**FY 19/20 Enhancement Plan**

**Local Funding Request**

**Introduction:**

In 2016 the Florida Legislature passed Senate Bill 12, which amended Florida Statute 394 related to Managing Entity Duties to include the development of annual Enhancement Plans. These plans should include 3-5 priority needs for the Managing Entity. With the purpose of identifying these priority needs, Broward Behavioral Health Coalition, Inc. (BBHC) completed the Triennial Needs Assessment, as per Senate Bill 12, to identify service needs and gaps in the community.

With the purpose of identifying priority needs, BBHC gathered program data and held a series of focus groups in September and October 2016 involving providers, stakeholders, and individuals receiving behavioral health services in Broward County. BBHC created a standardized tool to conduct focus groups whereby all questions were open-ended to elicit individualized responses among a variety of stakeholders. Questions were customized based on the audience and BBHC achieved a 100% response rate from focus group participants. During FY 17-18 and FY 18-19 priorities for funding were identified via BBHC’s System of Care Committee, Provider Advisory Council and Consumer Advisory Council, various community partnership meetings such as DCF’s Forensic System meeting, Baker Act and Marchman Act meetings to address gaps in the implementation, meetings with the Judiciary, State Attorney and Public Defenders, and BBHC’s Quarterly Provider Network Meeting. Other gaps have been identified at the Funders Forum, Coordinating Council of Broward, Homeless Continuum of Care Initiative, Governor’s Executive Order 18-81, and MSD Commission feedback from South Florida Wellness Network.

In addition to the process described above, during the 2016-17 Legislative Session, the state received a $31 million reduction that included the oversight of Housing and Care Coordination teams, in addition to a $20 million adjustment reduction in Federal Block Grant funding. Thus, a $3.8 million reduction in services has impacted Broward's system of care in Fiscal Year 2017-18. These reductions have impacted BBHC’s Mental Health (MH), Substance Abuse (SA) and Prevention services. Without any action to restore these funds, we anticipate an increase in arrests, overdoses, hospitalization, substance exposed newborns, children coming into foster care, and even death. The problem is intensified by the following needs:

**Priority 1. Develop and Implement a plan for Zero Suicide Initiative**

1. **Please describe the process by which the area(s) of priority were determined. What activities were conducted, who participated, etc.**

Broward County has been experiencing elevated levels of suicide during the past two years. Broward Behavioral Health Coalition (BBHC) identified this as an issue through a review of the Broward County Medical Examiner’s Data on death by suicide. BBHC’s Continuous Quality Improvement committee began a system wide address regarding the issue of suicide screening throughout treatment, not only upon admission as is currently suggested by best practice models. BBHC intends to use the Zero Suicide framework as a guide for implementation. In February 2018, the tragic shooting at Marjory Stoneman Douglas shocked and re-shaped reality for both the community of Parkland and all of Broward County. There were 264 suicides in 2018, an increase of 19.8% in one year. There is no complete count of suicide attempts throughout Florida. However, in 2018, 2-1-1 Broward responded to 1,898 suicide needs of callers experiencing life threatening situations (thoughts, plans, in progress suicides and third-party requests). These types of calls often are intense as clients are hopeless, overwhelmed and at times in progress of suicide. A multiagency group representing Broward County community stakeholders attended the American Suicidology Conference in Denver, Colorado to bring back best practice knowledge for suicide prevention and intervention and postvention/treatment. This group was comprised of representatives from BBHC, Broward County Public Schools, Children’s Services Council of Broward County, United Way of Broward County, ChildNet, and the BBHC provider network. This learning experience led to the creation of the Broward Wellness and Resiliency Coalition. This group will conduct a study that will focus on the analysis of local suicides in Broward County through the collection of local data in an effort to understand risk factors, guide suicide prevention efforts, and to create a County-wide Suicide Prevention Action Plan as a first step to implement the Zero Suicide framework. This county-wide action plan will align with the 2016-2020 Florida Suicide Prevention Plan published by the Florida Department of Children and Families.

