



# **Kitsap County Mental Health, Chemical Dependency & Therapeutic Court Programs**

**2019 Continuation Grant  
Submitted Proposals  
RFP 2019-136**

**January 1, 2020 – December 31, 2020**

## 2019 Mental Health, Chemical Dependency and Therapeutic Court Continuation Grant Submitted Proposals

The Kitsap County Department of Human Services (KCDHS) received 16 Continuation Grant proposals for moneys collected under RCW 82.14.460 and “**must be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services.** Programs and services includes, but is not limited to, **treatment services, case management, transportation, and housing that are a component of a coordinated chemical dependency or mental health treatment program or service.**” Approximately \$6,000,000 will be awarded for projects or program services delivered between January 1, 2020 and December 31, 2020.

### **Continuation Proposals:**

#### **Aging and Long-Term Care**

**Partners in Memory Care** – \$90,000 in grant funds requested to provide dementia-friendly supports, strategies and consultation for challenging behaviors in order to prevent and delay institutionalizations and preserve placements.

#### **Bremerton School District**

**Social and Emotional Learning** – \$320,000 in grant funds requested to expand services using Restorative Justice Practices (RJP) and a Collective Impact Framework to join multiple county services for prevention of initial mental health services and further involvement in the criminal justice system.

#### **City of Poulsbo**

**Behavioral Health Outreach** - \$480,858 in grant funds requested to provide Behavioral Health Outreach Services staffed by four Behavioral Health (BH) Navigators to serve adults with a mental illness or co-occurring mental health and substance abuse disorders who are charged with minor, non-violent crimes throughout Kitsap County or are identified as at-risk of arrest or crisis.

#### **The Coffee Oasis**

**Homeless Youth Intervention** - \$303,917.77. in grant funds requested to support intervention and outreach to homeless youth struggling with substance abuse and mental illness and connect them to services that will provide opportunities for restoration with their families and community.

#### **Kitsap County District Court**

**Behavioral Health Court** – \$318,156 in grant funds requested to provide two Behavioral Health Specialist, one full-time Treatment Court Compliance Specialist and dedicated public defense to the growing number of participants in Behavioral Health Court.

#### **Kitsap Juvenile Court Services**

**Enhancements for Juvenile Therapeutic Courts** - \$189,238 in grant funds requested to improve the continuity of treatment services to participants in the Individualized Treatment Court by establishing a dedicated behavioral health specialist to serve all participants and establish a full-time Therapeutic Court Case Monitor.

#### **Kitsap County Prevention & Youth Services**

**Substance Abuse Prevention Program** - \$63,985 in grant funds requested to increase youth substance abuse efforts to all of Kitsap County through the application of Research Proven Prevention Strategies.

### **Kitsap County Prosecuting Attorney's Office**

**Therapeutic Courts Alternative to Prosecution** - \$299,047.88 in grant funds requested to support their roles in rapidly increasing role in all five Therapeutic Courts. Funds would provide 2 full-time Deputy Prosecuting Attorneys and one full-time Legal Assistant to support the growth of all five Therapeutic Courts.

### **Kitsap County Sheriff's Office**

**Crisis Intervention and Triage for Law Enforcement** - \$22,500 in grant funds requested to provide funding for training for commissioned law enforcement officers in Kitsap County in Crisis Intervention/Triage. The training will also provide 40-hour Crisis Intervention Training and Enhanced Training for Crisis Intervention Officers (CIOs).

### **Kitsap County Sheriff's Office**

**Reentry Officer and Coordinator** - \$193,538 in grant funds requested to fund a Reentry Officer and Reentry Coordinator to collaborate with the current services that are being provided in the jail, and also add services that are currently not being provided.

### **Kitsap County Superior Court**

**Adult Drug Court Expansion** - \$640,787 in grant funds requested to expand the capacity of the Adult Felony Drug Court from 100 participants to 150 participants. Expansion also includes mental health screening, assessment and counseling; and behavioral compliance tools.

### **Kitsap County Superior Court**

**Veterans Treatment Court** - \$93,428 in grant funds requested to support the Veterans Court Treatment Track, designed to serve up to 25 veterans engaged in the criminal justice system due to co-occurring substance abuse and/or mental health issues.

### **Kitsap Public Health District**

**Crisis Response and Coordinated Care Demonstration Project (Kitsap Connects)** – \$574,598 in grant funds requested to support a multi-disciplinary, mobile outreach team to intervene with adults who are experiencing (or are at risk of) mental illness, chemical dependency, physical illnesses, and homelessness and includes intensive care coordination services.

