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Appendix A: Reinvestment Gr

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EFFECT OF THE GRANT PROGRAM ON THE GROWTH AND EXPENDITURES OF THE JAIL, JUVENILE DETENTION CENTER, AND PRISON.

The impact on the growth and expenditures of jails, detention centers, and prisons reported by the grantees is described as cost avoidance through a reduction in the number of individuals detained in county jails and increased access to services rather than in specific dollar amounts of documented savings. Overall, grantees report program participants received increased services in the communities rather than in jails and detention centers and, for those individuals detained in jails, the length of stay is shortened as a result of these grant-funded programs. Grantees' description of the positive impact their programs are having on the jail or detention population through a reduction in arrests, shorter jail stays, increased access to treatment, and increased diversion efforts are discussed in the grantees' program profiles.

E

Number Served – Program Lifetime

Implementation/Expansion Grantees	Number Served Program Lifetime	CIT Training Program Lifetime	MHFA Training Program Lifetime
Centerstone of Florida (Sarasota County)	107	135	45
Collier County BOCC	126	109	-
Guidance/Care Center (Monroe County)	79	-	-
Hillsborough County BOCC (LHZ49)	50	-	-
Hillsborough County BOCC (LHZ69)	24	-	-
Kids Hope Alliance (Duval County/City of Jacksonville)	664	-	86
Lee County BOCC	986	131	-
LifeStream Behavioral Center (Lake County)	82		

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HOW THE LOCAL MATCHING FUNDS PROVIDED BY THE COUNTIES LEVERAGED ADDITIONAL FUNDING TO FURTHER THE GOALS OF THE GRANT/INCENTIVE PROGRAM.

PLANNING GRANTS

This section of the report provides profiles of the eight one-year planning grants.

BAYCARE BEHAVIORAL HEALTH (PASCO COUNTY)

BayCare's planning grant for Pasco County began February 1, 2017 and ended January 31, 2018.

Target Population

The target population wyBayCare

- Measure: 100 percent completion of the **Workforce Development Plan** within 270 days of contract execution
  - October 17, 2017: the Workforce Development Plan completed
- Measure: 100 percent completion of the Strategic Plan within 365 days of contract execution
  - January 31, 2018: the Strategic Plan completed

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

Not applicable as the grant is not supporting a program or direct services.

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Commitments to State Mental Health Treatment Facilities

Not applicable as the grant is not supporting a program or direct services.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of January 31, 2018, BayCare expended/leveraged $49,565 or approximately 99.1 percent of the one-year match commitment for their CJMHSA Reinvestment grant. Matching funds and in-kind services provided by the Public Defender's Office supported attendance at steering committee meetings and engagement in activities at the subcommittee level.

BROWARD BEHAVIORAL HEALTH COALITION (BROWARD COUNTY)

Target Population

The target population, as stated in the application, was individuals aged 12 through 21 years with substance use, mental health, and/or co-occurring disorders who were at risk of involvement in or already involved in the juvenile or criminal justice systems. Putnam County Public Safety Coordinating Council and the Hanley Center Foundation narrowed the target population to youth aged 12-to-18 who were engaged with, or at risk of entering the juvenile or criminal justice systems and who had behavioral health concerns.

Goals/Objectives

The overall objective of this planning grant was to develop a strategic plan through key stakeholder collaboration in the service area. The strategic plan should

- April 28, 2017: Needs Assessment completed
- April 28, 2017: Target population identified and confirmed

x Measure: 100 percent of formal partnerships established, as evidenced by **legally binding agreements**, with a minimum of three agencies within 180 days of contract execution
- By July 31, 2017, LSF Health Systems executed Memoranda of Understanding (MOUs) with four entities: Mid-Florida Homeless Coalition, Springbrook Hospital, BayCare Behavioral Health, and LifeStream Behavioral Center. An MOU with the Hernando County Sheriff's Office is in the process of being executed.

x Measure: 100 percent completion of determining the methodology for **data sharing and reporting** among partners within 270 days of grant execution (per E-1.3 of the contract).
- Per the grantee's final quarterly report, E-1.3 relates to the development of a workforce development plan and, for this performance measure, the grantee reports that the workforce development plan was part of their strategic plan document.

x Measure: 100 percent completion of the **strategic plan** within 365 days of contract execution
- January 9, 2018: Strategic Plan completed and approved by the Public Safety Coordinating Council

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

Not applicable as the grant is not supporting a program or direct services.

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Commitments to State Mental Health Treatment Facilities

Not applicable as the grant is not supporting a program or direct services.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of January 31, 2018, LSF Health Systems expended/leveraged $51,738 or 88.7 percent of the one-year match commitment for their CJMHSA Reinvestment grant.

LUTHERAN SERVICES FLORIDA (LSF) HEALTH SYSTEMS (HERNANDO COUNTY)

LSF Health Systems' juvenile planning grant for Hernando County began November 9, 2017.

