

MONROE COUNTY, FL – PROJECT PROPOSAL FOR  
FLORIDA DEPARTMENT OF LAW ENFORCEMENT  
EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE GRANT (JAG) PROGRAM

**ORGANIZATION INFORMATION**

Organization Name: Guidance Care Center / The Heron

Contact Person/Title: Lisa Marciniak / Director

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**PROJECT INFORMATION**

Project Title: Assisted Living Prevents Recidivism

Project Director: Clare Condra

Primary Physical Location of Program: 67 Coco Plum Drive, Marathon, FL 33050

Project Period: **October 01, 2016 through September 30, 2017**

**PROJECT OVERVIEW**

JAG Funds may be used for any one of the following purpose areas.

**Choose ONE Federal Purpose Area**

- Law Enforcement Programs
- Prosecution and Court Programs
- Prevention and Education Programs
- Corrections and Community Corrections Programs
- Drug Treatment and Enforcement Programs
- Planning, Evaluation, and Technology Improvement Programs

## PROBLEM IDENTIFICATION

Provide a description of the problem addressed with the proposed project.

Be sure to address the following items:

1. **Problem Description.** What is the problem, define the problem?
2. **Problem Significance.** Why is the problem significant and who is affected by the problem? Why do we need your project to address this problem now?
3. **Needs Assessment.** Identify the current scope of the problem and support your statements with factual information. Use measurable and descriptive data.

*Insert your response here. Add additional pages as needed.*

*Both locally and nationally, jails/prisons contain a significant number of non-violent mentally ill men and women. Monroe County Corrections continues to report that about 20% those in the Monroe County Detention Center have some type of mental illness, 80+% of those have substance abuse problems. These numbers vary greatly with the most recent (2006) Bureau of Justice Statistics report, which estimate that 1.26 million prisoners are mentally ill, representing 45% of federal offenders, 56% of state offenders and 64% of jail inmates. In this study a mental health problem was defined as receiving a clinical diagnosis or treatment by a mental health professional in the past one year.*

*To compound this, the 2010 National Survey on Drug Use and Health, Mental Health Findings, reported that the use of illicit drugs in the past year was more likely among adults aged 18 or older with past year mental illness (25.8 percent) than it was among adults who did not have mental illness in the past year (12.1 percent) This pattern was similar for most specific types of illicit drug use, including the use of marijuana, cocaine, hallucinogens, inhalants, or heroin and the nonmedical use of prescription-type psychotherapeutics. This makes it more likely that those with mental illness will often come in contact with the criminal justice system*

*The Heron Assisted Living Facility provides stable, affordable, supportive housing to adults with mental illness and who are dually diagnosed (with mental illness and a history of substance abuse). In the "Housing First" model, whereby housing is the critically required component in order to make recovery successful, It has been shown that once people have housing they are more receptive to participating in other programs to deal with mental health and substance abuse issues. The supportive services we provide improve the resident's ability to manage his/her mental illness and maintain sobriety- therefore greatly reducing the risk of incarceration and improving the quality of life of this very vulnerable population. Information provided by the Monroe County Sheriff's Office indicates that it currently (January 2015) costs \$80.40/day to maintain a prisoner in the County Jail. The daily cost of a stay at North Florida Evaluation and Treatment Center (State Funded Forensic Mental Health Facility) is in excess of \$233.00. The cost for a bed day at The Heron is \$78.84 and provides a therapeutic environment with access to an array of psychosocial rehabilitation activities.*

*The problem of incarceration of adults with mental illness and substance abuse, especially those who are not major offenders, remains a significant concern. Almost all jail inmates with*

*co-occurring mental illness and substance use disorders will leave correctional settings and return to the community. Monroe County has only one Assisted Living Facility with a Mental Health License serving a total of 16 low-income residents (The Heron). The Monroe County Homeless Services Coalition from the 2015 Point-in-Time study performed indicated that there were 575 homeless people in Monroe County at that time. 41% indicated they had a disabling mental health condition. 32% identified substance abuse conditions. These are the very populations that our proposed project will serve. The survey indicates that of the subpopulations of the homeless, one of those with the greatest need and the least resources to serve were the mentally ill. Homeless people with mental illness have been identified as a priority area of need. Outreach, intake, and assessment are core elements of our supported services. In fact, the problems of inappropriate incarceration and its link to homelessness have become so epidemic that the federal Substance Abuse and Mental Health Services Administration (SAMHSA) has identified major initiatives “to divert individuals with mental illness from the criminal justice system to mental health treatment and appropriate supported services”. The Heron is the only Assisted Living Facility of its kind in Monroe County serving this population: providing housing with support services to adults who are persistently and chronically mentally ill. By directing these type clients to The Heron and similar programs, whether through diversion upon entry to the criminal justice system or at reentry, we can provide a cost effective, stable housing and the supportive services necessary for successful community integration, and therefore decreasing the likelihood of recidivism. The Heron offers a more effective recovery environment than alternatives such as homelessness, correctional institutions, and state psychiatric hospitals.*

## PROJECT SUMMARY (SCOPE OF WORK)

Describe how your proposed project will focus on the problem.

