RE[illegible]

APPENDIX C – COVER PAGE FOR GRANT APPLICATION

Planning Grant

Applicant: LSF Health Systems

Address Line 1: 9428 Bayr[illegible]

Phone: [illegible] Fax: 352.540.4339

CERTIFYING OFFICIAL

Certifying Official's Signature: Dr. Christine Cauffield

Certifying Official's Name (printed): Dr. Christine Cauffield

LSF HEALTH SYSTEMS – HERNANDO COUNTY
CJMHSA Reinvestment Grant Application
Youth Planning Grant 2017

TABLE OF CONTENTS


| Proposal Section | Page Number |
|---|---|
| Tab 1: Cover Page | 1 |
| ƒ Letter of Intent and Receipt | 2 |
| Tab 2: Table of Contents | 4 |
| Tab 3: Statement of Mandatory Assurances | 5 |
| Tab 4: Match Commitment and Summary Forms | 6 |
| Tab 5: Statement of the Problem | 23 |
| Tab 6: Project Design and Implementation | 33 |
| ƒ Planning Council | 33 |
| ƒ Timeline and Expected Milestones | 35 |
| ƒ Performance Measures | 42 |
| ƒ Capability and Experience | 46 |
| ƒ Evaluation and Sustainability | 52 |
| - Evaluation | 52 |
| - Sustainability | 52 |
| - Project Timeline | 52 |
| Tab 7: Commitment Letters | 53 |
| Tab 8: Line Item Budget and Budget Narrative | 78 |
| Tab 9: Certified Letter from County | 85 |

TAB 5: STATEMENT OF THE PROBLEM

ƒ Describe the problem the project will address. Document extent of problem with local or state data and include trend analysis. Describe project's geographic environment, Target Population, socioeconomic factors, and priority as a community concern.

Target Population: The Planning Grant will focus on youth ages 17 and under in Hernando County with mental health (MH), substance abuse (SA), or co-occurring disorders (CODs), who are in, or are at risk of entering the juvenile justice system.

Trend Analysis: 2011 -2016 Youth Baker Acts : An analysis of the number of Baker Act initiations between 2011 and 2016 reveals that while the percentage for youth throughout the state has stayed relatively the same over the last five years, Baker Acts among youth in Hernando County has more than doubled to 34%, nearly twice the state rate. Please see Table 1 below. In fiscal year 15-16, the majority of Baker Acts in Hernando County were initiated by law enforcement (50.5%), followed by mental health professionals (46.7%) and ex-parte (2.8%).

Despite these alarming figures, the data in the table below understate the true nature of the crisis in Hernando County as they do not include Baker Act initiations received at Springbrook Hospital whose forms were not being reported to the USF Louis de La Parte Florida Mental Health Institute (USF-FMHI) during that time period.

Table 1 – Youth Baker Acts
(excludes Springbrook Hospital data)

Source: The Baker Act, The Florida Mental Health Act, Fiscal Year 2015/2016 Annual Report, Released March 2017, Prepared for the Florida Department of Children and Families, Baker Act Reporting Center, Louis de la Parte Florida Mental Health Institute, Department of Mental Health Law and Policy as cited in 2017 Hernando County Adult Needs Assessment, WellFlorida Council.

state of Florida during that same year. Although males are the most represented among youth who are arrested, females represent a greater proportion of those arrested in Hernando County relative to the rest o

Table 6: Youth on Probation

Source: Florida Department of Juvenile Justice

Additional concerns creating urgency for Hernando County to secure new funding such as competitive grants to address the mental health, substance abuse and criminal justice crisis include the following:

- Behavioral health services for uninsured and underinsured individuals are underfunded relative to other counties:

  - Per Capital County Revenue: Per capita county revenue is approximately $700 lower than the average for other counties in the state ($1,180.84 vs. $1,884.17 - Hernando County Profile, Florida Legislature, Office of Economic and Demographic Research, August 2016). Due to the size of the total population in Hernando (less than 200,000), Hernando County is not eligible for enhanced federal funding, further restricting resources available to meet community needs. County funding for human services expenditures represents just 1/3 of the average amount in other counties throughout the state ($49 vs. $153.17 - Hernando County Profile, Florida Legislature, Office of Economic and Demographic Research, August 2016). He25.5C /P <</MCID T <</MC26

Managing Entity - Regional Needs Assessment - Well Florida Council) reveals that Circuit 5 provides the most limited range of services and has fewer numbers of behavioral health providers of the 5 circuits in the region.

The current DCF CJMHSA Reinvestment Grant is a critical opportunity for Hernando County to build upon the work begun with the Adult Planning Grant (effective date February 1, 201 ) to collaboratively integrate findings related to youth and their parents/other significant adults to address the crisis facing the community. Through the CJMHSA Planning Grant opportunity focused on the systems serving youth ages 17 and under, Hernando County will benefit from:

- Implementing the Sequential Intercept Mapping (SIM) process focusing on youth in the criminal and juvenile justice system who have substance abuse (SA), mental health (MH), or co-occurring disorders (CODs). The SIM will assist the county, community agencies/providers, and stakeholders in mapping the intercepts at which youth come into contact with the criminal justice system Tf 12 Te(t)2()2(7(ol

Table 7: Hernando Socioeconomic Factors

| | County | Florida |
|---|---|---|

Juvenile Justice Data: According to the Department of Juvenile, 35.9% of Hernando youth that were screened with the PACT were found during intake to have a history of mental health problems compared to the statewide average of

LSF HEALTH SYSTEMS – HERNANDO COUNTY

CJMHSA Reinvestment Grant Application

| | |
|---|---|
| Irma Terry, Juvenile Detention Superintendent<br>DJJ - DIRECTOR OF DENTENTION FACILITY OR DESIGNEE | Rick Bedson, Chief Probation Officer<br>DJJ – CHIEF OF PROBATION OFFICER OR DESIGNEE |
| Joelle Aboytes, Circuit 5 Administrator<br>DCF - SUBSTANCE ABUSE AND MENTAL HEALTH PROGRAM OFFICE REPRESENATIVE | Michael Bove<br>PRIMARY CONSUMER OF MENTAL HEALTH SERVICES |
| Douglas Leonardo, Baycare Behavioral Health and Karen Rogers, LifeStream<br>COMMUNITY MENTAL HEALTH AGENCY DIRECTOR OR DESIGNEE | Douglas Leonardo, Baycare Behavioral Health and Karen Rogers, LifeStream<br>LOCAL SUBSTANCE ABUSE TREATMENT DIRECTOR OR DESIGNEE |
| Tina, Kinney, NAMI<br>PRIMARY CONSUMER OF COMMUNITY-BASED TREATMENT FAMILY MEMBER | Wendy Maynard<br>PRIMARY CONSUMER OF SUBSTANCE ABUSE SERVICES |

Four additional members of the community representing key stakeholder agencies have also committed to serve on the Hernando PSCC to include:

- Robin Napier, MS, Health Officer - Florida Department of Health in Hernando
- Brenda Gause, Direction of Operations – Career Source
- Lesley Hersey, Community Engagement Specialist, LSF Health Systems
- Kevin Carroll, Deputy Fire Chief, Hernando County

ƒ Description of planning council's activities, including the frequency of meetings for the previous 12 months and future scheduling of meetings.

Committed to move forward with an active council, the PSCC held its first meeting on October 27th 2016 and has met once per quarter since then. Key agenda items have included: selection of chair (currently, Captain HAROLD Hutchinson – Hernando Sheriff's Office); oversight of existing CJMHSA Reinvestment planning grant for adults; discussion and request for approval and submission of transportation policy to the Board of County Commissioners and DCF; and discussion, review and request for submission of CJMHSA Reinvestment grant application for youth due May 2017.

In addition, committees of the PSCC have met at a minimum monthly to address the objectives of the current adult planning grant (needs assessment steering committee and

| Primary Goals and Objectives | Milestone | Person Responsible | Benchmark | Start Date | Completion Date |
|---|---|---|---|---|---|
| | | | | quarter.<br><br>Strategic Planning Committee to meet within 120 days of contract effective date following needs assmnt and monthly thereafter | effective date |

–

- Florida Department of Children and Families- Treatment Admissions; Child Welfare Measures
- LSF Health Systems service data
- Florida Department of Education- School Enrollment; SESIR
- Robert Wood Johnson Foundation's County Health Rankings
- Florida Poison Control Center

Local Data Providers:

- Mental Health Hospitalization Data
- Oak Hill Hospital
- Springbook Hospital (Baker Act Data)
- Bay Front Hospital- Brooksville/Spring Hill (Baker Act Receiving Facility)
- New Visions
- Hernando County School District
- Hernando County Sheriff Office
- Brooksville Police Department
- BayCare Behavioral Health
- District 5 Medical Examiner
- Department of Juvenile Justice, Regional Detention Center
- LifeStream Behavioral Center (Baker Act Data)
- NAMI Hernando
- DAWN Center

HCC Data Collection:

- Community Teen Norms Survey (partnership with Hernando County Schools)
- Parental Attitudes on Underage Drinking Survey
- Last Drink Survey (partnership with West Central Florida Driver Improvement Center)
- Environmental Scans
- Bullying Attitudes Survey

C. PERFORMANCE MEASURES

ƒ Include a description of the manner in which the grant will be monitored to determine achievement of performance measu res:

The Project Coordinator will have primary responsibility for monitoring achievement of performance measures. Bachelor's and Master's level interns from the fields of social work, public health, and mental health counseling will provide support to the Project Coordinator in tracking data and the timeline stated for each objective to ensure achievement of the performance measures. And independent evaluator by USF-FMHI professors, Dr. Scott Young and Dr. Kathleen Moore will be conducted to assist in evaluating achievement of goals, objectives and performance measures.

Required reports will be submitted to the Department of Children and Families according to the schedule outlined in the RFA. Additional deliverables are detailed in the Project Timeline.

Project Goal : Develop need-based, data-informed strategic action plan to increase Hernando County's capacity to divert adults with a mental illness, substance abuse or co-occurring disorder from arrest, prosecution, or incarceration and into treatment and support services.

Objective 1 – Develop Strategic Action Plan

Through a collaborative community process, the Hernando CJMHSA Planning Grant committee (with support provided by the Project Coordinator) will develop and submit a Strategic Action Plan that complies with the requirements of Appendix A of the RFA. The strategic action plan will include all components in the format outlined in the RFA, including but not limited to project goals, strategies, milestones, key activities, and persons responsible.

PROJECT OBJECTIVES:

| Objective 1 – Develop Strategic Action Plan | | | |
|---|---|---|---|
| Tasks | Target Date | Performance Measure | Methodologies |
| 1. Conduct a current and thorough needs assessment, including clear delineation of the Target Population(s) | Within 90 days of execution of final grant agreement. | Measure #1 Required by Section 2.4.1 :<br><br>The needs assessment and identification of the Target Population are completed within 90 days of execution of the final grant agreement. | - Contract with Hernando Anti Drug Coalition to include:<br>- Rey5 rj ET [(T)-15.5(h)9.8(e)-1.2(r)] |

| | | | |
|---|---|---|---|
| 2. Evaluate at least quarterly the proposed planning activities identified in the application to determine whether or not milestones are being met. | Quarterly – at the end of each quarter | Additional Measure: Evaluation reports are completed at the end of each quarter. | - Independent Evaluation through USF-FMHI Faculty |
| 3. Develop Strategic Action Plan and Submit to DCF | Within 365 days of execution of the final grant agreement | Measure #2 Required by Section 2.4.1: The Strategic Plan is completed within 365 days of execution of final grant agreement | - Collaborative community process through regularly scheduled meetings<br>- SIM workshop Format and components required in Appendix A of RFA |
| Objective 2 – Create and Encourage Ongoing Collaboration | | | |
| Tasks | Target Date | Performance Measure | Methodologies |

| | | | |
|---|---|---|---|
| services | | | |
| 3. Establish formal partnerships among agencies to provide and coordinate services | Within 180 days of execution of the final Grant Agreement. | Measure #3 Required by Section 2.4.1 : Legally binding agreements, with a minimum of three (3) agencies are established within 180 days of final grant agreement. | Memorandum of Understanding (MOU) |
| 4. Derive methodologies for sharing data and information among partners. | Within 270 days of execution of the final Grant Agreement. | Measure #4 Required by Section 2.4.1 : Data sharing, collection and reporting methodologies among partners and the CJMHSA TAC are completed within 270 days of execution of the final grant agreement as evidenced by dissemination of data collection, sharing and reporting protocols. | Adoption of f |

| Objective 4 – Identify and mitigat e existing policy, legal, social and other barriers within the county | | | |
|---|---|---|---|
| Tasks | Target Date | Performance Measure | Methodologies |
| 1. Utilize results of the needs assessment and SIM workshop to compile a list of identified policy, legal, social and other barriers that impede implementation of diversion strategies within the county.<br><br>2. Provide list to Public Safety Council and identify workgroup tasked with developing recommendations to address top 2 identified barriers<br>3. Include recommendations as part of the formal strategic plan due within 365 days of contract effective date. | | | |

LSF HEALTH SYSTEMS – HERNANDO COUNTY

CJMHSA Reinvestment Grant Application

Mental Health Institute's (FMHI) Technical Assistance Center (TAC). This, as well as the prospect of future state and federal opportunities - with grant seeking assistance to be provided by LSF Health Systems, has been instrumental in mobilizing community stakeholders to re-establish the Hernando PSCC as an active council that fulfills a critical collaborative planning role in Hernando County.

As noted on pages 39-40, LSF Health Systems will contribute a number of critical resources as a Managing Entity to benefit the project and is committed to the success of this project:

- Resource development efforts for research and screening of funding opportunities, development of opportunity summaries and an evaluation matrix to be provided to the Project Coordinator and Planning Grant Committee for review and discussion.
- Community Engagement (CE) specialist position serving Circuit 5, who will assist in building relationships and coordinating resources in the community. This position will also serve as an additional member on the Public Safety Coordinating Council in Hernando County.
- Bachelor's and Master's level interns from the fields of social work, public health, and mental health counseling who will provide support to the Project Coordinator in preparing meeting documents, , and collecting data, and tracking achievement of the goals and objectives of the project according to the stated timeline.

Other resources include the in-kind services and resources to be provided by:

- Veda Ramirez, Hernando County Health and Human Services Manager, who will coordinate meetings of the Public Safety Coordinating Council, serve on the Needs Assessment Steering Committee and the Planning Grant Committee, and play a key role in supporting the activities of the grant. Ms. Ramirez will serve as a resource to the Project Coordinator who will be housed in the Health and Human Services offices at the county.
- Office space for the Project Coordinator within the county administration building which will facilitate access to key county and criminal justice officials. Meeting space is also being contributed by the county to meet the objectives of the grant. w t1e
- Time, perspective, expertise contributed by th e various Public Safety Coordinating Council members and community stakeholders who have committed (please see list in TAB

| Role | Level of effort | Primary responsibility |
|---|---|---|
| LSFHS Interns | 8 hours per week X 36 weeks – Bachelor's or Master's Level Interns in the field of social work, public health, or mental health counseling. | Administrative support to the Project Coordinator as follows: assisting with administrative tasks (agenda development, preparing minutes, reports, forms, and presentation materials), assisting with research as needed, and tracking the goals and objectives of the grant. The interns do not receive any re W n J 0 -1.1l |

LSF HEALTH SYSTEMS – HERNANDO COUNTY

CJMHSA Reinvestment Grant Application