



GUIDANCE/ CARE CENTER, INC.



To: Lisa Tennyson, Grants Administrator
1100 Simonton St , Room 2-210
Key West, FL 33040

Guidance/Care Center, Inc. BOCC Budget Request – 2010/2011 Summary

Description of Services Provided:

1. In October 2009, the Guidance Clinic of the Middle Keys, Inc and Care Center for Mental Health, Inc officially merged to be incorporated as the Guidance/Care Center Inc. This merger has allowed GCC to provide state contracted services to Monroe County residents more effectively. For example, prior to the merger, substance abuse prevention dollars were focused at Stanley Switlick Elementary School. Since the merger, substance abuse prevention dollars are now utilized county wide and services are provided at high risk locations such as DJJ detention facility, FL Keys Children’s Shelter, and Douglas Gym.
2. Agency-wide Services Provided:

<p><i>Guidance/Care Center, Inc.</i></p> <p>Adult Mental Health (AMH) Children’s Mental Health (CMH) Adult Substance Abuse (ASA) Children’s Substance Abuse (CSA) Children’s Prevention (CP) Adult Co Occurring Disorders (ACOD) Children’s Co Occurring Disorders (CCOD)</p>	<p><i>Services Provided:</i></p> <p>Adult Crisis Stabilization – 11 beds – licensed by DCF and ACHA , CARF accredited Adult Residential Level 1 – MH /ACOD – 2 beds – licensed by DCF and ACHA Adult Detox – 3 beds – licensed by DCF, CARF accredited Substance Abuse Residential/Community treatment -12 bed - Levels 2 & 3, licensed by DCF, contract with DOC-CARF accredited Substance abuse incarcerated treatment program (JIP) – 50 male slots – limited female slots Children and Adult In-home/On-Site Treatment Services Substance Abuse children Treatment Accountability for Safer Communities(TASC) services for DJJ children Emergency Screening Community Mental Health Crisis Responder Psychiatric and Medical Services for Adults and Children Outpatient Services (OP) – licensed by DCF, CARF accredited</p>
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	<p>OP Nursing Clinic for Injectable Medication Adult and Children Targeted Case Management Services – licensed by DCF ,CARF accredited Children and Adult Case Management Individual Outpatient Services –CARF accredited Mental Health and Substance Abuse Outreach Services Mental Health Intervention Services- CARF accredited Supportive Housing/Living Services Children’s Prevention Program and Services – Licensed by DCF, CARF accredited Referrals as part of Continuum of Services General Information and Referral Mental Health Clubhouse – CARF accredited Mental Health Drop-in Center Psychosocial education Rehabilitation – CARF accredited Substance Abuse Intervention Individual and Group Services- licensed by DCF, CARF accredited Substance Abuse Outpatient Individual Services Substance Abuse Aftercare Individual and Group Services School Based Services Life Skills Counseling Transportation: Medicaid /Disadvantaged/Baker/Marchman Act Employee Assistance programs</p>
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3. Services to be provided with BOCC funds :

a. Baker Act Services

- i. BOCC dollars are used to match state mental health funds.
- ii. GCC is a public Baker Act Receiving Facility and a Crisis Stabilization Unit. The purpose of the Unit is to examine, stabilize, and redirect persons to the most appropriate and least restrictive setting consistent with their needs. As a receiving facility we receive individuals under emergency conditions for psychiatric examination and short term treatment. As a public receiving facility we are part of the Baker Act Acute Care System which includes the Monroe County Detention Facility, local ERs, Court system, NAMI, Detox beds, community hospitals, school system and other community relationships. GCC CSU has 11 beds. In May 2009, GCC received

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a 3 year Redesignation of its Receiving Facility

- status. This facility operates 24/7
- iii. Required services for CSU / Baker Act Receiving Facility include emergency reception, emergency screenings, and psychiatric / medical evaluation, nursing observation, crisis counseling and therapeutic activities.
 - iv. CSU is the psychiatric and mental health safety net for the community. This year a Suicide Hot Line was added to the Crisis Unit. It is manned with professional nurses 24/7.
- b. Keys To Recovery (KTR)
- i. BOCC dollars are used to match state substance abuse funding.
 - ii. KTR is a 12 bed licensed substance abuse treatment program providing services to males who have been involved in the criminal justice system. This program is designated by the Department of Corrections as a nonsecure residential treatment program. It is licensed by DCF as a Residential Level 2 and Level 3 to provide structured rehabilitation oriented group program 24/7 for persons with substance abuse problems.
 - iii. Required services include a minimum of 10 hours of counseling activities per week per client, 1 individual session and 30 hours of therapeutic activities per week for the first 2 months. This is followed by the employment reentry component that includes a focus on facilitating the offender's re-integration into the community through community based employment, continued education, and a plan for continued sobriety.
 - iv. KTR is a jail diversion and offender reentry program with a high rate of success (persons who do not reoffend within one year of discharge). After significant reductions in the number of contracted beds in the state this past year, the Department of Corrections selected KTR to make mid-year contract increases based on its high quality rating.
- c. Community Transportation
- i. BOCC funds are used to match Florida Commission for the Transportation Disadvantaged State dollars.
 - ii. GCC is the designated Community Transportation Coordinator for the Florida Commission for the Transportation Disadvantaged. Persons are considered transportation disadvantaged when they can not provide their own transportation due to a physical or mental disability, income status, or a make them unable to transport themselves or to

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purchase transportation. These conditions cause them to rely on others to obtain access to health care, employment, education, shopping, or other life-sustaining activities. Handicapped children or children at-risk or high-risk are also eligible for services under this program.

iii. Schedule

1. GCC / Middle Keys Transportation has a regular Monday through Friday schedule (6:30A-6:00P) that includes the following:

