at mengelhardt@usf.edu or call 813-974-0769.

Sincerely,

Mark A. Engelhardt

Mark A. Engelhardt, MS, MSW, ACSW
Director – USF CJMHSA Technical Assistance Center
www.floridatac.org

RICK WELLS, Sheriff
MANATEE COUNTY, FLORIDA

600 301 Blvd. West
Suite 202
Bradenton, FL 34205
Telephone (941) 747-3011

Fax Number
Executive (941) 749-5401
www.manateesheriff.com

Letter of Commitment between Centerstone and Criminal Justice System

This document serves as a Letter of Commitment between key community stakeholders and Centerstone, the designated applicant on behalf of Manatee County. Nami is concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment services. Nami Sarasota and Nami Manatee are in the process of merging, which will be finalized over the next few months.

Nami Sarasota, the local affiliate covering Manatee County, agrees to collaborate to develop a Strategic Plan to initiate systemic change for the identification, intervention, and treatment of adults who have a mental illness, substance use disorder, or co-occurring mental health and substance use disorders, and who interface with Manatee County's criminal justice systems. This agreement sets forth the intent of community stakeholders to engage in a collaborative Planning Initiative. This initiative will include a needs assessment, identification of points of intercept between this population and the criminal justice system using the Sequential Intercept Mapping Model (SIM), and recommendations to enhance/improve services throughout the County that divert individuals from judicial involvement to community-based service programs.

We, the undersigned, agree to participate in the Planning Initiative in *one or more* of the following areas:

- Participate, as appropriate, in activities to foster and increase collaboration among key stakeholders in developing a Strategic Plan, e.g., needs assessment, SIM, interviews with consultant(s), planning committee meetings;
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- Participate in planning council/committee meeting to provide input and recommendations on program implementation based Strategic Plan, as appropriate.

This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled Criminal Justice, Mental Health, and Substance Abuse Reinvestment

Rick R. Wells — January 31, 2019

RICK WELLS, SHERIFF
MANATEE COUNTY, FLORIDA

DATE

An Accredited Agency

60

Letter of Commitment between Centerstone and Criminal Justice System

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This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant (Grant # RFA112818HSET1)

01/20/2019

Signature | Date

Regional Substance Abuse and Mental Health Director | Dept. of Children and Families

Title | Agency

STATE OF FLORIDA
TWELFTH JUDICIAL CIRCUIT
WALT SMITH, COURT ADMINISTRATOR

Letter of Commitment between Centerstone and Criminal Justice System

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W J Smith — 1-16-19

Signature — Date

Court Administrator — 12th Judicial Circuit Court

Title — Agency

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Heather Doyle 1/24/19

Signature Date

CHIEF ASSISTANT STATE ATTORNEY - SAO

Title Agency

Public Defender
Twelfth Judicial Circuit
State of Florida
1051 Manatee Avenue West, Seventh Floor
Bradenton, Florida 34205
(941) 747-6436

LARRY L. EGER
Public Defender

FAX (941) 746-8472

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Signature 1/18/19 Date

Public Defender 12th Circuit

Title Agency

FLORIDA
DEPARTMENT of
CORRECTIONS

Governor
RON DESANTIS
Secretary
MARK S. INCH

501 South Calhoun Street, Tallahassee, FL 32399-2500

www.dc.state.fl.us

Letter of Commitment between Centerstone and Criminal Justice System

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Stephanie DiTroia — 1-15-19

Signature — Date

Circuit Administrator — FDC

Title — Agency

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Signature

1/24/19
Date

Probation Services Manager
Title

Manatee Co. Probation Div.
Agency

NaphCare
Your independent health care choice

Letter of Commitment between Centerstone and Criminal Justice System

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Jim Moore	1/16/2019
Signature	Date
COO - Jails	NaphCare, Inc.
Title	Agency

2090 Columbiana Road, Suite 4000
Birmingham AL 35216
205-536-8400

Department of Public Safety
2101 47th Terr East
Bradenton, FL 34203
Phone: (941) 749-3500
www.mymanatee.org

Letter of Commitment between Centerstone and Criminal Justice System

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James Crutchfield — JAN 18 2019

Signature — Date

James Crutchfield, Chief, Community Paramedicine — Manatee County Department of Public Safety

Title — Agency

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This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled *Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant* (Grant # RFA112818HSET1)

Signature _____ Date 1-15-19

Title Chief Operating Officer Agency Suncoast Partnership to End Homelessness, Inc. (CoC)

NAMI Sarasota County
National Alliance on Mental Illness

January 22, 2019

Letter of Commitment between Centerstone and Criminal Justice System

This document serves as a Letter of Commitment between key community stakeholders and Centerstone, the designated applicant on behalf of Manatee County. The National Alliance on Mental Illness (NAMI) Sarasota County is concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment and support services. NAMI Manatee is in the process of merging with NAMI Sarasota and this process should be completed in the coming months.

NAMI Sarasota County, the local affiliate covering Manatee County, agrees to collaborate to develop a Strategic Plan to initiate systemic change for the identification, intervention, and treatment of adults who have a mental illness, substance use disorder, or co-occurring mental health and substance use disorders, and who interface with Manatee County's criminal justice systems. This agreement sets forth the intent of community stakeholders to engage in a collaborative Planning Initiative that will include a needs assessment, identification of points of intercept between this population and the criminal justice system using the Sequential Intercept Mapping Model (SIM), and recommendations to enhance/improve services throughout the County that divert individuals from judicial involvement to community-based service programs.