Target Population

The target population includes juveniles, aged 17 years and younger, with a mental health illness, substance use, or co-occurring disorder who are in or at risk of entering the juvenile justices Ñ with a men a ing disorder w

avert increased spending on criminal justice, and improve the accessibility and effectiveness of treatment services for persons who have a mental illness, substance abuse disorder, or co-occurring disorder who are in, or at risk of entering, the juvenile or criminal justice systems.

Overall Grant Award

- Total amount awarded: $100,000 (one year)

Performance Measures

Outcome data for the performance measures reflect progress through April 30, 2018 (Year 1, Quarter 2).

- Measure: 100 percent completion of the **Needs Assessment and identification of the target population** within 90 days of contract execution.
  - January 31, 2018: Needs assessment was completed
  - January 31, 2018: Target population was identified and confirmed
- Measure: 100 percent of formal partnerships established, as evidenced by legally binding **agreements**, with a minimum of three agencies within 180 days of contract execution
  - April 27, 2018: three MOUs were in place and two were in progress
- Measure: 100 percent completion of determining the methodology for **data sharing** and reporting among partners within 270 days of grant execution
  - In progress
- Measure: 100 percent completion of a **strategic plan** within 365 days of contract execution
  - In progress.

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

Not applicable as the grant is not supporting a program or direct services.

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Commitments to State Mental Health Treatment Facilities

Not applicable as the grant is not supporting a program or direct services.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program ot applicable

Target Population

The target population included youth, 18 years and younger, with mental health, substance use, and/or co-occurring disorders that were in or at risk of entering the juvenile or criminal justice systems.

Goals/Objectives

The overall objective of this planning grant was to develop a strategic plan through key stakeholder collaboration in the service area. The strategic plan should have identified methods to increase public safety, avert increased costs, and

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Commitments to State Mental Health Treatment Facilities

Not applicable as the grant is not supporting a program or direct services.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of January 31, 2018, SMA Behavioral Healthcare expended/leveraged $67,895 or 80.5 percent of the one-year match commitment for their CJMHSA Reinvestment grant. Matching funds facilitated the assessment and planning process for the grantee and led to active engagement of community leaders and staff from Flagler Schools, Flagler Cares, Halifax Health, The House Next Door, and Flagler County.

STEWART MARCHMAN ACT (SMA) BEHAVIORAL HEALTHCARE (ST. JOHNS COUNTY)

SMA Behavioral Healthcare's planning grant for St. Johns County began February 17, 2017 and ended January 31, 2018.

Target Population

The target population included adults residing in St. Johns County who had a severe mental illness and/or addictive disease and who were involved in or at risk of involvement in the criminal justice system.

Goals/Objectives

The overall objective of this planning grant was to develop a strategic plan through key stakeholder collaboration in the service area. The strategic plan should have identified methods to increase public safety, avert increased spending on criminal justice, and improve the accessibility and effectiveness of treatment services for persons who have a mental illness, substance abuse disorder, and/or co-occurring disorder who are in, or at risk of entering, the criminal justice system.

Overall Grant Award

- Total amount awarded: $50,204 (one year)

Performance Measures

Outcome data for the performance measures reflect progress through January 31, 2018 (end of contract).

- Measure: 100 percent completion of the **needs assessment and identification of the target population** within 90 days of contract execution.
  - April 1, 2017: Needs Assessment completed
  - April 1, 2017: Target population identified (refined after the Sequential Intercept Mapping conducted August 2017)

- Measure: 100 percent of formal partnerships established, as evidenced **by legally binding agreements**, with a minimum of three agencies within 180 days of contract execution
    - August 24, 2017: SMA Behavioral Healthcare executed Memoranda of Understanding (MOUs) with EPIC Behavioral Healthcare, St. Johns Public Safety Coordinating Council, and the Health Planning Council of Northeast Florida
- Measure: 100 percent completion of determining the methodology for **data sharing and reporting** among partners within 270 days of grant execution (per section E-1.3 of the contract)data sha th the co

IMPLEMENTATION/EXPANSION GRANTS

This section of the report provides profiles of the 19 implementation/expansion grant programs.

CENTERSTONE OF FLORIDA (SARASOTA COUNTY)

Centerstone's grant program for Sarasota County, the Sarasota County Reinvestment Project (SRP),