Be sure to address any of the following items that are relevant to your project:

1. What will your project accomplish?
2. Who will receive services? **Participants must be involved with the criminal justice system.**
3. Who will provide services?
4. **State what documentation will be provided to document deliverables.**
5. Give a general description of cost covered by grant funds.

*Please note, there will be a focus on validating delivery of services and ensuring deliverables were met. Supporting documentation will be required and reviewed throughout the project and will be provided to FDLE.*

*Insert your response here. Add additional pages as needed.*

*The Heron will provide housing and supportive services to men and women who are mentally ill and have a history of both incarceration and substance abuse. Residents will not be re-incarcerated or re-institutionalized for the entirety of their residency at The Heron. This will be accomplished through community integration and on-site support activities. Projected outcomes are:*

- *90% of the participants will not be re-arrested or re-incarcerated*
- *90% of the participants will not be re-institutionalized*
- *90% of participants will not use substances*

*Services will be provided to men and women who are mentally ill, with a history of both incarceration and substance abuse. The Heron program staff will provide the services. Guidance / Care Center will provide any ancillary services that may be outside the scope of training and expertise of The Heron staff. However, no other GCC programs will receive any project funds for services provided to The Heron residents. Direct supportive services provided to each individual will be documented in the form of a daily summary note and filed in the client record. Components of this documentation will include:*

- *specific interventions provided by staff to support each participant*
- *activities that the resident participated in that support the program goals*
- *identification of risk factors that may inhibit success in obtaining the goals*
- *intensified efforts to address relapse, criminal activity, and psychiatric decompensation.*

*The grant funds will cover personnel costs to provide direct supportive services through a bundled daily rate.*

### **PROJECT ACCOMPLISHMENTS – Objectives and Measures**

Describe the accomplishments or benefits of the project. The description should link back to the project Summary (Scope of Work). Explain how the accomplishments will be measured and documented.

Also, select **ONE** of the Federal Purpose Areas below, which should correspond to your selection from page one, and answer all of the questions for that item.

1. Will your project be implementing a **Law Enforcement Program**? (*Law enforcement organizations only*)
  - a. Describe the law enforcement program you will be implementing, expanding, and sustaining?
  - b. How many programs will be new and what type of program will they be?
  - c. What is the target population and what type of events will be held?
2. Will your project be a **Prosecution and Court Program** (activities conducted in courts)?
  - a. What types of court programs will you have?
  - b. How many new cases will be prepared, how many will be drug related?
3. Will your project be a **Prevention and Education Program**?
  - a. How many prevention and education programs will you implement?
  - b. How many will be substance abuse prevention or education programs?
  - c. What types of prevention and education programs will be provided?
  - d. How many participants will the program serve?
  - e. Will you be developing program materials? If yes, what types of materials will be developed and how many?
  - f. How many educational activities and materials will be disseminated and where will they be disseminated?
4. Will your project be a **Corrections and Community Corrections Program**? (*Activities conducted by corrections agencies in correctional facilities or in the community*).
  - a. Will you provide cognitive based corrections and community corrections (CCC) services? *No*
  - b. Will you provide education, employment, Health Care/Medicaid Eligibility, Housing, pro-social, or substance abuse CCC services? *YES*
  - c. How many participants will you serve? *10*
  - d. How many participants will be new and how many will complete the program? *2 will be new. 2 will complete the program*
  - e. Will your CCC program provide evidence-based services? *no*
  - f. If yes, how many evidence-based services will be provided?