1. **Please describe:**
   1. **The problem or unmet need that this funding will address:**

The problem and unmet need is the lack of alignment for a system-wide approach to suicide prevention, treatment and postvention. There are many suicide prevention initiatives and sources of data to track to all levels of suicidality, but none that are working collectively to make the greatest impact county wide. There is a lack of knowledge, training and service capacity across the system. Services are being provided without the guidance or support of an Evidence Based Practice (EBP) in the provision of services in the areas of prevention, intervention and postvention/treatment. This funding will support the implementation of the county-wide Suicide Prevention Action Plan, provide technical assistance, and capacity building amongst stakeholders. Additionally, the funding will be utilized to provide services that include prevention, intervention, and postvention/treatment for survivors of suicide attempts.

* 1. **The proposed strategy and specific services to be provided:**

The process will start by developing an action plan with the assistance of a suicidology consultant. This action plan will determine how the next steps of technical assistance, capacity building and services will be implemented within in the Zero Suicide Framework.

The goals will be:

1. Development of the County-wide Suicide Prevention Action Plan
2. Identification and selection of a comprehensive EBP within the Zero Suicide Framework
3. Provide system wide capacity building
4. Implementation of services
5. Continuous quality improvement to ensure fidelity to the EBP selected
   1. **Target population to be served:**

At a systems level, the community will develop a County-wide Suicide Prevention Action Plan that will implement the Zero Suicide Framework that will impact all residents in Broward County.

At the provider level there will be comprehensive capacity building that will result in more effective interventions.

Finally, at the individual/family level it will identify and provide services to fragile populations such as:

* Individuals at risk of suicide and their families
* Individuals who have attempted suicide
* Individuals and families who have been impacted by suicide or attempted suicide
  1. **County(ies) to be served (County is defined as county of residence of service recipients):**

The county to be served is Broward County, Florida.

* 1. **Number of individuals to be served:**

At the community level: 750,000-1,000,000

At the provider level: 60 providers

At the individual/family level: 60 individuals

The number of individuals served will be determined by the recommendations in the County-wide Suicide Prevention Plan.

1. **Please describe in detail the action steps to implement the strategy:**

*See attached excel workbook- action plan tab.*

1. **Identify the total amount of State funds requested to address the unmet need and provide a brief budget narrative. Please identify any other sources of state and county funding that will contribute to the proposal.**

Funding request is **$**500,000.00. *See attached excel workbook- budget tab.*

1. **Identify expected beneficial results and outcomes associated with addressing this unmet need.**

The Zero Suicide Framework fills the gaps that individuals at risk for suicide often fall through by applying evidence-based tools that are specific to the needs of Broward County. Continuous process improvement drives this framework to ensure organizations deliver quality care, routinely examine outcomes, and remain committed to fidelity of the program model.

As the BBHC Network providers adopt a Zero Suicide Framework approach, the expectation is for outcomes for those individuals at risk of suicide, suicide survivors, and all impacted by suicide in general, will improve. Process measures such as screening rates, follow up contacts and referrals to services will increase. Additionally, outcomes such as the number of suicide attempts and actual number of deaths by suicide will be reduced.

1. **What specific measures will be used to document performance data for the project?**

* Individuals in the community will be reached via educational campaign for prevention
* Mental health professionals will be trained in a suicide EBP
* Individuals/families impacted by suicide will receive treatment

Recommendation:

Specific measures that will document performance will include the Broward County Medical Examiner’s Data in 2021 and additional outcomes based on the recommendations of the County-wide Suicide Prevention Action Plan.

**Priority 2. Housing and Care Coordination Teams/Family and Peer Support and Peer Navigators**

1. **Please describe the process by which the area(s) of priority were determined. What activities were conducted, who participated, etc. **

*The question is addressed in the Introduction.*

**a. The problem or unmet need that this funding will address.**

The Legislature through the Road to Recovery funding restored funding for the Housing and Care Coordination at the ME level. This funding is one time only for FY 2019-20.