- Measure: Attain 25 percent reduction in number of **arrests** among participants within the one-year period following program discharge compared to the one-year period prior to program admission
    - 74.46 percent reduction in the number of arrests
- Measure: 90 percent of participants who did not reside in **stable housing** at the time of admission will reside in stable housing within 90 days of program admission
    - 100 percent of participants resided in stable housing
- Measure: 100 percent of participants who did not reside in **stable housing** at the time of admission will reside in stable housing one year post-discharge
    - 90 percent of participants resided in stable housing
- Measure: 100 percent of participants who are **not employed** and who express a desire to work at program admission are employed full or part-time within 180 days of program admission
    - 100 percent of participants employed within 180 days
- Measure: 100 percent of participants who are **not employed** and who express a desire to work at program admission are employed full or part-time one year following program discharge
    - 66.67 percent of participants employed
- Measure: 100 percent of participants who were eligible for but not receiving **Social Security or other benefits** at admission will be assisted in applying for benefits within 180 days of admission
    - 100 percent were assisted
- Measure: 80 percent of participants will be diverted from a **state mental health treatment facility**
    - 98 percent of participants were diverted
- Measure: 60 percent of participants will have reduced **mental health symptomology** within 180 days of admission based on pre- and post-assessment rest results
    - 59 percent of participants had reduced symptomology

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

Centerstone estimates that the grant-funded program saved the county $610,000 in reduced arrests (booking, court hearings) during its first full program year. This cost savings does not take into consideration jail costs (if housed in jail while waiting trial or as a sentence).

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Forensic Commitments to State Mental Health Treatment Facilities

The CTC reached capacity (n=25) almost as soon as it became operational (within thirty days). The grantee reported that participants had a mental illness diagnosis, many were homeless, and most were unable to meet their basic needs. The CTC and Centerstone immediately began providing appropriate treatment services and linkages to community-based resources.

Centerstone reported that, thus far, 52 participants were at risk for commitment to a state hospital. Fifty-one participants (of 52) were diverted from a state hospital commitment. These diversions should lead to additional cost savings to the county and state.

2. Create and encourage collaborati (e)-3 (in)2t Tc 0.090l (u)2.2 (73 (in)20(73 /8)-1.4 (e (y)m)-6. 3 (s)-1.3 (t)-2.a /8)-6

    - 80 percent in stable housing
- Measure: 60 percent of participants not residing in a **stable housing** environment at program admission will report living in stable housing one year following program discharge
    - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 60 percent of participants **not employed** at program admission who are employed full or part-time within 180 days of program admission.
    - 37 percent employed
- Measure: 60 percent of participants **not employed** at program admission who are employed full or part-time within one year of program discharge
    - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 80 percent of participants assisted in applying or be linked to for **Social Security or other benefits** for which they may have been eligible but were not receiving at program admission
    - 82 percent received assistance
- Measure: 50 percent of participants will be diverted from a

trauma, or suicide are referred to the Criminal Justice, Mental Health, and Substance Abuse

services, psychotropic medications as needed, and linkages for additional psychiatric services when appropriate. The client and the therapist develop, as a collaborative effort, an individualized Wellness and Recovery Action Plan (WRAP). The client and therapist review the Wellness and Recovery Action Plan monthly. The client also participates in a weekly individual therapy session (one hour in duration) and three, one-hour case management sessions for six months or longer until services are complete. Incentives in the form of restricted use gift cards are awarded for client milestones.

Goals/Objectives

The primary goal of this gr 613.68 5al therap(o)-2 Tr 12 -0 4 11E.12 (il)1024ispiduaphal f2h(i)-31 (e)-3.2 (t)-3 (h)2.-9 ((ali

Performance Measures

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

GCC reported reductions in arrests/rearrests since April 2017 (when program began serving individuals) which should yield some cost savings or cost avoidance associated with law enforcement (arrests) and the jail (bookings and jail days).

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and

Overall Grant Award

- Total amount awarded: $1,200,000 (three years)

Performance Measures

Outcome data for the performance measures reflect progress up through April 30, 2018 (Year 2, Quarter 1).

- Measure: Attain 50 percent reduction in number of **arrests/rearrests** among participants while enrolled in the program compared to one-year period prior to program admission
  - 94 percent reduction
- Measure: Attain 25 percent reduction in number of **arrests/rearrests** among participants within the one-year period following program discharge compared to the one-year period prior to program admission
  - T
    e

(increased services and case management), the jail (fewer bookings of individuals with intensive treatment needs), and the community (increased infrastructure to serve the target population).

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Forensic Commitments to State Mental Health Treatment Facilities

MHC-EODI increased access to individualized and evidence-based behavioral health treatment and support services. Moreover, this program potentially prevented, through diversion, the admittance of 50 individuals into state mental health treatment facilities.

This court-based, pretrial diversion program provides increased infrastructure to support and increased access to community-based treatment services. The increased access to community treatment services increases the likelihood that individuals will be successful in their treatment and decreases the likelihood that these individuals will recidivate. Moreover, it provides an opportunity for program participants to be Nolle Prosequi—no criminal prosecution for the offense which brought them to the program. In turn, this increases their likelihood of securing meaningful employment and housing to sustain their recovery-oriented behavior.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of April 30, 2018, Hillsborough County expended/leveraged $284,493.69 or approximately 24 percent of the three-year match commitment for their CJMHSA Reinvestment grant. Hillsborough County's matching funds enable the county to expand treatment services from community-based providers.