### **Kitsap Public Health District**

**Improving Health and Resiliency of High Risk Mothers and their Children** - \$153,712 in grant funds requested to support evidenced-based nurse home visiting program (Nurse Family Partnership) for first time, low-income moms and their babies and adds a bilingual Community Health Worker (CHW) to the Parent Child Health Team to provide outreach and case management to high risk, low-income pregnant women.

### **Olympic Educational Service District 114**

**School Based Behavioral Health Enhancement Project** - \$733,695 in grant funds requested to provide school-based behavioral health services for both mental health and substance abuse in targeted high risk elementary and high schools.

### **West Sound Treatment Center**

**New Start (Jail Transition Services)** - \$374,000 in grant funds requested to provide Substance Use Disorder Assessments, Court-ordered Assessments, Treatment, Life-Skill Building and Re-entry services at the Kitsap County Jail as well as housing, case management and supportive services for 16 men and women through the New Start men and women's houses.

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name: Kitsap County Division of Aging and Long Term Care

Primary Contact: Stacey Smith, Administrator sasmith@co.kitsap.wa.us (360) 337-5624  
Name Email Phone

Organization Address: 614 Division St., MS-5 Port Orchard, WA 98366  
Street City State Zip

Federal Tax ID Number: 91-6001348 Legal Status of Organization: Gov't Non-Profit

Individual Authorized to Sign Contracts: Kitsap County Board of County Commissioners  
Name Title

**Continuation Grant Proposal Information**

Proposal Title: Partners in Memory Care

Number of Individuals Screened: +150 Number of Individuals Served: +150

Requested Amount of Funding: \$90,000 Matching Funds: \$15,883

**Please check which area(s) of the Continuum this project addresses:**

<input checked="" type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input checked="" type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input type="checkbox"/> Crisis Intervention	<input checked="" type="checkbox"/> Recovery Support Services
<input type="checkbox"/> Outpatient treatment	

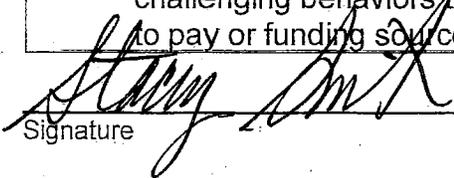
**Please check which area(s) of the County this project is focused:**

<input checked="" type="checkbox"/> South Kitsap	<input checked="" type="checkbox"/> City of Bremerton
<input checked="" type="checkbox"/> Central Kitsap	<input checked="" type="checkbox"/> Other City: <u>2 Tribes</u>
<input checked="" type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

The 2020 continued Partners in Memory Care project will provide proven successful services to Kitsap residents, and their caregivers, to address challenging behaviors and stress associated with aging and mild to major neurocognitive dementia disorders and memory impairment.

- The 2020 proposal will sustain the Dementia Consultant service dedicated to providing community-based personalized education and strategies to address challenging behaviors threatening placement, regardless of an individual's ability to pay or funding source.

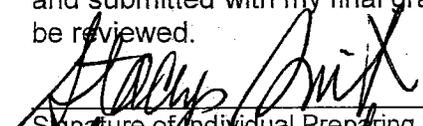
 Administrator, Division of Aging 7/15/2019  
Signature Title Date

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program: Partners in Memory Care      Organization Submitting: Kitsap Aging & Long Term Care

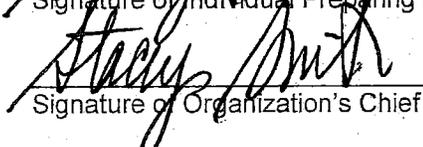
Item or Attachment	Yes	No	NA	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			
Organization had a representative at the Mandatory Continuation Grant Proposer Conference: Stacey Smith	X			
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			
Organization did receive funding for this project in 2019	X			
Attachment A – Continuation Grant Proposal Summary Page	X			
Attachment B – Continuation Grant Proposal Checklist Form	X			
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			
Attachment C – Continuation Grant Proposal Narrative Template	X			
Proposal Narrative is limited to 10 pages	X			
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			
Attachment E – Total Agency Budget Form	X			
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			
Indirect is limited to 5%	X			
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			
Organization submitted Attachment G for each Sub-Contractor	X			
Sub-Contractor indirect limited to 5%	X			
Attachment H – Continuation Grant Proposal Project Salary Summary	X			
Attachment I – Letter of Resource Commitment (optional)	X			
No other attachments are included	X			
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
\_\_\_\_\_  
Signature of Individual Preparing Proposal

