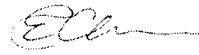


THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
ACTION AGENDA SUMMARY

DEPT: Sheriff



BOARD AGENDA # *B-9

Urgent

Routine

AGENDA DATE March 31, 2015

CEO Concurs with Recommendation YES NO
(Information Attached)

4/5 Vote Required YES NO

SUBJECT:

Approval for the Sheriff to Apply for the Mentally Ill Offender Crime Reduction (MIOCR) Grant from the Board of State and Community Corrections to Provide Services for Adult Mentally Ill Offenders

STAFF RECOMMENDATIONS:

1. Authorize the Sheriff to apply for the Adult Mentally Ill Offender Crime Reduction Grant.
2. Authorize the Sheriff to sign the grant agreement including any extension, amendments or agreements related to the Mentally Ill Offender Crime Reduction Grant.
3. Approve a formal resolution to be submitted to the Board of State and Community Corrections authorizing the Sheriff to apply for and provide matching contributions for the MIOCR grant.

FISCAL IMPACT:

If the grant is awarded, the Adult Mentally Ill Offender Crime Reduction Grant will fund Sheriff, California Forensic Medical Group, and Behavioral Health and Recovery Services staff to expand services already offered to mentally ill adult offenders. The total grant funding requested from the Board of State and Community Corrections is \$950,000 over a three year period of the grant.

Continued on Page 2

BOARD ACTION AS FOLLOWS:

No. 2015-144

On motion of Supervisor Chiesa, Seconded by Supervisor Monteith
and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Monteith, De Martini, and Chairman Withrow

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

1) Approved as recommended

2) Denied

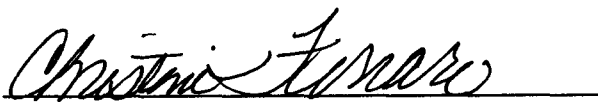
3) Approved as amended

4) Other:

MOTION:

This Item was removed from the consent calendar for discussion and consideration.

ATTEST:



CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval for the Sheriff to Apply for the Mentally Ill Offender Crime Reduction (MIOCR) Grant from the Board of State and Community Corrections to Provide Services for Adult Mentally Ill Offenders

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FISCAL IMPACT (Continued)

The MIOCR grant Request for Proposal states that the applicant must include a 25% match to any grant funds that are being requested. Also in the scoring breakdown additional points are given to applications which put up a match in excess of 25%. In order to have the best chance at receiving the grant funding the Sheriff's Department has claimed every dollar that is currently spent on services for Mentally Ill Offenders in Stanislaus County not currently pledged as match elsewhere. This meets the grant requirements for additional points and allows the BSCC to see how much of its own resources Stanislaus County will be using to supplement the grant funds being requested.

The County will provide in-kind matching funds for each of the first three years of 340% or \$1,061,673 through a combination of staffing and contract services. This amount is in excess of the 25% match in grant requirements.

There is no additional general fund obligation during the first 3 years of the grant. As a condition of the grant all of these positions and services will need to be continued into a fourth year (immediately following the 3 year grant period) at the cost of the county. This will result in the need for \$321,016 in additional funding for the fourth year. It is anticipated that funding will be provided to sustain these positions and services as part of the Public Safety Center AB900 project expansion which includes a 72-bed Medical/Mental Health Housing Unit, identified staffing, and expanded services for the Mentally Ill inmate population.

If the grant application is awarded, along with the request to accept the funding, any necessary revisions of the California Forensic Medical Group contract will also be brought back to the Board of Supervisors.

Approval for the Sheriff to Apply for the Mentally Ill Offender Crime Reduction (MIOCR) Grant from the Board of State and Community Corrections to Provide Services for Adult Mentally Ill Offenders

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A summarized breakdown of the fund recipients is included below:

GRANT FUNDS	2015-2016	2016-2017	2017-2018	2018-2019	TOTAL
Stanislaus County Sheriff's Department Deputy Sheriff-Custodial (1 MH Deputy)	94,296	98,504	102,924		295,724
California Forensic Medical Group Psychiatric RN (additional 24 hrs/week)	66,144	66,144	66,144		198,432
Psychiatrist (additional 8hrs/week)	104,000	104,000	104,000		312,000
Behavioral Health and Recovery Services Mental Health Clinician (addtl 24 hrs/week)	47,948	47,948	47,948		143,844
TOTAL GRANT FUNDS	312,388	316,596	321,016		950,000
MATCH					
Stanislaus County Sheriff's Department Deputy Sheriff-Custodial (3 FT MH Deputy)	383,433	383,433	383,433	383,433	1,533,732
California Forensic Medical Group Psychiatric RN's	110,240	110,240	110,240	110,240	440,960
Psychiatrist (16hrs/week)	208,000	208,000	208,000	208,000	832,000
Behavioral Health and Recovery Services Mental Health Clinicians	360,000	360,000	360,000	360,000	1,440,000
Fourth Year General Fund Contribution				321,016	321,016
STANISLAUS COUNTY MATCH	1,061,673	1,061,673	1,061,673	1,382,689	4,567,708

This application if awarded will require the County to fund the full cost of the deputy on the fourth year. This deputy is already scheduled to be hired as soon as the expanded facility is opened. This grant will provide funding which will allow the Department to fund and fill this position 3 years earlier than otherwise would be possible.

Approval for the Sheriff to Apply for the Mentally Ill Offender Crime Reduction (MIOCR) Grant from the Board of State and Community Corrections to Provide Services for Adult Mentally Ill Offenders

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DISCUSSION:

On two prior occasions the Stanislaus County Sheriff's Department has applied for and been granted Mentally Ill Offender Crime Reduction grants from the State of California. In each of those previous cases the Sheriff has used the funds to partially or fully fund deputies and medical health professionals who have been dedicated to security, transportation, supervision and treatment of the mentally ill offenders incarcerated at one of the detention facilities within Stanislaus County. These programs were proven to be successful in that mentally ill offenders achieved a better quality of life and more effective rehabilitation within the county detention system.

According to the California Department of Healthcare Services, Stanislaus County has a mental health prevalence rate of 14.48%. In 2014, Stanislaus County booked 21,004 people into the three adult detention facilities. If the current mental health prevalence rate of 14.48% holds true for the inmate populations as well as the population at large then Stanislaus County should have counted approximately 3,041 mentally ill offenders. An actual count of inmates who received mental health services in 2014 was 2,174 which means that the facilities only reached 71% of the anticipated mentally ill offenders who should have received service in 2014.

In an effort to meet the needs of the mentally ill offenders in each of the facilities the Sheriff's Department currently employs 3 mental health deputies who are charged with supervising mentally ill offenders and making sure they get to and from services and treatment safely and regularly. California Forensic Medical Group (CFMG) provides 2 full time Licensed Clinical Social Workers, 1 part time psychiatrist, and 1 full time Psychiatric Nurse. Stanislaus Behavioral Health and Recovery Services provides 3 Mental Health Clinicians who collaboratively provide mental health programming, administrative services, aftercare and wraparound planning.

The Sheriff's Department is seeking approval to apply for a grant for \$950,000 (over 3 years) from the MIOCR grant program. These funds will be used to fund a new Deputy Sheriff-Custodial position and partially fund an additional part-time Mental Health Clinician (additional 24 hours of service per week), an additional part-time Psychiatric Registered Nurse (additional 24 hours of service per week), and an additional 8 hours of a Psychiatrist's time per week. As a condition of the grant all of these positions and services will need to be continued into a fourth year (immediately following the 3 year grant period) without grant monies. The fourth year cost of the MIOCR will be absorbed by the Public Safety Center AB900 project expansion including the new 72-bed Medical/Mental Health Housing Unit, identified staff, and expanded services which is scheduled to open

Approval for the Sheriff to Apply for the Mentally Ill Offender Crime Reduction (MIOCR) Grant from the Board of State and Community Corrections to Provide Services for Adult Mentally Ill Offenders

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in Budget Year 2017-2018. The County along with the BSCC are required to review the success and continuance of the grant on a yearly basis.

This increased staffing and services will allow the Department to reach a much higher proportion of the mentally ill offenders that come through the county custody facilities and help develop more effective identification and evidence based programmatic approaches to treatment that are currently in effect. Fine tuning those processes now will mean that when the expanded facility opens in 2017 there will be a more effective and streamlined process in place which will allow the Department to operate a more effective mentally ill offender outreach and treatment program.

This Grant will provide a unique opportunity for the County to expand the Mentally Ill Offender program prior to the expansion of the jail. With the success the treatment program brings to the mentally ill community within the County Detention Facilities, the Sheriff will be able to expand programs three years earlier than current plans. This Grant will provide a total of \$316,667 per year for three years of increased services to the current inmate population. The expanded facility and expanded services will be in place before the population of the facilities begins to increase.

If the grant application is selected by the Board of State and Community Corrections for funding the Sheriff's Department will return to the Board of Supervisors with another Agenda Item to accept the funding, to establish a budget for the grant program and to update the position allocation report for the Sheriff's Department to reflect an increase of one Deputy Sheriff Custodial in the Detention Division of the Sheriff's Department.

POLICY ISSUES:

Application of this grant will assist the Sheriff's Department in meeting the Board's priorities of A Safe Community and Effective Partnerships by identifying funding for personnel to provide enhanced programs and services to the mentally ill offenders who are inmates within the detention facilities located in Stanislaus County and under the supervision of the Sheriff's Department. If awarded, the Sheriff's Department will return to the Board of Supervisors for approval to accept the grant.

