

**City of Carson City
Agenda Report**

Date Submitted: Sept. 6, 2013

Agenda Date Requested: Sept. 19, 2013

Time Requested: 5 minutes

To: Mayor and Supervisors

From: Carson City Sheriff's Office

Subject Title: For possible action: To accept the FY 13 Justice and Mental Health Collaboration Program: Planning & Implementation Grant, award number 2013-MO-BX-0007, in the amount of \$248,921. (Ken Furlong and Kathy Bartosz)

Staff Summary: The goal of this Carson City Justice and Mental Health Collaboration Program: F.A.S.T.T. (*Forensic Assessment Services Triage Team*) is to reduce recidivism among individuals encountered by law enforcement either on the street or in the jail with presenting mental illness and/or addiction, through early identification, diversion, and wrap around services. The existing FASTT has developed an effective system of problem identification and treatment. Funding from this grant will enhance the capabilities of local services in the community as part of a comprehensive aftercare plan including: A fulltime Therapeutic Assistant through Community Counseling Center, a half time Life Coach through Ron Wood Family Resource Center, housing support through Carson City Health and Human Services, and community providers education, project coordination, data collection and evaluation services through Partnership Carson City. The Carson City Sheriff's Office will serve as fiscal agent of the grant.

Type of Action Requested: (check one)

Resolution

Ordinance

Formal Action/Motion

Other (Specify)

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: I move to accept the FY 13 Justice and Mental Health Collaboration Program: Planning & Implementation Grant, award number 2013-MO-BX-0007, in the amount of \$248,921.

Explanation for Recommended Board Action: The application was submitted to the Bureau of Justice Assistance's Justice and Mental Health Collaboration Program. The purpose of the program is to increase public safety by facilitating collaboration among the criminal justice, juvenile justice, and mental health and substance abuse treatment systems to increase access to mental health and other treatment services for those individuals with mental illness or co-occurring mental health and substance use disorders.

Applicable Statute, Code, Policy, Rule or Regulation: N/A

Fiscal Impact: There is no financial impact to the city.

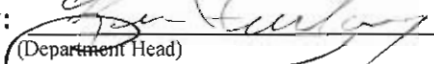
Explanation of Impact: See Above

Funding Source: The funds for this project have been obtained through a grant from the Department of Justice, Office of Justice Programs.

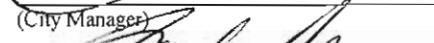
Alternatives: No participation in the grant.

Supporting Material: Grant application.

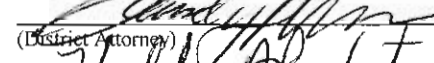
Prepared By: Kathie Heath, Chief Financial Officer

Reviewed By: 
(Department Head)

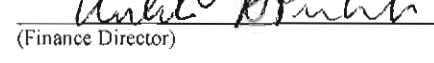
Date: 9/10/13


(City Manager)

Date: 8/10/13


(District Attorney)

Date: 9/10/13


(Finance Director)

Date: 9/10/13

Board Action Taken:

Motion: _____

- 1) _____
- 2) _____

Aye/Nay

(Vote Recorded By)



Department of Justice

Office of Justice Programs

Office of Communications

Washington, D.C. 20531

GRANT NOTIFICATION		Grant Number: 2013-MO-BX-0007
Name & Address of Recipient:	Carson City Sheriff'S Office 911 E. Musser St.	
City, State & ZIP:	Carson City, Nevada 89701	
Recipient Project Director/Contact:	Ken Furlong Sheriff	
Phone:	(775) 841-4730	
Title of Program:	FY 13 Justice and Mental Health Collaboration Program: Planning & Implementation	
Title of Project:	FY 13 Justice and Mental Health Collaboration Program: Planning & Implementation	
Amount of Award:	\$ 248,921	Date of Award: 09/05/2013
Awarding Agency:	Bureau of Justice Assistance Veronica Munson	
Supplement:	No	
Statutory Authority for Program:	FY13(BJA - JMHCP) 42 USC 3797aa	
Impact/Focus:	Discretionary	CFDA Number: 16.745
Project Description:	<p>The Bureau of Justice Assistance's (BJA) Justice and Mental Health Collaboration Program (JMHCP) is funded through the Mentally Ill Offender Treatment and Crime Reduction Act of 2004 (Public Law 108-414), which was reauthorized in 2008 (Public Law 110-416). The primary purpose of JMHCP is to increase public safety by facilitating collaboration among the criminal justice, juvenile justice, and mental health and substance abuse treatment systems to increase access to mental health and other treatment services for those individuals with mental illness or co-occurring mental health and substance use disorders. Jurisdictions were eligible to apply for planning, planning and implementation, or expansion funding through JMHCP.</p> <p>The grant recipient will use the planning and implementation grant funds to complete an already-initiated collaboration plan for their criminal justice and mental health collaboration, and then begin implementation of the plan during the project period. Grant funds can be used to support law enforcement response programs; mental health courts, pretrial services, and diversion/alternative prosecution and sentencing programs; treatment accountability services; specialized training for justice and treatment professionals; corrections/community corrections, transitional, and reentry services to create or expand mental illnesses or co-occurring mental health and substance abuse disorders support services; and non-treatment recovery support services coordination and delivery including case management, housing placement, job training, education, primary and mental health care, and family supportive services.</p> CA/NCF	
For more information about this grant, contact the Office of Justice Program's Office of Communications at 202/307-0703.		



U.S. Department of Justice

United States Attorney's Office
District of Nevada

Daniel G. Bogden
United States Attorney

333 Las Vegas Boulevard South Phone (702)388-6336
Suite 5000 Fax (702)388-6296
Las Vegas, Nevada 89101

September 5, 2013

Ken Furlong, Sheriff
Carson City Sheriff's Office
911 E. Musser St.
Carson City, Nevada 89701

Re: U.S. Department of Justice (DOJ) Grant Award


Dear Sheriff Furlong:

I am pleased to inform you that I have recently been notified that Carson City Sheriff's Office is the recipient of the Justice and Mental Health Collaboration Program: Planning & Implementation grant award in the amount of \$248,921. The awarding DOJ agency is the Bureau of Justice Assistance.

The award notification indicates that the Sheriff's Office will use the grant award to complete an already-initiated collaboration plan for the criminal justice and mental health collaboration, and then begin implementation of the plan during the project period. Any questions about use of the grant monies should be directed to your grant program managers listed on the award notification.

Thank you for your interest in the Department of Justice grant programs and your continuing commitment to working together to provide improved law enforcement services to the citizens of the State of Nevada.

Sincerely,


DANIEL G. BOGDEN
United States Attorney

Attachment

Project Abstract



Part 1: Please identify the applicant point of contact (POC)

Applicant POC	
Organization Name	Carson City Sheriff's Office
POC Name	Kathie Heath
Phone Number	(775) 283-7811
Email Address	kheath@carson.org
Mailing Address	911 East Musser St. Carson City ,NV 89701

Part 2: Please identify the application

Application Information	
Solicitation Name	Justice and Mental Health Collaboration Program FY 2013 Category 2: Planning and Implementation Competitive Grant Announcement: BJA -2013-3493
Project Title	Carson City FASTT: Forensic Assessment Services Triage Team
Proposed Start Date	October 1, 2013
Proposed End Date	September 30, 2015
Funding Amount Requested	\$248,921.00

Part 3: Please identify the project location and applicant type

Project Location and Applicant Type	
Project Location (City, State)	Carson City, Nevada
Applicant Type (Tribal Nation, State, County, City, Nonprofit, Other)	City



U.S. Department of Justice
Office of Justice Programs

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Part 4: Please provide a project abstract

Enter additional project abstract information. Unless otherwise specified in the solicitation, this information includes:

- Brief description of the problem to be addressed and target area and population
- Project goals and objectives
- Brief statement of project strategy or overall program
- Description of any significant partnerships
- Anticipated outcomes and major deliverables

Text should be single spaced; do not exceed 400 words.

Project Abstract

Carson City, Nevada, the state capital and home to 52,000 people will be the area served by this funding opportunity.

During 2011, 195 of the 2,285 individuals detained at the Carson City Jail had been diagnosed with a co-occurring disorder involving mental illness and substance abuse, and had been arrested more than once. These individuals, approximately 200 per year for two years will be the target population for this grant opportunity, with priority given to pregnant/parenting women.

