

Implementation Grant Conditional Awards

Applicant Central Florida Cares Health System, Inc.
 Grant Lead Admiral Henderson
 Regional SAMH Anne Sutherland
 Forensic Liason Asta Trinh Erica Goldstein

Criteria	SubCriteria	Major required elements	Region	Central Brevard	
1: Statement of the problem	1-1	extent of the problem		77.5%	Willing to waive
1: Statement of the problem	1-2	geographic environment socioeconomic factors		77.5%	Willing to waive
1: Statement of the problem	1-3	analysis of the population, screening and assessment process		77.5%	Willing to waive
1: Statement of the problem	1-4	analysis of the population, % admitted with mental illness, substance use disorder, or co-occurring disorders		70.0%	Willing to waive
1: Statement of the problem	1-5	analysis of the population, contributing factors that affect population trends		82.5%	OK
1: Statement of the problem	1-6	analysis of the population, data and descriptive narrative, specific at-risk of entering or re-entering factors		85.0%	OK
1: Statement of the problem	1-7	reasonable projected number to be served.		72.5%	Willing to waive
1: Statement of the problem	1-8	needs are consistent with the Strategic Plan.		82.5%	OK
1: Statement of the problem	Subtotal	SUB TOTAL		78.1%	
2: Project Design and Implementation	2A-1	compliance with s. 394.657(2)(a), clearly identifies role of each member		91.7%	OK
2: Project Design and Implementation	2A-2	Planning council activity, frequency of meetings, previous 12 months and future		83.3%	OK
2: Project Design and Implementation	Subtotal	SUB TOTAL		87.5%	
2: Project Design and Implementation	2B-1	goals, strategies, milestones and key activities, at least one additional objective		80.0%	OK
2: Project Design and Implementation	2B-2	key stakeholder responsible for each task and proposed completion date		80.0%	OK
2: Project Design and Implementation	2B-3	addressing participation of the planning council or committee. communication amongst		73.3%	Willing to waive
2: Project Design and Implementation	2B-4	agencies, frequency of planned meetings, and the decision-making process		71.3%	Willing to waive
2: Project Design and Implementation	2B-5	addressing screening , validated needs-based assessments, criteria and tool(s) specific to the Target Population		47.5%	Must Address
2: Project Design and Implementation	2B-6	care coordination to increase access to treatment support services and ancillary social services		78.8%	Willing to waive
2: Project Design and Implementation	2B-7	addressing law enforcement assessment of intercept points, capacity, project diversion initiatives.		80.0%	OK
2: Project Design and Implementation	2B-8	implementation, sequential Intercept Mapping, update for proposed Target Population, challenges or barriers		76.7%	Willing to waive
2: Project Design and Implementation	Subtotal	SUB TOTAL		72.6%	
2: Project Design and Implementation	2C-1	services and supervision for diversion from arrest, prosecution, or incarceration to treatment and support services.		86.3%	OK

The target population is any Adult over 24 years old residing or located within the Melbourne Police Department jurisdiction experiencing a mental health crisis or co-occurring with substance use disorder. The process for the Co-Responder Model is as follows: A 911 call is received at MPD. While law enforcement (LE) is responding the call is assessment using an initial questionnaire (unless the location and person is known for mental health and substance use disorder) for the Mobile Crisis Response Team (MRT). Upon determination of MRT need the clinical team is deployed. Once LE secures the scene the MRT begins de-escalating techniques and conducts assessment for need. LE is released from scene. MRT connects the person to services, medication management (if necessary), case management services, and 24 hour follow-up to ensure person is stabilized.