- 2 roundtrips between Marathon and Key West 5 days per week
- 1 roundtrip between Marathon and Homestead 3 days per week
- 2 roundtrips between Marathon and Key Largo 2 days per week
- 2 roundtrips within the Marathon area 2 days per week
- Weekday and Weekend in-county as well as out-of-county trips are available on an appointment basis.

d. Baker Act Transportation Contract

- i. GCC is a purchase of service vendor of the County to provide Baker Act transportation services on behalf of Monroe County as outlined in Chapter 394 FS. GCC may provide the transportation directly or may subcontract the service. As a purchase of service contract, only monies actually spent for this service will be invoiced to the County for payment.
- ii. This POS contract provides secure and supervised transportation from pick up points in Key West, Marathon, and Upper Keys for involuntary clients ordered under the Baker Act and Marchman Act. Transportation includes trips from ER to receiving facilities, transfers between local receiving facilities , Miami-Dade receiving facilities and when, required to State Treatment facilities. This is a 24/7 service.

iii. Trip Summary

1. Total Trips –
 - i. October 08- Sept 09: 582 trips
 - ii. Average Cost per trip - \$162.86
 - iii. October 09- March 10: 300 trips
 - iv. Average Cost per trip - \$158.82

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Amount Requested: Total Request -\$460,520

- 1. Grant/Match Application Request Sub Total -\$314,520
 - a. Baker Act Services - \$ 215,915
 - b. Keys to Recovery - \$69,177
 - c. Community Transportation - \$30,148
- 2. Vendor POS Contract Sub Total - \$146,000
 - a. Baker Act Transportation

Explanation of Expenses:

1. Grant/Match Budget Request funds will serve to provide dollars to meet match requirements for crisis stabilization services, substance residential treatment, and community transportation services. GCC has the ability to bring to the County \$1,393,046 which requires a \$404,050 match requirement. We are asking the County to provide \$314,520 (78%) of this match requirement. We validate our reimbursement and demonstrate the expense through staff salaries related to the service provided.

Mental health and substance abuse treatment services are core services and as such are community safety net programs that provide life sustaining services to the most vulnerable of our community. Individuals who need these services but do not receive these critical services are negatively impacted by being unable to function, unable to work, unable to participate in family life, and unable to be contributors of this community.

In the first seven months of 2009- 2010, 84% of the crisis stabilization clients served were persons without benefits. These clients were served using a sliding fee scale as low as \$3.00 per day.

Last year, the transportation services provided a total 25,768 trips; 530 unduplicated riders were served; 86% of the riders had medical as the primary trip purpose.

2. The POS vendor contractual arrangement provides a timely and cost efficient service for the County. GCC is an experienced transportation provider with expertise in both transportation and mental health. It maintains two (2) special equipped vehicles for this special transportation service with locations in Key West and Marathon. We seek reimbursement based on invoices of actual expenses to provide this service which

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include trips, fuel, maintenance of vehicles, and salaries related to coordination and dispatching of trips.

Please see attached Narrative and Attachments for detail information.

Janie Baker
5-27-10

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MONROE COUNTY
Board of County Commissioners
Application for Funding
Fiscal Year 2011
October 1, 2010 – September 30, 2011

Agency Name	Guidance/ Care Center, Inc.
Physical Address	3000 41 st St. Ocean, Marathon, FL 33050 99198 Overseas Hwy, Suite 5, Key Largo, FL 33037 1205 Fourth St., Key West, FL 33040
Mailing Address	3000 41 st St. Ocean
City, State, Zip	Marathon, FL 33050
Phone	305-434-9030
Fax	305-434-9040
Email	Jamie.pipher@gcmk.org
Who should we contact with questions about this application?	Jamie Pipher, Regional Vice President 305-434-9030

Amount received for prior fiscal year ending 09/30/09	\$460,520
Amount received for current fiscal year ending 09/30/10	\$460,520
Amount requested for upcoming fiscal year ending 09/30/11	\$460,520

Budget Breakdown :

01509 - 30,148
01526 - 69,177
01508 - 215,195
01535 - 146,000

CERTIFICATION

To the best of our knowledge and belief, the information contained in this application and attachments is true and correct. Monroe County is hereby authorized to verify all information contained herein, and we understand that any inaccuracies, omissions, or any other information found to be false may result in rejection of this application. This certifies that this request for funding is consistent with our organization's Articles of Incorporation and Bylaws and has been approved by a majority of the Board of Directors.

We affirm that the Agency will use Monroe County funds for the purposes as submitted in this Application for Funding. Any change will require written approval from the Monroe County Board of County Commissioners.

We understand that the agency must substantially meet the eligibility criteria to be considered for Monroe County funding and that any applicable attachments not included disqualify the agency's application.

We further understand that meeting the Eligibility Criteria in no way ensures that the agency will be recommended for funding by the Board of County Commissioners. These recommendations are determined by service needs of the community, availability of funds, etc. Funding recommendations must be approved by the Monroe County Board of County Commissioners.

Typed Name of Executive Director: Jamie Pipher

Signature 

Date: 5-27-10

1. Insert your agency's board-approved mission statement below.

The Guidance/Care Center Inc is a nonprofit, charitable organization dedicated to the provision of high-quality and cost-effective behavioral healthcare services for children, youth, and adults throughout the Florida Keys. GCC is affiliated with WestCare Foundation and supports WestCare's mission to: Empower everyone with whom we come into contact to engage in a process of healing, growth and change benefiting themselves, their families, coworkers and communities.