Carson City Sheriff's Department (not a previous JMHCP recipient), and the Nevada Division of Mental Health are the lead agencies for this application, and are supported by the local non-profits Partnership Carson City, Community Counseling Center, and the Ron Wood Family Resource Center in the creation of a pre-booking diversion initiative called FASTT: Forensic Assessment Services Triage Team, initiated in January, 2013.

FASTT's goal is to provide "fast" response to mentally ill people encountered by law enforcement on the streets by jail staff and diverting into treatment. These individuals with no or low level offenses appropriate for pre-booking diversion are immediately seen by the Forensic Assessment Team, stabilized, and referred to the Transition Triage Team who will then create a person-centered case plan beginning with arrangements for mental health services through Carson Mental Health, or the Community Counseling Center (CCC) in the newly established "pod" for dual diagnosed FASTT clients. These services created no additional cost, simply by moving state funded psychiatric case workers and a psychologist to the jail and CCC.

The focus of this application is to improve upon the experiences of the first pilot month of FASTT by adding a Therapeutic Assistant and a Life Coach to help transition clients into treatment and independent living by using person centered care: assessing the client's functional assets and deficits (FADs) such as tending to basic needs, social and life skills, that may derail their successful re-entry and recovery. All crisis response law enforcement, FASTT staff and local social service agencies will receive training in FAD. Needed wrap around services will be coordinated through the Life Coach by Partnership Carson City and Ron Wood Family Resource Center. Given the strong and well coordinated local and state agency collaboration, this proposal's goal is to achieve a less than 20% recidivism rate among FASTT clients, and 70% will still be living independently 12 months from entering the FASTT initiative.



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PROBLEM STATEMENT

This application for the Justice and Mental Health Collaboration Program, Category 2 will serve the community of Carson City, Nevada, the state capital and home to 52,000 people.

The interest in this opportunity began with a simple pie chart. There it was. In 2011, there were 2,285 individuals detained at the Carson City County Jail, and of those, 522 (22.8%) had previously been served for a mental illness related problem. Half of the mentally ill individuals (@ 261) who were detained at CCCJ in 2011 were repeatedly (more than two times) detained in Carson City Jail in 2011, and 75% have a dual diagnosis or a co-occurring alcohol and/or drug use disorder. Clearly, within our current system something was not working for these individuals, referred to by jail staff as “frequent flyers”. *These approximately 200 mentally ill inmates with repeat incarcerations and co-occurring disorders are the target population for this funding opportunity, with priority referrals given to pregnant and parenting women.* A further review of the data told us more about these individuals. The most current mental illness and criminal justice data available from 2011 was cross-matched and analyzed at the Nevada State Health Division by Epidemiologist, Dr. Azzam, in order to assess prevalence of mental illness in the criminal justice system. Frequencies, rates, and patterns of detention at Carson City County Jail (CCCJ) of mentally ill individuals was compared with data relating to inpatient and outpatient admission/readmission into mental health services and thoroughly evaluated.

The number of persons with mental illness in the CCCJ continues to grow. It is estimated that of the 22.8% of the jail population with mental illness, the percentage of mentally ill males detained in 2011 at the CCCJ was significantly higher than that for females. About 57.1% of all individuals with mental illness who were detained at least once in CCCJ in 2011 were males.

The rate of mentally ill Caucasians (92.9%) at the CCCJ in 2011 significantly exceeded their overall rates in Carson City which is less than 70%, while about 26.4% of Carson City County residents are of Hispanic origin, a mere 18.8% of all mentally ill individuals detained at least once at the Carson City County Jail in 2011 were of Hispanic origin.

30.8% of all mentally ill individuals incarcerated at CCCJ in 2011 were age 24 or younger. Additionally, among all age groups, those aged 25 to 34 years (144) had the second highest detention rate (27.6%) in 2011.

Employment status was missing for about 35.6% of the mentally ill detainees at the Carson City County Jail in 2011. 14% were unemployed and were not seeking employment; 6.9% were full-time employed; and about 4.0% were part-time employed. 7.1% were students; 2.7% were homemakers; 0.4% were military; and 0.2% were retired.

About one-fifth of individuals with mental illness detained at least once at the Carson City County Jail had a high school diploma; 7.9% had some college education; 12.3% had some general education; 2.1% had vocational or technical school training; 1.3% had college degrees; and about 0.6% had graduate degrees.

Originally within the CCCJ, mental health intervention services provided by Dr. Joe McEllistrem, the Forensic Psychologist and David Ramsey, the Physician's Assistant who assess clients in the jail, were limited to providing stabilizing medication as indicated, and referral to mental health and substance abuse services upon release. Sometimes referrals to the Mental Health Court assist with providing the incentive and accountability to follow through with recommendations, others fall under the supervision of Alternative Sentencing, while others serve their time and are released to the street. Case closed, until they come back – 261 of them.

In this traditional disease oriented medical system there was no expedited diversion protocol

for those with presenting mental illness, and there was limited time for symptom identification beyond the necessary medical findings to establish a treatment protocol. Therefore once the medical symptoms had been successfully addressed, from a System standpoint the case is closed. But, from a person centered standpoint, the functional deficits to include (but not limited to) poor interpersonal skills, deficits in social judgment, poor organizational abilities, etc. which can lead to significant problems are not addressed. Unfortunately, consequences of the functional deficits can lead to a mental health and/or substance abuse relapse, and another trip to jail.

Richard Whitley, the administrator for the Nevada Division of Health, as well as the Division of Mental Health (in the process of merger into one Division of Behavioral and Public Health) requested the support of the Partnership Carson City, the local community health and safety coalition. His intent was clear: reduce the incidence of mentally ill people committing crimes by bringing state mental health staff and resources to the community table. Mr. Whitley presented the *Sequential Intercept Model* to Partnership Carson City's Steering Committee, a task force of "heavy hitters": department heads and elected officials such as the Sheriff, District Attorney, both Municipal Court Judges, and the Chief of Alternative Sentencing and invited Dr. Joe McEllistrem, the Forensic Psychologist, Dave Ramsey, the Nurse Practitioner, and Bekah Bock, the state Clinical Director of Mental Health services in the Carson City area. Following a prototype of the Sequential Intercept Model, they assessed the current response to the target population on the street and within the jail, and identified where intervention steps were lacking or in need of improvement. They reorganized existing state and local resources to create **FASTT**: The Forensic Assessment Services Triage Team. The FASTT program is a Pre-Booking Jail Diversion intervention program designed for a "fast" response assessment and referral as opposed to a Post-Booking Jail Diversion program best represented by the Carson Mental Health

Court. The FASTT strategy begins with: 1) client identification, 2) referral for Forensic evaluation, and stabilization, 3) referral to a Transition Triage Team for full client assessment and treatment case plan based on the recommendations of the Forensic evaluation, and 4) transfer to the treatment provider. From the previous two-person forensic team, the FASTT expanded to include two staff from the state Carson Mental Health Center (CMHC) making up the Triage Team. The state also relocated two existing staff to the Carson City Community Counseling Center (CCC), the only non profit substance abuse treatment facility to accommodate co-occurring disorder FASTT clients that will be treated at CCC, thereby requiring psychiatric expertise that current CCC staff does not have.