Approval for the Sheriff to Apply for the Mentally Ill Offender Crime Reduction (MIOCR) Grant from the Board of State and Community Corrections to Provide Services for Adult Mentally Ill Offenders

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STAFFING IMPACT:

If the grant application is selected for funding the Sheriff will return to the Board to amend the Salary and Position Allocation Resolution to add one Deputy Sheriff-Custodial position to the Sheriff-Detention budget.

CONTACT INFORMATION:

Adam Christianson, Sheriff – Coroner, telephone (209) 525-7105

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
STATE OF CALIFORNIA

2015-144

Date: March 31, 2015

On motion of Supervisor Chiesa Seconded by Supervisor Monteith
and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Monteith, De Martini and Chairman Withrow

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

Item # *B-9

THE FOLLOWING RESOLUTION WAS ADOPTED:

**A RESOLUTION OF THE BOARD OF SUPERVISORS AUTHORIZING THE SHERIFF TO APPLY
FOR THE ADULT MENTALLY ILL OFFENDER CRIME REDUCTION GRANT AND TO
TO SIGN THE GRANT AGREEMENT INCLUDING ANY EXTENSION OR AMENDMENTS**

WHEREAS the Stanislaus County Sheriff Department is seeking funds available through the Mentally Ill Offender Crime Reduction (MIOCR) Grant program administered by the Board of State and Community Corrections (hereafter referred to as BSCC).

NOW, THEREFORE, BE IT RESOLVED that the Sheriff is authorized on behalf of the Board of Supervisors to submit the MIOCR application and to sign the Grant Agreement with the BSCC, including any amendments thereof.

BE IT FURTHER RESOLVED that Stanislaus County agrees to provide all in-kind matching funds and sustainable operating fund in the fourth year, required for said project, and abide by the statutes and regulations governing the MIOCR grant program as well as the terms and conditions of the Grant Agreement as set forth by the BSCC.

ATTEST: **CHRISTINE FERRARO TALLMAN, Clerk**
Stanislaus County Board of Supervisors,
State of California



File No.

**MENTALLY ILL OFFENDER CRIME REDUCTION GRANT PROGRAM
ADULT PROJECT APPLICATION**

SECTION I: APPLICANT INFORMATION

A. APPLICANT/DEPARTMENT IMPLEMENTING THE GRANT

COUNTY: Stanislaus		COLLABORATING COUNTY (if applicable):	
IMPLEMENTING AGENCY	DUN AND BRADSTREET NUMBER	TELEPHONE NUMBER	
Stanislaus County Sheriff's Department	127395734 (if applicable)	(209) 525-7216	
STREET ADDRESS	CITY	STATE	ZIP CODE
250 E. Hackett Rd.	Modesto	CA	95358
MAILING ADDRESS	CITY	STATE	ZIP CODE
250 E. Hackett Rd	Modesto	CA	95358

B. GRANT AMOUNT REQUESTED

C. PROPOSED MATCH AMOUNT

\$ 950,000

\$ 3,185,010

D. APPLICANT PROJECT DIRECTOR

NAME AND TITLE			TELEPHONE NUMBER
Gregg Clifton, Lieutenant			(209) 525-5675
STREET ADDRESS			FAX NUMBER
200 E. Hackett Rd.			(209) 525-5605
CITY	STATE	ZIP CODE	E-MAIL ADDRESS
Modesto	CA	95358	gclifton@stanislaussheriff.com

E. APPLICANT PROJECT FINANCIAL OFFICER

NAME AND TITLE			TELEPHONE NUMBER
Seth Rogers, Business Manager			(209) 525-7009
STREET ADDRESS			FAX NUMBER
250 E. Hackett Rd.			(209) 525-7106
CITY	STATE	ZIP CODE	E-MAIL ADDRESS
Modesto	CA	95358	srogers@stanislaussheriff.com

F. APPLICANT DAY-TO-DAY CONTACT PERSON

NAME AND TITLE		TELEPHONE NUMBER
Gregg Clifton, Lieutenant		(209) 525-5675
EMAIL ADDRESS		
gclifton@stanislaussheriff.com		

G. APPLICANT'S AGREEMENT

By signing this application, the applicant assures that the grantee will abide by the laws, policies, and procedures governing this funding.

NAME AND TITLE OF PERSON AUTHORIZED TO SIGN AGREEMENT			
Adam Christianson, Sheriff			
STREET ADDRESS	STATE	ZIP CODE	TELEPHONE NUMBER
250 E. Hackett Rd., Modesto	CA	95358	(209) 567-4468
APPLICANT'S SIGNATURE			DATE

PROJECT ABSTRACT

Please provide a brief summary of the proposed project in the space provided below; narrative must not be more than a single page in length.

Stanislaus County Sheriff's Department is requesting \$950,000 in grant funds over a 3 year period (July 1, 2015 – June 30, 2018) to enhance its Mentally Ill Offender Treatment Program through the Mentally Ill Offender Crime Reduction (MIOCR) Grant Program. Funds awarded by the Board of State and Community Corrections (BSCC) will enable Stanislaus County to increase Adult MIO services including assessment, diagnosis, medication assessments, crisis intervention, crisis stabilization, treatment, therapy services, discharge planning, medication bridging, aftercare, and wraparound services through increased Service Capacity, Increased Staffing, and Increased Level of Care. MIOCR Grant funds and Stanislaus County match funds will be used to provide additional staff dedicated to MIO and MIOCR Grant goals. Proposed staff includes:

- One full time **Adult Detention Deputy** to provide supervision of MIO receiving treatment while in custody.
- One part-time **Mental Health Clinician** for 24 hours per week. Mental Health Clinicians coordinate within a multidisciplinary team to provide holistic case management services to MIO.
- One part-time **Psychiatric Registered Nurse** for 24 hours per week.
- Addition of 8 hours of **Psychiatrist** time per week.

By providing more timely and improved services, MIO can be connected with mental health service providers who will ease barriers to accessing mental health services during their incarceration and after their release. Increasing staffing and service hours will alleviate some of these challenges to providing the most comprehensive and in-depth services to our MIO population.

Stanislaus County provides comprehensive mental health treatment and services designed to eliminate disparities, promote wellness, recovery and resiliency, and ensure positive outcomes for people living with mental illness and their families. Stanislaus County will be increasing its ability to assess and target the right individuals for these programs ensuring MIO access to tried and proven treatment programs, and increasing the number of MIO who receive services.

NARRATIVE SECTIONS

Note: Sections II – VIII are to be completed in a narrative format (see instructions on page 45). Rating factors will be evaluated regarding the extent to which a proposal adequately addresses the topics listed under the section titles below. If a sub-element does not apply, the applicant should clearly state as such and provide the reason. Omission or lack of clarity for any section is likely to result in a reduction of allowable points. The total combined page limit for narrative Sections II – VIII is 20 pages within the required format; these sections begin on page 51.

SECTION II: NEED STATEMENT

Address the following in narrative form:

The proposal describes the probable/potential impact of the grant on reducing the number or percent of mentally ill adult offenders or mentally ill juvenile offenders who are incarcerated or detained in local adult or juvenile correctional facilities and, as relevant for juvenile offenders, in probation out-of-home placements. The proposal identifies the local need(s) to be addressed with grant funds and demonstrates the need(s) by including local data to support the described impact. The proposal describes how the program shall support prevention, intervention, supervision, and/or incarceration-based services and strategies to reduce recidivism and to improve outcomes for mentally ill juvenile and adult offenders. Additionally, the proposal explains why existing resources, both state and local, are inadequate to address the identified need.

If graphs and/or charts are necessary to provide information for this section, the applicant may attach one (1) additional single-sided 8 ½" x 11" sheet of paper containing only graphs/charts (referenced as Attachment A); references to any graphs/charts must be clearly identified in the narrative.

SECTION III: PROJECT DESIGN

Address the following in narrative form:

The proposal describes how the project would demonstrate the ability to develop effective responses and to provide effective treatment and stability for mentally ill adult offenders or mentally ill juvenile offenders based on evidence-based treatment models, specific services to be provided, where and when service delivery would occur, and who would provide these services (i.e., project staff). The proposal identifies the project's target population and program eligibility criteria (e.g., estimated number and type of offenders to be served, criminal history, diagnostic categories, etc.). The proposal communicates a direct and well-articulated relationship/nexus between the project design and identified need(s).

SECTION IV: COUNTY PLAN / STRATEGY

Address the following in narrative form:

The proposal describes a comprehensive county plan for providing a cost-effective continuum of responses and services for mentally ill adult offenders or mentally ill juvenile offenders, including prevention, intervention, and incarceration-based services, as appropriate; cite research to support the proposed services' cost-effectiveness within the criminal and juvenile justice system. The plan must describe how the responses and services included in the plan have been proven to be or are designed to be effective in addressing the mental health needs of the target offender population, while also reducing recidivism and custody levels for mentally ill offenders

in adult or juvenile detention or correctional facilities. Strategies for prevention, intervention, and incarceration-based services in the plan shall include, but are not be limited to, all of the following:

(1) Mental health and substance abuse treatment for mentally ill adult offenders or mentally ill juvenile offenders who are presently placed, incarcerated, or housed in a local adult or juvenile detention or correctional facility or who are under supervision by the probation department after having been released from a state or local adult or juvenile detention or correctional facility.