7/15/2019

Date

  
\_\_\_\_\_  
Signature of Organization's Chief Executive (Division Aging Administrator)

7/15/2019

Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template**

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**All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.**

**1. Project Description (20 points)**

**A. Project Design**

The 2020 continued Partners in Memory Care project will provide proven successful services to *Kitsap residents, and their caregivers*, to address challenging behaviors and stress associated with aging and mild to major neurocognitive dementia disorders and memory impairment.

- The 2020 proposal will sustain the Dementia Consultant service dedicated to providing community-based personalized education and strategies to address challenging behaviors threatening placement, regardless of an individual's ability to pay or funding source.

2020 Continued Funding Request: Dementia Consultant

Since 2018 Kitsap County Division of Aging and Long Term Care has provided individual community-based consultation and educational services to informal and formal caregivers (family, facility-based staff, systems, etc.) in dealing *with challenging behaviors related to neurocognitive disorders that could jeopardize an individual's placement* through the Kitsap 1/10<sup>th</sup> sales tax revenue. This service is available to all individuals and their caregivers in Kitsap County, regardless of enrollment in public assistance programs, insurance coverage, or current placement.

This service is provided through a subcontracted professional service contract with Denise Hughes. Ms. Hughes received a Masters in Nursing, is a retired Registered Nurse, mental health professional with geriatric mental health specialist credentials. She has 20+ years' experience providing Medicaid older adults mental health direct services, as well supervising the Older Adults Treatment Team at Kitsap Mental Health Services. She is experienced as a nurse and adult family home administrator. She is uniquely skilled as a consultant to the community and local care facilities.

Partners in Memory Care was funded in CY 2018 and 2019. Since that time, Ms. Hughes has worked extensively with Kitsap community partners, primary care physicians, skilled nursing facilities, and a host of long term care system partners. She is highly respected as a local expert in the field of older adult brain disorders to better support care teams treating individuals with dementia and their caregivers.

- In 2018, there were 39 educational presentations provided to ancillary partners.

The professional services subcontract provides the flexibility to meet individuals, including caregivers, at a variety of locations in Kitsap County and provide information to better understand concerning behavior(s), discuss strategies, review medications, refer to

resources and provide support to maintain a placement. The Consultant also has the flexibility to provide individualized consultation, training to facility staff, co-facilitate community educational workshops, connect families to existing community resources (collective impact), as well as provides expertise to existing ancillary agencies through a collective impact model. This includes services and programs provided by Kitsap Aging, Alzheimer's Association and other long-term care system partners.

From March- December 2018, Ms. Hughes provided 76 consultation services for individuals with dementia and their caregivers, 40 education/trainings to long term care facilities (staff), and 7 community educational presentations about the behavioral challenges with dementia and interventions. One outreach event included a workshop at the 2018 Caregiver Conference hosted by Kitsap Aging, with over 80 attendees.

- January- March 2018 was dedicated to the procurement and subcontracting required County process. Professional services started April 1, 2018.

In CY 2019 from January- June, Ms. Hughes provided 45 consultation services for individuals with dementia and their caregivers, 12 education/trainings to long term care facilities (staff) representing collective impact, and 9 community educational presentations about the behavioral challenges with dementia and interventions.

#### Goals of the Dementia Consultant:

This innovative approach targets stabilizing current placement, increasing connections to existing community resources, decreasing emergency room use, decreasing hospital admissions and length of stays, as well as preserves formal and informal long-term services and systems. The collective impact with system partners is critical to the success of supporting the following policy goals.

This strategy meets the following 2020 grant proposal policy goals:

- Reduce the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms and crisis services.
- Improve the health status and well-being of Kitsap County residents.

This strategy meets the following 2020 identified 1/10<sup>th</sup> community gaps:

- Assess and identify the mental health service needs of an aging population;
- Evaluate geriatric population needs;
- Provide consistent behavioral health consultation to providers working with the aging population;
- Expand family education, involvement and support.