Although the state and local collaborative team comprised of law enforcement and mental health professionals created through FASTT has greatly improved services to inmates with mental illness, some gaps in client need response were identified during the first pilot month: 1) "Street" officers were not adequately trained to handle those with obvious mental disturbances, and most referrals for FASTT were coming from the Booking officer. Training is needed for street officers and dispatch to intervene in mental health "first aid" and crisis intervention; 2) Current FASTT forensic mental health assessment services are primarily directed at identifying, stabilizing, and addressing psychiatric crises, and do not allow adequate time for the forensic psychologist or nurse practitioner to continue to stabilize mentally disturbed inmates in crisis that may be driven by florid psychosis, drug/alcohol withdrawal, or suicidal ideation while transitioning to treatment. A Therapeutic Assistant is needed to provide therapeutic support for the mentally ill inmates in process of transfer and personally assist them in getting to their treatment center; 3) the treatment plan that is crafted for the inmate by the FASTT Transition Triage Team while they are in custody currently focuses on their mental health treatment needs

and includes ongoing care and follow up when they are released back into the community. We have identified a need, both in the jail and following an inmate's immediate release from custody, to accurately assess, across a broad range of symptom and functional domains. Arthur J. Anderson, Ph.D. □Helen Bellfield, D. Clinical Psych. state in their research, "Functional Assessment of Mental Health and Addiction: A Treatment Planning and Evaluation Strategy for Clients Suffering from Co-Morbidity":

"The assessment of client functioning is a critical component of both treatment outcome evaluation and assessment of individual level of need for individual treatment planning and service delivery selection. The Functional Assessment of Mental Health and Addiction scale (FAMHA) was specifically designed to meet both criteria. This is utmost importance for dually diagnosed clients, with multiple service needs in mental health, addiction treatment, and medical interventions. A basic, core goal of all treatment is to produce substantial and enduring changes in client behaviors, cognitions and moods and more useful strategies for managing their day-to-day lives. The only other goal of treatment is then to reduce a client's distress to the greatest degree possible. By determining a client's overall level of functioning, specific functional deficit profiles emerge that can then be used for more effective treatment planning. Such assessments are client centered by their very nature and specifically relate to the distress and difficulties that each patient must endure in their daily lives. Thus, functional assessments are the key to not only measuring the outcomes of treatments on a broad scale, but crucial to the clinician's full understanding of patient's individual needs."

A part time "Life Coach" is needed to work with client's functional assets and deficits, and to help the inmate navigate through the land mines that may cause their recovery to unravel once they leave treatment due to functional deficits. Training in functional assets and deficit

assessment and case management will be part of this strategy for clinicians and social service providers. Finally, as simple as it may sound, the crucial issue of a lack of free or affordable temporary housing can be the deal breaker for many FASTT clients. Therefore, financial assistance to support temporary housing while other alternatives are explored will be essential. *We are requesting funds under Category 2 to allow for the continued planning, implementation and evaluation of FASTT to include the necessary interventions revealed in the first pilot month.*

PROGRAM DESIGN AND IMPLEMENTATION

The FASTT program development began October 19, 2012 when Mr. Whitley first engaged Partnership Carson City. His Nevada Division of Mental Health and Disability Services will act as the mental health services partner for this initiative. The Carson City Sheriff's Department, the applicant agency, represents the criminal justice system, and the Partnership Carson City will coordinate community-based support services.

FASTT was piloted on January 27, 2013. By February 28th, 44 were referred for FASTT services, and 34 met FASTT criteria. The goal for this fledgling project will be to narrow down the FASTT clients to 200 per year based on the 2011 number of mentally ill with dual diagnosis and multiple low level offense arrests, or crisis calls. Priority will be given to co-occurring disordered pregnant/parenting women. In this section the needed improvements identified through the first month of implementation of the current FASTT program are articulated in goals and measurable objectives.

GOAL I: Create an early identification and referral system for client entry into FASTT.

Objective A: *15 officers per year will be trained in mental health "First Aid" response and demonstrate the appropriate skill set to respond to a mental health illness involved crisis call.*

Discussion: Outside the jail facility, the Crisis Intervention Team (CIT) from the Sheriff's Office will respond to crisis calls in the community facilitating a connection between a potential client in need and a mental health care provider before a crisis develops into an "arrestable" offense. A deputy will be assigned as a point of contact for crisis calls and will involve an onsite mental health care provider from Carson Mental Health if necessary. During the FASTT first pilot month, all referrals came from staff inside the jail, so in March 2013, 15 officers were trained in crisis intervention by the Forensic Psychologist, with another training scheduled in 12 months to generate "street" referrals to FASTT.

Objective B: *Six dispatch operators will be trained to identify and appropriately address a caller dealing with a mental health crisis.* Discussion: No dispatchers have received training specific to calls from people dealing with mental distress, either the caller's or someone else, and assist until help arrives. FASTT will provide the training, and adding a tracking system for measuring contacts involving a mentally ill person, both through dispatch calls, and personal contact.

GOAL II: Inmates with presenting mental health and substance abuse conditions will be assessed for diversion through FASTT, with priority given to those with co-occurring disorders, and pregnant or parenting women.

Objective A: *100% of jail inmates referred for mental health issues will initially be assessed by the Forensic Health Services Team: Dr. Joseph McEllistrem, PhD, David Ramsey, N.P., and the Carson City Sheriff's Office Medical Deputy within 36 hours of referral.* Discussion: Dr. McEllistrem triages all referrals, identifies their release date, and documents his clinical impression. He uses evidence-based assessment tools and interviewing skills, previous contacts with client

and their criminal history to determine whether or not the inmate is appropriate for FASTT diversion. He then refers all appropriate candidates to the Transition Triage Team: Bekah Bock, Clinical Coordinator, and Kathleen Buscay, Psychiatric Caseworker,(both with the state Carson Mental Health Center) and a Therapeutic Assistant licensed in Alcohol and Drug Abuse Counseling (secured through this grant).

Objective B: *The Transition Triage Team will screen all referrals for FASTT and complete a Person centered case management plan within seven days of notification of a referral.*

Discussion: The Transition Triage Team will conduct a screening and develop the discharge plan while the client is still incarcerated including a medical response and care, and an assessment of the functional strengths and deficits the individual brings to the circumstances he/she is confronted by using the Functional Assessment of Mental Health and Addiction scale. The assessment and case management plan will include the recommendations of the Forensic Health Services Team for a medical treatment services plan, review of the client's education and vocational training and previous experiences, family and social relationships and ability to provide basic needs(food, shelter). If ancillary health services are necessary, the Transition Triage Team will make arrangements for further assessment and treatment of those as well.

Objective C: *Ensure all FASTT clients are stabilized while transition into services identified in the case management plan are prepared.* Discussion: Dave Ramsey N.P. , will be notified of the inmate's first psychiatric appointment with Carson Mental Health. He will write, within reason, scripts of all necessary medications to bridge the gap between the inmate's departure from the jail and their first medication appointment. Dr. O'Shaunessy, M.D., will continue supervision of Dave Ramsey for inmates released from jail custody until they are admitted to another treatment option. The Therapeutic Assistant, part of the Transition Triage Team, working under the

direction of Dr. McEllistrem will meet continually with all inmates preparing for release into services while still in jail to ensure stabilization and avoid crises.

GOAL III: Inpatient and out patient services will be available for all dual-diagnosed clients appropriate for FASTT, with an emphasis on pregnant and parenting women.

Objective A: *Services at Community Counseling Center will be enhanced to accommodate FASTT clients with psychiatric involved, dual-diagnosis.* Discussion: Approximately 80 percent of inmates identified with mental illness are also dually diagnosed with substance abuse or dependence. The Community Counseling Center (CCC) has set up a minimum three-bed “pod” that can be expanded as needed for dual-diagnosis clients requiring residential care. Dave Ramsey, N.P., will work with CCC to provide medical coverage, assessment, and medication management. This will allow for continuity between the jail and CCC. One of Carson Mental Health Center’s (CMHC) state funded mental health counselors, Caron Tayloe, MFT, LADC, is now based at Community Counseling Center (CCC) weekly to assist with any FASTT referrals who are placed in residential services for co-occurring disorders, and Dr. Kristi Walter, a state funded psychologist has been relocated to Carson City to provide treatment, clinical oversight and training. This treatment team is in line with the GAINS Center model for consistency in treatment for both substance abuse and mental illness. CCC staff has experience in working with pregnant and parenting women, and developed a network of support for women exiting treatment for parenting classes, anger management, nutrition and domestic violence counseling, and these contacts and relationships are built while the women are still in treatment. CCC currently follows the Cognitive Behavioral Therapy model, considered a promising practice.

Objective B: *Carson Mental Health Center will ensure no waiting for FASTT clients, and provide evidence –based best practices.* Discussion: All mental health treatment practices for FASTT clients provided at Carson Mental Health Center are evidence based practices and include: Illness Management and Recovery (IMR), Cognitive Behavioral Therapies including Dialectical Behavioral Therapy and Acceptance and Commitment Therapy, and Psychopharmacology and Co-Occurring programming utilizing Seeking Therapy. CMHC staff will be available immediately either on site, or through CCC.