HILLSBOROUGH COUNTY BOCC (LHZ69)

Hillsborough County's grant program, the Drug-Enhanced Service Initiative (DC-ESI), began October 4, 2017.

Target Population

Tier One/First Priority

- Expands current Drug Pretrial Intervention (DPTI) program to serve individuals who have a co-occurring disorder, are charged with a non-violent third-degree felony, and who have been approved for DPTI.

Tier Two/Second Priority

- Individuals in quadrants III and IV of SAMHSA's Four Quadrant Framework for Co-occurring Disorders who are defendants in the county's Adult Drug Court for whom lower levels of service are deemed inappropriate.

Program Design/Model

Hillsborough County's second, current CJMHSA Reinvestment grant, the DC-ESI (awarded in late 2017), expands the county's existing DPTI by adding 30 additional clients to the existing DPTI (up to 90 over

Number Served through June 30, 2018 (Year 1, Quarter 3)

DC-ESI	Program Year 1	Program Year 2	Program Year 3	Program Lifetime
Number Served	24	-	-	24
Number Serviced Target	30	30	30	90

Overall Grant Award

- Total amount awarded: $1,200,000 (three years)

Performance Measures

Outcome data for the performance measures reflect progress up through June 30, 2018 (Year 1, Quarter 3).

- Measure: 80 percent reduction in the total number of **arrests**/rearrests among participants while enrolled in the program compared to one-year period prior to program admission
  - 100 percent reduction
- Measure: 75 percent reduction in the total number of **arrests**/rearrests among participants within the one-year period following program discharge compared to the one-year period prior to program admission
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 75 percent of participants who did not reside in **stable housing** at the time of admission will report residing in stable housing within 90 days of program admission
  - 100 percent in stable housing
- Measure: 60 percent of participants who did not reside in **stable housing** at the time of admission will report residing in stable housing one year post-discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 60 percent of participants who are **not employed** at admission will be employed full- or part-time within 180 days of program admission
  - 100 percent employed
- Measure: 55 percent of participants who are **not employed** at program admission are employed full- or part-time within one year post-discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 85 percent of participants assisted in applying for **Social Security** or other benefits for which they may hav oe

alternative to arrest and incarceration when law enforcement officers encounter individuals with a substance use, mental health, and/or co-occurring disorder. Individuals can stay at the shelter for up to 30 days. Upon intake into the shelter, a SalusCare mental health clinician performs a bio-psychosocial

Performance Measures

The outcomes listed below reflect progress through June 30, 2018 (Year 2, Quarter 1).

- Measure: 25 percent reduction in the total number of **arrests or rearrests** among participants while enrolled in the program compared to the one-year period prior to program admission.
  - 41 percent reduction
- Measure: 20 percent reduction in the total number of **arrests or rearrests** among participants within the one-year period following program discharge compared to the one-year period prior to program admission for those individuals who received case management services while residing at the Triage Center and were discharged into a participating Lee County Continuum of Care (CoC) program or other participating supportive housing program
  - 69 percent reduction
- Measure: 25 percent of participants not residing in **stable housing** at admission that received case management services while residing at the Triage Center and discharged into a participating Lee County Continuum of Care (CoC) program or other participating Homeless Management Information System (HMIS) supportive housing program will report living in stable housing one year following program discharge
  - 28 percent in stable housing
- Measure: 10 percent of participants will be assisted in applying or be linked to **Social Security or other benefits** for which they may have been eligible but were not receiving at program admission
  - 13 percent received assistance
- Measure: 60 percent of enrolled participants will have **increased access** to community comprehensive recovery-based mental health and/or substance use treatment services while participating in the program
  - 69 percent received increased access to services

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

The Lee County Sheriff's Office provided the following statistics to describe jail population trends at the quarterly PSCC meeting:

- Jail admissions decreased by 37 percent between 2008 (when the Triage Center opened) and 2017, despite an increase in Lee County's population.
- Since the Triag(t)-25 (i)-14.9 (y)-7.5 (')1002 Tc -0.eas tp6 ( )10opened

Historically, one percent of Bob Janes Triage Center clients were possibly eligible for admittance in a state mental health treatment facility. Therefore, the program does not anticipate having a significant impact on such diversions.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of June 30, 2018, Lee County has expended/leveraged $474,872 or approximately 31 percent of the three-year match commitment.

LIFESTREAM BEHAVIORAL CENTER (LAKE COUNTY)

LifeStream Behavioral Center's (LifeStream) grant program for Lake County began April 1, 2017. It is an expansion of Lake County's 2014-17 CJMHSA Reinvestment Grant program, the Forensic Community Services Team (FCST).

Target Population

The target population for the FCST is adult residents of Lake County who:

- have a mental health, substance use, or co-occurring mental health and substance use disorder;
- are charged with misdemeanor and/or non-violent felony offenses; and
- have a history or presentation of moderate-to-high criminogenic ri ele-n0.0i

Goals/Objectives

The primary goal of the FCST is to increase access to treatment and to support the target population through the provision of evidence-based, trauma-informed services that address and reduce criminogenic risks and needs.