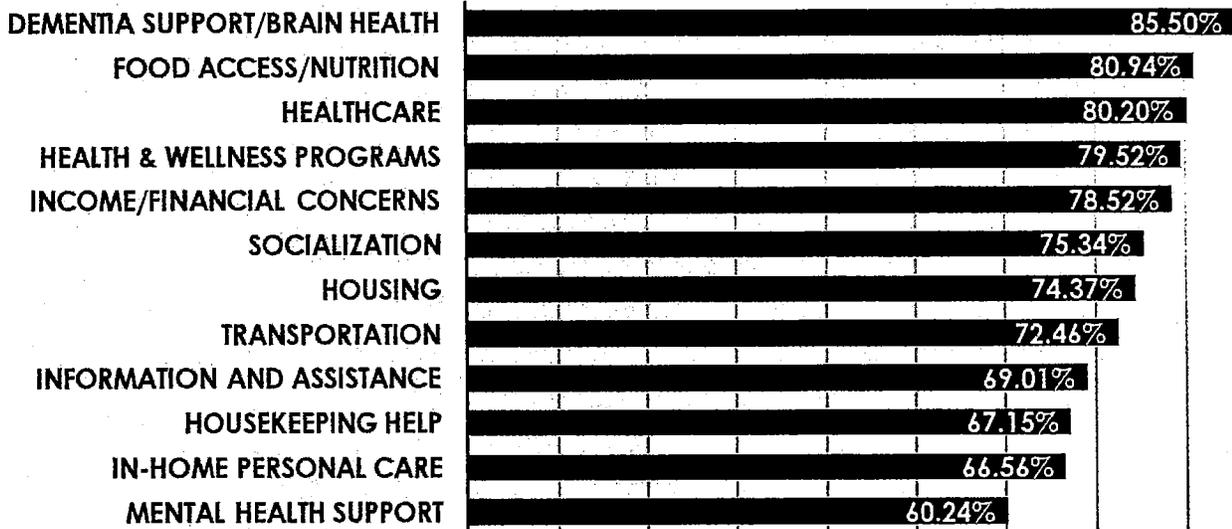
#### Community Feedback:

In the month of April 2019, Division of Aging and Long Term Care conducted a community survey to assist with identifying community gaps and concern for the Aging Area Plan. We received over 700 responses. (584 on-line and 133 mailed survey responses.)

- The highest rate of survey responses were from 60-74 age group, followed by 75-84 age group, and then 50-59 age group.
- 30% of responders identified themselves as caregivers.

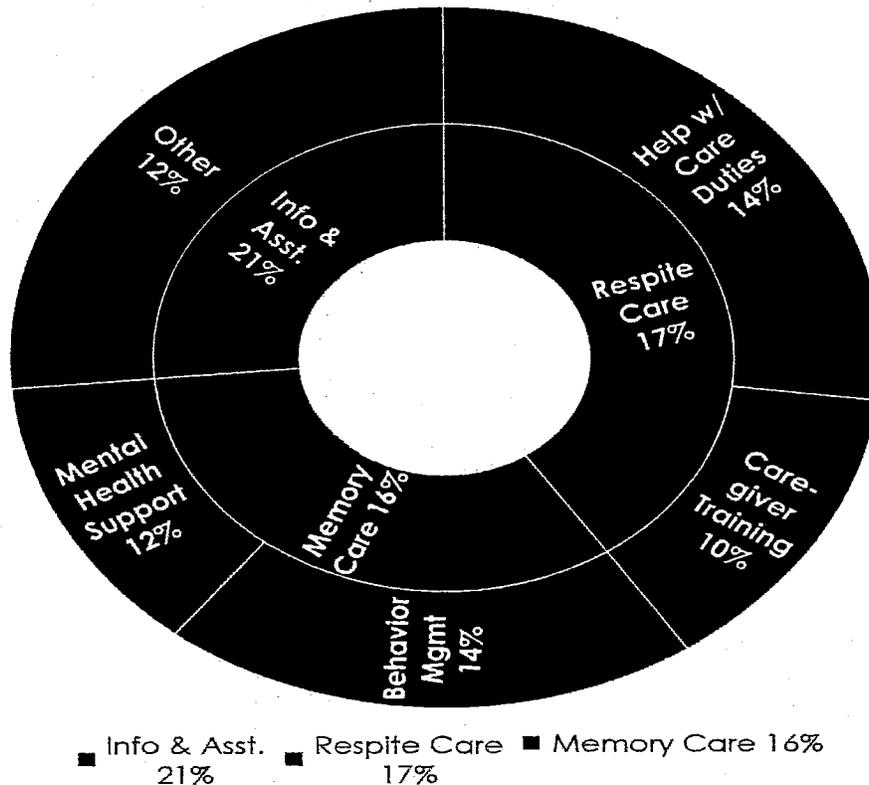
The following tables illustrate significant findings and guidance from our community.  
 #1 concern of Older Adults in Kitsap County: Dementia and Brain Health

## NEEDS OF OLDER ADULTS



#1 concern of Caregivers in Kitsap County: Information and Assistance

## Caregiver Top Needs



The Dementia Consultant services addresses the top needs of older adults and caregivers in Kitsap.