GOAL IV: Comprehensive release and treatment re- entry supervision and services will be an integral component of FASTT.

Objective A: *Upon release from jail/residential treatment, all FASTT clients will have assistance as needed with maintaining medical support outlined in their case management plan.*

Discussion: The FASTT Therapeutic Assistant will maintain contact with the prospective client periodically and make sure they get to their first medical appointment and continue contact as needed. Department of Alternative Sentencing (DAS) for client’s placed under their supervision will have the most contact with the individual and will most likely identify any emerging problems first. The Therapeutic Assistant will be the point person DAS can call to identify new problems or needs of the client that are revealed during the course of their normal routine of supervising the individual. Intervention by the FASTT Transition Triage Team can then occur to avoid a crisis. Clients that do not follow through with recommendations for treatment may be in violation of probation /parole, and required to return to court, or referred to Drug or Mental Health Court. Clients violating conditions of parole/probation may be returned to jail.

Objective B: *All FASTT clients will have the personal support necessary to navigate life outside of jail and live independently.* Discussion: If determined necessary, the Transition Triage Team will assign the inmate to a Life Coach, a new part time position proposed through this grant, trained in functional assets and deficits and based in the Ron Wood Family Resource Center. The Life Coach will assist the client with housing, employment, education, transportation and basic necessities identified in their case management plan to avoid re-arrest as a result of functional difficulties. This is critical to a Person Centered approach to care, and imperative to stabilization and successful community re-entry. A bi-lingual Community Health Advocate available through Partnership Carson City will be assigned to assist clients with limited English skills. The director of Ron Wood Family Resource Center will review the Supported Employment and Higher Education Support Toolkit (evidence based programs) for implementation with their staff and the Life Coach by the end of the first grant year.

Objective C: *Partnership Carson City will ensure necessary wrap around services and basic needs are provided for FASTT clients upon release/re-entry into the community by working with the Life Coach.* Discussion: Partnership Carson City facilitates a monthly meeting of over 73 community service providers, the Community Action Agency Network (CAAN) to maintain connections between services for maximum benefit to all clients. The needs of FASTT clients can be attended to through the collaboration of the CAAN team working with the Life Coach for educational, vocational, transportation and other support service access. Carson Mental Health Center is working with Carson City Health and Human Services to contract with an apartment owner to rent two, four bedroom/bath units for FASTT clients. Each four-person unit shares a kitchen. Lack of free and affordable temporary and transitional housing is a challenge needing financial assistance from this grant initially until alternative housing can be acquired.

Partnership Carson City will provide free bus passes to FASTT clients. The Life Coach will provide continual monitoring and assistance to FASTT clients, and report to the Therapeutic Assistant, the “familiar face” that will be associated with the client from intake through re-entry. Clients (“consumers”) will be asked to complete a review of their experiences through FASTT to guide improvements to the program.

Objective D: *All professionals working with the FASTT clients will receive training in assessing and case managing Functional Assets and Deficits to ensure all those involved with the FASTT clients are approaching assistance with a Person Centered vision.* Discussion: Given the national move towards Person Centered Care, it is imperative for medical and social service professionals to understand their client’s functional strengths and limitations. Dr. Jack Araza, a seasoned psychologist in Carson City, with a background in functional assessments, will provide training in assessing Functional Assets and Deficits for local clinical and social professionals.

Accountability: The Nevada State Epidemiologist, Dr. Azzam, will set up monitoring and tracking systems with the FASTT partners for each objective identified above to ensure everything from training of officers and dispatchers, to the referral, assessment, case management, re-entry assistance, and training of clinicians and social workers has measurable performance and outcome data to support the impact of the FASTT program.

CAPABILITIES:

The success of the FASTT program is based on a strong collaboration between state and local government and the support of local community agencies. The lead agency is the **Carson City Sheriff’s Department** as the applicant, with the jail forensic team being the “epicenter” of the referral and case management team activities. Key staff include: Dr. Joe McEllistrem,

Forensic Psychologist (15 years of experience), and David Ramsey, Nurse Practitioner (11 years of experience). The lead mental health agency for this application is the **Nevada State Division of Mental Health and Disability Services- Carson Mental Health Center (CMHC)**.

Administrator, Mr. Richard Whitley, initiated this application by bringing the data compiled by Dr. Azzam, the State Epidemiologist, and creatively moving state human resources out of offices, and into the jail and treatment centers for enhanced accessibility to the clients most in need. Key staff include Bekah Bock, Clinical Director and Kathleen Buscay, Psychiatric Case Worker of the state Carson Mental Health Center. Both have over 10 years of experience. The Community Counseling Center, the non-profit substance abuse treatment facility in Carson City, offers the spectrum of in and out patient services. The director, Mary Bryan, brings over 25 years of experience. She has added three beds to her facility for dual –diagnosed clients, and will hire and supervise a full time Therapeutic Assistant (to be hired with federal assistance) that will assist with FASTT clients stabilization while still in jail waiting for discharge, and to be part of the assessment team to bridge clients to CCC and mental health services and monitor their re-entry. **The Ron Wood Family Resource Center** a non-profit that is the primary provider of essential services for citizens from emergency food, to family advocacy. The director, Joyce Buckingham, a seasoned non –profit administrator, will provide the Life Coach (to be hired with federal assistance) with space at her facility for easy access to resources for FASTT clients, to make sure they have adequate support and services to the degree needed to maintain stability and self sufficiency. **Partnership Carson City (PCC)**, is a non profit engaged in substance abuse prevention and health promotion for Carson City since 1989. The director, Kathlyn Bartosz has over 25 years in program development, coalition building, and project evaluation. PCC facilitates the Community Action Agency Network, a collaborative of community service agencies that will

bring their resources to assist with wrap around services and support for FASTT clients. PCC will also organize the Functional Assets and Deficits training for clinicians and social service agencies, with Dr. Jack Araza, PhD. The only barrier foreseen during the pilot period that has not been addressed by federal assistance requested in this grant, is community perception that individuals with mental illness that have committed a crime have greater access to services than those that have no mental illness or criminal history. PCC has drafted a commentary for the local newspaper to address this concern.

Planning for collecting data required for performance and outcome measures.

The director of PCC will be responsible for coordinating all of the collection of data identified in the table below, and compile FASTT performance reports for evaluation by State Epidemiologist, Dr. Azzam, and for federal progress reporting purposes. *The overall goal target is a 20% recidivism within one year for all FASTT clients receiving diversion services.*

Performance Measures	Data Collection plan/source
Percent increase in the number of police service calls involving persons with mental illness that were responded to by specially trained officers	The call log will be maintained by the Dispatch Coordinator. Target % increase for response by trained officers: 20%. From 2012.
# of people receiving field screenings for mental illness	The CIT Supervisors on shift will log field screenings. Target % increase will be 20%. From 2012.
Average amount of time participants are confined to a jail, prison, or hospital due to mental health crisis	The goal will be for all FASTT clients to be transferred to treatment services within one week, and no longer than 2 weeks with extenuating circumstances.
# of criminal justice system staff available to respond to incidents involving persons with mental illness	The number of street officers trained will be increased by 15 from 2012.
# of different types of agencies participating in mental health and criminal justice issues training	The number of agencies participating in FAD training within the jail and in the community will be increased by a minimum of 20 social service agencies per year.
Percent of participants successfully completing alternative sentencing or diversion from prosecution programs	The number completing diversion programs will be tracked by the Therapeutic Assistant, and given to the PCC Director for evaluation. The target for completion will be 70% of those referred.

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

The rate of recidivism for participants in alternative sentencing or diversion from prosecution programs	Recidivism will be tracked by the jail booking staff, and given to the PCC Director for inclusion in analysis. The target recidivism rate will be 20% or less.
Recidivism rate of participants who have completed alternative sentencing or diversion programs	See above
# of people treated for mental illness, substance abuse, or co-occurring disorders	These numbers will be tracked through CCC and Carson Mental Health estimated per year is 200.
# of people receiving employment, education, or housing services	A minimum of 70 people will receive services per year.
Percent of people obtaining and maintaining employment after receiving services	The Life Coach will track these cases, and the targeted percent is 50%
Percent of people obtaining and maintaining housing after receiving services	The Life Coach will track these cases, and the targeted percent is 50%
Percent of people earning degrees or certifications after receiving education services	The Life Coach will track these cases, and the targeted percent is 50%

Plan for Measuring Program Success to Inform Plans for Sustainment

Dr. Azzam, the State Epidemiologist will conduct an analysis measuring the success of FASTT clients compared to those not participating in FASTT. The core performance measure data collected as articulated in the previous table will be collected at the end of the first and the second year to begin the establishment of trend data, and inform improvement to the program.