2. List the services your agency provides.

<p>Guidance/Care Center, Inc.</p> <p>Adult Mental Health (AMH) Children's Mental Health (CMH) Adult Substance Abuse (ASA) Children's Substance Abuse (CSA) Children's Prevention (CP) Adult Co Occurring Disorders (ACOD) Children's Co Occurring Disorders (CCOD)</p>	<p>Services Provided:</p> <p>Psychiatric and Medical Services Emergency Mental Health and Detox Screening Adult Crisis Stabilization – 11 beds – licensed by DCF and ACHA , <i>CARF accredited</i> - (CSU) Adult Residential Level 1 – MH /ACOD – 2 beds – licensed by DCF and ACHA (RTF) Adult Detox – 2 beds funded – 8 licensed beds by DCF, <i>CARF accredited</i> (Detox) HIV Services: Invention Counseling / Pre and Post Test Counseling and Testing/ Education</p> <p>Community Integration and Adult Rehabilitation Services- Personal Growth Center (PGC) (<i>CARF accredited</i>) Mental Health Clubhouse Mental Health Drop-in Center Psychosocial education Rehabilitation –Walk In Social Rehabilitation Peer Support Supportive Employment Supportive Housing/Living Services (PATH) General Information and Referral</p> <p>Criminal Justice Treatment and Services Substance Abuse Residential/Community treatment - 12 bed - Levels 2 & 3, licensed by DCF, contract with DOC-<i>CARF accredited</i> (Keys to Recovery- KTR) Substance abuse jail incarcerated treatment program for men and women (JIP) Community Reentry services for persons who have been in jail and are returning to community (Other Side of the Fence/ ORP) Drug Court evaluation and treatment DUI evaluations</p> <p>Children and Families Services Crisis Evaluations/ Child and Adult Mental health and substance professional expertise when collaborating with community partners Psychiatric Evaluations and Medication Monitoring for Adults and Children Children and Adult In-home/On-Site Treatment Services (ITOS / IHOS) Outpatient Services – licensed by DCF, (OP)- <i>CARF accredited</i> Substance Abuse and Mental Health Outpatient Individual Services</p>
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	<p>Mental Health OP Individual Substance Abuse and Mental Health Groups</p> <p>OP Nursing Clinic for Injectable Medication</p> <p>Children's Prevention Program and Services (majority are Evidence based) – Licensed by DCF, CARF accredited</p> <p>Substance Abuse treatment for DJJ children/Treatment Accountability for Safer Communities services (TASC) Case Management</p> <p>Adult and Children Targeted Case Management Services – licensed by DCF, CARF accredited</p> <p>Children and Adult Case Management</p> <p>Community Mental Health Crisis Responder</p> <p>Mental Health and Substance Abuse Outreach Services</p> <p>Mental Health Intervention Services</p> <p>Substance Abuse Intervention Individual and Group Services- licensed by DCF</p> <p>Substance Abuse Aftercare Individual and Group Services</p> <p>School Based Services</p> <p>Life Skills Counseling</p> <p>Employee Assistance programs</p> <p>Transportation :Medicaid /Disadvantaged/Baker/Marchman Act</p>
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3. What services will be funded by this request?

1. Services to be provided with BOCC funds :
 - a. Baker Act Services
 - b. Keys To Recovery (KTR)
 - c. Community Transportation
 - d. Baker Act Transportation Contract

4. Will County BOCC funds be used as match for a grant? – Yes

5. If you answered "yes" to number four, please specify the:

- a. grant award title, granting agency, and purpose:
- b. grant amount:
- c. match percentage requirement and amount:

a. Grant Award/Title	b. Grant Amount	c. Match Required
Florida Dept of Children & Families		
Adult Crisis Stabilization	1,009,566	336,522
South Florida Provider Coalition (DCF Funds)		
Keys To Recovery	112,140	37,380
Community Transportation Grant	271,340	30,148
Total	1,393,046	404,050

Please note that the \$146,000 applicable for Baker/Marchman Act Transportation is fully funded by Monroe County.

6. Do you plan to allocate any part of this BOCC grant, if awarded, as a sub-grant to another organization? *If yes, please list the recipient(s), the purpose(s), and amount(s). Please make sure these are included on Attachment D, under "Grants to Other Organizations."* No, the only amounts shown under "Grants to Other Organizations" are from other funding sources.
7. Does your organization allocate sub-grants to other organizations using other sources (non County) of funding? *If yes, please list the recipient(s), the purpose(s), and amount(s). Please make sure these are included on Attachment E, under "Grants to Other Organizations."* Yes, see below:

DCF & SFPC	
Heron/Peacock	47,496
Helpline	10,000
Drug Court	47,403
Transportation/MCSSS	45,996
Offender Re-entry Program./Sheriff	14,000
	164,895

8. Will you or have you applied for other sources of County funding? If yes, please list source(s) and amount(s). *Also be sure to reflect this information on Attachment F.*

Grant/Contract Source	Effective Dates		Annual Amount	Services Provided
	from	to		
Board of County Commissioners of Monroe County, Florida	10/01/09	09/30/10	\$44,900	Byrne Grant
Board of County Commissioners of Monroe County, Florida	09/01/09	08/31/10	\$66,667	RSAT
Board of County Commissioners of Monroe County, Florida	10/01/09	09/30/10	\$600,000	HSAB allocation funding various mental health and substance abuse treatment services, used as a match for DCF funds
Board of County Commissioners of Monroe County, Florida	04/18/07	Until Marathon hook-up expected in Fall 2010	\$580.00+ per month	Sharing of Guidance/Care Center sewage treatment plant facilities with Marathon jail
Monroe County School Board	08/11/09	06/08/10	\$236,373	Life skills services
Monroe County Sheriff	10/01/09	09/30/10	\$30,000	Inpatient mental health services for MSCO inmates

9. What needs or problems in this community does your agency address?

Problems:

- a. Children and Youth
 - i. Under age drinking
 - ii. Binge drinking
 - iii. Youth with alcohol / drug issues
 - iv. Youth with anger issues
 - v. Increase in crimes of violence
 - vi. Youth with substance use that contributed to criminal behavior
 - vii. Children and youth with behavioral health issues and co-occurring disorders
 - viii. Children and youth who required mental health and/or substance abuse residential treatment/ hospitalization.
 - ix. Children who are maltreated.
- b. Adults and Families
 - i. Problems associated with no financial means such as loss of job or having no health insurance
 - ii. Connection between substance abuse and suicide.
 - iii. Individuals and families who live in the Keys and do not have the tools / support to successfully participate in the community.
 - iv. Individuals who suffer from serious emotional distress.
 - v. Individuals with mental health, substance abuse or co-occurring disorders
 - vi. Individuals who require mental health and/or substance abuse residential treatment/hospitalization.
 - vii. Individuals and families who are homeless and are not able to meet basic needs
- c. Community
 - i. Duplication of services
 - ii. Recidivism and "high user" of multi services
 - iii. Scarce resources to meet the highest need
 - iv. Access to services
 - v. Trauma events impacting the community
 - vi. High % of persons without health insurance or other means of securing health services.

Needs:

- a. Children and Youth
 - i. Access to mental health and substance use services and treatment
 - ii. Access to intervention and prevention services
 - iii. Trained mental health professionals for 0-5 yr old
- b. Adults and Families
 - i. Identification and engagement of persons in need of mental health and substance abuse services
 - ii. Capacity
 - iii. Family interventions/treatment and safety net services
 - iv. Outpatient counseling services with extended hours
 - v. Access to prescribed psychotropic medication
- c. Community
 - i. Evidence based programs and best practices put into practice
 - ii. Supportive employment and community employment
 - iii. Transportation
 - iv. Access to grant writers for national grants to help pay for some of the high cost related to the needs
 - v. Access to and community linkage to mental health and substance abuse services
 - vi. Access to mental health / substance abuse consultation for primary care providers

10. What statistical data supports the needs listed in number nine?

- a. Report from Florida Community Mental Health Council to the 2010 Florida Legislators

- i. Florida is currently meeting less than 42% of the need for adult mental health, 18% for children mental health, 7% for adult substance, and 15% for children substance abuse.
 - ii. Individuals with severe mental illnesses die on the average 25 years ahead of their peers.
 - iii. 70% of primary care visits involve mental health or substance abuse issues.
 - iv. Daily in Florida, there are 16,000 prison inmates, 15,000 local jail detainees, and 40,000 under the correctional system supervision experiencing a mental illness.
 - v. Florida Tax Watch recommends treatment over incarceration.
 - vi. State wide, addiction and substance abuse issues are involved in 7 out of 10 child abuse cases.
 - vii. Social and economic impact of depression is estimated at \$63 billion.
 - viii. \$44 billion is lost annually due to alcohol and drug related work loss cost.
 - ix. Majority of behavioral health care in Florida and nationally is publically funded.
 - x. Mental illnesses and addictions account for more premature deaths and disability than cardiovascular disorders.
- b. US census – SAHIE
- i. 2006- Monroe County reported 30.8% of its residents were uninsured.
- c. Circuit Juvenile Justice Board Plan 2009-2012
- i. Monroe County Stats: (Circuit 16)
 - 1. Youth with a Parent with a Problem/MH/SA : Monroe 29% State wide 21%
 - 2. Youth has Used Alcohol Monroe 59% State wide 43%
 - 3. Youth has an Anger Problem Monroe 70% State wide 60%
 - 4. Youth has Experienced a Traumatic Event : Monroe 19% State wide 13%
 - 5. Youth Use of Substance Abuse / Drugs Contributed to Crime: Monroe 16% State wide 11%
 - 6. Youth Used Other Drugs Monroe 14% State wide 7%
 - ii. Plan Goals:
 - 1. Increase the % of parents that avail themselves to counseling.
 - 2. Make recommendations to treatment community to utilize evidence based best practices.
 - 3. Assess current Prevention Programs in Monroe County to identify needs for additional services and program expansion.
 - 4. Utilize current communications systems (DJJ meetings, FSPT) to collect data and analyze recidivism data, cross system utilization.
- d. Florida Child Abuse Prevention and Permanency Plan 2010-2015- Draft
- i. Monroe County stats (Circuit 16)
 - 1. State wide reporting rates were 58 per 1000. Circuit16 rate of 64.1 is above the state levels and more than double Circuit 11.
 - 2. Maltreatment rates per 1,000 children statewide rates for 2007-2008 were 11.30 and 11.08 for 2009. Circuit 16 was 19.18 in 2007-2008 and 17.51 in 2008-2009. Second highest in the State.
 - 3. State average for substance abuse treatment is 6.2 per 1,000. Circuit 16 is more than double at 15 per 1000 and the second highest in the state.
 - 4. Count of services recommended for victim at disposition of investigation:
 - a. 196 cases recommended for mental health services
 - b. 198 cases recommended for substance abuse services
 - ii. Plan Objectives and Information
 - 1. Circuit 16 will support efforts to increase availability and capacity of substance abuse prevention, intervention, and treatment programs and services for children at high risk for abuse and neglect and families in need of substance use related services.
- e. Monroe County Coalition for Under Aged Drinking – Community Plan
- i. Monroe County stats
 - 1. Underaged DUIs have increased 285% from 2001 – 2006.