Therefore, BBHC has identified a need to restore funding for the Housing and Care Coordination oversight at the ME level and increase funding for the implementation functions at the provider network level. This will support the Care Coordination-Housing Initiative implemented since the beginning of 2016. Based on feedback gathered from the Needs Assessment, recent focus groups and community stakeholders’ meetings; housing (permanent and supportive housing, emergency beds and transitional living) was cited as the top priority. Housing is an essential part of the recovery process for individuals with mental health and substance use disorders. Furthermore, the Governor Executive Order meetings have identified a need for Navigators to assist families access services from the public and private sector.

The need is to reinstate funding in Broward County for the following:

* Care Coordination-Housing Teams at the provider level: $1,050,000 on three (3) teams serving 210 high utilizer individuals per year: $350,000 for each team annually (these teams include peer support specialists)
* Family/Peer support and Navigators: $600,000
* 12 Family/Peer support navigators. These individuals will be trained as Family/Peer Navigation Specialists to assist families navigate the public and private system of care to access services for the youths and adults in the community. Their peer navigators would be available also when the individuals transition from intensive levels of care such as Care Coordination Teams, FITT, CAT or FACT.
* Voucher Funding: $450,000 (new funding request) for Housing and other community support for approximately 40-45 individuals to sustain their recovery as they transition to community housing and supported care. (New funding request)

For a total of $2,100,000

Care Coordination-Housing Team oversight at the ME level will be specifically addressed within Priority 3: Ensure Operation Integrity for Managing Entity.

BBHC serves individuals who are transitioning out of State Mental Health Treatment Facilities, emergency crisis, structured treatment care settings, or jail. Due to their length of time in this treatment settings they do not qualify for HUD homeless-specific funding. Often, they lack resources because they are not engaged with community supports that can assist in navigating systems to secure and maintain housing. Subsequently, through an established initiative, BBHC has identified that a Care Coordination-Housing Initiative is imperative to the success of a Recovery Oriented System of Care. It will ensure continuity of care for individuals from inpatient treatment, and crisis treatment settings to discharge. This continuity of care will prevent homelessness, recidivism to emergency rooms, crisis and detox settings, jail, and the State Hospital by providing an evidenced-based approach to coordinating care for individuals who are reintegrating into the community. Dedicating funding for this Care Coordination-Housing Initiative will address the two largest priorities that are lacking in our community; providing permanent housing in conjunction with Care Coordination services and community supports.

* + 1. **The proposed strategy and specific services to be provided:**

BBHC will fund specialized Care Coordination teams at the provider level. These teams will be comprised of two Case Managers, two Peer Support Specialists, and one Housing/Benefits Coordinator. Currently the provider-based Care Coordination teams are composed of individual Case Managers who have the responsibility of providing a full-service array to the most vulnerable, complex persons served within the BBHC network. By expanding the Care Coordination initiative to include a team of specialists, individuals will receive time-limited, and intensive targeted services to overcome complex barriers through navigation and linkage throughout multiple systems of care. Offering individuals, a full-service team allows for one coordinated, comprehensive service plan and continuity of care rather than scattering services throughout multiple systems that have different standards of care and funding restrictions. With this approach, the team and individual will work in partnership to address complex needs and achieve the person's identified goals.

* Case Managers will offer service coordination by assessing the person's needs, linking them to appropriate services of their choice, addressing behavioral health wellness, and ensuring that all linkage to eligible services is made strategically with follow through, and develop the individual's natural supports. This results in warm hand-offs beneficial to the individual and seamless transitions to their continued supportive environment.
* Housing/Benefits Coordinator is responsible for identifying the most appropriate housing placement according to program-specific eligibility criteria. They will focus on finding housing options (apartments, landlords) for these individuals in need of stable and independent living. Additionally, they will assist individuals applying for SSI/SSDI using the SOAR model when appropriate and implementing a work incentive strategy that supports SSI/SSDI recipients with job placement in the community while maintaining their health insurance and other benefits.
* Peer Support Specialists will assist the individuals during their transition from a care setting to community integration by encouraging engagement with providers and enhancing their recovery by supporting the person in achieving their goals.
* Family/Peer Navigators will work with families in accessing the public and private system of care in Broward County.