(2) Prerelease, reentry, continuing, and community-based services designed to provide long-term stability for juvenile or adult offenders outside of the facilities of the adult or juvenile justice systems, including services to support a stable source of income, a safe and decent residence, and a conservator or caretaker, as needed in appropriate cases.

(3) For mentally ill juvenile offender applications, one or more of the following strategies that has proven to be effective or has evidence-based support for effectiveness in the remediation of mental health disorders and the reduction of offending: short-term and family-based therapies, collaborative interagency service agreements, specialized court-based assessment and disposition tracks or programs, or other specialized mental health treatment and intervention models for juvenile offenders that are proven or promising from an evidence-based perspective.

The plan shall include the identification of specific outcome and performance measures and for annual reporting on grant performance and outcomes to the board that will allow the board to evaluate, at a minimum, the effectiveness of the strategies supported by the grant in reducing crime, incarceration, and criminal justice costs related to mentally ill offenders.

SECTION V: COLLABORATION

Address the following in narrative form:

The proposal demonstrates the applicant's ability to provide for interagency collaboration to ensure the effective coordination and delivery of the strategies, programs, and/or services described in the application. The proposal describes the coordinated planning process undertaken by the local Strategy Committee to develop the proposal. The proposal includes evidence that ongoing collaboration among the Strategy Committee participants (i.e., agencies/community-based organizations) will continue in the implementation and operation of the project as well as describing each entity's role in the 4-year project and beyond. The proposal describes the applicant's involvement in other collaborative efforts involving treatment and support services for mentally ill offenders. In addition, the proposal provides dates and times of the Strategy Committee meetings and includes key decisions made, including but not limited to implementation and sustainability planning.

SECTION VI: PROBABILITY OF SUCCESS

Address the following in narrative form:

The proposal demonstrates the applicant's ability to administer the proposed grant project, including any past experience in the administration of a prior mentally ill offender crime reduction grant. The proposal describes the likelihood the project would succeed due to the proven effectiveness of its design for the target population and includes evidence of research-based results. The proposal illustrates the applicant's demonstrated history of maximizing federal, state, local, and private funding sources to address the needs of the grant service

population. This includes implementing and managing grant-funded projects in an efficient, effective and evidence-based manner. In addition, the timeline of activities for the proposed project is reasonable, given the nature and scope provided.

SECTION VII: EVALUATION

Address the following in narrative form:

The proposal describes project goals, the strategy/methodology for evaluating whether or not the project objectives were achieved, the plan for collecting data that supports the evaluation goals, and the manner in which the project evaluation will be documented and reported such as assessing the effectiveness of the program in reducing crime, adult and juvenile offender incarceration and placement levels, early releases due to jail overcrowding, and local criminal and juvenile justice costs. The proposal describes measures to be used to show successful outcomes, in addition to those provided in the application.

SECTION VIII: SUSTAINABILITY

Address the following in narrative form:

The proposal clearly describes how the program will be funded during the fourth year including a list of those funding source(s). The proposed project illustrates the likelihood that the program will continue to operate after state grant funding ends, including the applicant's demonstrated history of maximizing federal, state, local, and private funding sources to address the needs of the grant service population.

NARRATIVE SECTIONS II – VIII MUST NOT EXCEED A TOTAL OF 20 PAGES

SECTION II: NEED STATEMENT

According to the California Department of Healthcare Services, Stanislaus County is home to 510,385 people, with 73,893 people requesting mental health services, for an effective mental health prevalence rate of 14.48%.¹ Of the total county population of 510,385, 5.74% (29,287 people) are reported to have severe mental illness. Of the 73,893 people requesting mental health services, 39.6% (29,287 people) are reported to have a severe mental illness.

In 2014, Stanislaus County booked 21,004 people into the three adult detention facilities. If the mental health prevalence rate of 14.48% in Stanislaus County is extrapolated to total bookings, then mentally ill offenders (MIO) should account for approximately 3,041 of the jail bookings. However, in 2014 a total of 2,172 MIO received mental health treatment services while incarcerated in Stanislaus County, which is only 71% of the expected bookings for MIO.

Currently, the average adult daily jail population (ADP) in Stanislaus County is 1,042 people. If the mental health prevalence rate of 14.48% in Stanislaus County is extrapolated to the average ADP, the average ADP of MIO should be roughly 151 people. However, the average ADP of offenders receiving mental health services in the Stanislaus County jail is 118, compared to the estimated 151 MIO population. The end result is that Stanislaus County is providing mental health services to about 78.1% of the estimated MIO population coming through our adult detention facilities, and that gap in service is leaving approximately 33 (21.9%) MIO unserved at any point in time.

MIO who are not exhibiting symptoms of their severe mental illness are housed in the general population throughout the three Stanislaus County adult detention facilities. These MIO may receive mental health assessment and medication evaluation, but have little access to programs, counseling, or other mental administrative health services. Up to 44 MIO are housed in a medium security housing unit, where they receive mental health treatment, and have access to mental health counseling and administrative services, restorative and socialization programs, as well as substance abuse recovery,

¹ California Department of Healthcare Services, California Mental Health Prevalence Estimates, February 12, 2012, <http://www.dhcs.ca.gov/provgovpart/Documents/CaliforniaPrevalenceEstimates.pdf>

educational, and rehabilitative programs. Up to 24 of the most severely MIO are housed in a segregated high-risk mental housing unit, where they have access to psychiatric assessment, medication evaluation, and administrative mental health services, but no programs. Therefore, of the 118 MIO receiving mental health services at any point in time, 68 of them are in MIO housing units and 50 MIO are housed with the general population, where there are limited mental health services available.

Currently, Stanislaus County has 3 full-time Adult Detention Deputies that supervise MIO who receive mental health services while incarcerated. The deputies coordinate with the mental health service providers to ensure that MIO are transported to all medical and treatment appointments, and court, as well as supervise all treatment and programming activities within the adult detention facilities. Stanislaus County's adult detention medical provider, California Forensic Medical Group (CFMG), provides 2 full-time Licensed Clinical Social Workers and 1 full-time Psychiatric Registered Nurse for a combined total of 100 hours per week. CFMG also provides 1 part-time Psychiatrist that works 16 hours per week. CFMG staff provides all mental health and medication assessments, treatment services, and medication discharge planning. CFMG collaboratively provides mental health programming, administrative services, and aftercare and wraparound planning. Stanislaus County's Mental Health Department, Behavioral Health and Recovery Services (BHRS), provides 3 Mental Health Clinicians who collaboratively provide mental health programming, administrative services, and aftercare and wraparound planning.

Stanislaus County provides comprehensive and effective mental health services to adult MIO while incarcerated. Targeted services include identification of mentally ill offenders, mental health medication and treatment assessments, and treatment and counseling services, as well as intervention, supervision, pre-release discharge planning, and post-release aftercare and wraparound services. In 2014, mental health treatment services were provided to 2,172 individual MIO while incarcerated. Mental health service providers conducted 10,325 professional mental health appointments, and 659 Psychiatric appointments for a total of 10,984 units of service.

The number of MIO who need care overwhelms our mental health resources. Stanislaus County, while striving to provide effective and comprehensive mental health

services, literally does not have sufficient staff to provide the in-depth quality of care that our MIO population deserves. Estimates of MIO rates indicate that approximately 33 (or 21.9%) of the estimated 151 MIO at any point in time never receive mental health services. Moreover, those MIO that are receiving mental health services are not receiving the in-depth care they deserve because of scarce mental health staffing resources, which are divided amongst the 3 Stanislaus County adult detention facilities and too many MIO. Beginning treatment in custody increases the likelihood of out of custody treatment, contributing not only to the wellness of those served, but to the wellness and safety of the community.

SECTION III: PROJECT DESIGN

Increase Service Capacity – Stanislaus County is proposing to use MIOCR Grant funding and Stanislaus County match funding to increase mental health staff and service hours to expand direct mental health services to MIO. Currently, mental health staffs primarily work business hours. The increase in staff will allow mental health services to be administered on an expanded time-frame, which should increase the number of MIO who are able to receive services. Booking and release processes occur throughout the day, not just during business hours. Additionally, during typical business hours many inmates are away from their housing areas attending court, appointments, and other medical services. Demands on time during these hours, caused by routine daily correctional activities, make providing mental health services difficult, and make providing mental health and substance abuse treatment programs even more difficult.

Expanding mental health service hours beyond the 8 am – 5 pm workday would allow more MIO to receive services. MIO who are booked at different times throughout the day would have better access to treatment providers, thus capturing a greater portion of MIO who are booked into our adult detention facilities. Even MIO who do not stay in custody long after booking will have a better chance that treatment providers are present, allowing improved crisis intervention, medication assessment, and providing an opportunity for post release discharge planning for medications, aftercare, and wraparound services. Expanding the hours of staff coverage will result in increased access to mental health service providers and programs.

Increase Staffing – MIOCR Grant funds and Stanislaus County match funds will be used to provide additional staff dedicated to MIO and MIOCR Grant goals. Proposed staff includes:

- Addition of one full time **Adult Detention Deputy** to provide supervision of MIO receiving treatment while in custody. The deputy will coordinate with mental health treatment providers' and facilitate access to MIO while incarcerated in Stanislaus County adult detention facilities. The deputy will be responsible for ensuring that MIO are transported to all medical and treatment appointments, hospitalizations providing transportation to pre-arranged aftercare programs based on assessed needs and discharge planning, and is responsible for the coordination and supervision of all MIO treatment and programming activities.