2: Project Design and Implementation	2C-2	interventions addressing the objectives for the Target Population and goals of the Strategic Plan.	85.0%	OK	
2: Project Design and Implementation	Subtotal	SUB TOTAL	85.7%		
3: Performance Measures	3-1	monitoring activities, process and standards for data collection, analysis, distribution and quality assurance.	70.0%	Need to expand	Per our conversation, waiving and will addressed with performance measures
3: Performance Measures	3-2	targets and methodologies addressing the performance measures	70.0%	Need to expand	Per our conversation, waiving and will addressed with performance measures
3: Performance Measures	3-3	at least one additional performance measure unique to the application, proposed targets and methodologies.	60.0%	Must Address	Increase by 25% each year the number of persons diverted as result of mobile crisis involvement from Y1-Y2-Y3
3: Performance Measures	Subtotal	SUB TOTAL	66.7%		
4: Capability and Experience	4-1	capabilities and experience of Applicant and organizations, including law enforcement agencies	85.0%	OK	
4: Capability and Experience	4-2	capacity to implement the proposed project.	85.0%	OK	
4: Capability and Experience	4-3	role of advocates, family members, responsible partners, and other stakeholders	70.0%	Need to expand	Provided the Adult participating in the program agrees, the clinical team will engage with family members and natural support system. Advocates (Peers) maybe be engaged as necessary to ensure the Adult participant is successful in recovery journey. Other stakeholders will be accessed as necessary to support the identified needs of the participant. The Adult will be connected to case management.
4: Capability and Experience	4-4	proposed staffing, key personnel, and subcontractors , role of each, level of effort and qualifications.	75.0%	Need to expand	Can this be waived? According to the scores CFCHS scored 75%. If not, per our discussion this next paragraph outlines the process: The process for the Co-Responder Model is as follows: A 911 call is received at MPD. While law enforcement (LE) is responding the call is assessment using an initial questionnaire (unless the location and person is known for mental health and substance use disorder) for the Mobile Crisis Response Team (MRT). Upon determination of MRT need the clinical team is deployed. Once LE secures the scene the MRT begins de-escalating techniques and conducts assessment for need. LE is released from scene. MRT connects the person to services, medication management (if necessary), case management services, and 24 hour follow-up to ensure person is stabilized.
4: Capability and Experience	4-5	responsibilities and process to fill staff and select subcontractors.	80.0%	OK	
4: Capability and Experience	Subtotal	SUB TOTAL	79.0%		
5: Evaluation and Sustainability	5A-1	how effectiveness will be validated, including assessments of outcomes.	70.0%	Need to expand	100% of persons contacted as a result of crisis response will receive an on-site assessment
5: Evaluation and Sustainability	5A-2	process for defining and measuring variables like stakeholder support and service coordination	60.0%	Must Address	75% of persons contacted as a result of crisis response will be connected to community services as indicated by the assessment
5: Evaluation and Sustainability	5A-3	process for measuring project effectiveness in promoting public safety, reduction of recidivism and access to services and supports.	60.0%	Must Address	75% of persons contacted as a result of crisis response will be diverted from Jail; or, 75% of persons contacted as a result of crisis response will not be arrested while participating in the program
5: Evaluation and Sustainability	5A-4	process for measuring effectiveness in reducing expenditures, including a methodology to measure corresponding savings or averted costs.	58.3%	Must Address	75% of persons contacted as a result of crisis response will be diverted from Jail, Emergency Departments and Crisis Stabilization Unit. Return On Investment (ROI)analysis will be conducted to determine costs savings.
5: Evaluation and Sustainability	5A-5	how initiative will reduce the number of individuals committed to a state mental health treatment facility.	60.0%	Must Address	75% of persons contacted as a result of crisis response will be diverted from state mental health facility.
5: Evaluation and Sustainability	Subtotal	SUB TOTAL	62.1%		
5: Evaluation and Sustainability	5B-1	strategies to preserve and enhance the services, systems and collaborations	75.0%	Need to expand	Can this be waived? According to the scores CFCHS scored 75%.
5: Evaluation and Sustainability	5B-2	collaborative partnerships and funding long-term support and sustain the project	68.3%	Must Address	The Brevard Planning Council will explore opportunities to leverage existing funding to sustain the project. This includes, county, city, hospital, MPD, and BOCC (stakeholders). CFCHS will present to stakeholders a cost benefit/return on investment (ROI) analysis and request funding to sustain the project to the stakeholders. CFCHS and Planning Council will seek state and national funding opportunities.
5: Evaluation and Sustainability	Subtotal	SUB TOTAL	71.7%		Per our conversation, please remember that CFCHS is seeking an evaluator (will be in place prior to contract execution), as the listed evaluator is no longer available. CFCHS' will provide new evaluator qualification upon identification.

5: Evaluation and Sustainability	5C-1	goals, objectives, key activities, milestones, start dates, completion dates, responsible partners	88.3%	OK
5: Evaluation and Sustainability	5C-2	timeline supporting the Strategic Plan and project goals	81.7%	OK
5: Evaluation and Sustainability	Subtotal	SUB TOTAL	85.0%	
Total	Total	TOTAL PROGRAMMATIC SCORE	74.5%	

No addenda Needed	Subtotal Level = or > 78%	5
Regional Review Needed	Subtotal Level # requiring regional review	4
No addenda Needed	Major Elements Level = or > 80%	22
		59%
Regional Addenda Discretionary	Major Elements Level between 70% and 79.9%	8
		22%
Addenda Required	Major Elements Review < 70%	7
		19%