BBHC's Care Coordinator Managers and Housing Coordinator will facilitate the Care Coordination-Housing Initiative on a systems level, ensuring the teams have direct access to available resources. They will provide strategic linkage to targeted services, eliminate system barriers, offer training opportunities, weekly treatment planning sessions, and will facilitate the implementation of system-wide Care Coordination practice and strategy.

Once stabilized with the help of the Care Coordination-Housing Team, the individual will transition to less intensive services, in-home, or community-based services that may offer: clinical treatment, future wellness/treatment planning, medication monitoring, assistance maintaining housing, supported employment, and therapeutic services, as needed.

* + 1. **Target population to be served:**

Individuals identified for the Care Coordination-Housing Initiative are high utilizers of services who have multiple, complex needs and must be willing to participate in the Care Coordination-Housing Initiative. This program will serve individuals receiving services within BBHC's provider network who:

* Are high utilizers
* Have a mental health and/or co-occurring disorder
* Are transitioning out of a crisis or intensive level of care setting or jail
* Lack permanent housing and can live independently based upon their ability to manage activities of daily living

This initiative will enhance the individual's ability to integrate into the community through sustainable independent living and supportive services. The population served may need assistance with navigating systems of care that address behavioral healthcare needs, medical needs associated with a disabling condition, help attaining or retaining benefits, supported employment, and assistance with housing placement.

* + 1. **County(is) to be served (County is defined as county of residence of service recipients):**

Broward County, Florida

* + 1. **Number of individuals to be served:**

The number of individuals to be served will be approximately 210. This calculation is made based on the following numbers:

* Three (3) Care Coordination-Housing Teams
* 70 persons served per team annually
* Maximum nine-months of services from the Care Coordination-Housing Team

1. **Please describe in detail the action steps to implement the strategy.**

# *See attached excel workbook- action plan tab*.

1. **Identify the total amount of State funds requested to address the unmet need and provide a brief budget narrative. Please identify any other sources of state and county funding that will contribute to the proposal.**

# Funding request $2,100,000. *See attached excel workbook- budget tab.*

1. **Identify expected beneficial results and outcomes associated with addressing this unmet need.**

Initiating a team philosophy for individuals transitioning from intensive care settings to independent living will prove successful because the Care Coordination-Housing Teams will offer a holistic, “one-stop shop” approach. This is attained by working in coordination to best support the person in their recovery through targeted, person centered services intended to provide long-term stabilization, achieve goals and address individualized needs.

A measurable result of the Care Coordination-Housing Initiative will be a decrease in the use of costly mental health and substance use disorder crisis services. This is measured through the data BBHC collects from providers for its funded services. Transitioning our focus from crisis management to community support is cost efficient and an opportunity to improve the wellness of our Broward residents.

The primary outcome anticipated for this initiative is to increase discharges from inpatient care settings such as residential treatment facilities, State Hospitals, crisis stabilization units, and detoxification treatment to a Care Coordination team that offers permanent housing paired with supportive services with a sustained recovery focus.

**5. What specific measures will be used to document performance data for the project?**

BBHC will use its database to evaluate outcomes based on the number of high utilizations of crisis service pre, during, and post Care Coordination-Housing Team service intervention. Persons served will be eligible for this service based on a standardized level of care assessment (LOCUS/CALOCUS) and data will be utilized to assess outcomes.