A good number of these activities occur during non-business hours. For instance, most inmates released during court hearings, are not processed out of the adult detention facilities until late in the afternoon, and early evening. Similarly, inmates being discharged from custody at the end of their commitments are released in the early morning hours before business hours. For MIO released at these times, there is no mental health staff available, and most MIO are merely released to the street. Enhanced ability to add treatment, rehabilitative, and group program time during expanded hours, when there is less scheduled correctional activity, will greatly increase the amount of programming MIO can receive.

- Addition of one part-time **Mental Health Clinician** for 24 hours per week. Mental Health Clinicians coordinate within a multidisciplinary team to provide holistic case management services to MIO. The Mental Health Clinician will interview and assess MIO to determine service needs, and evaluate risk factors to provide coordinated treatment and planning services. The Mental Health Clinician advocates for and assists MIO in accessing and receiving services while incarcerated and after release, accompanies MIO to court, and tracks MIO treatment progress. The Mental Health Clinician is responsible for consulting with other agencies, law enforcement, and community service providers to identify available services to match assessed needs, and make referrals for aftercare and wraparound services.

- Addition of one part-time **Psychiatric Registered Nurse** for 24 hours per week. The Psychiatric Registered Nurse works in collaboration with the Psychiatrist, performing diagnosis and medication assessments, crisis intervention and crisis stabilization, and treatment and therapy services. Assists the Mental Health Clinician with discharge planning, medication bridging, and aftercare and wraparound services.
- Addition of 8 hours of **Psychiatrist** time per week. The Psychiatrist works, collaborates, and consults within the multi-disciplinary team for the prevention, diagnosis, and treatment of MIO, and is responsible for making diagnosis and treatment decisions, and prescribing medications. Currently, 16 hours per week of Psychiatric time is available in Stanislaus County adult detention facilities. Expanding the Psychiatrist availability to 24 hours would provide faster access to intervention, medication, and treatment services.

Stanislaus County adult detention facilities currently lack the resources necessary to identify, intervene/and or follow through with treatment for a substantial portion of the MIO population. As a result, these people tend to disappear when released from custody, and fail to receive mental health treatment and services until they re-offend and begin the cycle again. Through expanding staff and service hours, MIO will have a better chance to be identified, and for intervention and treatment services to begin.

By providing more timely and improved services, MIO are less likely to fall through the cracks. They can be connected with mental health service providers who will ease barriers to accessing mental health services during their incarceration and after their release. Stanislaus County has an extensive array of mental health services. However, failure to quickly identify MIO means missed opportunities for intervention and treatment, time constraints that face MIO in a detention setting hinder providing follow-up services and programming, and a lack of mental health service providers to serve an overwhelming number of MIO leads to a lessened quality of care. Moreover, the mental health services available in the adult detention facilities, as well as in our community, are overwhelmed by the number of people needing services. Increasing staffing and service hours will alleviate some of these challenges to providing the most comprehensive and in-depth services to our MIO population.

Increase level of care – Stanislaus County provides comprehensive mental health treatment and services designed to eliminate disparities, promote wellness, recovery and resiliency, and ensure positive outcomes for people living with mental illness and their families. Despite the array of available services and programs, there are an overwhelming number of people in need for which Stanislaus County does lack the resources to assist. Plans for each of these components are the result of robust community planning and stakeholder input. Although all of these services face capacity issues, the programs work together to create a continuum of services that address gaps in order to better meet the diverse needs of people. They cover a wide range of services including homeless outreach and stabilization programs, family education, crisis intervention, and prevention, community mental health services and support, prevention and early intervention, and workforce education and training. By increasing staff and service hours, Stanislaus County will be increasing its ability to assess and target the right individuals for these programs ensuring MIO access to tried and proven treatment programs, and increasing the number of MIO who receive services.

SECTION IV: COUNTY PLAN / STRATEGY

Currently, Stanislaus County provides comprehensive mental health services utilizing a collaboration of Stanislaus County departments and agencies. When first booked, all inmates are observed and queried for signs, presence, and history of mental illness, including suicidal behavior and/or ideations, and use of medication for psychiatric treatment as part of the intake health screening. Adult detention staff have been trained in the recognition of MIO and intake health screenings are designed to identify MIO. When potential MIO are identified, adult detention staff makes a referral to the adult detention facilities' medical staff.

In addition to the regular jail staff, Stanislaus County has three designated deputies who are assigned exclusively to mental health duties. These deputies work closely with mental health treatment providers, Mental Health Treatment Court, and Stanislaus County Mental Health Department in coordinating mental health services for MIO. The three mental health deputies' main responsibility is to monitor, assist, and provide care for MIO while they are incarcerated, and provide access and security to civilian and contracted employees providing services for the MIO population. Their goal is to assist

with stabilizing MIO so the inmate can participate in the court process, and lower custody levels, allowing MIO to be housed in general population setting, where the MIO can participate in group counseling sessions, and treatment and rehabilitative programming. These deputies provide supervision of MIO while incarcerated, and provide transportation and security for all MIO treatment and court appointments, as well as transportation to a safe facility or home upon release from custody.

The jail's medical provider, California Forensic Medical Group (CFMG) conducts follow-up assessments on MIO that are referred to them by adult detention staff. The assessment is completed by a Psychiatrist, Psychiatric Registered Nurse, Licensed Clinical Social Worker or other trained mental health therapist. CFMG also conducts health screenings on each inmate who stays in custody for fourteen days, which includes MIO identification. Once identified, MIO are assessed to identify current or potential diagnosis, medication needs, and a Level of Care Utilization Score (LOCUS) used to prescribe an appropriate level of needed care. CFMG Psychiatrist, Psychiatric Registered Nurse, and LCSW provide mental health treatment services, medication, discharge planning, aftercare, and wraparound services in cooperation with the County's Mental Health Department.

The County's Mental Health Department, Behavioral Health and Recovery Services (BHRS), conducts follow-up assessments on MIO that have been referred by adult detention staff. BHRS Mental Health Clinicians provide crisis intervention, mental health treatment services, and professional facilitation and help which goes beyond brief screenings and educational or packaged groups. They follow up on issues identified either overtly or covertly during group or a screening. The Mental Health Clinician also provides individual and group counseling, as well as mental health, drug, and alcohol recovery programs designed to assist MIO, and/or substance abusers during their incarceration. Groups conducted would be Evidenced Based Practices, currently consisting of Moral Reconciliation Therapy, Seeking Safety, Men in Recovery, and Women of Wisdom. The Mental Health Clinician is responsible for assessing MIO for participation in Mental Health Treatment Court.

Working in conjunction with the Sheriff's staff and CFMG, BHRS' Mental Health Clinicians help to enhance programming and treatment strategies, contribute to the

wellbeing of those served and the overall safety of the facilities. Additionally, BHRS and CFMG work together to provide a continuum of care plan that identifies a MIO's needs upon release. This discharge plan specifies identified community resources, services, and clinics where MIO is to go for aftercare and wraparound services, including resources for medication, treatment, and housing, which includes transportation to a safe facility or home upon release.

Mental Health Treatment Court (MHTC) is a collaborative process between the Superior Court, Sheriff, District Attorney, Public Defender, and Probation. MHTC provides intervention and supervision to hold identified MIO accountable while enlisting their participation in flexible and intensive treatment programs tailored to specific assessed needs. The main goal of MHTC is to prevent the incarceration of MIO by securing their release from jail for appropriate aftercare, wraparound services, community intervention, and treatment services.

Services provided as part of Stanislaus County's Integrated Forensic Team (IFT) use several evidence-base modalities that have been shown to be effective. Modalities include Assertive Community Treatment (ACT), Adult System of Care, medication management, individual and group counseling, peer support and peer recovery groups, mental health, drug, and alcohol programs, Mental Health Treatment Court, discharge planning, medication bridging, aftercare, and wraparound services, amongst others. The treatment models have been tried, tested, and proven in programs around the country. BSCC, formerly the Board of Corrections, identified both the ACT model and the Mental Health Treatment Court model as among the most successful strategies for the treatment of MIO.² Research has shown that Assertive Community Treatment has a demonstrated efficacy and effectiveness in providing a comprehensive community based model for delivering treatment, support, and rehabilitation services to individuals with severe mental illness.³ Wraparound is a proven, effective approach to developing care plans that gather together services and people important to the individual, which support a MIO to achieve success in their lives. Further, wraparound is a nationally recognized best practice model of intensive, holistic engagement with those needing

² California Board of Corrections, MIOCR Grant Program Legislative Report, 2004

³ Substance Abuse and Mental Health Services Administration. *Assertive Community Treatment: The Evidence*. DHHS Pub. No. SMA-08-4344, 2008

services so that they can live in their homes and communities and realize their hopes and dreams.⁴ Early results from IFT, formerly known as the Forensic Assertive Community Treatment (FACT) team, showed that the program successfully improved outcomes for MIO, including improved health, greater personal safety, and increased daily activities and social interaction. Moreover, the majority of MIO receiving FACT services had significant decreases in the number of psychiatric emergency contacts.⁵ Recently, clients participating in IFT services achieved a 96.4% reduction in homelessness, 94.1% reduction in the number of days incarcerated, and a 93.9% reduction in days hospitalized.⁶ Moreover, the IFT program of services has been demonstrated to be a cost effective response to MIO in the criminal justice system.