2018 and 2019 Partnership with Alzheimer's Association – 2020 discontinued request

This 2020 proposal does not include a request for funding to support the Alzheimer's Association strategies from 2018 and 2019. The GREAT news is the Alzheimer's Association is committed to continuing the services, without on-going funding, that were created as a result of the start-up funds awarded in 2018 and 2019.

- In 2018 through partnership with the Alzheimer's Association a variety of individualized and group, services were created for informal caregivers, healthcare professionals, service providers and the individual with early memory loss and dementia.

The Alzheimer's Association, through 2018 subcontract, re-energized local support groups for individuals and caregivers dealing with memory impairment/ dementia, established an additional dementia Café in South Kitsap to complement the existing Central Kitsap site, as well as created a dedicated Bainbridge island museum docent monthly activity.

In 2018, Kitsap Aging partnered with the Alzheimer's Association to expand community-based Early Stage Memory Loss Support groups and Dementia Cafés in Kitsap County. The Cafés are evidence-based interventions that provided an informal venue for socialization, peer support, and education to individuals diagnosed with memory loss and their caregivers.

This approach targeted prevention of and early intervention for caregiver burnout, education regarding brain health, increased socialization and support for individuals with dementia, and strategies to delay the disease progression.

The 2018 expanded Café and Early Stage Memory Loss Support groups interventions are self-sustaining. In 2019 no additional funding is requested to support them.

- In 2018 these free services were provided throughout Kitsap County and served approximately 60 individuals and caregivers. Once these services were established (in 2018), no additional funding has been requested. All of these Alzheimer's Association support services continue in 2019 with no dedicated 1/10<sup>th</sup> funding; free to our community.
- In 2019, through partnership with the Alzheimer's Association, the following two new services were provided in Kitsap County:
  1. Four dementia educational community presentations were available in June that include information about dementia disorders, healthy brain aging strategies, early detection, understanding resources, communication strategies, legal and financial guidance, local resources and interventions for caregiving for individuals with a dementia and early memory loss brain disorder.

These educational presentations were located throughout Kitsap County at the following locations and offered free of charge:

- "Healthy Living" in Bremerton on June 29, 2019
- "Brain and Body Connections" in Poulsbo on June 20, 2019
- "10 Warning Signs" in Port Orchard on June 11, 2019
- "Understanding Dementia" in Silverdale on June 13, 2019

Approximately 35 individuals total attended these community workshops throughout Kitsap County.

2. Two evidence-based Staying Connected workshop series- one in North Kitsap and one in South Kitsap. The four-week health promotion workshop series will be facilitated by trained Alzheimer's Association staff and volunteers in the Fall of 2019.

The series is intended for unpaid caregivers of individuals with dementia. It provides information on how to stay socially active and engaged in community events to boost positive mood and prevent memory decline; while increasing social and emotional support and decreasing isolation as a caregiver. The caregiver journey involves unforeseen barriers and obstacles.

Topics for caregiver include; how to cope and live with memory loss challenges, strategies for staying involved in favorite activities, and how to communicate memory loss to others. The program gives individuals, and their caregivers, in the early stages of memory loss what they have said they need most – improved quality of life.

## **B. Outreach**

Kitsap County Division of Aging and Long Term Care provides a variety of community-based services that are Countywide to support the needs of older adults and their caregivers. One major strategy for educating our community about available information and services is through outreach activities. It remains a challenge to increase community awareness and distribute useful information to older people and caregivers, for making informed, person-centered decisions

Kitsap Aging staff are committed to meeting with community partners to explain services and programs available through this grant. Since 2018, Kitsap Aging staff and subcontractors presented to Harrison Hospital staff (nurses and social workers), faith-based churches, disaster response partners, skilled nursing facilities, assisted living facilities, crisis response workers, long term care alliance association, subcontractors and law enforcement navigators.