2. High School students who drank in past 30 days in Monroe County were 59% vs. State wide rate of 41.8%. (2006)
3. High school students reporting binge drinking was 37.8% vs. state wide of 23% and a nationwide of 17.4 %. (2006)
- ii. Plan Objectives / Problem Statement
 1. Reduction of DUI crashes for 18-20 year olds
- f. DCF Strategic Plan 2010-2014 – Goals
 - i. Basic needs of food, shelter, clothing and health are met for children and adults:
 1. Increase prevention efforts to help individuals and families avoid substance abuse and homelessness.
 2. Ensure adequate mental health and substance abuse prevention and treatment services are available in the community, limit unnecessary involvement of people with mental illness and or substance use disorders in the criminal justice system and develop strong collaborations among mental health, substance abuse and other providers.
 3. Increase the diversion of person with mental illness who become involved in the criminal justice system through expanding cost effective community based treatment alternatives to incarceration.
 4. More children and adults with mental health problems will live in their own homes or communities.
 5. Develop a comprehensive, integrated, continuous system of care for parents and children requiring substance abuse and mental health services.
 6. Increase speedy access to food and public assistance.
 - ii. Adults, children and families are active self sufficient participants living in their own homes/community.
 1. Integrate the service functions of Family Intervention Specialists and Case Managers to ensure a seamless delivery system for families involved in substance abuse-mental health and child protection programs.
 2. More children and adults will live in their own homes/ communities free from substance abuse and reduced symptoms of mental illness.
- g. SAMHSA –
 - i. 17.4 % of underage youth engaged in binge drinking during the past month
 - ii. Alcohol is the drug of choice, used by more young people than tobacco
 - iii. Substance abuse is the biggest risk factor for suicide
 - iv. Human and economic cost of self inflicted injuries in 2000 was over \$33 billion
 - v. 10.9% of the adults in US experienced serious psychological distress in 2007 of which, 44.6% received mental health services
 - vi. Over 65% of first time admissions between 18-25 yr for substance abuse treatment reported had no health insurance and 59% of repeat admissions had no health insurance
- h. National Survey on Drug Use and Health- 2008
 - i. 24.3 million persons received treatment for mental health problems. 44.6 % received services. Of those receiving services, 6.9% received all three types of services, (inpatient, outpatient, and prescription medication)
 - ii. Clients with alcohol reported as the primary substance, were 82% more likely to complete treatment

11. What are the causes (not the symptoms) of these problems?

Mental health and substance abuse / addictive disorders affect persons of all age, racial, ethnic, educational and socioeconomic groups. The causes of mental illness and substance use disorders may be a factor of heredity and/or the environment.

12. What does your agency do to address these causes?

- a. Utilization of evidence based programs agency wide:

1. Supported Employment: Illness management and recovery, Wellness Recovery Action Planning, , Social skills CCISC (co-occurring based), Motivational Interviewing (MI),Community Integration
 2. Aftercare : CCISC, Illness management and Recovery, MI, Psycho education, Relapse prevention, Twelve step facilitation therapy and peer support, Cognitive Behavior Therapy(CBT), Client centered therapy
 3. Outpatient: CCISC, MI, MET, CBT, Twelve step facilitation, Illness management and recovery, relapse prevention, family psychosocial education, Brief Solution Focused Therapy.
 4. Mental Health Clubhouse: Team Solutions and Solutions for Wellness, MI, CBT, CCISC, Peer Support, Wellness Recovery Action Planning
 5. Crisis Stabilization Unit: TACT- De-escalation training
 6. Intervention: Street Smart
 7. Prevention: Too Good For Drugs, Ripple Effects, Hooked on Fishing
 8. Residential: Cognitive Behavioral Therapy, Milkman
- b. Provide leadership and infrastructure
 - c. Advocate for federal, state and local resources to be available to meet the broad scope of need including the current treatment needs of the community based on intensity, services for persons at risk of mental health/substance use, and recovery based services.

13. Describe your target population as specifically as possible.

- a. Mental Health and Substance Abuse Community Services Target Group:
 - i. Adults with serious and persistent mental illness (SPMI)
 - ii. Adults and children with mental health disorders
 - iii. Adults and children with substance use disorders
 - iv. Adults and children with co-occurring mental health and substance use disorders
 - v. Adults and children at risk for mental health disorders
 - vi. Adults and children at risk for substance use disorders
 - vii. Adults and children at risk for co-occurring mental health and substance use disorders
 - viii. Adults are at risk for HIV
 - ix. Homeless adults with mental health disorders
 - x. Homeless adults at risk for substance use disorder
 - xi. Adults with COD and criminal justice involvement
- b. Mental Health Residential Services Target Group:
 - i. Adults with mental health problems
 - ii. Adults with SPMI
 - iii. Adults with co-occurring disorders
 - iv. Adults with substance use disorders
- c. Disabled or low income individuals in need of transportation to access healthcare

14. How are clients referred to your agency?

Source of Referral GCC	# of Referrals 09
Self	1209
School System	258
Sheriff's Office	175
Family	57
Fisherman's Hospital	87
Court	356
Mariner's Hospital	23
LFKHS/DePoo	113
Other	2223

Total	4501

15. What steps are taken to be sure that prospective clients are eligible and that the neediest clients are given priority?
- GCC provides services based on the initial assessment/intake using a triage approach.
 - All clients receive a financial eligibility screen by a staff member. Clients are requested to provide evidence of income, insurance coverage, or other financial data.
 - GCC provides services regardless of ability to pay.
 - GCC uses a sliding fee scale based on the most recent years Federal Poverty Level guidelines and DCF Financial rules.
 - Management staff participated in training on Ethical Decision Making / Allocation of scarce resources resulting in protocols based on providing services to the neediest.
16. Describe any networking arrangements that are in place with other agencies.
- GCC partners with the MCSO to provide a SAMHSA Re-entry grant for persons re-entering the community from jail/prison.
- GCC is the state-designated Community Transportation Coordinator (CTC) for the transportation disadvantaged of Monroe County and the Medicaid Transportation Coordinator. GCC subcontracts with Monroe County Social Services to provide in county transportation.
- GCC provides CPR courses at a low cost to a partner agency and HIV course at no cost to the same partner agency.
- GCC is on the Executive Board of Directors of Southernmost Homeless Assistance League (SHAL), a Monroe County community coalition dedicated to serving the needs of the homeless, as well as several other planning and health-related organizations
- GCC has a transfer agreement with Psych Solutions Inc. and Village South for the transfer of clients in case of an evacuation from the Keys.
- GCC works with judges and staff members of Drug Court to meet the needs of the community.
- GCC works through informal lines of communication with emergencies rooms, law enforcement, courts, and licensed professionals to provide Baker Act and Marchman Act transportation from a point of origin to a receiving facility.
- GCC collaborates with Fishermen’s Hospital, Lower Keys Medical Center, and Mariners Hospital who provide medical clearance for Baker Act and Marchman Act clients, and emergency and lab services for Baker Act and Marchman Act clients.
- GCC works collaboratively with Rural Health Network and Community Health Incorporated to provide mental health and substance use services and primary health services for our mutual clients.
- GCC coordinates with a number of agencies to make available forensic funds for housing and medication for individuals being released from the jails and the state prison
- GCC coordinates two FSPTs (Family Services Prevention Team). Membership includes majority of the children service providers throughout the county.
- GCC and Village South of Miami work together administratively to provide a continuum of services without duplication.
- GCC provides psychiatric on site services at Marathon High, HOB, Key West High School, in collaboration with the Monroe County School District.