Grant funding will be applied to increasing the staffing and service hours provided by the IFT in order to reach more MIO with proven effective treatment. The expanded IFT will improve identification and access of MIO with assessment, referral, and direct linkage to the outpatient IFT program which provides clients with case management, medication management and support, access to a physician, substance abuse treatment, and access to peer support and peer recovery groups. MIO will receive, depending on their assessed needs, from 12 to 24 months of mental health treatment, case management and wraparound services. The services provided to each MIO will be based on that individual's treatment needs and the level of service indicated by the individual's LOCUS assessment. Services will be available to all MIO with a need. Each individual will be seen by the psychiatrist every 90 days for medication and treatment evaluation. Group therapy will be offered to those MIO who are housed in a general population custody level. The IFT team will review participating MIO once a week for progress updates, treatment strategy, and to identify referral services.

Early identification of MIO promotes improved outcomes. Intervention and assessment that occur adjacent to when MIO are first incarcerated allow maximum time to provide intensive rehabilitative services to meet assessed needs. The time a MIO spends incarcerated varies from less than a day to possibly several years. It is essential that the identification screening process occur adjacent to the initial booking to

⁴ National Wrap Around Initiative, <http://nwi.pdx.edu>

⁵ Stanislaus County FACT Program: Analysis and Report, p. 28

⁶ Stanislaus County BHRS MHSA Update FY 2014-2015, June 20, 2014

identify as many MIO as possible. Early identification will help ensure that a maximum number of assessments occur, and that the greatest number of many MIO receives services. Grant funding will allow expanded services to MIO and promote more positive outcomes, such as fewer crises, stabilization, reduced custody levels, recidivism reduction, and an increased quality of life for mentally ill participants.

MIOCR grant will be used to fund:

- 1 full-time Adult Detention Deputy.. The 3 Adult Detention Deputies already assigned to the program, and paid for using Stanislaus County funding will be applied as a match to the grant. (\$295,724 grant funds / \$1,150,299 match funds).
- 1 part-time Psychiatric Registered Nurse for 24 hours per week. The 1 full-time Psychiatric Registered Nurse already assigned to the program, and paid for using Stanislaus County funding will be applied as a match to the grant. (\$198,432 grant funds / \$330,720 match funds).
- 1 part-time Mental Health Clinician for 24 hours per week. The 3 full-time Mental Health Clinicians already assigned to the program, and paid for using Stanislaus County funding will be applied as a match to the grant. (\$143,844 grant funds / \$1,080,000 match funds)
- Addition of 8 hours of Psychiatrist time per week. The additional 16 hours of Psychiatric time already dedicated to the program, and paid for using Stanislaus County funding will be applied as a match to the grant. (\$312,000 grant funds / \$624,000 match funds.)

The positions will be assigned exclusively to the MIOCR grant program. Current staff will be a significant component of the MIOCR team, and will assist with identification, assessments, referrals, and treatment activities. Addition of staff will provide additional mental health services to MIO as previously described, during expanded service hours.

Adding an additional mental health designated Adult Detention Deputy, a Psychiatric Registered Nurse, and a Mental Health Clinician will enable roughly 283 additional MIO per month to receive comprehensive mental health services offered by Stanislaus County including increased intervention, crisis management, interaction with treatment staff, treatment and medication management, access to Mental Health Treatment Court, and restorative and rehabilitative counseling and programming. Having the team work

expanded hours will facilitate more MIO having access to services. Adding availability of the Psychiatrist will allow roughly 30 additional MIO per month to be treated.

Stanislaus County is currently in the process of building a new detention facility in partnership with the State of California using AB900 grant funds. This new detention facility is due to become operational at the end of 2016. Part of this new facility is a medical/mental health treatment housing unit and a medical clinic. Stanislaus County has already identified staffing needs, and allocated funding sources for this new detention facility from Stanislaus County funding sources and the Community Corrections Partnership. The fourth year funding required to continue the staffing and services initiated as a result of this MIOCR grant will be funded through a continuation of the in kind funding that has been in place, and allocation of new staffing intended to operate the new facility's mental health housing unit. The Stanislaus County Board of Supervisors has already approved this staffing plan, and these positions will be dedicated to the continuation of the MIOCR grant program for the fourth year.

Stanislaus County is committed to providing comprehensive and collaborative mental health programs for our MIO population. Previously, Stanislaus County has twice received MIOCR grant funding. Both times when funding ceased, Stanislaus County continued to fund these programs from local funding sources instead of discontinuing the services and programs provided to our MIO. Collaborative and comprehensive mental health services to MIO have been continuously provided by Stanislaus County since 1999, when the first MIOCR grant was awarded to Stanislaus County.

SECTION V: COLLABORATION

Stanislaus County has been collaboratively providing mental health services for over fifteen years. In 1999, Stanislaus County first received the MIOCR grant. With the help of this grant, Stanislaus County developed the Forensic Assertive Community Treatment (FACT) team. The FACT team combined staff and resources from multiple Stanislaus County departments, including the County's mental health agency, Behavioral Health and Recovery Services (BHRS), the Sheriff's Department, Probation Department, District Attorney, Public Defender, Chief Executive Office, Stanislaus County Superior Court, Modesto Police, and the jail's medical provider, California Forensic Medical Group.

The FACT team implemented a program of intensive community mental health services based on the Assertive Community Treatment (ACT) model. This model has been tried, tested, and proven in programs around the country, and has been identified by the Board of State and Community Corrections (BSCC), formerly the Board of Corrections, in its evaluation of the MIOCR programs, as among the most successful strategies for the treatment of MIO.⁷ Due to the success of the program at producing improved outcomes for MIO, Stanislaus County continued collaborative mental health services beyond the end of the initial MIOCR grant period using local Stanislaus County funding sources. The FACT team evolved into the Integrated Forensics Team (IFT), which continues to provide comprehensive community mental health services.

In 2007, Stanislaus County again received a MIOCR grant, which was used to implement a Facilitative Adjudication and Intensive Rehabilitative Services (FAIRS) program. The FAIRS program, expanded IFT services, using two empirically proven, evidence based modalities designed to address the needs of MIO, including the established ACT model, and implementing a Mental Health Treatment Court (MHTC). BSCC, as the Board of Corrections, identified both treatment models as among the most successful strategies for the treatment of MIO.⁷ The FAIRS program focused on increased screenings to identify and assess MIO in the jail population, and implementation of MHTC, based on the existing Adult Drug Court model. In 2008, Stanislaus County reapplied for the MIOCR grant to continue funding services to MIO. However, the MIOCR grant was not funded. Again, despite the loss of the MIOCR grant, Stanislaus County continues its commitment to collaboratively provide comprehensive services to MIO through local funding sources.

Not only did Stanislaus County continue its commitment and maintain each of these programs, in the interim since the end of the MIOCR grant, mental health services for MIO have been increased in scope. Two correctional deputies were added to assist in supervising the MIO, and additional mental health service providers were added from CFMG and BHRS. Additionally, a 44 bed medium security mental health housing unit was established where MIO receive socialization, individual and group counseling, peer support and peer recovery groups, and programs for mental health restoration, and

⁷ California Board of Corrections, MIOCR Grant Program Legislative Report, 2004

substance abuse recovery. These programs are provided collaboratively by the Sheriff's Department, CFMG, BHRS and community-based organizations, such as Friends Outside and the National Alliance on Mental Illness (NAMI).

In preparation to apply for the MIOCR grant, Stanislaus County formed a Strategy Committee that met on March 3, 2015 and discussed the mental health needs of adult MIO. The strategy committee, using information derived as part of the annual reports of the Stanislaus County Mental Health Board, and the Mental Health Services Act, as well as an open discussion between Strategy Committee members, formulated a program providing the greatest benefit to MIO utilizing the available funding. Part of the discussion included how the program would be implemented, and centered on the ease of increasing services already in place and proven to be effective, versus attempting something new. Expanding currently implemented and effective services enables more long-term sustainability, and increased probability of services continuing with local funding when grant funds cease.

The Strategy Committee members continued to be involved throughout the grant proposal process, contributing ideas and information towards effectively serving the MIO population as the grant proposal was drafted. Each of the Strategy Committee members is committed to enhancing services provided to MIO, and each is dedicated to seeing these services continuing through the four year term of the grant, and beyond.

Stanislaus County is in good position to participate in the current MIOCR grant process. Successful participation in previous MIOCR grant projects has established key connections for collaboration among stakeholders, and has highlighted key strategies that successfully provided effective and efficient services for MIO. Moreover, Stanislaus County has multiple on-going collaborative committees that provide guidance and oversight for mental health treatment services.

- Stanislaus County Mental Health Board, Criminal Justice Oversight Committee provides oversight and continuing collaboration regarding mental health programs connected to criminal justice. Membership includes Mental Health Board members, a County Supervisor, consumers, as well as representatives of the Sheriff, Probation, local law enforcement agencies, CFMG, and BHRS.