LifeStream's three major grant objectives include:

1. Implement services and diversion initiatives.
2. Create and encourage collaboration among key stakeholders.
3. Establish program sustainability.

Evidence-based, Best, and Promising Practices and Tools Utilized

- Assertive Community Treatment (ACT)
- Motivational Interviewing (MI)
- Cognitive Behavioral Therapy (CBT)
- Crisis Intervention Teams(CIT)
- Mental Health First Aid (MHFA)
- Risk-Need-Responsivity framework (RNR)
- Forensic Community Services Team (FCST)
- Interactive Journaling
- Eye Movement Desensitization and Reprocessing (EMDR)
- Ohio Risk Assessment System (ORAS)
- Texas Christian University (TCU) Drug Screen
- Global Appraisal of Individual Needs (GAINS SS)
- Posttraumatic S.-p.8 (am)-17-1.37 Td0.0078Tj/TIETexm 0.93 (al N)3 (3 (i)10.6 (3e)-3.103 (ic)-1.78.5 ScS

Performance Measures

The outcomes listed below reflect progress through June 30, 2018 (Year 2, Quarter 1).

- Measure: 70 percent reduction in the total number of **arrests or rearrests** among participants while enrolled in the program compared to the one-year period prior to program admission.
  - 96 percent reduction
- Measure: 70 percent reduction in the total number of **arrests or rearrests** among participants within the one-year period following program discharge compared to the one-year period prior to program admission.
  - 91 percent reduction
- Measure: 60 percent of participants not residing in a **stable housing** environment at program admission will report living in a stable housing environment within 90 days of program admission.
  - 50 percent in stable housing
- Measure: 80 percent of participants not residing in a **stable housing** environment at program admission will report living in a stable housing environment one year following program discharge.
  - 50 percent in stable housing
- Measure: 30 percent of participants **not employed** at program admission who are employed full or part-time within 180 days of program admission.
  - 28 percent employed
- Measure: 40 percent of participants **not employed** at program admission who are employed full or part-time one year following program discharge.
  - 75 percent employed
- Measure: 80 percent of participants will be assisted in applying or be linked to **Social Security or other benefits** for which they may have been eligible but were not receiving at program admission.
  - 100 percent were assisted in applying for benefits
- Measure: 10 percent of participants will be **diverted** from a state mental health treatment facility.
  - There were no participants diverted from a state mental health treatment facility. None of the program participants were identified as "at risk" for state mental health treatment facilities.
- Measure: 50 percent reduction in the total number of **PTSD symptoms** of pre vs. post intervention, as assessed by the PCL-5, for participants receiving intensive evidence-based trauma treatment (EMDR).
  - EMDR was utilized with one participant to date. Additional data was not available for this measure.

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Goals/Objectives

The primary goal of the Martin County Mental Health Court is to divert juveniles and adults wn (s)-1.3 cS ge

MERIDIAN BEHAVIORAL HEALTHCARE, INC. (ALACHUA AND BRADFORD COUNTIES)

Meridian Behavioral Healthcare's (Meridian) grant program began April 5, 2017.

Target Population

The target population for the Forensic Diversion Program is adults who have a mental illness, substance
T0k6q545 0 0 rg 0 0 0 RG 1 w 0 J 0 j [] 0 d 1 i 0 Tc 0 Tw 100 Tz 0 TL 0 Tr 0 Ts 218 T (use disorder (SUD), and co-) 19f)10 11. (o)4r)

Number Served through June 30, 2018 (Year 2, Quarter 1)

Forensic Diversion Program	Program Year 1	Program Year 2	Program Year 3	

- Measure: 50 percent of participants will report having received **increased access** to comprehensive community-based services one year past admission to the program.
    - 86 percent received increased access
- Measure: 20 percent increase in the number of officers receiving **CIT or MHFA training** annually.
    - 65 percent increase in CIT and MHFA-trained officers
- Measure: 60 percent decrease in the number of **jail bed days** for participants one year past

Number Served through May 31, 2018 (Year 2, Quarter 1)

Jail In-Reach Team	Program Year 1	Program Year 2	Program Year 3	Program Lifetime
Number Served	107	47	-	154
Number Served Target	125	125	125	375

Overall Grant Award

- Total award amount: $1.2 million (three years)

Performance Measure

The outcomes listed below reflect progress through May 31, 2018 (Year 2, Quarter 1).

- Measure: 50 percent red7 (r)8 (r(d)-0.7 4of254f52 re Tr 12 -0 4 12 30 0 61(2)-45-7.9 (p5 w /TT1 7B031e 5( )104n8

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

Procedures have been developed to ensure collaboration among the Miami-Dade Corrections and Rehabilitation Department (MDCRD), Correctional Health Services (CHS), and South Florida Behavioral Health Network (SFBHN). Together, the MDCRF, CHS, and SFBHN address the need to identify and expedite jail diversion for eligible individuals. These procedures help reduce expenditures by reducing jail bed days, forensic commitments, and recidivism.