- For 2018, Kitsap Aging provided 43 outreach events- combined 18 outreach booths and 25 community presentations; serving approximately 1,925 people.

Ms. Hughes is required by subcontract to all services as an outreach service. She meets clients and caregivers where it is convenient for them. She is also required to provide at least five community care team consultations per month and at least 4 community educational presentations per year.

Currently, the Division of Aging and Long Term Care is conducting an Older Americans community wide assessment of specific needs and gaps in services for the 2020-2023 Area Plan. In April 2019, the agency used a community survey to inquire about the needs of older adults. There were over 700 surveys returned. The top need identified of older adults was dementia supports and services. Therefore, this remains a top priority for requested local funding.

One expectation of the Dementia Consultant subcontract is to provide services through an outreach model. The consultant meets referred individuals in *their preferred location*, such

as home, hospital setting, adult family home, or other. The Consultant also provides education to the community and long term care system partners through presenting at conferences, speaking engagements and facilities.

**2. Accomplishments to Date**

**A. Evaluation**

A true accomplishment of the Partners in Memory Care is the fact that a majority of the projects from 2018 and 2019 are self-sustaining after the first year. The following projects were awarded 2018 1/10<sup>th</sup> funding and are self-sustaining today:

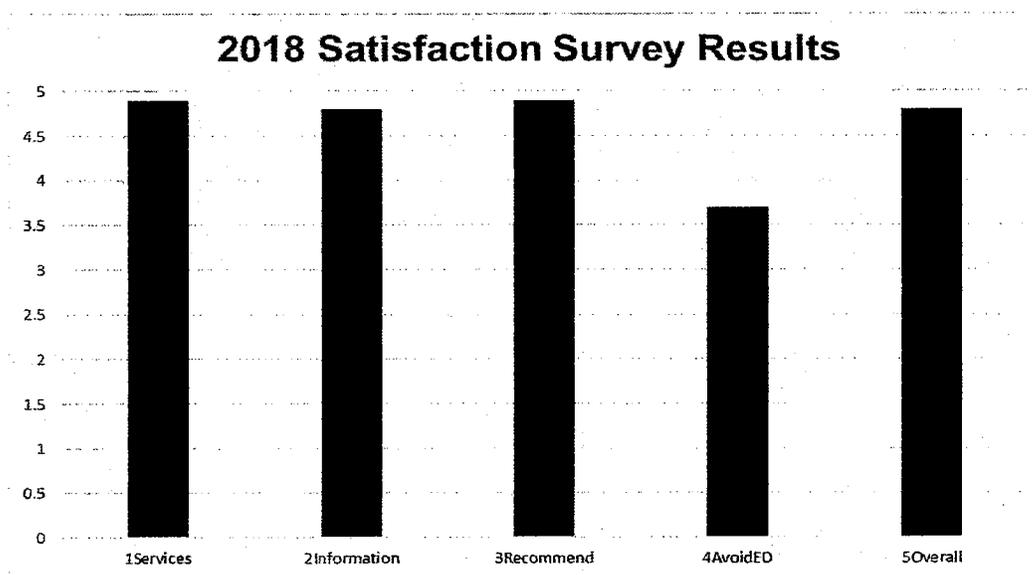
- Powerful Tools for Caregivers- 4 facilitators trained are providing 2 free workshop series in 2019
- South Kitsap Dementia Café remains open, self-sustaining and operational in 2019
- Bainbridge Island Museum Dementia Day remains open, self-sustaining and operational in 2019
- Alzheimer’s Association Support Groups (for individuals with memory impairments and their caregivers) remain available, self-sustaining and operational in 2019

In 2019, the Alzheimer’s Association remain strong partners and provided 2 additional community presentations than were required by subcontract.

The self-reported Satisfaction Survey results for 2018 and 2019 have provided valuable information about impact of services.