- Restorative Policing Oversight Committee is a multi-disciplinary collaboration that guides restorative policing efforts, as well as treatment and intervention options for individuals involved in the criminal justice system who have serious mental illness and/or co-occurring substance abuse diagnosis. Committee members include representatives of local law enforcement, the Sheriff, Probation, Public Defender, District Attorney, Courts, area hospitals, Adult Protective Services, BHRS (including a Patient's Rights Advocate), and community based treatment organizations. The purpose is to strategically intervene with the goal of "restoring" the individual to their community, and decreasing their contact with law enforcement.
- Stanislaus Drug Court Advisory Group has oversight over Drug Court and Mental Health Treatment Court, and provides collaboration on the programs' guidelines. The group is comprised of the Presiding Judge of the Superior Court, as well as the Mental Health and Drug Court Judges, and the Juvenile Court Commissioner, Public Defender, District Attorney, Sheriff, Bar Association, Stanislaus County Women's Lawyers' Association, Stanislaus County Chief Executive Office, Probation, BHRS, Community Services Agency, Health Services Agency, Modesto City Schools, CSU Stanislaus, Friends Outside, and a community member.
- Community Corrections Partnership continues to provide strong interagency collaboration on realignment, as well as mental health intervention, treatment, and restoration to reduce the number of mentally ill in the criminal justice system. Members of the Partnership include the Chief Probation Officer, Sheriff, Stanislaus Superior Court Executive Officer, a County Supervisor, District Attorney, Public Defender, BHRS, local law enforcement, Community Services Agency, County Office of Education, Center for Human Services, and Alliance WorkNet.

Stanislaus County continues to have strong partnerships within the Criminal Justice System that have proven to be very effective, and which indicates strong on-going interagency collaboration that will make the MIOCR grant program successful.

Under the leadership of the Sheriff's Department, Stanislaus County has had a number of notable successes utilizing state and federal grant programs to provide services to, and improve outcomes for MIO in the criminal justice system. Stanislaus County has been awarded and successfully managed two federal grants from the Department of

Justice, Education, & Labor. Both grants were designed to provide mental health and substance abuse treatment, enhance inmate life skills, and reduce recidivism. Like the MIOCR grant, both federal grant programs used interagency collaboration between the Sheriff, Probation, BHRS, and the Courts to plan, implement, and operate the programs. The Education, Life Skills, and Employment (ELSE) program was operated from 1997 through 2000. The Transitional Road to After Custody & Self-Sufficiency (TRACS) program was operated from 2001 through 2003. Both programs were evaluated and shown to have produced positive outcomes for participating offenders and their families.

In addition to grants designed to improve MIO outcomes, Stanislaus County received a Local Jail Construction Financing Program (AB900 Phase II) grant to build a new detention facility, part of which is designated as a mental health housing and treatment unit. Stanislaus County also received the Adult Local Criminal Justice Facilities Construction Financing Program (SB1022) grant to build a Reentry and Enhanced Alternatives to Custody Training (REACT) center designed to provide programs to offenders with the goal of reducing recidivism and improving offender outcomes.

These and other grant programs in which the Sheriff's Department has been involved underline Stanislaus County's commitment to use grant funding effectively and efficiently, to plan projects and bring them to completion within budget, and to carefully administer and report the outcomes of grant-funded endeavors, all with the goal of promoting improved outcomes for offenders involved in our criminal justice system.

SECTION VI: PROBABILITY OF SUCCESS

Stanislaus County will be providing an integrated intervention and treatment program utilizing tried, tested and proven evidence based treatment modalities designed to improve treatment and recidivism related outcomes for seriously and persistently MIO. Assertive Community Treatment, Mental Health Treatment Court, and Wraparound services are nationally recognized best practices that are evidenced based, and research proven, to be effective and cost efficient. Moreover, Stanislaus County has a proven track record of providing effective and cost efficient mental health treatment services producing positive outcomes for MIO. Stanislaus County was previously award two MIOCR grants. The first MIOCR grant established the FACT program, which improved outcomes for MIO through increased quality of life, and decreased

incarcerations and hospitalizations. The second MIOCR grant expanded the Integrated Forensic Team to establish the FAIRS program with continued success with further reductions in homelessness, days of incarceration and hospitalizations, and established a Mental Health Treatment Court, which continues to encourage MIO to participate in treatment through applying a range of graduated incentives and sanctions. The current MIOCR grant will expand these cost effective services making them available to more MIO with the expectation that they will continue to be just as successful in producing positive outcomes.

Expanding services to cover more hours increases the number of MIO who are identified, tracked, and provided service. Expanding service hours and staff creates more opportunity for release planning, aftercare, and wraparound services for MIO who are booked and released during times that currently have no mental health treatment staff available. Beginning treatment in custody increases the likelihood of out of custody treatment, contributing to the wellness of those served plus the wellness and safety of the community. Expanding an already established program provides for a streamlined implementation timeline. Once funding is approved, there will be minimal delay in getting the expanded program running. Additional staff will be brought on that are designated to the MIOCR program and will be selected from seasoned staff that will be reassigned to the MIOCR program, rerouting the sometimes lengthy hiring processes to positions not associated with the MIOCR grant program. Once funding is approved, staff will be identified and should be available to the program as of July 1, 2015.

SECTION VII: EVALUATION

Goal 1: Improve the quality of life for Mentally Ill Offenders (MIO) in Stanislaus County's adult detention facilities by increasing screening, assessment, and treatment capacity.

Objective 1.1: Increase mental health staff hours and service levels through contracts with CFMG and BHRS as outlined in the budget to provide more timely assessment and identification of MIO.

Objective 1.2: Decrease the wait time for screening and assessment of mentally ill offenders who are booked into Stanislaus County detention facilities "after hours" by

providing services after 5 pm and before 8 am in order to begin the process of intervention and stabilization in a more timely manner.

Objective 1.3: Ensure that all MIO requiring intervention and stabilization are served, thus reducing the current gap in services (approximately 21.9% of current MIO are unserved) as evidenced by lower caseload to participant ratios.

Goal 2: Provide Discharge Planning to MIO upon release from Stanislaus County's adult detention facilities to decrease the county's recidivism rate and improve MIO outcomes.

Objective 2.1: Increase MIO discharge "after care" to those individuals booked and released within a 24 hour period to ensure they leave custody with a mental health plan in place.

Objective 2.2: Increase MIO access to and engagement in community mental health resources once released from custody as requested and required (after care, referral, treatment, stability, follow-up,) in an effort to prevent recidivism.

We will determine whether or not outcomes are being met on a quarterly basis by comparing individual case studies of MIO intake, assessment, treatment, and discharge. This is to fully understand and depict MIO experiences in the program, recidivism, and to conduct a thorough cross-examination of cases. We will collect quantitative data through intake forms, assessment, diagnosis, MIO treatment history (medication, time-in-treatment, behavior management), arrest records, jail discharge records, mental health discharge plan, access to and engagement in community-based mental health services upon discharge, and re-arrest records (if any) on a quarterly basis. We will collect qualitative data through random sampling MIO interviews on a semi-annual basis (up to 20 interviews will be conducted) to determine whether or not they feel the assessment and start-of-care time intervals met their needs, and whether the treatment they are receiving is improving their mental health outcomes. This is in addition to collecting standard data required by BSCC (gender, age, race/ethnicity; number of participants served; number of participants referred; number of offenders screened/assessed; number of participants with formal psychological/psychiatric evaluations; number of service hours completed; average length of stay in program; number of days from referral to first program service; number of participants who offend

or re-offend; number of participants charged with formal violation; and number of participants who are homeless or in out-of-home placement. Quarterly evaluation reports of data collection and outcome measures will be reviewed by the local Strategy Committee and the BSCC. In addition, adjustments will be made to the program design and delivery system based on this feedback.

Stanislaus County is committed to improving the quality of life for MIO. A substantial number of these people are stuck in a cycle of instability and offense, arrest, incarceration, release, and re-offense that is exceedingly destructive not only to their health and wellbeing, but to that of the community as a whole. Far too many people are booked into the jail, and as a result of excessive delays in identification and assessment, never receive services, or receive inadequate services to break this destructive cycle. Our goal is to break this cycle through early intervention during incarceration that increases the likelihood of the MIO continuing treatment after release.

The first goal is to identify more MIO who are booked into our adult detention facilities in order to begin the process of intervention and stabilization. With staff working expanded hours throughout the day there should be an increase in the number of MIO identified. This is tracked by CFMG as new cases, which would allow for measurable improvements to be compared with earlier data.

Inmates with a mental illness and/or co-occurring disorders are difficult to manage in the jail setting as their illnesses often cause erratic behavior and undermine their ability to comply with rules and procedures. MIO are disproportionately involved in incidents and behavior management problems in our jails. The goal of intervention and stabilization is to lessen these behavior management problems. CFMG will track and trend a decrease in mental health events, such as decreased crisis interventions, safety cell placements, hospitalizations, fewer medication refusals, more involvement in groups and programs, more evenly distributed sick call lists, which would allow for more one on one interaction, more time with the clinicians where they could ensure a thorough discharge plan is created and then followed through. Additionally, as MIO stabilize, they should experience fewer incidents, and lowered custody levels. The adult detention deputy will evaluate success based upon more MIO able to be housed in our

medium security mental health housing unit, and more MIO participating in group mental health treatment, socialization, and substance abuse recovery programs.