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Forensic Commitments to State Mental Health Treatment Facilities

As a means to identify which services are appropriate, program participants are assessed using evidence-based screening tools. These tools (see list in prior section) assist in creating individualized transition plans for each participant. As a component of a participant's discharge plan, grant program personnel assist in coordinating services and housing.

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of May 31, 2018, Miami-Dade County has expended/leveraged $127,358.85 or approximately 10.4 percent of the three-year match commitment.

OPERATION PAR (PINELLAS COUNTY)

Operation PAR's grant program, the Pinellas County Behavioral Health Treatment Pilot, began November 1, 2017.

Target Population

The Pinellas County Behavioral Health Treatment Pilot was designed to serve adults brought to the Pinellas County Jail and placed in protective custody pursuant to the Marchman Act under s. 397.677, F.S., as well as individuals released from a Baker Act Receiving Facility who have a co-occurring mental health and substance use disorder and are assessed as at risk of involvement in the criminal justice system.

Three criteria determine the eligibility of an individual to receive services in this program:

- placed in protective custody pursuant to a Marchman Act order,
- referred to the program subsequent to being released from a Baker Act Receiving Facility, and
- identified as needing substance use or co-occurring treatment and at risk of involvement in the criminal justice system as determined by a screening utilizing an evidence-based screening instrument.

Program Design/Model

Operation PAR's pilot program assists

Performance Measures

Outcome data for the performance measures reflect progress through April 30, 2018 (Year 1, Quarter 2)

- Measure: 40 percent reduction in the total number of **arrests** or rearrests among participants while enrolled in the program compared to the one-year period prior to program admission
  - 61 percent reduction
- Measure: 30 percent reduction in the total number of **arrests** or re-arrests among participanstd.37ie.h0Tf0.4e1 T

- Reduce the factors which contribute to youth arrests

Objectives:

- Implement CJMHSA services and diversion initiatives
- Encourage and emphasize collaboration among key stakeholders
- Increase youth and family functioning across multiple life domains based on the individual needs of the youth and their family

Evidence-based, Best, and Promising Practices and Tools Utilized

- Child and Adolescent Needs and Strengths – Comprehensive tool (CANS-C) (completed at intake, at three months, six months, twelve months, and at discharge/transition)
- Car, Relax, Alone, Forget, Friends, Trouble (CRAFFT) (screening tool)
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- Crisis Intervention Teams-Youth (CIT-Y) Training
- SSI/SSDI Outreach, Access, and Recovery model (SOAR)
- Motivation Interviewing
- Wraparound (intensive, individualized care planning and management)

Number Served through June 30, 2018 (Year 2, Quarter 1)

WAO	Program Year 1	Program Year 2	Program Year 3	Program Lifetime
Number Served (youth & their families)	53	15	-	68
Number Served Target	48	48	48	144
CIT-Y Training	90	54	-	90
CIT-Y Training Target	70	70	70	210

Overall Grant Award

-

- 66.7 percent reduction

- Measure: 50

peer advocates or forensic diversion and recovery specialists. Follow-up services allows program staff to maintain contact with participants for at least one year post-discharge.

Services are provided 24 hours per day, seven days per week while participants are in transitional

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of April 30, 2018, Pinellas County expended/leveraged $333,277.90 or approximately 27.77 percent of the three-year match commitment for their CJMHSA Reinvestment grant. Matching funds and in-kind services have allowed the program to expand while maintaining program personnel who are familiar with the structure of the program and the population served.

POLK COUNTY BOCC

Polk County's grant program, the Polk County Forensic Intensive Case Management Project (PC-FICM), began February 1, 2017.

Target Population

The target population for PC-FICM is adults with substance use, mental health, and/or co-occurring disorders who are in or at risk of entering the criminal justice system.

Program Design/Model

The initial PC-FICM eligibility screening is conducted using a customized tool which screens for basic eligibility requirements and risk factors (homelessness, criminal justice involvement, mental illness, substance use, and veteran status). Referrals may be generated from community partners as well as the jail. The PC-FICM program manager serves as the centralized point of contact to determine eligibility. The PC-FICM program manager and case managers comprise the FICM team. There are two case managers from Tri-County Human Services (TCHS) and two case managers from Peace River Center (PRC). The FICM team reviews the screening results and confirms the assignment of a case manager. Participants must agree to participate and sign an agreement. Caseloads are limited to 15 per case manager. Polk County's Indigent Health Care Division houses the PC-FICM program manager and assists with care coordination. Case managers develop individualized case plans for participants.