* Decrease the utilization of higher levels of care by identified high utilizers over a 6 and 12month period after enrollment
* Decrease the number of re-admissions to crisis services by enrolled clients
* Decrease of recommitments to State Hospital
* Increase the length of time clients maintain successful stable housing

**Priority 3. Ensure Operation Integrity for Managing Entity**

1. **Please describe the process by which the area(s) of priority were determined. What activities were conducted, who participated, etc.**

When the legislature decided to capture all ME operation expenses in one-line item, the percentage of operation originally negotiated for operations was negatively impacted. The original percentage of operations for BBHC was 4.96% of the total budget. BBHC’s present operational was reduced to 4.38%. All ME’s have been impacted by this legislative change and are requesting language to the legislature that supports the ME operation to be proportionally increased. Additional mandated programs have been allocated to the Managing Entities; however, the oversight of these programs at the ME level have not been funded.

**a. The problem or unmet need that this funding will address:**

BBHC has identified limited funds for the myriad of management and oversight functions at the Managing Entity level. Additional initiatives require oversight of new services such as:

* Family Intensive Treatment (FIT) Teams
* Community Action Treatment (CAT) Teams
* Residential treatment, Housing and Care Coordination
* Child Welfare Integration
* Primary Care Integration efforts
* Recovery Oriented System of Care
* Care & Housing Coordination including SOAR oversight
* Obtaining accreditation
* Data analytics, and strategies to meet new priorities of effort
* The MSD tragedy in Broward County increased the responsibility of BBHC in coordinating care for families and children not traditionally served in the network. The time demand in coordinating services for the community for this response or any other emergency response are not being considered in the cost of the operational integrity of BBHC.

In addition, the ME operational costs increase as the staff’s cost of living, health insurance premiums, other professional liability insurance, and rent increases. These are critical for the normal operations of the ME. These additional demands on the Managing Entity reduces the amount of time available to oversee the core responsibilities as indicated in the original intent. Increased funding to ME’s is needed to sustain operational integrity and add proviso language that ensures the continuity of this funding level.

* + 1. **The proposed strategy and specific services to be provided:**

The ME will allocate any additional funds from this request in enhancing staff capabilities. It will give BBHC the ability to engage highly qualified staff to support oversight in all areas identified. This will ensure all funded programs have the appropriate oversight and technical assistance.

* + 1. **Target population to be served:**

This impacts the quality of oversight for the services that the BBHC network provides and the individuals we serve. The target population are Broward County residents that access services through the BBHC network providers.

\*(Approximately 30,000 individuals annually, and this does not include prevention and mental health promotion services that may account for another 1,500)

* + 1. **County(ies) to be served (County is defined as county of residence of service recipients):**

The county to be served is Broward County, Florida.

* + 1. **Number of individuals to be served:**

30,000 individuals, including adults, youth and families.

1. **Please describe in detail the action steps to implement the strategy.**

## *See attached excel workbook- action plan tab*.

1. **Identify the total amount of State funds requested to address the unmet need and provide a brief budget narrative. Please identify any other sources of state and county funding that will contribute to the proposal.**

Funding request $856,469. *See attached excel workbook- budget tab for details*.

* Sustain operational integrity with increased responsibilities over provider network $351,468
* Restore Housing Care Coordination funding -$505,000 *(this amount is also supported in detail within Priority 2, as it is directly linked to it)*

1. **Identify expected beneficial results and outcomes associated with addressing this unmet need.**

Benefits of increasing the Managing Entity budget will improve all facets of BBHC functions. This includes contract management, monitoring, quality improvement, programmatic oversight, accountability, expansion of Evidence-Based Practice fidelity monitoring, increase in collaboration with system partners and an overall increase in recovery and wellness within the community

1. **What specific measures will be used to document performance data for the project?**

The specific measures to be used are:

* Increase technical support for operational integrity of new programs.
* Increase the operational oversight and technical assistance for DCF priorities of effort as per DCF mandates.
* Increase the oversight to ensure the fidelity of Evidenced Based Practices is implemented.