The second goal of the program is to provide more discharge planning. For those MIO who do not stay in the jail long enough for intervention and stabilization there will be staff available to direct them to aftercare and wraparound treatment services, or provide for out of custody emergency crisis intervention. MIO who stay in the jail to receive intervention and stabilization will be better able to participate in their discharge planning, and more likely continue treatment after release. CFMG and BHRS will be able to track the increase in discharge plans being executed, and through continued contact and follow-up after release, track how many MIO participate in their discharge plans, by staying in identified safe homes or facilities, filling bridged medications, and attending designated follow-up care. The overarching goal of the program is to improve the quality of life for MIO. The program should result in a reduction in the number of crimes committed, as well as a reduction in the seriousness of the types of crimes committed, fewer contacts with law enforcement, and reduced recidivism by those MIO who receive treatment. Each of these can be tracked as a measure of success. Ultimately, the program should result in improved outcomes for MIO, Stanislaus County adult detention facilities, and our community.

SECTION VIII: SUSTAINABILITY

As a previous recipient of a MIOCR grant the Stanislaus County Sheriff's Department funded a mental health deputy to help facilitate many of the same programs proposed in this application. Since the funding for that grant has run out the Department has not only continued to fund the mental health deputy and provide services but the program has been expanded so that there is now 3 mental health deputies and if this application is selected then a fourth mental health deputy positions will be created. Stanislaus Behavioral Health and Recovery Services will provide an additional, part time Mental Health Clinician to support services for MIOs in the custody of the Sheriff's Department. The current services offered to MIOs already fully utilize the services of 3 mental health clinicians and the program expansion as anticipated by this proposal will provide enough patients to give this additional clinician a full work load. As the program naturally expands to meet the needs of an increased inmate population when the new

Public Safety Center expansion is activated there will be ample funding, personnel, and patients to justify the continued services of an additional mental health clinician. The services rendered by CFMG under the terms of this program expansion are simply of an extension of many of the services that are currently ongoing within the Stanislaus County Public Safety Center. The Sheriff's Department has planned to increase the impact of the MIO program as the footprint of the Public Safety Center expands. As the grant funding terminates the programs previously funded by the grant will be folded into the new Public Safety Center where additional services will be maintained and built upon. The overreaching resource that will allow Stanislaus County to continue to fund this program on an on-going basis is that the Board of Supervisors has made a public commitment to services for the mentally ill within Stanislaus County and the future completion of a new Public Safety Center which will have space dedicated to the treatment of and programming for MIOs. The deputy position created to serve the needs of this grant is a position that will be made permanent as the new Public Safety Center comes on line in 2017-2018. All of the other positions and services that will be increased as a result of this grant are the same or similar services that are currently being offered to MIOs who are in the custody of Stanislaus County. That population is expected to grow proportionately as a result of the current Jail Expansion projects. As that population grows the County is anticipating funding growth to continue to provide the same level of service to future MIOs than those currently in custody are receiving. This elevated funding will provide the money and personnel necessary to continue the program after the grant period has ended. All of the services and personnel that will be funded by this grant would be developed by the County even in the absence of this grant funding, however this grant will allow the County to start expanding these programs 2-3 years earlier than current funding will allow. This 3 year head start will allow the County to get a solid program in place to make sure the County has solid plan in place for the identification, treatment and subsequent organized release of MIOs is in place by the time the demand for those services doubles or triples upon the opening of the new expanded public safety center.

SECTION IX: PROPOSED BUDGET

The proposal includes sufficient detail regarding how state grant and match funds will be expended to implement and operate the proposed project. The proposal provides justification that the amount of grant funds requested is reasonable and appropriate given the proposed project's design and scope, and describes other funding streams that may be used to support the proposed project. The proposal must name the sources to be applied as matching funds and describe how these sources of match will be utilized for the success of the proposed project.

- A. **BUDGET LINE ITEM TABLES:** Complete the following table, **using whole numbers**, for the grant funds being requested ("targeted cap" / funding request guideline of \$950,000) for the 3-year grant period (July 1, 2015 to June 30, 2018).

While recognizing agencies may use different line items in the budget process, the line items below represent how the BSCC will require grantees to report expenditures via its invoicing system. Match funds may be expended in any line item, and must be identified as to their respective dollar amounts and source of the match. The 'Other' category funds should be budgeted for travel purposes for one mandatory grantee briefing meeting (*to be held in Sacramento, date TBA*) as well as other proposed travel.

Applicants projecting to utilize grant funds for Indirect Costs / Administrative Overhead may not use more than 10% of the state grant funds for this line item.

Applicants must provide a minimum **25 percent (25%) match**; of the grant funds requested. Matching funds may be met through cash, in-kind, or a combination of both.

All funds shall be used consistent with the requirements of the BSCC Grant Administration and Audit Guide, July 2012 (<http://www.bscc.ca.gov/resources>).

Please verify total grant funds requested and total match amounts
as columns and rows do not auto-calculate.

3-YEAR GRANT BUDGET TABLE

PROPOSED BUDGET LINE ITEMS	GRANT FUNDS	CASH MATCH	IN-KIND MATCH	TOTAL
1. Salaries and Benefits	295,724		1,448,308	1,533,732
2. Services and Supplies				
3. Professional Services				
4. Community-Based Organization (CBO) Contracts	654,276		2,034,720	2,899,296
5. Indirect Costs / Administrative Overhead (may not exceed 10% of grant award)				
6. Fixed Assets / Equipment				
7. Data Collection / Enhancement				
8. Program Evaluation				
9. Sustainability Planning				
10. Other (include travel costs)				
TOTAL	950,000		3,185,016	4,433,028

REQUESTED 3-YEAR GRANT TOTAL EXCEEDS THE "TARGETED CAP" OF \$950,000

Provide a brief justification (4-5 sentences) for exceeding the targeted cap / funding request guideline.

Complete the following table, **using whole numbers**, for the grant funds anticipated to be expended during the first year of the grant (July 1, 2015 to June 30, 2016).

Please verify total grant funds requested and total match amounts as columns and rows do not auto-calculate.

YEAR 1 GRANT BUDGET TABLE

PROPOSED BUDGET LINE ITEMS	GRANT FUNDS	CASH MATCH	IN-KIND MATCH	TOTAL
1. Salaries and Benefits	94,296		383,433	511,244
2. Services and Supplies				
3. Professional Services				
4. Community-Based Organization (CBO) Contracts	218,092		678,240	966,432
5. Indirect Costs / Administrative Overhead (may not exceed 10% of grant award)				
6. Fixed Assets / Equipment				
7. Data Collection / Enhancement				
8. Program Evaluation				
9. Sustainability Planning				
10. Other (include travel costs)				
TOTAL	312,388		1,061,673	1,477,676

B. BUDGET TABLE LINE ITEM DETAILS:

The proposal must provide sufficient detail in each category below regarding how state grant and match funds will be expended to implement and operate the proposed project as identified in the Year 1 Grant Budget Table (above). The proposal must provide justification that the amount of grant funds requested is reasonable and appropriate given the proposed project's design and scope, and describes other funding streams that may be used to support the proposed project. The proposal must name the sources to be applied as matching funds and describe how these sources of match will be utilized for the success of the proposed project. In addition, an outline of Year 2 and Year 3 proposed budget spending must be provided. If a budget line item and/or match category is not applicable for the proposed project, complete with N/A.

1. SALARIES AND BENEFITS (e.g., number of staff, classification/title, salary and benefits)

Requested Grant Funds Year 1: \$ 94,296

Matching Funds Year 1: \$ 383,433

Narrative: The funds proposed to be used for salaries and benefits in this application will be used to fund a total of 4 mental health deputies who are charged with supervising and coordinating mental help services for mentally ill offenders who are incarcerated within the

detention facilities operated by Stanislaus County. The grant funds will fund approximately 22% of the salaries and benefits for one new mental health deputy who will increase the oversight and coordination activities of the three full time mental health deputies already working within the Stanislaus County detention facilities. Cost per 1.0 FTE is \$94,296 including fringe. The matched funds will fund the salaries and benefits of three mental health deputies already in place.

Match Source(s): There are two sources of the match funds for this application, two of the three current mental health deputies are funded by money coming into the Sheriff's Department through the Community Correction Partnership originally from the Board of State and Community Corrections. The match funds for the third current deputy comes from existing Net County Cost.

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures: The grant expenditures for this category in years 2 and 3 will remain constant at \$94,296 as outlined in Year 1. Any increases in salary will be covered by an increase in match funds from the County.