Dr. Azzam will create the consumer FASTT review forms, and analyze to assess the impact of the person centered approach and community services. Dr. Azzam has the capacity to enter data to allow for covariates such as number of dual diagnosed individuals recidivism rates compared to those with either mental health or substance abuse diagnoses, success with women versus men, and the impact of wrap around service providers' involvement. This information will be used at the beginning of the second year to shift resources as needed, and fill in gaps revealed in needed responses. On March 15, 2013, FASTT was presented to the Nevada State Legislature as a promising program for statewide implementation. They requested another report when they meet again in 2015. Mr. Whitley will prepare a report articulating what we hope will be the success of targeted, person centered comprehensive diversion services, and the safety and fiscal impact on a community to encourage state level policy change and state funding support.

BUDGET

CARSON CITY JUSTICE AND MENTAL HEALTH COLLABORATION PROGRAM: *FASTT*

The following budget reflects the costs for FASTT that are not currently in place and already sustainable. Cost items below are requested to match the objectives that were identified in the grant as services needed for the FASTT plan to be successful, and adopt a Patient Care centered approach to mentally ill, dual diagnosed inmates, there by ensuring long term functional lives for the FASTT clients.

BUDGET SUMMARY

BUDGET CATEGORY	TOTAL	FEDERAL REQUEST	NON FEDERAL MATCH
PERSONNEL	\$189,940	\$153,940	\$36,000
FRINGE	\$40,792	\$32,376	\$8,416
TRAVEL	\$10,505	\$10,505	0
EQUIPMENT	0	0	0
SUPPLIES	0	0	0
CONSTRUCTION	0	0	0
CONSULTANTS	\$4,500	\$4,500	0
OTHER COSTS	\$68,000	\$47,600	\$20,400

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

INDIRECT COSTS	0	0	0
TOTAL	\$313,737	\$248,921	\$64,816

BUDGET DETAIL AND NARRATIVE

The budget narrative is included under each category for ease of the reviewer.

PERSONNEL:

YEAR ONE:

Position	Computation	Cost
Therapeutic Assistant	2080 hrs x \$25	\$52,000.00
Life Coach	1040 hrs x \$18	\$18,720.00
PCC Director - Evaluation	250 hrs x \$25	\$6,250.00
CCC Director – Supervision	240 hrs x \$40	\$9,600.00 (Match)
RWFRC Director – Supervision	240 hrs x \$35	\$8,400.00 (Match)
SUB TOTALS		\$76,970.00 federal grant \$18,000.00 Match
TOTAL		\$94,970.00

YEAR TWO:

Position	Computation	Cost
Therapeutic Assistant	2080 hrs x \$25	\$52,000.00
Life Coach	1040 hrs x \$18	\$18,720.00
PCC Director - Evaluation	250 hrs x \$25	\$6,250.00

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

CCC Director – Supervision	240 hrs x \$40	\$9,600.00 (Match)
RWFRC Director – Supervision	240 hrs x \$35	\$8,400.00 (Match)
SUB TOTALS		\$76,970.00 federal grant \$18,000.00 (Match)
TOTAL		\$94,970.00

NARRATIVE:

Therapeutic Assistant: This position will provide the FASTT clients with a similar face from the triage team meeting, to supervision of the Life Coach assisting them with community stability. The Therapeutic Assistant must be a Licensed Alcohol and Drug Abuse Counselor, and have at least two years experience in counseling in a related field. The position will be considered part of the Community Counseling Center (CCC) staff, and paid by this agency. This allows for non profit professional rates, \$25/hour, which are half of their counterparts in the private and government sector. The smaller salary is balanced by the degree of training and experience this individual will receive by professionals highly revered in the community. While working with clients in the jail, this position will be under the mentorship and supervision of the Dr. Joe McEllistrem, the Forensic Psychologist. Their position will be housed in office space with access to supplies and office equipment in the jail (across the street from CCC) at no charge to the FASTT program. Mary Bryan, Executive Director of CCC will mentor and supervise the Therapeutic Assistant when transitioning clients to either CCC or Carson Mental Health and ensuring they are stabilized in the “hand off”. Finally, the Therapeutic Assistant will work closely with the directors of Partnership Carson City and Ron Wood Family Resource Center to identify needed services required in the release/re-entry plans for the FASTT client, as they supervise the Life Coach in carrying out these service provisions. The state is currently working to advance the ability of the CCC and other counseling centers statewide receiving funding assistance to bill to Medicare and Medicaid due to health care reform. This will help centers generate more income, and pick up the cost of this position at the end of the two year grant.

Life Coach: The half time Life Coach will be responsible for helping FASTT clients obtain the essentials for living a stable, and functional life. This position must have at least a high school diploma, complete the Functional Assets and Deficits Training under Dr. Araza, and demonstrate the ability to work with co-occurring disorder clients. A person in recovery for more than five years may apply. Depending on the functioning level of the client, the Life Coach may assist with everything from food, housing, reminders for appointments, assistance with the bus system, help with applications ,etc. While working under the direction of the Therapeutic Assistant, the Life Coach will have an office based at the Ron Wood Family Resource Center, for easy access to the myriad of services provided there, and the mentorship of the director, Joyce Buckingham, who will help with resource identification and locations. Ron Wood Family Resource Center is investigating training peer mentors that will work under stipends to assist FASTT clients with re-entry at the end of the grant period, or build the Life Coach position into their organization

permanently. The pay of \$18/per hour is in line with someone in non-profit expected to work somewhat independently, and take initiative.

Partnership Carson City Director (PCC): The director of PCC, Kathlyn Bartosz, has over 25 years experience in community coalition building, and evaluation development for non profits. She will provide the data collection systems to acquire the data needed to evaluate the required performance measures, and work with the state Epidemiologist to evaluate program outcomes. Ms. Bartosz also taught Special Education for 10 years, and brings a knowledge of Individual Education Plans to the table to assist the Therapeutic Assistant and Life Coach to break down the goals for the FASTT clients into manageable tasks. Ms. Bartosz did not do well in her 2 weeks as a retired person, and willingly accepted the position of director at PCC , knowing the pay would be typical of non –profits: low - \$25/hour. She is currently working 32 hours per week, and will add the additional time to dedicate to the success of FASTT.

CCC Director (match): The CCC Director, Mary Bryan, will volunteer the time to mentor the Therapeutic Assistant, create the three bed pod for dual diagnosed clients, and provide the necessary evaluation and demographic data needed to evaluate the impact and success of FASTT. As director, she averages \$40/hour, and in her private practice as an MFT makes \$75/hour, so with her 25 years experience, and extensive training of professionals in the field, she is a bargain to ensure the Therapeutic Assistant is appropriately mentored and supervised.

RWFRC Director (match): Joyce Buckingham has grown an organization that is considered the “on stop shop” for people needing assistance from food banks, clothing closets, WIC, job search, housing, parenting classes, pre-natal nutrition, medical help, and early childhood learning. Her clientele runs the gamete. She is eager to engage in the FASTT project as she already knows many of the potential FASTT clients from their time on the streets. Her current pay is \$35/hr and she will dedicate the 20 hours per week to mentoring the Life Coach, and the FASTT clients.