GCC partners with the school district to provide substance abuse prevention services at each of the High Schools through a Prevention Partnership grant.

GCC works collaboratively with DePoo/Receiving Facility, Jackson Memorial, Citrus Health Network to provide a Baker Act Receiving Facility services for Monroe County adults and children. GCC coordinates referrals and admissions with DePoo Hospital to ensure a full range of services regardless of ability to pay.

GCC works collaboratively with Department of Health to provide HIV testing and counseling services focused at the individuals who have been determined to be at the greatest risk- substance abuse and mental health clients. GCC offers Street Smarts, an evidence based program at Douglas Gym in Key West.

GCC partners with Monroe County Sheriff's Office to provide in custody treatment program for inmates at the County jail.

GCC is a member of many community alliances, coalitions, councils , and work group including: Florida Keys Interagency group, SAMH Alliance, DJJ Alliance, SFPC Partnership, MC Disability Council, Jail Suicide Prevention Task Force, Commission for Transportation Disadvantaged Advisory Board, State Mental Health Council, Southernmost Homeless Assistance League and associated subcommittees, South Florida Co-Occurring Alliance, Drug Court, Interagency Council, Marathon Chamber of Commerce, NAMI Middle Keys Chapter, SFPC Data Workgroup, Monroe County HIV Advisory.

17. List all sites and hours of operation.

Upper Keys: 99198 Overseas Hwy, Suite 5, Key Largo, FL 33037

Outpatient

- M – F 8am-5pm

- 24 hour crisis service

School Based

Coral Shores High School

- School Calendar and School Hrs

Plantation Key Middle School

Key Largo Elementary

Key West: 1205 Fourth St. Key West, FL 33040

Outpatient

- M – F 8 am- 5 pm (with extended hrs by appointment)

- 24 hour crisis services

School Based

- School Calendar and School Hrs

Gerald Adams

Key West High

HOB Middle School

Sugarloaf

Douglas Gym

- M-F 2:00 pm – 5:30 pm

DJJ

- M –F 8:00 am – 5:00 pm

Monroe County Detention Facility

- M-F 8:00 am -5:00 pm

Marathon: 3000 41st Street Ocean, Marathon, FL 33050

Residential/Crisis Stabilization Unit/Detox

- 24 hours/7days, 365 days/year

Outpatient/Case Management/Club House

- M, W, Th, F 8:30am - 5:00pm

Tuesday 8:30 – 6:00 pm

Transportation

- Monday – Friday 6:30am – 6:00pm

Drop In Services

- Monday – Friday 9:00am - 4:00pm
- Sat. & Sun. /12:00pm – 4:00pm

School Based

Stanley Switlick Elementary School -
Marathon High School

per schedule
School Calendar and School Hrs

County –wide service /Baker/Marchman Act Transportation - 24 hours/7days, 365 days/year

18. What financial challenges do you expect in the next two years, and how do you plan to respond to them?

- a. Decreasing government funding is a very real challenge. In response, we have been more active in submitting grant applications. In October 2009, we were successful in obtaining a three-year Offender Re-entry grant at approximately \$400,000 per year. In addition, we are working on the infrastructure (staff and technology) to improve our payment ratio on billings for private insurance, Medicaid and Medicare services.
- b. Our buildings and fixed equipment require repairs that have been put off over the last few years. Last summer, we repaired the pilings on the main building in Marathon at a cost of over \$184,000. The Key West Office is badly in need of a new air conditioning system at an estimated cost of \$50,000. In addition, GCC paid \$115,000 for the sewage treatment assessment in Marathon and anticipate an additional \$150,000 to hook up to the new system. Our response has been to pay for these costs out of reserves but these are now being reduced faster than they can be replenished.

19. What organizational challenges do you expect in the next two years, and how do you plan to respond to them?

- a. Responding to community need and capacity is a challenge. In response, GCC will take two major steps over the next 2 years. It will move its services from a primary site based operation to a program and off site operation. In short, GCC recognizes that many individuals needing services are not going to walk into our building asking for help. We will be taking services to locations in partnership with other agencies such as Wesley House. GCC is currently providing services at DCF, DJJ and Children's shelter as well as continuing a partnership with the School District for school based mental health and substance abuse intervention and treatment services. In addition, GCC recognizes that that our long-range plan must include enhancing resources on the prevention side of the spectrum of services. We know that by investing in strategies that prevent or even delay negative behaviors, we will prevent the need for greater and more expensive treatment services later on in life. As part of this commitment to the community, GCC will deliver evidence based prevention programs in at risk locations.
- b. Hiring and retention of qualified staff: Of particular concern is the hiring of psychiatrist and licensed personnel. GCC has been very creative in the hiring of psychiatrist. We contract with individuals who live in other areas but enjoy the Keys. They provide services by coming down to the Keys for 1-3 days, working evening hours and Saturdays. This has benefited our community by allowing us to provide extended hours and week end hours. In addition, the Upper Keys have benefited from the hiring of a psychiatrist with geriatric, criminal justice and child expertise. However, while this methodology has had good program results, it is a costly way of doing business. GCC will be working aggressively to restore the designation of critical access shortage back to Monroe County for psychiatrists which will allow new graduates to reduce their loan payments and providing incentives for psychiatrists to move to the Keys.