- g. If yes, what type of evidence-based services will be provided?
- 5. Will your project be a **Drug Treatment and Enforcement Program**?
  - a. Will your program admit participants to drug treatment programs? If so, how many participants will be enrolled programs?
  - b. Will your drug treatment program provide evidence-based treatment services?
  - c. How many evidence-based services will be provided?
  - d. What type of evidence-based services will be provided?
  - e. Will the program provide inpatient services? If yes, how many days of inpatient services will participants receive?
  - f. Will the program provide outpatient services? If yes, how many sessions of outpatient services will participants receive?
  - g. Will participants be tested for the presence of alcohol or illegal substances? If so, how many will be tested and how many will test positive?
  - h. How many participants will successfully complete all program requirements?
  - i. Will this program expand existing services? If yes, identify the services which are being added.
- 6. Will your project be a **Planning, Evaluation, and Technology Improvement Program**?
  - a. How many programs will be evaluated?
  - b. What kind of new programs will be evaluated and evaluated?
  - c. How many evidence-based programs/practices will you implement?
  - d. What type of evidence-based programs/practices will be implemented?
  - e. How many evidence-based programs/practices will be evaluated?
- 7. Will your project be a **Crime Victim and Witness Program**?
  - a. How many crime victims and/or witnesses will be served?
  - b. What types of services will be provided?
  - c. How many will receive referrals for additional services?

*Please note, these questions are to provide us with specific details regarding the nature of the proposed project. Should your project be selected for funding, additional Objectives and Measures will be necessary to meet Federal and State requirements. Quarterly performance reporting on the Objectives and Measures of the project will also be required.*

**PROJECT ACCOMPLISHMENTS (Continued)**

*Insert your response here. Add additional pages as needed.*

*The supportive and assistive services that the Heron provides will assure that 90% of the individuals who participate in the program will maintain sobriety, and will not be re-incarcerated or re-institutionalized. The services will be documented on a daily service log and maintained in the resident's file. These services specifically include: supervision of medication, assistance with meal preparation, assistance with phone call (to coordinate medical, behavioral health, education, and legal services), provision of and arrangement of transportation (for medical, behavioral health, education, legal services, shopping, or other supportive community activities), assistance with money management, access to social and leisure activities and assisting with access to entitlements.*

**BUDGET NARRATIVE**

Provide a detailed Budget Narrative for the purposed project.

Be sure to include the following in your Budget:

1. Identify the type of Budget, either Unit Costs or Unit Rates, for each service provided.
2. Provide a definition and cost for each service.
3. Describe the basis for the Unit Costs/Unit Rates and state when the basis was established or updated.
4. Will your project be funded by any other source(s) and if so, state the other source(s)?

*Please note, Federal funds may not supplant state or local funds. Monroe County will be the subrecipient of Federal FDLE funds. Monroe County will enter into a contract with the organization should this Project Proposal be selected for funding. All applicable Federal requirements of the granting agency will also be the responsibility of the proposal organization and will be included in the contract.*

*Insert your response here.*

*The budget reflects costs directly associated with the prevention of Recidivism in Dually Diagnosed Adults residing in the Heron Assisted Living facility in Marathon, Florida.*

*All services provided at The Heron are included in a bundled daily rate.*

	<i>DCF Unit Cost Budget</i>	<i>Byrne Grant Related</i>
<i>Total Operating Budget:</i>	<i>\$391,382.69</i>	<i>\$119,599.15</i>
<i>Unit of Service:</i>	<i>a day in residence</i>	<i>a day in residence</i>
<i>Minimum Service Level</i>	<i>4964 days</i>	<i>4964 days</i>
<i>Unit Rate</i>	<i>\$78.84</i>	<i>\$24.09</i>
	<i>Byrne Grant</i>	
<i>Grant Funding:</i>	<i>\$42,515.00</i>	
<i>Unit of Service:</i>	<i>a day in residence</i>	
<i>Units of Service:</i>	<i>approximately 1764.84 days</i>	
<i>Unit Rate:</i>	<i>\$24.09</i>	

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**BUDGET NARRATIVE (Continued)**

*Note that, while some of the costs of a bed day are partially covered by client fees and DCF state funding, the DCF invoice process assures that there will be no supplanting or double billing:*

- 1. DCF funding is the payer of last resort so any client payments (which are no way covering the full costs—determined to be \$78.84 per day per the state funding contract approved July 1, 2016), the HSAB funding and the FDLE funding are reported to offset any state funding that may be due. Other funding is reported in the DCF invoices so as not to double bill. Of note is that all three types of payments are considered as fulfilling the match requirement.*
- 2. The Byrne grant is only covering a portion of the cost and*
- 3. DCF does not cover all of the client bed days/costs. The funding is limited by contract.*

*The line item is in the budget category of "Contractual Services." A contract with the treatment provider will be developed to be utilized during the established grant period.*

*Monthly invoices are provided to Monroe County by the treatment provider, including units of service provided each month. Documentation summarizing the number of days that each eligible client resided in the facility is available upon request. Invoices are reviewed by County Office staff for approval of payment.*

*TOTAL PROGRAM COST: 1764.84 bed days (4.83 eligible residents per day x 365 days) times \$24.09 = \$42,515.00 (rounded). \$42,515.00 will be funded by Byrne.*