FRINGE BENEFITS:

YEAR ONE:

Community Counseling Center Personnel

Position	Fringe Benefit	Computation	Cost
CCC Director	FICA	.0765 x \$9,600.00	\$734.00 (Match)
Therapeutic Assistant		,0765 x \$52,000.00	\$3,978.00
CCC Director	Workmen’s Comp	.02 x \$9,600.00	\$192.00 (Match)
Therapeutic Assistant		.02 x \$52,000.00	\$1,040.00
CCC Director	Fed. Unemp.	.02 x \$9,600.00	\$192.00 (March)
Therapeutic Assistant		.02 x \$52,000.00	\$1,040.00
CCC Director	Health Stipend	\$530/mo x 12 x 11.5%	\$731.00 (Match)

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Therapeutic Assistant		\$530/mo x 12	\$6,360.00
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Ron Wood Family Resource Center

Position	Fringe Benefit	Computation	Cost
RWFRC Director	FICA	.0765 x \$8,400.00	\$642.00 (Match)
Life Coach		.0765 x \$18,720.00	\$1,432.00
RWFRC Director	Workmen's Comp	.02 x \$8,400.00	\$168.00 (Match)
Life Coach		.02 x \$18,720.00	\$374.00
RWFRC Director	Fed. Unemp.	.02 x \$8,400.00	\$168.00 (Match)
Life Coach		.02 x \$18,720.00	\$374.00
RWFRC Director	Health Benefits	\$3,180.00/yr x 11.5%	\$365.00 (Match)
Life Coach		\$3,180.00/yr x 50%	\$1,590.00

Partnership Carson City

Position	Fringe Benefit	Computation	Cost
PCC Director	FICA	.0765 x \$6,250.00	\$478 (Match)
PCC Director	Workmen's Comp	.02 x \$6,250.00	\$125 (Match)
PCC Director	Un emp.	.02 x \$6,250.00	\$125 (Match)
PCC Director	Health Benefits	\$2400/yr x 12%	\$288 (Match)

SUB TOTALS (including all three agencies)	\$16,188.00 federal grant \$4,208.00 Match
TOTAL	\$20,396.00

YEAR TWO:

Community Counseling Center Personnel

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

Position	Fringe Benefit	Computation	Cost
CCC Director	FICA	.0765 x \$9,600.00	\$734.00 (Match)
Therapeutic Assistant		.0765 x \$52,000.00	\$3,978.00
CCC Director	Workmen's Comp	.02 x \$9,600.00	\$192.00 (Match)
Therapeutic Assistant		.02 x \$52,000.00	\$1,040.00
CCC Director	Fed. Unemp.	.02 x \$9,600.00	\$192.00
Therapeutic Assistant		.02 x \$52,000.00	\$1,040.00
CCC Director	Health Stipend	\$530/mo x 12 x 11.5%	\$731.00 (Match)
Therapeutic Assistant		\$530/mo x 12	\$6,360.00

Ron Wood Family Resource Center

Position	Fringe Benefit	Computation	Cost
RWFRC Director	FICA	.0765 x \$8,400.00	\$642.00 (Match)
Life Coach		.0765 x \$18,720.00	\$1,432.00
RWFRC Director	Workmen's Comp	.02 x \$8,400.00	\$168.00 (Match)
Life Coach		.02 x \$18,720.00	\$374.00
RWFRC Director	Fed. Unemp.	.02 x \$8,400.00	\$168.00 (Match)
Life Coach		.02 x \$18,720.00	\$374.00
RWFRC Director	Health Benefits	\$3,180.00/yr x 11.5%	\$365.00 (Match)
Life Coach		\$3,180.00/yr x 50%	\$1,590.00

Partnership Carson City

Position	Fringe Benefit	Computation	Cost
PCC Director	FICA	.0765 x \$6,250.00	\$478 (Match)
PCC Director	Workmen's Comp	.02 x \$6,250.00	\$125 (Match)
PCC Director	Un emp.	.02 x \$6,250.00	\$125 (Match)

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

PCC Director	Health Benefits	\$2400/yr x 12%	\$288 (Match)
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SUB TOTALS (including all three agencies)	\$16,188.00 federal grant \$4,208.00 Match
TOTAL	\$20,396.00

NARRATIVE:

All of the FICA, Workmen’s Comp. and Unemployment benefits are calculated based on the percentages currently applied to the three non-profit organizations. These are standard for non-profits. All three agencies handle health stipends differently. Most non-profits are too small to afford health insurance, and common practice is to offer a health stipend, paid to the employee once a month. The exception for this grant is CCC, which pays for health insurance with a premium of \$530/month for anyone over 20 hours per week. The Therapeutic Assistant is fulltime, and will receive the full benefit. RWFRC pays a health stipend of \$265 per month for full time, so the Life Coach would be half of that as a half time employee. PCC pays \$200/month for fulltime.

The Directors of PCC, RWFRC, and CCC are considered match and not charged to this grant. Only the new positions, the Therapeutic Assistant and the Life Coach have fringe applied.

TRAVEL:

YEAR ONE:

Purpose of Travel	# of People	Item	Computation	Cost
Required WDC training for 3 days, 2 days travel	3 people	airfare	\$500/person x 3	\$1,500.00
		Lodging	\$200/night x 4 nights x 3	\$2,400.00
		Per diem in WDC	\$71/day x 3 days x 3	\$639.00
		Per diem travel days	\$53/day x 2 days x 3	\$318.00
		Airport pking	\$14/day x 5 days	\$210.00

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

			x 3	
Life Coach ground travel		Mileage	56.5 cents/mile x 2,400 miles/yr	\$1,356.00
TOTAL				\$6,453.00 federal grant

YEAR TWO:

Purpose of Travel	# of People	Item	Computation	Cost
Required WDC training for 2 days, 2 days travel	2 people	Airfare	\$500/person x 2	\$1,000.00
		Lodging	\$200/night x 3 nights x 2	\$1,200.00
		Per diem in WDC	\$71/day x 2 days x2	\$284.00
		Per diem travel 2 days	\$53/day x 2 days x 2	\$212.00
Life Coach ground travel		mileage	56.5 cents/mile x 2400 miles/yr	\$1,356.00
TOTAL				\$4,052.00 federal grant

NARRATIVE:

We have built in the trips required by this grant: two trips to WDC, one for three days and one for two days. Given the location of Nevada, this requires that we build in two days of travel for each training. The cost of the airfare was pulled from Southwest at their current rates as of this month. WDC is one of the highest Government approved travel rates, unfortunately, (we can get you much better rates and a free roll of nickels if you move the training to Reno...) so we were locked into the \$200 a night for lodging, and the per diem rates for meals – both for government rates for in-day training and lower for the travel days.

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It is assumed the Life Coach will be driving around Carson City to access services for FASTT clients, and check in with them, so it was estimated at 200 miles per month, at the government approved rate of .565 cents per mile.

EQUIPMENT:

None.

SUPPLIES:

None.

CONSTRUCTION:

None.

CONSULTANTS/CONTRACTS:

YEAR ONE:

Consultant -activity	Calculation	Cost
Dr. Jack Araza, training in Functional Assets and Deficits assessment and case management	\$450/day x 6 days for development of assessment tool and training curriculum \$450/day for training x 2 days	\$3,600.00
TOTAL		\$3,600.00 federal grant

YEAR TWO:

Consultant -activity	Calculation	Cost
Dr. Jack Araza, training in Functional Assets and Deficits	\$900.00 training = one day prep and one day training	\$900.00

Carson City FASST Application for Justice and Mental Health Collaboration Program: Category 2

assessment and case management		
TOTAL		\$900.00 federal grant

NARRATIVE:

Dr. Jack Araza is a long time Clinical Psychologist in Carson City, and one of the more experienced in working with co-occurring disorders, and a strong advocate of Patient Centered Care. Dr. Araza has researched functional assets and deficits (FAD), and reviewed assessment tools. Dr. Araza will dedicate a minimum of six days to the development of a FAD training appropriate for social service agency employees that may be involved with FASTT clients, such as job search, housing, pregnancy centers, food stamps, etc. The curriculum will include the presentation and training, and the tools necessary for the training participants to take with them to refresh themselves on FADS, and conduct informal assessments to assist them when working with clients. Dr. Araza will also create a more advanced tool for clinicians working with FASTT clients in the jail, CCC, Carson Mental Health Center, and RWFR. One training will be conducted each year. Costs are calculated at the government limit of \$450 per day.