NAMI Sarasota County agrees to participate in the Planning Initiative in *one or more* of the following areas:

- Participate, as appropriate, in activities to foster and increase collaboration among key stakeholders in developing a Strategic Plan, e.g., needs assessment, SIM, interviews with consultant(s), planning committee meetings;
- Participate in quarterly evaluations of the proposed planning activities to determine if Grant milestones are being met;
- Provide subject matter expertise to planning group participants to increase their understanding of the issues affecting the population;

- Participate, as appropriate, in community outreach education, and/or training activities provided by Centerstone, or others through for purposes of developing the Strategic Plan;
- Participate, as appropriate, in data sharing and information gathering efforts to support planning activities; and
- Participate in planning council/committee meeting to provide input and recommendations on program implementation based Strategic Plan, as appropriate.

This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant (Grant # RFA112818HSET1)

	1/23/19
Signature	Date
Executive Director	NAMI Sarasota Co.
Title	Agency

Goodwill MANASOTA

Letter of Commitment between Centerstone and Criminal Justice System

This document serves as a Letter of Commitment between key community stakeholders and Centerstone, the designated applicant on behalf of Manatee County. We, the stakeholders, are concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment services.

We, the community stakeholders, will collaborate to develop a Strategic Plan to initiate systemic change for the identification, intervention, and treatment of adults who have a mental illness, substance use disorder, or co-occurring mental health and substance use disorders, and who interface with Manatee County's criminal justice systems. This agreement sets forth the intent of community stakeholders to engage in a collaborative Planning Initiative. This initiative will include a needs assessment, identification of points of intercept between this population and the criminal justice system using the Sequential Intercept Mapping Model (SIM), and recommendations to enhance/improve services throughout the County that divert individuals from judicial involvement to community-based service programs.

We, the undersigned, agree to participate in the Planning Initiative in *one or more* of the following areas:

- Participate, as appropriate, in activities to foster and increase collaboration among key stakeholders in developing a Strategic Plan, e.g., needs assessment, SIM, interviews with consultant(s), planning committee meetings;
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- Participate in planning council/committee meeting to provide input and recommendations on program implementation based Strategic Plan, as appropriate.

This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled *Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant* (Grant # RFA112818HSET1)

Signature _____ Date 1/15/19

Vice President, Mission SVCS — Goodwill- Manasota

Title — Agency

Letter of Commitment between Centerstone and Criminal Justice System

This document serves as a Letter of Commitment between Community Assisted and Supported Living (CASL) and Centerstone, the designated applicant on behalf of Manatee County. We, CASL, are concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment services.

We, CASL, will collaborate to develop a Strategic Plan to initiate systemic change for the identification, intervention, and treatment of adults who have a mental illness, substance use disorder, or co-occurring mental health and substance use disorders, and who interface with Manatee County's criminal justice systems. This agreement sets forth the intent of community stakeholders to engage in a collaborative Planning Initiative. This initiative will include a needs assessment, identification of points of intercept between this population and the criminal justice system using the Sequential Intercept Mapping Model (SIM), and recommendations to enhance/improve services throughout the County that divert individuals from judicial involvement to community-based service programs.

We, the undersigned, agree to participate in the Planning Initiative in *one or more* of the following areas:

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This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled *Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant* (Grant # RFA112818HSET1)

	01/21/2019
Signature (J. Scott Eller)	Date
CEO	Community Assisted and Supported Living, Inc.
Title	Agency

First Step
Addiction Recovery Programs

Letter of Commitment between Centerstone and Criminal Justice System

This document serves as a Letter of Commitment between key community stakeholders and Centerstone, the designated applicant on behalf of Manatee County. We, the stakeholders, are concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment services.

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This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled *Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant* (Grant # RFA112818HSET1)

J. B. as C.E.O. — Jan. 31, 2019

Signature — Date

President/C.E.O. — First Step of Sarasota, Inc.

Title — Agency

Administrative Offices • 4579 Northgate Court • Sarasota, FL 34234
Phone 941.366.5333 • Fax 941.953.4673 • www.fsos.org

CHILDREN & FAMILIES
A CARF-Accredited Organization

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Behavioral Health & Wellness
"Create the Life You Want"

Administrative Offices
6655 66th Street North
Pinellas Park, FL 33781
Ph: 727-545-7564
Fax: 727-545-7584
www.operationpar.org

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Letter of Commitment between Centerstone and Operation PAR, Inc.

This document serves as a Letter of Commitment between key community stakeholders and Centerstone, the designated applicant on behalf of Manatee County. We, the stakeholders, are concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment services.

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This agreement is contingent upon award of a one-year grant from the Florida Department of Children and Families, Office of Substance Abuse and Mental Health, titled *Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant* (Grant # RFA112818HSET1)

Diane L Clark — 1-22-2019

Signature — Date

CEO — Operation PAR, Inc.

Title — Agency

Manatee Parenting Time

5191 26th St. W., Unit A
Bradenton, FL 34207
(888) 698-4914
leslie@manateeparentingtime.net

Letter of Commitment between Centerstone and Criminal Justice System

This document serves as a Letter of Commitment between key community stakeholders and Centerstone, the designated applicant on behalf of Manatee County. We, the stakeholders, are concerned about unmet mental health and substance use treatment needs among adults (ages 18+) who are in or at risk of entering the criminal justice system. We are committed to improving individual outcomes, promoting public safety, averting increased spending on criminal justice systems, and improving the accessibility to appropriate treatment services.

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Leslie Lowell — 1-18-2019

Signature — Date

Director — Manatee Juvenile Justice

Title — Agency