In 2018, the satisfaction survey score for overall with Dementia Consultant was 4.8 (out of 5). Other averaged scores included:

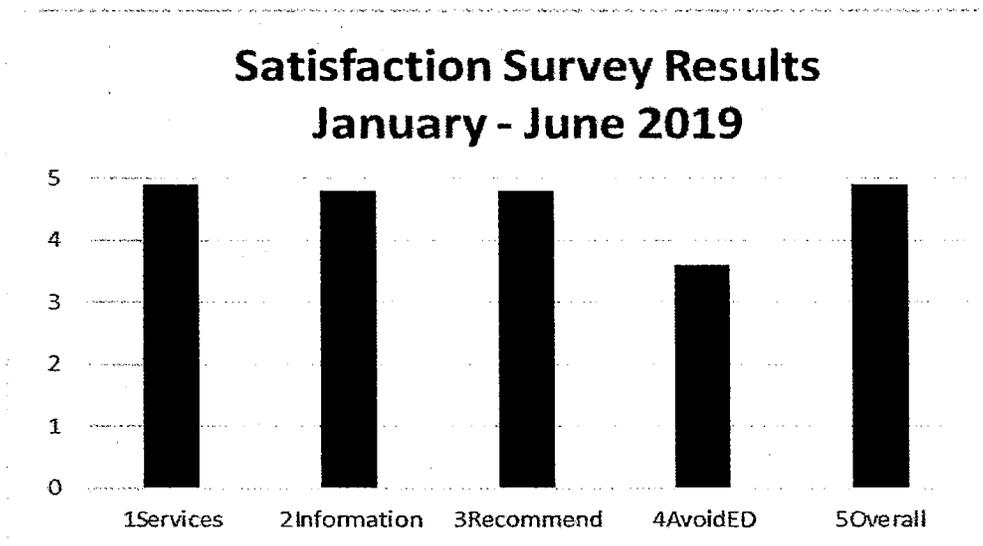
- 1) I was satisfied with the *services* provided by the Consultant. Score: 4.9
- 2) The *information* and recommendations provided by the Consultant was useful. Score: 4.9
- 3) I would *recommend* this service to others. Score: 4.9
- 4) The information and support provided *avoided an Emergency Room visit*. Score: 3.5



In 2019, the satisfaction survey score for overall with Dementia Consultant was 4.9.

Other averaged scores included:

- 1) I was satisfied with the *services* provided by the Consultant. Score: 4.9
- 2) The *information* and recommendations provided by the Consultant was useful. Score: 4.8
- 3) I would *recommend* this service to others. Score: 4.8
- 4) The information and support provided *avoided an Emergency Room visit*. Score: 3.6



A few excerpts from the 2019 narrative responses included:

*I was really pleased with this support (visit), we need to know about this in my mother's case dementia and how we can help her and ourselves.*

*Denise is providing a unique and invaluable service to dementia sufferers and their caregivers. Without her support we would feel totally abandoned as far as wife's dementia is concerned.*

*The consultant was very knowledgeable and competent. She navigated the patient's issues and was able to get at the crux of her problems despite numerous sidetracks and fibs. Well done, Ms. Hughes.*

*What a great service to offer and it will be helpful to our whole family. Thank you!*

*This service was very helpful, needed, and appreciated. My concerns and questions regarding dementia, eased my mind, and is helping me focus. Aging and memory glitzes are so disturbing. This info helped greatly.*

*Denise was a compassionate listener who worked hard to find solutions.*

## **B. Barriers to Implementation**

In 2019, the Dementia Consultant subcontract was executed by end of January 2019. However, the subcontract with the Alzheimer's Association was delayed due to the

contract review process of the Association. Per Alzheimer's Association protocol, all contracts must be routed through the national organization for review. As part of the review process, the National Alzheimer's Association requested a modification to the Kitsap County Aging indemnification clause. The subcontract was eventually executed in June 2019 and did not delay the community workshops that were conducted.

Another barrier worth mentioning is how informal or family caregivers do not identify as a "caregiver". A caregiver will contact our office seeking information about how to assist an individual with a chronic condition, but neglect to identify how stressed or isolated they are feeling. In 2018, Senior Information and Assistance served 1,700 people; however only 20% identified as a caregiver.

### C. Key Accomplishments

Many key accomplishments were noted in the Part A Evaluation section (pages 6-7).

In 2019, one success of the Partners in Memory Care project was the recognition the program received when the statewide Washington Association of Area Agencies on Aging requested state appropriated funding for dementia services and supports. Kitsap Aging was able to proclaim the successes of our locally funded projects and strategies in meeting our local needs related to the acuity of dementia of our elected officials. The statewide Association used Kitsap's professional services contract to develop a job description and request statewide funding to support Dementia Consultants.

- Unfortunately, this request was not funded in the 2019-2020 state biennial budget.