**Priority 4. Multi-Disciplinary Treatment Teams: Family Intensive Treatment (FIT), Community Action Treatment (CAT) and Florida Assertive Community Treatment (FACT)**

1. **Please describe the process by which the area(s) of priority were determined. What activities were conducted, who participated, etc.**

*The question is addressed in the Introduction.*

1. **Please describe:**

**a. The problem or unmet need that this funding will address:**

**Family Intensive Treatment (FIT)**: The current opioid crisis has generated an overwhelming demand for FIT services and an additional team is urgently needed in Broward County. This crisis not only affects the individual, but sadly the children who enter the child welfare system due to parental substance use. Families enrolled in FIT are in need parenting and implementation of behavior management. An additional 300 families have been identified as in need to be served by the FIT team; however, the team has been at capacity since it began to operate.

**Community Action Team (CAT)**: BBHC needs an additional CAT to serve those children/youths with co-occurring or substance use disorders. These individuals are at risk of out of home placements, psychiatric hospitalizations, poor academic performance, and multiple episodes involving law enforcement. The team has been in operations for less than one year and the demand for this level of care exceeds the capacity of this team. After the MSD shooting BBHC and Broward Schools have identified a potential for 200 additional youth that would benefit from this level of care.

**Florida Assertive Community Treatment (FACT)**: BBHC needs an additional FACT team to assist with the discharge of individuals from the State Hospitals and divert individuals from the receiving facilities. The FACT team in Broward is at full capacity. There is a need to add another team to address the needs of individuals being discharged from receiving facilities at risk of going to the State Hospital.

1. **The proposed strategy and specific services to be provided:**

Specific services to be provided because of this requested funding will increase immediate access to substance use and mental health services, crisis stabilization, detoxification services, relapse prevention, skill development, parenting, education, transportation assistance, and peer support. The additional funding will also assist with expenses such as housing security deposits, and expenses related to obtaining employment which will lead individuals to address their complex needs and achieve their identified goals on a long-term basis.

1. **Target population to be served:**

Both FIT and CAT teams are family focused and follow a multi-disciplinary team approach to achieve and maintain stability in the community.

The FIT team is designed for families involved in the child welfare system due to parental substance use.

The CAT team is designed for children/youth who may experience multi-system involvement with mental health, substance use, juvenile justice, and child welfare due to the severity of their symptoms and behaviors.

The FACT team is designed to treat individuals in the community with severe mental health symptoms and behaviors that are involved in various systems due to their illness. This is an intensive community in-home multi-disciplinary with the goal of supporting the individual’s recovery in the community.

1. **County(ies) to be served (County is defined as county of residence of service recipients):**

The county to be served is Broward County, Florida.

1. **Number of individuals to be served:**

The approximate number of individuals to be served will be:

* FIT — 60 families served annually
* CAT— 70 youth and their families served annually
* FACT- 100 individuals served annually

**3. Please describe in detail the action steps to implement the strategy.**

# *See attached excel workbook- action plan tab.*

**4. Identify the total amount of State funds requested to address the unmet need and provide a brief budget narrative. Please identify any other sources of state and county funding that will contribute to the proposal.**

Funding Request $2,600,000. *See attached excel workbook- budget tab for details.*

* FIT Team-$600,000
* CAT Team $750,000
* FACT Team $1,250,000

1. **Identify expected beneficial results and outcomes associated with addressing this unmet need.**

The benefit of the multi-disciplinary teams is to provide immediate, intensive, and solution-focused individual and family therapy that takes place in the home environment.

CAT: The expected beneficial results for an additional CAT team include providing family centered and culturally competent services. These services will focus on the strengths and needs of each child and his/her family; with a goal of supporting and sustaining the child in his/her family system and in the community.

FIT: The expected benefits of an additional FIT team can be achieved through rapid identification of parental behavioral health disorders, immediate access to Evidence Based Practices, and multi-disciplinary teams. This will result in better outcomes for children and their families. Certified Recovery Peer Specialists will assist the individual in the recovery process as they link them to community resources, provide social networking opportunities and support the individual in daily living activities. Support and funds for these services will decrease individuals re-entering the criminal justice system, detoxification units, foster care and acute crisis stabilization units.