Polk County is working with the Polk County Housing and Neighborhood Development Division and a private housing developer to generate plans to meet the housing need. Diverting individuals from the system, collaborating with community partners to increase access to community-based treatment services (wrap-around services), and promoting stable and safe housing for participants are the core tenets of the grant program. Additionally, Polk County is exploring the implementation of the evidence-based APIC model (Assess, Plan, Identify, Coordinate) for transition planning with Peace River (treatment provider) and the jail.

Goals/Objectives

The primary goal of the program is to divert individuals with a history of criminal justice involvement who are at risk of recidivism into either the criminal justice system or a state mental health treatment hospital and divert them into community-based treatment services.

Polk County's three main objectives:

1. Implement services and diversion initiatives

2. Create and encourage collaboration among key stakeholders
3. Develop a housing initiative in support of the grant's target population

- Measure: 25 percent of participants who are **not employed** and who express a desire to work at program admission are employed full or part-time within 180 days of program admission
  - 47 percent employed
- Measure: 30 percent of participants who are **not employed** and who express a desire to work at program admission are employed full or part-time one year following program discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 95 percent of participants who were eligible for but not receiving **Social Security or other benefits** at admission will be assisted in applying for benefits within 180 days of admission
  - 100 percent received assistance
- Measure: 10 percent of participants will be diverted from a **state mental health treatment facility**
  - 100 percent diverted (one participant)
- Measure: 95 percent of participants who do not have a means of **transportation** will receive program related transportation services while in the program
  - 100 percent with transportation services

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Growth and Expenditures of the Jail, Juvenile Detention Center, and Prison

No specific impact determined at this time. The program's participants are receiving a variety of services previously unavailable to them and are achieving positive results. Participants are finding employment, receiving medical care and treatment, and other quality of life improvements.

Summary of the Effect of the CJMHSA Reinvestment Grant Program on the Availability and Accessibility of Effective Community-Based Mental Health and Substance Use Services and How Expanded Community Diversion Alternatives Reduced Incarceration and Commitments to State Mental Health Treatment Facilities

FICM contingency funding has provided opportunities for participants to receive housing assistance, medications, medical and mental health services, transportation assistance, and assistance with food and identification cards. The program is working with the Polk County Indigent Health Care Program to streamline the application process that would enable FICM participants to receive healthcare under the plan. Nineteen (19) participants are approved for county-funded indigent healthcare.

SEMINOLE COUNTY

Seminole County's grant program began October 5, 2017.

Target Population

The

- 80 percent resided in stable housing

- Measure: 50 percent of adult participants who did not reside in **stable housing** at the time of admission will reside in stable housing one year post-discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 20 percent of adult participants who are **not employed** at admission will be employed full or part-

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of June 30, 2018, Seminole County expended/leveraged $232,998 or approximately 19 percent of the three-year match commitment for their CJMHSA Reinvestment grant. Seminole County is utilizing match funds to address homelessness among program participants (personnel and direct costs). Aspire is also providing some match.

SOUTHEAST FLORIDA B

Goals/Objectives

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of April 30, 2018, Southeast Florida Behavioral Healt

Summary of How Local Matching Funds Leveraged Additional Funding to Further the Goals of the Reinvestment Grant Program

As of April 30, 2018, Southeast Florida Behavioral Health Network expended/leveraged $98,856.05 or approximately 16.67 percent of the three-year match commitment for their CJMHSA Reinvestment grant.

STEWART MARCHMAN ACT (SMA) BEHAVIORAL HEALTHCARE (PUTNAM COUNTY)

SMA's Putnam County grant program, the Putnam County Crisis Stabilization Unit (CSU), Cnc(ri9)-3.2(riag)2.6(riag). Td(,)Tj( )TjTw 61(t)-3 AMCIDBDD 4/H

- Motivational Interviewing
- myStrength (online support system using cognitive behavioral therapy, motivational interviewing, dialectical behavioral therapy, and behavior activation techniques
- Peer specialists
- Mental Health First Aid (MHFA)

Number Served through June 30, 2018 (Year 1 Quarter 2)

CTTU	Program Year 1	Program Year 2	Program Year 3	Program Lifetime
Number Served	115	-	-	115
Number Served Target	175	175	175	675
CIT Training	2	-	-	2
CIT Training Target	20	30	30	80

Overall Grant Award

- Total amount awarded: $1,200,000 (three years)

Performance Measures

Outcome data for the performance measures reflect progress up through June 30, 2018 (Year 1 Quarter 2).