20. How are clients represented in the operation of your agency?
- a. Peers Specialist – Consumers are hired into positions whose responsibilities include client advocacy. GCC has Peer Specialists as case managers, housekeepers, therapist and maintenance assistant.
 - b. Peer Specialist are encouraged and assisted in obtaining their Peer Specialist certifications.
 - c. A member of the GCC Clubhouse represents Monroe County on the State Mental Health Planning Council. As a council member, he provides leadership in development and implementation of a comprehensive state plan for mental health services in Florida.
 - d. All clients/consumers participate in the development of their individual treatment plan.
 - e. Personal Growth Center operates a Consumer Advisory Board that makes decisions for the Center’s work groups.
 - f. The Consumer Advisory Board issues are reviewed at GCC management meetings and by the Board of Directors (BOD).
 - g. Clients from all programs are given the opportunity to complete a Client Satisfaction Survey.
 - h. Results from the surveys are reviewed by a Performance Improvement Committee and the BOD.
 - i. Results from the surveys are posted on our Website.
 - j. Clients/Consumers are encouraged to participate in external advocacy roles.

21. Is your agency monitored by an outside entity? If so, by whom and how often?
- a. CARF: Site Survey conducted: May 3-5, 2010. 3 year accreditation is expected.
 - b. The State of Florida Board of Professional Regulation or the Florida Certification Board licenses or certifies individual clinicians by professional discipline. – Annual licenses and re-certifications.
 - c. Substance abuse detoxification, residential, outpatient, intervention, aftercare, and prevention programs. – Licensed and monitored annually by the DCF.
 - d. The Florida Department of Corrections (DOC) monitors KTR substance abuse residential services. – Monitored quarterly.
 - e. CSU and the two-bed residential facility (RTF) - Licensed by AHCA and monitored annually.
 - f. GCC is a DCF designated Baker Act Receiving Facility- Recertified every 3 years.
 - g. Department of Health for dietary and hazardous waste- Quarterly inspections
 - h. Monroe County Fire Marshall – Annual
 - i. Southernmost Homeless Assistance League- as needed
 - j. Department of Health /Pharmacy – Annual
 - k. Department of Health /Lab – Annual
 - l. Department of Health / Dispensing Pharmacist – Annual
 - m. Department of Agriculture/Personal Growth Center Kitchen – Annual
 - n. DCF Contract Monitoring- Desk Review and On Site 1- 3 years
 - o. South Florida Provider Coalition – Annual contract monitoring site visit
 - p. Magellan – Desk Reviews and On Sites as determined
 - q. Medicaid – Annual review of Transportation
 - r. Commission for Transportation Disadvantaged - Annual review of Transportation

22. 479.5 hours of program service were contributed by 8 volunteers in the last year.

23. Will any services funded by the County be performed under subcontract by another agency? If so, what services, and who will perform them? Only Baker Act/Marchman Act Transportation

services are, in part, subcontracted to another agency. These services are paid under **BOCC** allocation. Elanjess, Inc. provides the transportation portion of those services.

24. What measurable outcomes do you plan to accomplish in the next funding year?

- a. Effectiveness Objectives
 - i. 86% of children receiving mental health services will increase attendance in school
 - ii. 78% of clients will be employed at discharge
 - iii. Adults receiving mental health services will increase the number of days they are living in the community
 - iv. 74% of the children receiving mental health services will show improvement by discharge
 - v. 75% of clients receiving services will reduce alcohol/drug use from time of admission to discharge
- b. Efficiency Objectives
 - i. Clients served:
 1. Adult mental health = 1100
 2. Child mental health= 240
 3. Adult substance abuse = 304
 4. Child substance abuse = 19
 - ii. 80% of clients will attend first session of OP treatment following IP discharge.
 - iii. 80% of clients will attend their OP therapy sessions
 - iv. 80% consumer satisfaction with program quality
 - v. 90% compliance of treatment program records to regulatory agencies requirements
 - vi. 95% of clinical records will demonstrate appropriate level of care
 - vii. 95% of clinical documentation will support billing and invoicing
 - viii. 95% of clinical records will contain a medication wellness and recovery treatment plan
 - ix. Clinical records will have prescription copies filed
 - x. 99% of incidents will be reported to appropriate external entity
 - xi. 95% of all staff will complete required annual trainings.
- c. Other measures
 - i. Financial stability
 - ii. Reorganization of the GCC mental health and substance abuse delivery system in the Keys

25. How will you measure these outcomes?

- a. Outcomes will be tracked and monitored by our Performance Improvement Coordinator (PIC) with results reported in a Quarterly PI report which is posted on our GCC Website. The Coordinator uses a sophisticated statistical software program to analyze the reported data. This process includes reporting data from the following sources:
 - i. GCC/WC client data base
 - ii. Information from client satisfaction surveys
 - iii. Results from stakeholder surveys using Survey Monkey
 - iv. Reports from the WestCare Intranet Incident Reporting system
 - v. Training and staff development completion records
- b. Other outcomes will be measured using financial and internal audits and results from regulatory contract compliance site visits.
- c. Example of a measured outcome and reported results:

Total OP Appointments = 3,815

and % Client Cancelled Appointments = 1,529 / 40%

Analysis: It is important to know if clients are coming for their appointments or not. Client cancellations are a trigger for other possible issues. By monitoring client cancelled appointments, we can better identify barriers and other issues. For the above situation, PIC, GCC VP and Directors met, reviewed the data and developed an improvement initiative to contact the next 15 clients who cancelled their appointments and ask the clients if they are experiencing barriers and how we prevent future cancelled appointments.