FACT: The expected benefits of an additional FACT team is to provide services to individuals being discharged from receiving facilities at risk of going to the State Hospital and to serve clients that are being discharged from the State Hospital. This will result in a reduction of admission and re-admission to the State Hospital.

1. **What specific measures will be used to document performance data for the project?**

Specific measures for the FIT team will be:

* Increase in child safety and reduce risks
* Increase parental protective capacity
* Reduce rates of re-abuse and neglect of children with parents with a substance use disorder
* Reduce the number of out of home placements and the time the children remain in the child welfare system

Specific measures for the CAT team will be:

* Decrease out of home placement
* Improve family and youth functioning
* Decrease substance use
* Decrease psychiatric hospitalizations
* Improve school related outcomes such as grades, attendance, and graduation rates
* Increase health and awareness
* Decrease juvenile delinquency
* Decrease re-admission rates

Specific measures for the FACT team will be:

* Eliminate or lessen the debilitating symptoms of mental illness and co-occurring substance use that the individual may experience
* Improve socialization and development of natural supports
* Support with finding and keeping competitive employment
* Reduce hospitalization
* Increase days in the community

All outcomes measures will be in accordance to FIT, CAT, FACT guidance documents.

**Priority 5. Fund Priority of Effort for Acute Care Services**

1. **Please describe the process by which the area(s) of priority were determined. What activities were conducted, who participated, etc.**

*The question is addressed in the Introduction.*

1. **Please describe:**
   1. **The problem or unmet need that this funding will address:**

Broward is the county with the highest number of commitments to State Mental Health Treatment Facilities in the state. Our criminal justice partners are committed to diverting eligible individuals from forensic facilities, but there needs to be a locked and secure facility available. The Broward Forensic Alternative Center (FAC) will be a safe and cost-efficient community-based residential treatment alternative to serve individuals charged with third degree or non-violent second-degree felony charges, who do not pose significant safety risks, and who otherwise would be admitted to state treatment facilities. Individuals will be treated in a locked inpatient setting where they will receive crisis stabilization, short-term residential treatment, competency restoration training, and living skills for community reintegration. When ready to step-down to a less restrictive placement in the community, participants are provided assistance with re-entry and ongoing service engagement.

* 1. **The proposed strategy and specific services to be provided:**

Securing funding from the legislature will provide secured and extended acute care residential bed services with linkage to less restrictive community placements. The Forensic Alternative Commitment Center will be licensed as a Short-term Residential Treatment and will provide an alternative to hospitalization at the state mental health facilities. This will serve as a diversion strategy by providing the following services, in addition to specific needs of the person served:

* Psychiatric Treatment
* Rehabilitation Intervention
* Transition Services
* Community Care and Reintegration Services
* Competency Restoration Training
* Employment program
  1. **Target population to be served:**

The target population is incompetent to proceed (ITP) adults with third degree or non-violent second-degree felony charges, who meet the criteria for involuntary hospitalization and who do not pose significant safety risks.

* 1. **County(ies) to be served (County is defined as county of residence of service recipients):**

The county to be served is Broward County, Florida.

* 1. **Number of individuals to be served:**

Broward FAC - 60 ITP adults

1. **Please describe in detail the action steps to implement the strategy.**

*See attached excel workbook- action plan tab.*

1. **Identify the total amount of State funds requested to address the unmet need and provide a brief budget narrative. Please identify any other sources of state and county funding that will contribute to the proposal.**

Funding Request $2,645,593*. See attached excel workbook- budget tab*

1. **Identify expected beneficial results and outcomes associated with addressing this unmet need.**

With this increased capacity in Broward county, there will be a reduction in admissions to Forensic State Mental Health Treatment Facilities (SMHTF).

1. **What specific measures will be used to document performance data for the project?**

Specific measures that will be used:

* Decrease in the number of admissions to SMHTF
* Decrease in the number of days required for competency restoration
* Increase in the number of individuals restored to competency
* Increase in the number of individuals successfully discharged into the community