OTHER COSTS:

YEAR ONE:

Description	Computation	Cost
Transitional Housing	\$400/ mo per living pod x 3 pods x 12 months \$400/mo per living pod x 2 pods x 12 mo	\$14,400.00 \$9,600.00 Match
Cel phone	2 cell phones x \$45/mo x 12 mo.	\$1,080.00
computers	2 computers x \$1,000.00	\$800.00 grant \$1,200.00 Match
Life Coach rent space	\$660/mo x 12 mo. includes rent and utilities, supplies and copier	\$7,920.00
SUB TOTAL		\$24,200.00 federal grant \$10,800.00 Match
TOTAL		\$35,000.00

YEAR TWO:

Description	Computation	Cost
Transitional Housing	\$400/ mo per living pod x 3 pods x 12 months	\$14,400.00
	\$400/mo per living pod x 2 pods x 12 mo	\$9,600.00 Match
Life Coach rent space	\$660/mo x 12 mo. includes rent and utilities, supplies copier, printer, bookkeeper, and liability.	\$7,920.00
Cel phone	2 cel phones x \$45/mo x 12 mo.	\$1,080.00
SUB TOTAL		\$23,400.00 federal grant \$9,600.00 Match
TOTAL		\$33,000.00

NARRATIVE:

Housing: One area that has been a stumbling block for those transitioning out of residential treatment services has been the lack of free or affordable transitional housing. Carson Mental Health has negotiated with a local apartment owner to rent units that include four bedroom/bath “pods” sharing one kitchen. Each pod is \$400/month. Two four bedroom units will be reserved for FASTT clients. This grant is requesting start up funds that can be used to pay for a full pod, or a percentage of a pod based on the client’s ability to pay, and subsidized by client income. Each client’s stay in the pod will depend upon their ability to become stable and self supporting. In the long term, CCC is currently in negotiations to secure a four bedroom home that would work well as a transitional facility. The state Mental Health Division is trying to secure the necessary funding to make the upgrades (fire sprinkler system, etc.) required for a transitional facility. It is estimate this may take about one year before the building is open and ready for FASTT clients. Clients living is supported housing will be under the supervision of the Life Coach.

Life Coach office rental space and support: Ron Wood Family Resource Center will provide office space and support services that is all inclusive of space (12’x 12’ office), furniture, utilities, janitorial, office supplies, use of copier, printer, and fax, bookkeeper, increase in liability insurance for the position. A portion of the liability insurance and bookkeeper is also included. The estimated amount is based on a standard rate applied to all positions.

Cell phones: The two positions supported by this grant, the Therapeutic Assistant and the Life Coach will each need a cell phone given the nature of their positions - out in the field with clients. The cheapest rate was found through WalMart for \$45/month which would give the amount of minutes needed per month in the plan, and doesn't charge fees or penalties for cancelling or transferring service.

Computers: Each of the positions supported by this grant, the Therapeutic Assistance and the Life Coach will need a lap top computer they can use at their desk or on the move. The cost is \$1,000 per computer, but only \$400 per computer will be charged to this grant and the balance is being paid through a donation by the store who is supportive of this project.

INDIRECT COSTS:

None.

**CARSON CITY FASTT: FORENSIC ASSESSMENT SERVICES TRIAGE TEAM
PROJECT TIMELINE**

The Project Timeline illustrates the progression of the FASTT project. The first column includes the goals, objectives and activities as they are written in the grant narrative. The second column labeled “In place prior to FASST” shows the Carson City Sheriff’s Department and Jail response to mentally ill people brought to their attention. The next column labeled “Completed through current FASTT” are the strategies initiated between January and February, 2013 *that will be continuing throughout the grant period*. The next 8 columns refer to the eight quarters in the two year grant award period, and the quarter we anticipate the activity will be initiated is checked. The anticipated completion date (unless the activity is on going) is given and the person responsible in the last two columns.

GOALS/OBJECTIVES/ACTIVITIES	IN PLACE PRIOR TO FASST	COMP. THRU CURRENT FASST	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP DATE	RESPONSIBLE PERSON
GOAL I: Create an early identification and referral system for client entry into FASTT.												
Objective A: <i>15 officers per year will be trained in mental health “First Aid” response and demonstrate the appropriate skill set to respond to a mental illness involved crisis call.</i>												
<i>The Crisis Intervention Team (CIT) from the Sheriff’s Office will respond to crisis calls in the community facilitating a connection between a potential client in need and a mental health care provider before a crisis develops into an “arrestable” offense.</i>		X									n/a	Sgt. Craig Lowe
A deputy will be assigned as a point of contact for crisis calls and will involve an onsite mental health care provider from Carson Mental Health if necessary.			X								10/31/13	Sgt. Craig Lowe
In March 2013, 15 officers were trained in crisis intervention by the Forensic Psychologist.		X									n/a	Dr. McEllistrem, Sheriff Furlong
Another training scheduled in 12 months to generate “street” referrals to FASTT.			X								11/30/13	Dr. McEllistrem, Sheriff Furlong
Objective B: <i>Six dispatch operators will be trained to identify and appropriately address a caller dealing with a mental health crisis.</i>												
FASTT will provide the training, and add a tracking system for measuring contacts involving a mentally ill person, through dispatch calls, and personal contact.			X								11/30/13	Dr. McEllistrem, Sheriff Furlong

GOALS/OBJECTIVES/ACTIVITIES	IN PLACE PRIOR TO FASST	COMP. THRU CURRENT FASST	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP DATE	RESPONSIBLE PERSON
GOAL II: Inmates with presenting mental health and substance abuse conditions will be assessed for diversion through FASTT, with priority given to those with co-occurring disorders, and pregnant or parenting women.												
Objective A: 100% of jail inmates referred for mental health issues will initially be assessed by the <u>Forensic Health Services Team</u> : Dr. Joseph McEllistrem, PhD, David Ramsey, N.P., and the Carson City Sheriff's Office Medical Deputy within 36 hours of referral.												
Dr. Mc Ellistrem triages all referrals, identifies their release date, and documents his clinical impression. He uses evidence-based assessment tools and interviewing skills, previous contacts with client and their criminal history to determine whether or not the inmate is appropriate for FASTT diversion.	x										n/a	Dr. McEllistrem
Dr. McEllistrem then refers all appropriate candidates to the <u>Transition Triage Team</u> : Bekah Bock, Clinical Coordinator, and Kathleen Buscay, Psychiatric Caseworker,(both with the state Carson Mental Health Center)		x									n/a	Dr. McEllistrem Bekah Bock
A Therapeutic Assistant licensed in Alcohol and Drug Abuse Counseling (secured through this grant) will be hired and added to the triage team.			x								10/31/13	Dr. McEllistrem Mary Bryan
Objective B: The <u>Transition Triage Team</u> will screen all referrals for FASTT and complete a Person centered case management plan within seven days of notification of a referral.												
The Transition Triage Team will conduct a screening and develop the discharge plan while the client is still incarcerated using a medical response and care.		x									n/a	Bekah Bock
An assessment of the functional strengths and deficits the individual brings to the circumstances he/she is confronted by using the Functional Assessment of Mental Health and Addiction scale will be completed.				x	x	x	x	x	x	x	n/a	Dr. McEllistrem Bekah Bock

GOALS/OBJECTIVES/ACTIVITIES	IN PLACE PRIOR TO FASST	COMP. THRU CURRENT FASST	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP DATE	RESPONSIBLE PERSON
The assessment and case management plan will include the recommendations of the Forensic Health Services Team for a medical treatment services plan, review of the client's education and vocational training and previous experiences, family and social relationships and ability to provide basic needs (food, shelter).		x									n/a	Bekah Bock
If ancillary health services are necessary, the Transition Triage Team will make arrangements for further assessment and treatment of those as well.		x									n/a	Bekah Bock
Objective C: <i>Ensure all FASTT clients are stabilized while transition into services identified in the case management plan are prepared.</i>												
. Dave Ramsey N.P. is notified of the inmate's first psychiatric appointment with Carson Mental Health. He will write, within reason, scripts of all necessary medications to bridge the gap between the inmate's departure from the jail and their first medication appointment		x									n/a	Dave Ramsey
Dr. O'Shaunessy, M.D., will continue supervision of Dave Ramsey for inmates released from jail custody until they are admitted to another treatment option.		x									n/a	Dr. O'Shaunessy
The Therapeutic Assistant, hired as part of the Transition Triage Team, working under the direction of Dr. McEllistrem will meet continually with all inmates preparing for release into services while still in jail to ensure stabilization and avoid crises.			x	x	x	x	x	x	x	x	n/a	Dr. McEllistrem Mary Bryan
GOAL III: Inpatient and out patient services will be available for all dual-diagnosed clients appropriate for FASTT, with an emphasis on pregnant and parenting women.												

GOALS/OBJECTIVES/ACTIVITIES	IN PLACE PRIOR TO FASST	COMP. THRU CURRENT FASST	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP DATE	RESPONSIBLE PERSON
Objective A: <i>Services at Community Counseling Center will be enhanced to accommodate FASTT clients with psychiatric involved, dual-diagnosis.</i>												
The Community Counseling Center (CCC) has set up a minimum three-bed “pod” that can be expanded as needed for dual-diagnosis clients requiring residential care.		x									n/a	Mary Bryan
Dave Ramsey, N.P., will work with CCC to provide medical assessment, and medication management.		x									n/a	Dave Ramsey
One of Carson Mental Health Center’s (CMHC) state funded mental health counselors, Caron Tayloe, MFT, LADC, is now based at Community Counseling Center (CCC) weekly to assist with FASTT referrals who are placed in residential services for co-occurring disorders.		x									n/a	Richard Whitley
Dr. Kristi Walter, a state funded psychologist has been relocated to Carson City to provide treatment, clinical oversight and training.		x									n/a	Richard Whitley
CCC staff has experience in working with pregnant and parenting women, and developed a network of support for women exiting treatment for parenting classes, anger management, nutrition and domestic violence counseling, and these contacts and relationships are built while the women are still in treatment.		x									n/a	Mary Bryan
Objective B: <i>Carson Mental Health Center will ensure no waiting for FASTT clients, and provide evidence – based best practices.</i>												
All mental health treatment practices for FASTT clients provided at Carson Mental Health Center are evidence based practices and include: Illness Management and Recovery (IMR), Cognitive Behavioral Therapies including Dialectical Behavioral Therapy and Acceptance and Commitment Therapy, and Psychopharmacology and Co-Occurring programming utilizing Seeking Therapy.		x									n/a	Richard Whitley
CMHC staff will be available immediately either on site, or through CCC.		x									n/a	Bekah Bock
	IN	COMP.	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP	RESPONSIBLE

GOALS/OBJECTIVES/ACTIVITIES	PLACE PRIOR TO FASTT	THRU CURRENT FASTT										DATE	PERSON
GOAL IV: Comprehensive release and treatment re- entry supervision and services will be an integral component of FASTT.													
Objective A: <i>Upon release from jail/residential treatment, all FASTT clients will have assistance as needed with maintaining medical support outlined in their case management plan</i>													
The FASTT Therapeutic Assistant will maintain contact with the prospective client periodically and make sure they get to their first medical appointment and continue contact as needed.			x	x	x	x	x	x	x	x	x	n/a	Mary Bryan
The Therapeutic Assistant will be the point person DAS can call to identify new problems or needs of the client that are revealed during the course of their normal routine of supervising the individual.			x	x	x	x	x	x	x	x	x	n/a	Mary Bryan
Intervention by the FASTT Transition Triage Team can then occur to avoid a crisis.			x	x	x	x	x	x	x	x	x	n/a	Bekah Bock
Clients that do not follow through with recommendations for treatment may be in violation of probation /parole, and required to return to court, or referred to Drug or Mental Health Court. Clients violating conditions of parole/probation may be returned to jail.	x											n/a	DAS
Objective B: <i>All FASTT clients will have the personal support necessary to navigate life outside of jail and live independently.</i>													
If determined necessary, the Transition Triage Team will assign the inmate to a Life Coach, a new part time position proposed through this grant, trained in functional assets and deficits and based in the Ron Wood Family Resource Center. The Life Coach will assist the client with housing, employment, education, transportation and basic necessities identified in their case management plan to avoid re-arrest as a result of functional difficulties.			x	x	x	x	x	x	x	x	x	n/a	Joyce Buckingham

GOALS/OBJECTIVES/ACTIVITIES	IN PLACE PRIOR TO FASST	COMP. THRU CURRENT FASST	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP DATE	RESPONSIBLE PERSON
A bi-lingual Community Health Advocate available through Partnership Carson City will be assigned to assist clients with limited English skills.			x	x	x	x	x	x	x	x	n/a	Kathlyn Bartosz
The director of Ron Wood Family Resource Center will review the Supported Employment and Higher Education Support Toolkit (evidence based programs) for implementation with their staff and the Life Coach by the end of the first grant year.				x	x	x					9/30/14	Joyce Buckingham
Objective C: <i>Partnership Carson City will ensure necessary wrap around services and basic needs are provided for FASTT clients upon release/re-entry into the community by working with the Lief Coach.</i>												
The needs of FASTT clients can be attended to through the collaboration of the CAAN team working with the Life Coach for educational, vocational, transportation and other support service access.			x	x	x	x	x	x	x	x	n/a	Kathlyn Bartosz Joyce Buckingham
Carson Mental Health Center is working with Carson City Health and Human Services to contract with an apartment owner to rent two, four bedroom/bath units for FASTT clients. Each four-person unit shares a kitchen. Lack of free and affordable temporary and transitional housing is a challenge needing financial assistance from this grant initially until alternative housing can be acquired.			x	x	x	x	x	x	x	x	n/a	Kathleen Buscay Mary Anne Ostrander
Partnership Carson City will provide free bus passes to FASTT clients.			x	x	x	x	x	x	x	x	n/a	Kathlyn Bartosz
The Life Coach will provide continual monitoring and assistance to FASTT clients, and report to the Therapeutic Assistant, the "familiar face" that will be associated with the client from intake through re-entry.			x	x	x	x	x	x	x	x	n/a	Mary Bryan Joyce Buckingham
Clients ("consumers") will be asked to complete a review of their experiences through FASTT to guide improvements to the program.			x	x	x	x	x	x	x	x	x	Therapeutic Assistant Joyce Buckingham

GOALS/OBJECTIVES/ACTIVITIES	IN PLACE PRIOR TO FASST	COMP. THRU CURRENT FASST	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP DATE	RESPONSIBLE PERSON
Objective D: All professionals working with the FASTT clients will receive training in assessing and case managing Functional Assets and Deficits to ensure all those involved with the FASTT clients are approaching assistance with a Person Centered vision.												
Dr. Jack Araza, a seasoned psychologist in Carson City, with a background in functional assessments, will provide training in assessing Functional Assets and Deficits for local clinical and social professionals.			x				x				1/1/15	Kathlyn Bartosz Jack Araza
Goals for Program data collection, performance measurement analysis, and assessment.												
The director of PCC will coordinate the collection of data identified, and compile FASTT performance reports for evaluation by State Epidemiologist, Dr. Azzam, and for federal progress reporting purposes					x	x			x	x	9/30/15	Kathlyn Bartosz
Dr. Azzam, the State Epidemiologist will conduct an analysis measuring the success of FASTT clients compared to those not participating in FASTT.								x	x	x	11/30/15	Dr. Azzam
The core performance measure data will be collected at the end of the first and the second year to begin the establishment of trend data, and inform improvement to the program.					x	x			x	x	5/3/14 11/30/15	Kathlyn Bartosz Dr. Azzam
Dr. Azzam will create the consumer FASTT review forms, and analyze to assess the impact of the person centered approach and community services.			x								1/1/14	Dr. Azzam
DR. Azzam has the capacity to enter data to allow for covariates such as number of dual diagnosed individuals recidivism rates compared to those with either mental health or substance abuse diagnoses, success with women versus men, and the impact of wrap around service providers' involvement. This information will be used at the beginning of the second year to shift resources as needed, and fill in gaps revealed in needed responses.					x	x	x				9/30/14	Dr. Azzam
	IN	COMP.	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	COMP	RESPONSIBLE

GOALS/OBJECTIVES/ACTIVITIES	PLACE PRIOR TO FASST	THRU CURRENT FASST									DATE	PERSON
<p>On March 15, 2013, FASTT was presented to the Nevada State Legislature as a promising program for statewide implementation. They requested another report when they meet again in 2015. Mr. Whitley will prepare a report articulating what we hope will be the success of targeted, person centered comprehensive diversion services, and the safety and fiscal impact on a community to encourage state level policy change and state funding support.</p>								x		n/a	Richard Whitley	