2. SERVICES AND SUPPLIES (e.g., office supplies and training costs)

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

3. PROFESSIONAL SERVICES: (e.g., consultative services - include name of consultants or providers)

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

4. COMMUNITY-BASED ORGANIZATION CONTRACTS (e.g., detail of services - provide name of CBO)

Requested Grant Funds Year 1: \$ 218,092

Matching Funds Year 1: \$ 678,240

Narrative: The grant funds in this category are being requested to pay the cost of increasing the number of outside contractors the Sheriff's Department will bring into its facilities to provide mental health services to the mentally ill offenders incarcerated in Stanislaus County. The County currently provides access to Mental Health Clinicians, Psychiatric Nurses and a

Psychiatrist to coordinate and provide programs and services to the Mentally Ill Offenders. In Year 1, the MIOCR grant will fund:

- Addition of one part-time **Mental Health Clinician** for 24 hours per week through a contract with Stanislaus County Behavioral Health and Recovery Services. Cost per hour is \$38.42 (\$47,948 for 24 hours/week). Mental Health Clinicians coordinate within a multidisciplinary team to provide holistic case management services to MIO. The Mental Health Clinician will interview and assess MIO to determine service needs, and evaluate risk factors to provide coordinated treatment and planning services. The Mental Health Clinician advocates for and assists MIO in accessing and receiving services while incarcerated and after release, accompanies MIO to court, and tracks MIO treatment progress. The Mental Health Clinician is responsible for consulting with other agencies, law enforcement, and community service providers to identify available services to match assessed needs, and make referrals for aftercare and wraparound services.
- Addition of one part-time **Psychiatric Registered Nurse** for 24 hours per week through a contract with California Forensic Medical Group. Contracted cost per FTE is \$110,240 (\$66,144 for 24 hours/week). The Psychiatric Registered Nurse works in collaboration with the Psychiatrist, performing diagnosis and medication assessments, crisis intervention and crisis stabilization, and treatment and therapy services. Assists the Mental Health Clinician with discharge planning, medication bridging, and aftercare and wraparound services.
- Addition of 8 hours of **Psychiatrist** time per week through a contract with California Forensic Medical Group. Contracted cost per FTE is \$520,000 (\$104,000 for 8 hours/week). The Psychiatrist works, collaborates, and consults within the multidisciplinary team for the prevention, diagnosis, and treatment of MIO, and is responsible for making diagnosis and treatment decisions, and prescribing medications. Currently, 16 hours per week of Psychiatric time is available in Stanislaus County adult detention facilities. Expanding the Psychiatrist availability to 24 hours would provide faster access to intervention, medication, and treatment services.

Match Source(s): The source of the match funds for this portion of grant comes from the county general fund through existing Net County Cost.

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures: Years 2 and 3 of the Community Based Organization Contracts will remain consistent at \$218,092 as outlined in Year 1. If there is an increase in cost for some reason that increase will be paid from the general fund.

5. INDIRECT COSTS / ADMINISTRATIVE OVERHEAD: Indicate percentage and methodology for calculation. In the “Grant Funds” column of the previous table, this total may not exceed 10% of the total funds requested. In the “Match Funds” column of the previous table, agencies may expend up to their Indirect Cost Rate (over and above 10%) for match funds supported by state or local dollars.

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

6. FIXED ASSETS / EQUIPMENT (e.g., computers, other office equipment necessary to perform project activities)

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

7. DATA COLLECTION / ENHANCEMENT (e.g., programming services, data analysis)

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

8. PROGRAM EVALUATION (e.g., evaluator, materials)

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

9. SUSTAINABILITY PLANNING

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

10. OTHER (e.g., travel expenses)

Requested Grant Funds Year 1: \$

Matching Funds Year 1: \$

Narrative:

Match Source(s):

Outline of Year 2 and Year 3 Line Item Proposed Budget Expenditures:

Funding Streams Utilized by the County / County Collaborative

Provide ten (10) funding streams and/or revenues available to the applicant that may be utilized for investing in or leveraging dollars for maximum benefit to the proposed project and 4-year strategic plan.

The following funded sources are available to the Stanislaus County Sheriff's Department to augment or leverage any funds awarded by the BSCC by building, maintain, improving the facilities which will house and treat the mentally ill offenders of the County. Many of these other sources will leverage the requested funds by identifying mentally ill offenders, bringing them safely into custody, providing them with everyday necessary items and funding the Inmate Welfare Fund which is used to benefit all inmates. These sources have not all been identified as match fund sources but they are all available to provide funding that will support the goals and objectives of this application. The sources are:

1. The County General Fund
2. Funds from the Community Correction Partnership
3. Grant Funds from the Board of State and Community Corrections Partnership
4. Proposition 69 DNA funds
5. Justice Assistance Grant funding
6. Supplemental Law Enforcement Services Funding
7. Funding from the Commissary (Inmate Welfare Fund)
8. AB 900 funding
9. SB 1022 funding
10. County Public Facilities Fees

SECTION X: PROPOSED TIMELINE

Provide a timeline for the major activities to be accomplished or obstacles to be cleared in order to achieve the 3-year funded project (e.g., recruiting, selecting staff and/or contracting with an expert consultant or provider, analyzing data, conducting training sessions, development of project evaluation, determining sustainability plan/funding, etc.). Detail critical implementation activities occurring in Year 1 of the project.

Activity	Timeframe
Adjust contract with California Forensic Medical Group to add 1 part-time Psychiatric Registered Nurse for 24 hours per week, and add an additional 8 hours of Psychiatric time per week.	One week after notification of grant approval
Sign Memorandum of Understanding with Behavioral Health and Recovery Services to provide 1 part-time Mental Health Clinician for 24 hours per week.	One week after notification of grant approval
Staff recruitment and selection	One month after notification of grant approval.
Staff training	First two weeks after the grant period begins
Development of evaluation criteria and tracking methods	To be completed during the first quarter of the grant program.
Expanded assessments, treatment, and support services for mentally ill offenders	Fully implemented by July 20, 2015
Monthly Statistical data and evaluation data collection	August 1, 2015
Monthly Statistical data and evaluation data collection	September 1, 2015
First quarter statistical data and evaluation report	October 1, 2015
Monthly Statistical data and evaluation data collection	November 1, 2015

SECTION XI: STRATEGY COMMITTEE'S COLLABORATIVE EFFORTS

**This section will be included in the scoring of the "Collaboration" rating factor.*

- A. **STRATEGY COMMITTEE MEMBERSHIP:** Provide the name, title, and agency or organization for each Strategy Committee Member. Please refer to page two (2) of this RFP for the Legislation which provides necessary individuals, disciplines, and local stakeholders.

Name: Adam Christianson	Title: Sheriff
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Bill Duncan	Title: Captain
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Gregg Clifton	Title: Lieutenant
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Seth Rogers	Title: Business Manager
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Terri Renard	Title: Accountant
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Ernie Radza	Title: Sergeant
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Michael Dixon	Title: Deputy
Agency/Organization: Stanislaus County Sheriff's Department	
Name: Jill Silva	Title: Chief Probation Officer
Agency/Organization: Stanislaus County Probation Department	
Name: Leticia Ruano	Title: Division Director
Agency/Organization: Stanislaus County Probation Department	
Name: Debra Buckles	Title: Chief of Forensics
Agency/Organization: Behavioral Health and Recovery Services	
Name: Charles Yarnell	Title: SUD Liaison / IOT Coordinator
Agency/Organization: Behavioral Health and Recovery Services	
Name: Shawn Bessey	Title: Superior Court Judge Presiding Mental Health Court Judge
Agency/Organization: Superior Court of California, County of Stanislaus	
Name: Lisa Larranaga, RN	Title: Program Manager
Agency/Organization: California Forensic Medical Group	
Name: Jen Diaz, RN	Title: Assistant Program Manager
Agency/Organization: California Forensic Medical Group	
Name: Manual Chua, MD	Title: Psychiatrist
Agency/Organization: California Forensic Medical Group	

Name: Grashika Devendra, RN

Title: Psychiatric Registered Nurse

Agency/Organization: California Forensic Medical Group

Name: Stanley Bindner

Title: Former offender and consumer

Agency/Organization:

B. COLLABORATIVE EFFORTS: List the dates and times the Strategy Committee met to collaborate on the local MIOCR plan and key decisions made during those meetings, including but not limited to implementation and sustainability planning. **This subsection may not exceed two (2) single-sided pages in length.**

As part of this section, provide Strategy Committee Member sign-in sheets, marked as Attachment B, as part of the complete RFP packet.

Initial planning for the MIOCR grant project began on February 23, 2015, with a meeting of core Sheriff's Department personnel, which included Sheriff Adam Christianson, Sheriff's Department Business Manager Seth Rogers, project leader Lieutenant Gregg Clifton, and other key staff. Primary discussion revolved around the sources of funding for the required twenty-five percent match, and the fourth year sustainability funding requirement. The group decided that the match and fourth year funding requirements could be met, and that the Sheriff's Department should develop and submit a proposal for the adult MIOCR grant program.

Due to time constraints, over the next couple of days, the Sheriff's grant team met individually with the adult detention facilities' mental service providers, which included adult detention mental health deputy, Psychiatric Registered Nurse, California Forensic Medical Group Program Director, and Behavioral Health and Recovery Services Mental Health Clinician. At these different meetings, each of the mental health service providers identified in-custody needs for mental health services. Although the meetings were independent of each other, there were common needs identified by each service provider that would improve services for mentally ill offenders.

The Strategy Committee, chaired by Sheriff Adam Christianson, met on March 3, 2015. The MIOCR grant requirements, the request-for-proposal process, and the grant timelines and deadlines were reviewed. The Sheriff's grant team presented the common in-custody mental health service needs that had been identified by the individual service providers. There was an open discussion regarding the identified needs, as well as other possible mental health service needs.

The group discussed resources and options for improved mental health services with each member providing information and feedback, resulting in the development of the project objectives, goals, and plan. Key decisions from the Strategy Committee revolved around expanding current mental health services instead of attempting to develop a new program, and what combination of increased services would provide the best service to mentally ill offenders while maximizing the available funding.

Further collaboration between key Strategy Committee plan members, including the Sheriff's Department, Behavioral Health and Recovery Services, and California Forensics Medical Group occurred via email and phone calls as the MIOCR grant proposal was developed. There was ongoing communication between each agency to examine the proposal and provide input, and comments as the plans were developed. The final plan was submitted to the Strategy Committee Members and each agency reviewed, and approved their respective parts of the proposal.

On March 31, 2015, the MIOCR grant proposal was submitted for approval to the Stanislaus County Board of Supervisors.