- Measure: 90 percent of participants will have no **arrests** while enrolled in the program
  - 96.9 percent had no arrests
- Measure: 85 percent of participants will have no **arrests** one year after program discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 75 percent of participants who did not reside in **stable housing** at the time of admission will reside in stable housing within 90 days of program admission
  - 100 percent resided in stable housing
- Measure: 85 percent of participants who did not reside in **stable housing** at the time of admission will reside in stable housing one year post-discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 25 percent of participants who are **not employed** at admission will be employed full or part-time within 180 days of program admission
  - 22.2 percent employed
- Measure: 50 percent of participants who are **not employed** at program admission are employed full or part-time within one year post-discharge
  - The grantee is collecting data; however, it is too early to report on this measure.
- Measure: 85 percent of participants will be assisted in applying for **Social Security** or other benefits for which they may have been eligible but were not receiving at admission

- 100 percent of participants assisted

- Measure: 90 percent of participants will be **diverted** from a state mental health treatment Facility
  - There have been no participants who would have been eligible to be admitted to a state mental health facility.
- Measure: 85 percent of participants referred to the CTTU under a **Baker Act order** will not be referred under a Baker Act order again within one year following program discharge
  - The grantee is collecting/TT2 1 T1vtelw(e i)2.7vrt iv(o)7.2 (a)2.8 (a)2.7 (er)3.2 (ti)2.8 (ec)1 (tyh)2.56 (to)

THE CJMHSA TECHNICAL ASSISTANCE CENTER

This section summarizes the CJMHSA TAC's technical assistance during FY2017-18. Technical assistance activities include assisting grantees in projecting and monitoring the effect of grant-funded interventions 1

Common Program Features for 2017-20 CJMHSA Reinvestment Grantees (implementation/expansion grants)

2017-20 Implementation/ Expansion Grantees	Common Grant Program Features

2017-20 Implementation/ Expansion Grantees	Common Grant Program Features			
	Adult or Juvenile	Intercepts	Evidence-based Practices and Best Practices	Type of Model
			x Posttraumatic Stress Disorder Checklist for DSM 5 (PCL-5) x Mental Health Screening Form-III (MHSF-III)	
Kids Hope Alliance (Duval County -				

2017-20 Implementation/ Expansion Grantees	Common Grant Program Features			
	Adult or Juvenile	**Intercepts**	**Evidence-based Practices and Best Practices**	**Type of Model**
Martin County BOCC	Both (Adult and Juvenile)	1,2,3	x Brief Jail Mental Health Screen (BJMHS) x Crisis Intervention Teams (CIT) x SSI/SSDI, Outreach, Assist, and Recovery (SOAR)	x Case management for the Mental Health Court participants x Diversion x Linke7 0 Td53 (m)-6.4 (9ÐDC 8078Ŧj/TT2 1 ())

2017-20 Implementation/ Expansion Grantees	Common Grant Program Features			
	Adult or Juvenile	Intercepts	Evidence-based Practices and Best Practices	Type of Model
		x		

Grante				

2017-20 Implementation/ Expansion Grantees	Common Grant Program Features			
	Adult or Juvenile	Intercepts	Evidence-based Practices and Best Practices	Type of Model
			x Peer specialists	

RESULTS OF SATISFACTION SURVEYS COMPLETED BY G

Recommendations and Suggested Strategies for Furthering the Development of the CJMHSA TAC and the Reinvestment Grant Program

The USF CJMHSA TAC offers the following recommendations for quality improvement in the existing CJMHSA Reinvestment Grant programs

School shooting, a framework to consider when sharing private health information, and examples of proper and improper data sharing.

On-Site and Off

April 2018

Grantee/County	Topic Area(s) of TA	Type of TA (on-site, [illegible])
Kids Hope Alliance (Duval County/City of Jacksonville)	TA needs assessment follow-up	Telephonic
Orange County BOCC	TA planning	
Southeast Florida Behavioral Health Network **(Indian River County)**	SIM planning	Email
SMA Behavioral Healthcare **(Putnam County)**	SIM planning	Telephonic
Lee County BOCC	TA needs assessment follow-up	Email
SMA Behavioral Healthcare **(Putnam County)**	SIM planning	
Collier County BOCC	Strategic Planning	On-site
LSF Health Systems **(Hernando County)**	SIM participant list	Email
Polk County BOCC	TA planning – APIC training	Telephonic

Grantee/County	Topic Area(s) of TA	Type of TA (on-site, telephonic, email)
LSF Health Systems **(Hernando County)**	Juvenile SIM	On-site
Polk County BOCC	Trauma-Informed Care trainer	Email
Polk County BOCC	Medicaid policy for county jail inmates	Email

June 2018

Grantee/County C-2.5.2.2.1.1	Topic Area(s) of TA C-2.5.2.2.1.5	Type of TA (on-site, telephonic, email)
Southeast Florida Behavioral Health Network		

APPENDIX B: GRANTEES—HISTORICAL SNAPSHOT

Historical Snapshot of CJMHSA Reinvestment Grantees

Not all of the grantees listed below are “county grantees”, new grantees may be county

County	Contract #

County	Contract # Grantee, if not the county	Grant Type	Target Population	Begin Date	End Date
St. Johns	LHZ66 (SMA Behavioral Healthcare)	Planning	Adults	2/17/2017	1/31/2018

For questions or additional information, please contact: