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3.8.6.3- Implementation and Expansion Grants Only (Limited to 35 pages)..... 25
3.8.6.3.1.- Introduction to the existing Strategic Plan 25
3.8.6.3.1- Existing Strategic Plan..... 27
3.8.6.3.2- Project Design and Implementation..... 39
3.8.6.3.2.1- Project Goals, Strategies, Milestones, and Key Activities..... 39
3.8.6.3.2.2- Key Organization or Key Staff Responsible..... 41
3.8.6.3.2.3- Planning Council Participation 42
3.8.6.3.2.4- Communication..... 42
3.8.6.3.2.5- Screening..... 43
3.8.6.3.2.6- Care Coordination..... 44
3.8.6.3.2.7- Law Enforcement diversion initiatives..... 45
3.8.6.3.2.8- Non-applicable .....--
3.8.6.3.3- Strategies with Service Description and Supervision meth Tc 041

3.8.8- Letters of Commitment.....

Department of Juvenile Justice……

Line Item Budget and Budget Narrative Putnam County Sheriff's Office..... 7……

3.8.9- Line Item Budget and Budget Narrative P. H. 6 R. F. L. H. W. \..... 7

Putnam County Office……...7

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Tab 9-

udget 7

Budget Narrative.....

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Tab 5: Statement of the Problem (Limited to 10 pages)
3.8.5.1 For both Planning and Implementation and Expansion Grants, the application must include a detailed description of the problem the project will address. The application should document the extent of the problem using local or state data and include trend analysis. Describe the project's geographic environment, Tar

unincorporated areas of the County. Palatka is the county seat and largest city with a population of approximately 10,000.

Putnam County Population by Community, 2017

City	Number	Percent
Crescent City	1,577	2.1%
Interlachen	1,403	1.9%
Palatka	10,558	14.2%
Pomona Park	912	1.2%
Welaka	701	0.9%
Unincorporated Putnam	59,213	79.6%
TOTAL Putnam County	74,364	100.0%

From a socio-economic standpoint, Putnam County is one of the poorest counties in Florida, with very limited resources. According to Florida's Office of Economic and Demographic Research (2018), the expected average annual wage for 2017 for Putnam County was $36,868; 24% below the state average of $48,452. In 2017, 41.3% of Putnam families with children age 5 – 17 met poverty guidelines; more than double the 19.6% statewide average. Based on data from the Putnam County School District (2018), there are 10,840 students in Putnam County Schools. According to the Florida County Health Rankings, in 2018 Putnam County ranked 66th out of 67 counties.

In terms of juvenile arrests from Putnam County; per Juvenile Justice Information Systems data, in fiscal year 2015-2016 there were 372 juvenile arrests in Putnam County. In fiscal year 2016-2017 there were 316 arrests (a decline of 15% from the previous year), and in fiscal year 2017-2018 there were 276 arrests (a decline of 13% from the previous year). In fiscal year 2017-2018 there was a 12% decline from the previous year in number of juveniles from Putnam County held in secure detention.

As part of a CJMHSA children/adolescent planning grant awarded to Hanley

established that adolescents experiencing a behavioral health emergency be

behaviors of youth while directing treatment and monitoring court-ordered sanctions. The PACT provides Department staff with data necessary to make informed decisions about which youth need which interventions and to what extent.

DJJ PACT data regarding youth arrested in Putnam County demonstrates that 43% of youth are assessed as being low risk to re-offend, 16.0% moderate risk to re-offend, 24.8% moderate-high risk to re-offend, and 16.3% are at high risk to re-offend. These numbers are significantly higher than the Circuit and Statewide percentages for the Moderate, Moderate-High, and High categories and contribute to the number of Putnam youth in detention centers. This suggests Putnam youth are at higher risk to re-offend than youth in surrounding counties and in the State of Florida.

The greatest contributing factors to the high risk associated with Putnam youth is poverty. Putnam is the one of the poorest counties in Florida and definitely the poorest in Circuit 7. The annual wage for 2017 for Putnam County was $36,868; 24% below the state average of $48,452. In 2017, 41.3% of Putnam families with children age 5 – 17 met poverty guidelines; more than double the 19.6% statewide average.

> 3.8.5.2.4 Data and descriptive narrative delineating the specific factors that put the Target Population at-risk of entering or re-entering the criminal or juvenile justice systems.

In addition to poverty, there are other specific factors that put youth at risk of entering or re-entering the juvenile justice systems. Other contributing factors include substance use and mental health symptoms, many of which go untreated. As previously mentioned, substance abuse issues were identified in detention youth in the range of 36.7% to 47% in the last two years; mental health issues in the range of 43.9% and 51.9% in youth in the last two years; and youth with co-occurring issues of both mental health and substance abuse issues between 20.3% and 22.7% over the last two years. These are conservative numbers and likely are higher, per DJJ's Office of Research and Data Integrity. These issues contribute to detention population due to substance related charges, committing crimes to pay for substances, committing crimes while under the influence of alcohol and other drugs, domestic violence, and destructive behaviors. Behavioral health disorders such as Attention Deficit Hyperactivity Disorder,

The target population is children and adults in mental health crisis who reside in Putnam County. From 2015-2016 to 2016-17, the number of Baker Act involuntary examinations conducted on County residents increased by over 8.5%, from 517 to 561. Five-year trend data for FY 2012-13 to FY 2016-17 showed a greater than 32% increase in the number of Baker Act exams in Putnam County, which is one of the highest increases in the state. Baker Acts exams performed on children increased by an even greater amount, 72 were performed in 2012-13; 128 were performed in 2016-17, an increase of 78%.

SMA's CTTU began operation in 2018. Current hours of operation for the CTTU are from 12pm–12am, which covers approximately 60% of the law enforcement Baker Acts. This expansion will allow the CTTU to be in operation 24 hours each day and be available to intervene with law enforcement at all times. Given these facts and variables, SMA proposes to serve 100 adults under a Baker Act in year one and 150 adults in year two and 150 adults in year three. SMA will also add services to the existing CTTU to include children/adolescents by providing 45 transports of youth under a Baker Act in year one, 60 transports of youth in year two, and 60 transports in year three. These individuals will not have provided consent for treatment

day, 7 days a week, SMA projects that the number of adult transports annually will be 350 in the first year of expansion and 400 in years two and three. Based on the utilization rate in the first year of adult implementation, SMA projects that 45% of those transported will subsequently consent to continued case management and treatment services as this expansion goes into effect. Therefore, the CTTU Expansion will increase its current adult population who consent for case management services to 157 in the first year of expansion and 180 in years two and three.

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	treatment services	
18	A representative from an area homeless program or a supportive housing program	Courtney Carter
19	The director of the detention facility of the Department of Juvenile Justice, or designee	DeShawn Deering
20	The chief probation officer of the Department of Juvenile Justice, or designee	DeShawn Deering

There are two positions that still need to be confirmed and the person/entity responsible for locating/appointing membership is listed. Specifically, the PSCC needs to have a primary consumer of substance abuse services, and a family member of a primary consumer of community-based treatment services. Nancy Russo, SMA Healthcare's Vice President for Putnam County Services, is assigned to identify these consumers and family members to participate on the PSCC.

3.8.6.1.2 An outline of the Planning council's activities, including the frequency of meetings for the previous 12 months and future scheduling of meetings.

The Putnam County Public Safety Coordinating Council (PSCC) has met monthly over the past year, meeting the grant guidelines required by the current Adult CJHMSA implementation grant. The PSCC's will continue to meet monthly and its agenda will include updates from this expansion grant, if awarded.

3.8.6.3 Implementation and Expansion Grants Only (Limited to 35 pages) . i i3.)

3.8.6.3.1 Copy of the existing Strategic Plan, which must include at minimum, all the elements specified in Appendix A and a description of the Strategic Plan, including progress toward implementing the plan or SIM.134(t)1e76 75pi tude plnn or Spti2(al 11(Ii)6.10(t)n o

provide medication as well as outpatient mental health and substance abuse counseling services to those clients who select SMA as their follow-up provider.

To assist in reducing the number of inappropriate arrests and increase law enforcement and Student Resource Officers' abilities to divert individuals in acute behavioral health crisis, SMA will continue to provide Crisis Intervention Training (CIT), an evidence-based law enforcement training program training to Putnam County Sheriff's deputies and Palatka Police Department officers. CIT is designed to improve appropriate first responder response to individuals with behavioral illnesses will be provided. Initial training consists of 40 hours, conducted over 5 consecutive days, followed by annual 8-hour refresher/update trainings. CIT will not be funded by this proposal, however the personnel costs of time spent attending these trainings will be included as part of the matching funds requirement of this grant.

		CTTU or SMA staff in the one year period following their admission to CTTU.		
1.3	Deliver CIT Training to Putnam County Law Enforcement Officers	Train 30 law enforcement members annually using CIT techniques	VP of Putnam County- SMA	08-01-18; ongoing

Objective #2	Create and encourage collaboration among stakeholders in implementing the Strategic Plan and providing ongoing oversight and quality improvement activities.			
	Task	Performance Measure	Lead Person or Organization	Projected Completion Date
1.1	SMA will present a summary of the progress in expanding CTTU operating hours, services toBT /CS0 cs 94.3SMA().15 Td [(hour)7(s)4(,) re 2ing CTatin1es,n0(e)be4(t)2(c			

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Sequential Intercept Mapping

This report summarizes the Cross-Systems Sequential Intercept Mapping workshop

Sequential Intercept Mapping

Sequential Intercept Mapping

- Faith Leaders
- Hospital
- Doctors
-

Detention center is out of county

- Do not provide services for Putnam residents
- Do not contact school district in a timely fashion to continue educational goals
- Do not have IEP or 504 plan information to provide accommodations to students
- Do not coordinate care with current treatment providers

Adult Jail for direct file youth (also out of county)

- No SAMH services available
- Do not coordinate care with current treatment providers
- Do not contact school district in a timely fashion to continue educational goals
- Do not have IEP or 504 plan information to provide accommodations to students

Detention hearings

- De Facto Guardians can be an issue as they have no legal responsibility for youth
- Notice of Parental Sanction for uncooperative parents are not often filed
- Lack of transportation to court for appearance can cause failure to appear

DJJ-referred treatment

- Original screenings require youth to come to DJJ office if not detained
- Treatment is optional and may not be attended
- Parental consent is required to treat, de facto guardians cannot sign for youth

Intercept III: Jails/Courts

—Identified Strengths and Resources

- Diversion Programs
- Diversion programs currently exist and are coordinated by the State Attorney's Office (SAO)
- Can be diverted pre- or post-arrest
- Very individualized diversion plans
- If the youth does not comply with the terms of the program, the SAO decides whether they want to press charges or not (usually during arraignment)
- High percentage of children with SAMH problems

—Identified Gaps – Jails/Courts

No Specialty Courts: Juvenile Drug Court, Girls Court, Crossover Court, Teen Court

Juvenile Drug Court

- Numbers may not support funding specialty courts at this time
- Judges must be attached to programs, significant time investment

Few (often no) Guardian Ad Litem available

In need of more commitment beds

Need for placement for children with mental health or educational needs

Secure Detention

- Youth awaiting placement in many diversion programs required to remain in secure detention until a spot opens instead of returning to the community.
- Detention center is out of county and does not provide sufficient services to Putnam youth.

Intercept IV: Re-Entry

—Identified Strengths and Resources

Residential Treatment

- Diversion programs attempt re-entry preparation with youth
- Re-entry team meets to staff youth returning from programs
- Follow up services may be condition of probation

Community Re-Entry Team (CRT)

- Team works with youth on discharge planning
- School board, workforce, juvenile probation officer (JPO), SAMH provider, and program administrator attend discharge planning
- Typically held 60 days prior to release
- JPO works with the family and tries to meet with the family and child within 24 hours of release

—Identified Gaps – Re-entry (Intercept 4)

There are not enough youth to support a therapeutic group home

Lack of engagement and transportation barriers are hard for parents to overcome post release

In need of parent support partners, proven to be successful in other areas

- Acute need for parent help/programming
- Peer support recovery coaches/ system navigator

From Jail:

- No re-entry plan
- No re-entry team
- Limited follow-up

Programs that are not linked to local service provider may not inform provider of treatment or progress.

Intercept V: Home and Community Supervision and Support

—Identified Strengths and Resources

Putnam County’s Strategic Plan for Improving Crisis Response for Adolescents in

Objective #1- Expand Diversion Program
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the organizations will meet at least once monthly. The principals in this meeting will include, but not be limited to, the CTTU Director, Putnam County Undersheriff, and representatives from Putnam Community Medical Center, Baker Act Receiving Facility representatives from the closest receiving facilities, Halifax Behavioral Services and Meridian Behavioral Health.

This project has the full attention of management at PCSO and SMA because of the number of Baker Acts currently originating in Putnam County and the resulting overutilization of Baker Act Receiving Facilities. Of particular concern are the high readmission rates of patients and the need to coordinate continuing care for juveniles identified at risk of mental health and substance use issues following release from crisis centers. Developing a better approach to mental health crises and substance abuse has real value to both organizations and the community. The PCSO and SMA have a history of strong collaboration on mental health and substance abuse issues. Currently, PCSO and SMA are collaborating in a CJMHSA Implementation Grant which focuses on the adult popul both orpoeTc 0(m)-3(e)-1.15 T/s57O ree4E6(e)10(m6w -37.61 -1.15 Td [(a)6(c)-1.7f-37.T

- x Field-use ready; mental health training not required to administer
- x Gathers key data to help direct limited resources to persons most in need.
- x Track record of many millions of administrations.
- x Electronic self-report is available and widely used (e-CSSRS)

The C-SSRS is used extensively in primary care, clinical practice, surveillance, research, and institutional settings. The C-SSRS is a reliable and valid risk assessment likely to reduce unnecessary hospitalizations, so that limited resources may be targeted to those who most need them.

For the clinical interview, upon discharge from a CSU, the CTTU will utilize the behavioral health screening bundle that is embedded in SMA's electronic health record. The bundle includes a history of previous episodes of care at SMA including assessments, treatment plans and discharge summaries. The bundle documents the presenting problem, obtains a psychiatric history, current mental status, and provides a current diagnosis. Suicide, homicide and potential for violence are assessed during the mental status examination and through the completion of the C-SSRS.

> 3.8.6.3.2.6 How the proposed design will facilitate care coordination to increase access to behavioral health treatment and support services and ancillary social services (i.e., housing, primary care; benefits, etc.);

If law enforcement initiates a Baker Act in an outlying area, CTTU staff will meet the officer in the community where the individual was placed under a Baker Act in order to transfer participant from law enforcement custody to SMA custody. SMA CTTU staff will then transport to the most appropriate Baker Receiving Facility with input from the parent(s)/guardian if reachable.

After individuals have been stabilized and are ready for discharge, transportation staff and/or an assigned CTTU Case Manager will initiate contact with the individual and/or family members to coordinate transportation back to the community, including potentially providing the transportation. If transportation is provided, it is an opportunity to engage the individual being released to assist in motivating that individual to accept case management and care coordination services.

Those who have a mental health and/or substance use diagnosis will be eligible for CTTU Case Management services. The goal of case management is to provide the support, tools and coordination necessary for the client to develop/maintain a healthy, self-sufficient and productive life. Discharge summaries with diagnostic information from CSUs will be provided, with consent, to the CTTU program. Although not required under the Baker Act to have consent for case management, consents will be attempted. Case management will include home visits to assess the person in their own environment. Case management services include completion of an assessment with the client and/or family members to determine needs and preferences. After the assessment is complete, an individualized service plan will be developed with the assistance of the client and/or parent(s)/guardian.

Case managers will assist clients with appointments and services related to the service plan. Many of the individuals utilizing these services will either be indigent or low income. The case managers will assist clients and/or parent(s)/guardian in obtaining identification, birth certificates, immunizations, etc. Client linkage and transportation to these programs will be assisted by CTTU Case Managers.

Services available to stabilize individuals include intensive case management, individual counseling, group therapy, substance abuse counseling, and medication management. These services can occur in the schools, in the community or at home provided by licensed providers, and when appropriate, individuals can be linked to residential behavioral health treatment programs offered by SMA, Meridian Behavioral Healthcare, Halifax Behavioral Services, and other regional providers. Children/Adolescents who require more intensive services may be referred to Clay Behavioral Health Center for participation on their CAT (Community Action Team) Program.

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

PCSO and other local law enforcement agencies will assess current practices and training with industry best practices and then implement training improvements for officers. The training will focus on improved initial on-scene assessment criteria and improved coordination with program participants and case managers to divert from readmission or criminal arrest when immediate outpatient intervention can be provided locally. There will be a coordinated response between CTTU staff and law enforcement for early identification of Putnam residents suffering from mental illness to be linked with case managers prior to a crisis situation.

SMA will improve the crisis intervention skills of law enforcement officers through ongoing training in the Crisis Intervention Training (CIT) model. SMA will enhance the frequency and intensity of training to law enforcement agencies (Putnam County Sheriff’s Office, Palatka Police Department) using CIT, an evidence-

3.8.6.3.3 A description of the strategies SMA intends to use to serve the Target Population, including a description of the services and supervision methods to be applied and the goals and measurable objectives of the new interventions.

SMA's CTTU is a specialized diversion program. Law enforcement will be trained to utilize CIT when interacting with individuals experiencing a behavioral crisis. Law enforcement will also be able to utilize the CTTU to assist with transportation. Knowing that this service is available for all law enforcement in Putnam County, officers will utilize CTTU services rather than arrest Putnam residents who are experiencing a behavioral crisis.

SMA proposes to utilize is CTTU to servici

		65% of those engaged in Case Management services will be employed or enrolled in school during program participation and one year post discharge. 85% of eligible participants will be assisted by CTTU in obtaining social security or other benefits for which they may be eligible but were not receiving at Program admission. 90% of program participants will be diverted from a State Mental Health Treatment Facility for adults or a Statewide Inpatient Psychiatric Program (SIPP) for youth.		
1.3	Train Law Enforcement Officers and supporting staff in the principles of CIT and/or Mental Health First Aid.	85% of the Putnam County Sheriff's Office deputies will be trained in CIT SMA will conduct at least 3 CITs in Putnam County and 5 Mental Health First Aid trainings	VP of Putnam County- SMA	09-01-19 Ongoing

Objective 2 - Continue collaboration among stakeholders in implementing the Strategic Plan for Improving Crisis Response for all Putnam residents in Behavioral Health Crisis and providing ongoing oversight and qual ity improvement activities.

2.1	SMA will participate and present a summary of the progress in expanding CTTU operations as well as numbers of adults and youth served at each Putnam County PSCC meeting.	SMA will provide a summary at each PSCC meeting 100% of the time and will be reflected in the minutes.	VP of Putnam County- SMA	09-01-19; ongoing
2.2	SMA will establish a timeline of activities and share the progress of accomplishing objectives			

	defined in the timeline to the PSCC at each meeting.	PSCC meeting 100% of the time.		
2.3	MOUs between Department of Juvenile Justice and SMA as well as Baker Act Receiving Facilities will include responsibilities of sharing statistical data and client information sharing as part of discharge planning and follow up services.	Executed MOU between all parties	VP of Putnam County- SMA	10-01-19
2.4	Lutheran Services of Florida (LSF) will be invited to attend the Putnam PSCC in order to be included in the CTTU Expansion information.	LSF will be invited to attend PSCC 100% of the time.	VP of Putnam County- SMA	10-01-19 Ongoing
2.5	Program adjustments will come from, but are not limited to, feedback from the following sources: PSCC oversight, DCF Contract Manager and feedback from quarterly reports submitted, consumer satisfaction surveys, staff input, and SMA's Quality Assurance Department.	Any adjustments made will be approved by PSCC and communicated to DCF Contract Manager	VP of Putnam County- SMA	10-01-19 Ongoing

Objective 3 - Reduce law enforcement time on the road and Putnam County expenses in providing transportation to Pu tnam County residents in mental health crisis.

3.1	SMA CTTU will record length of time to transfer custody of adolescent from law enforcement to CTTU staff, indicating whether it was less than 15 minutes.	Transfer from Putnam County Sheriff's office custody to SMA custody will be less than 15 minutes 90% of the time.	VP of Putnam County- SMA	09-01-19; ongoing
3.2	Putnam County will stop paying for private transportation except during times when CTTU is not available to provide transportation (i.e. vehicle out of commission, already transporting multiple individuals, etc.).	County's yearly costs in transportation for individuals in mental health crisis will be reduced by 80% from pre-CTTU implementation year.		

3.8.6.4.3 At least one additional proposed performance measure unique to the tasks outlined in the application, including proposed targets and methodologies.

x Reduce law enforcement time on the road and Putnam County expenses in

Since the inception of the program on 5/1/2014, through the end of December 2018, the Crisis Triage and Treatment Unit (CTTU) diverted 380 clients from a Baker Act, 190 clients from arrests, and 170 clients were diverted from a Marchman Act. During those four and half years, CTTU admitted and provided services for 1

PSCO General Order #4540 states: The Putnam County Sheriff's Office shall adhere to the comprehensive continuum of accessible substance abuse intervention, and treatment services, as set by Florida Statutes, Chapter 397, also known as the "Marchman Act." Also, PSCO General Order #4540 states: The Putnam County Sheriff's Office shall adhere to the Florida Mental Health Act, also known as the "Baker Act," Florida Statutes Chapter 394.

Putnam County Sheriff's Office deputies are trained to recognize adults and

County’s efforts to bring services into Putnam County to serve the mentally ill who are at risk for incarceration. The County currently is using funds to transport Putnam residents outside of Putnam County to Baker Act Receiving Facilities outside Putnam County as there are no receiving facilities in Putnam County.

SMA has provided Adult CTTU services over the last year for adults at risk of being arrested due to their behavioral health crisis (those placed under a Baker/Marchman Act). SMA Putnam CTTU has provided 183 Baker Act transports to the most appropriate crisis stabilization unit and assisted with 135 client transports from the crisis stabilization units. SMA Putnam CTTU has provided Case Management services to 62 clients and has delivered operative transportation services and total cost savings of $47,238.75 to Putnam County.

3.8.6.5.2 Availability of resources for the proposed project;

The expansion CTU-

SMA Healthcare will be the sole contractor for this project. SMA is selected because of it being the sole behavioral health agency capable of responding to this application and

This will result in fewer adult crisis and hospital admissions. For children, when

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Goal #1	Start Date	End Date	Resp. Partner
Expand Diversion Program (CTTU) to 24 hours a day, seven days a week and provide services to children/adolescents and adults in order to increase public safety, avert increased spending on criminal justice, and improve the accessibility and effectiveness of behavioral health treatment services.	7/1/2019	6/30	

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1- Transfer of Putnam resident from Putnam County Sheriff's office custody to SMA custody will be less than 15 minutes 90% of the time.	09/01/2019	06/30/2020 ongoing	SMA
2- Putnam County will stop paying for private transportation except during times when CTTU is not available to provide transportation (i.e. vehicle out of commission, already transporting multiple individuals, etc.).	09/01/2019	06/30/2020 ongoing	SMA, PCSO, & Putnam Co.

Tasks	Milestone	Start Date	End Date	Resp. Partner
SMA CTTU will record length of time to transfer custody of adolescent from law enforcement to CTTU staff, indicating whether it was less than 15 minutes.	Form created and implemented to track LEO time from drop off and being free to			

[redacted]

transported and linked with continuing mental health services in Putnam County by CTTU staff				
4- Individuals who accept Case Management and Care Coordination services will be monitored by CTTU staff for a period of one year.		7/1/2020	06/30/2021 ongoing	SMA
Tasks	Milestone	Start Date	End Date	Resp. Partner
Provide transportation to most appropriate receiving facility from the CTTU.	60 Adolescents requiring admission to a Baker Act Receiving Facility will be transported to the Receiving Facility from the CTTU.	7/1/2020	06/30/2021 ongoing	SMA
Provide case management and coordinate ongoing behavioral health services to the population.	Upon discharge from a Baker Act Receiving Facility, CTTU will facilitate coordination of transportation of adolescents back to Putnam County along with being linked with continuing mental health and substance abuse services in Putnam County.	7/1/2020	06/30/2021 ongoing	SMA
Coordinate data collection efforts between law enforcement, DJJ, and SMA's electronic health record to track adolescents while in the program and one year after discharge from program to include, but				

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	Officers. CIT updates and specialized 4 and 8 hour trainings for previously trained officers provided semi-annually.			ment agencies

Goal #2 Start Date

				Partner
Reduce law enforcement time on the road and Putnam County expenses in providing transportation to Putnam County residents in mental health crisis.		7/1/2020	06/30/2021 ongoing	SMA
Objectives			Start Date	End Date
1- Transfer of Putnam resident from Putnam County Sheriff's office custody to SMA custody will be less than 15 minutes 90% of the time.		07/01/2020	06/30/2021 ongoing	SMA & PCSO
2- Putnam County will stop paying for private transportation except during times when CTTU is not available to provide transportation (i.e. vehicle out of commission, already transporting multiple individuals, etc.).		09/01/2020	06/30/2021 ongoing	SMA, PCSO, & Putnam Co.
Tasks	Milestone	Start Date	End Date	Resp. Partner
SMA CTTU will record length of time to transfer custody of adolescent from law enforcement to CTTU staff, indicating whether it was less than 15 minutes.	Continue tracking on form previously created that will be reviewed monthly.	7/1/2020	06/30/2021 ongoing	SMA
Monthly invoices to Putnam County from private transportation company will be reviewed to determine the costs to the County for private transportation.	Putnam County's yearly costs in transportation for individuals in mental health crisis will be reduced by 80% from pre-CTTU implementation year.	7/1/2020	06/30/2021 ongoing	SMA & Putnam County

Year 3

Goal #1	Start Date	End Date	Resp. Partner
Expand Diversion Program (CTTU) to 24 hours a day, seven days a week and provide services			

program and one year after discharge from program to include, but not limited to the following data: arrests and stable housing.				
Train law enforcement officers in the principles of CIT.	CIT 40 hour core training conducted semi-annually for Law Enforcement Officers. CIT updates and specialized 4 and 8 hour trainings for previously trained officers provided semi-annually.	7/1/2021	06/30/2022 ongoing	SMA, DJJ, & local law enforce-ment agencies
Goal #2		Start Date	End Date	Resp. Partner
Continue collaboration among stakeholders in implementing the Strategic Plan for Improving Crisis Response for all Putnam residents in Behavioral Health Crisis and providing ongoing oversight and quality improvement activities to those being discharged from Crisis Stabilization Units.		7/1/2021	06/30/2022 ongoing	SMA, PCSO, PSCC, & PCMC

Objectives

SMA Performance Improvement Council will monitor the selected efficiency and

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