26. Provide information about units of service below.

Service	Unit (hour, session, day, etc.)	Cost per Unit
Mental Health Crisis Stabilization	Bed Day	\$ 666.68
Substance Abuse Residential Treatment	Bed Day	\$ 121.40
Community Transportation	One-Way Trip	\$ 17.34
Baker Act Transportation	Round trip	\$ 243.78
Assessments	Hour	\$ 77.51
Mental Health & Substance Abuse Intervention	Hour	\$ 59.18
Outpatient Counseling/Therapy	Hour	\$ 82.82
In Home/On-Site Services	Hour	\$ 69.85
Treatment Accountability for Safer Communities	Hour	\$ 84.12
Emergency Screening	Hour	\$ 47.52
Psychiatric Services	Hour	\$ 398.18
Substance Abuse Detoxification (Residential)	Bed Day	\$ 419.27
Substance Abuse Aftercare	Hour	\$ 58.50
Supported Housing	Hour	\$ 52.87
Case Management	Hour	\$ 54.54
School & Community-based Prevention	Hour	\$ 56.36
Information & Referral	Hour	\$ 45.96
Outreach & Education	Hour	\$ 47.43
Psychosocial Rehabilitation (Clubhouse)	Client Hour	\$ 16.97
Drop In Program	Facility Day	\$ 260.47
Mental Health Residential Treatment Level 1	Bed Day	\$ 385.51

27. In 300 words or less, address any topics not covered above (optional).

The Guidance/Care Center has acted on the recommendations of the BOCC to collaborate, partner, and consolidate its services. To date GCC have taken the following actions:

1. Cost savings while maintaining program integrity: Care Center for Mental Health merged with the Guidance Clinic of the Middle Keys creating the now, Guidance/Care Center. The merger occurred October 2009. As a result of consolidating administrative services and other efficiencies, we have seen a reduction in compensation expenses of \$143,796 over one year and \$912,593 over 3 years.
2. Increase access to mental health and substance abuse services for children and families at risk for child abuse and other maltreatment: GCC, in collaboration with DCF, moved the Family Intervention Specialist position to DCF Key West to be more accessible to the Protective Investigators and to be available to respond on the Protective Investigators first call. This resulted in increased referrals and services for this high risk group from a total of 177 services for FY 2009 to over 220 services for July – Feb 2010.
3. Working with a local business, Coldwell Banker–Schmitt Real Estate (CB Schmitt), the community was provided with a Suicide Hot Line at a time when this community was experiencing the highest number of suicides in the past 8 years.

Coldwell Banker-Schmitt Real Estate (CB Schmitt) provided the cost of the telephone service and extensive ads and the GCC provided the 24/7 professional crisis staff to respond the calls at no additional cost to the community.

4. Cost –Benefit of Prevention: GCC is actively involved in supporting effective prevention programs as a part of a comprehensive substance abuse array of services. GCC moved Prevention from one school to 5 community sites from Key West to Plantation Key. In addition, GCC, with the School District, applied for and was awarded a Prevention Partnership grant of \$247,363 over 3 years to place an evidence based prevention program in each high school.

ATTACHMENTS:

1. Attachment A- Board Information
2. Attachment B- Agency Compensation Detail
3. Attachment C- Profile of Client and Services
4. Attachment D – County Funding Budget
5. Attachment E- Agency Expenses
6. Attachment F- Agency Revenue
7. Attachment G – Baker Act Transportation Detail

ATTACHMENT C - PROFILE OF CLIENTS AND SERVICES (Performance Report)

2011

Guidance Care Center, Inc.

This attachment has changed; please note asterisked information at the bottom of page.
Delete or type over sample information shown.

List Services Here	Target Population Adult Mental Health=AMH Children Mental Health=CMH Adult Substance Abuse=ASA Children Substance Abuse=CSA	# of Persons In Target Population	Area	Days/Hours	Cumulative # of Clients for Year Ending 06/30/09	Current # of Clients ("snapshot") on 2/23/10
	AMH	4,483			2,773	124
	CMH	1,797			684	38
	ASA	6,739			1,636	83
	CSA	2,992			563	52
	Total	16,011			5,656	297
CSU	AMH		CW	24/7		
KTR	ASA		CW	24/7		
Medicaid/CTC Transportation			Monroe/Dade County Wide	M-F		
Information and Referral	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00		
Outreach and Education	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00		
Emergency Screening	AMH		CW	24/7		
Detox	ASA		CW	24/7		
Jail Diversion	AMH		Jail	M-F/8:30-5:00		
Assessments	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00		
Psychiatric Services	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00		
Intervention	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00	Ext Hr and Sat	
HIV Intervention	ASA		CW	M-F/8:30-5:00		
Case Management	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00		
Drop In Center	AMH		CW	M-F/8:30-5:00		
Clubhouse/Psychosocia Rehab	AMH		CW	SS 12:00-4:00		
Aftercare	ASA		CW	M-F/8:30-5:00		
School Based Prevention	CSA		CW	M-F/8:30-5:00		
School Based Life Skills	CSA		CW	School calendar		
Supported Employment	AMH		CW	M-F/8:30-5:00		
Crisis Support	AMH, CMH,ASA,CSA		CW	M-F/8:30-5:00		
Comprehensive Comm Service Team	AMH,ASA		CW	24/7		
AMH	AMH		CW	M-F/8:30-5:00		
Unduplicated Clients for Entire Agency					4,284	297