## 3. Budget Narrative

### A. Funding Request

The 2020 proposal is requesting less revenue than 2019. This proposal represents the Consultant professional services, as well as dedicated Aging staff time to support the Dementia services and resources in Kitsap. The proposal requests revenue to cover staff time for contacting, participation in grant quarterly meeting, monitoring and reporting activities.

Attachment E includes itemized indirect expenses for Aging amounts for Rent and Information Services interfund charges; thereby reducing the total indirect *charged by the County to the Division of Aging* to 5%.

- Unfortunately, the County charged interfund expenses are non-negotiable.

Attachment E reflects the 2018 Senior Employment program that no longer is administered by our office in 2019 and 2020. The good news is the Federal revenue increases (2019 and 2020) absorbed the Senior Employment program revenue loss.

Attachment F reflects the 2019 current expenditures. The Consultant subcontract is at 50% of the calendar year for expenditures. The Alzheimer's Association (AA) subcontract notes no expenses. This is due to the AA invoice for June activities (no other activities from January- May) have not been processed and the remaining activities will occur in Fall 2019.

The following table illustrates the requested 2020 project funding and justification.

<b>2019 Partners in Memory Care</b>		
<b>Activity</b>	<b>Requested Amount</b>	<b>Justification</b>
Dementia Consultant subcontract	\$78,000	Same reimbursement from 2019- no changes. <ul style="list-style-type: none"> <li>• \$6,500 X 12 months= \$78,000</li> </ul>
Division of Aging and Long Term Care – direct staff time	\$10,000	Staff time for: <ul style="list-style-type: none"> <li>• Information and Assistance information and referrals to Ms. Hughes</li> <li>• Community-based Outreach Activities</li> <li>• Develop and monitor subcontract</li> <li>• Compile reporting deliverables</li> <li>• Participate in quarterly grant meetings</li> </ul>
Indirect	\$2,000	As a County entity, indirect is charged through County budget process to Aging for staff costs and business operations. The 2020 requested indirect is 3%and less than 2019.
Match (Not Required)	\$15,883	15% match for 2020 from Federal revenue. <ul style="list-style-type: none"> <li>• Senior Citizens Services Act is discretionary funds that support direct Senior Information and Assistance staff time.</li> </ul>
<b>2020 Requested Total</b>	<b>\$90,000</b>	Total Project Budget: \$105,883 with match <ul style="list-style-type: none"> <li>• \$15,883 (15%) matching funds</li> </ul>

Attachment G Subcontractor Special Project Budget is included for the Dementia Consultant. All 2019 expenses are noted at 47% spent at end of June.

Attachment H identifies the information for Division of Aging staff direct time in the 2020 grant activities.

## **B. Past Expenditures and Budget Modifications**

The following table illustrates the 2019 January to June expenses, with no modifications.

<b>2019 Expenses</b>	
<b>Activity</b>	<b>January- June 2019 Expenditure Status</b>
Strategy 1: Dementia Consultant	On schedule; expended \$39,000
Strategy 2: Alzheimer's Association	Awaiting June invoice
Aging staff time	On schedule; expended \$1,777
Indirect	On schedule, expended 4,102

#### 4. Sustainability

##### A. Sustainability Plan

Local funding will be used to create “dementia-friendly” treatment strategies that do not currently exist in Kitsap. As these strategies are social services, neither Medicare nor Medicaid mental health benefits cover the types of home-based consultation services outlined in this proposal.

Kitsap Aging is skilled at identifying and leveraging existing resources to sustain programs. We acknowledge local sales funds are intended for start-up innovative community solutions to address local gaps and needs.

- With the 2018 funded strategies, half of the projects are self-sustaining in 2019. 2018 projects that were funded through 1/10<sup>th</sup> that no longer need continued funding include: Powerful Tools for Caregivers training and workshops, expanded Memory Loss Support Groups, additional Dementia Café (Port Orchard) and Bainbridge Island Museum dedicated Dementia Days.

January 2019 the Washington Association of Area Agencies on Aging did advocate for increased funding, in collaboration with the Dementia Action Collaborative, to develop statewide funding opportunities to support evidence-based and innovative services that create dementia-friendly and dementia-informed communities. We requested \$5.4 million and was awarded \$430,000.

Kitsap Aging will continue to advocate for dedicated funding to support the vital services that the local 1/10<sup>th</sup> sales tax funding provides. We are hopeful that state funding becomes a reliable funding source for continued projects and successful services in the near future.

In the meantime, the Kitsap 1/10<sup>th</sup> sales tax funding has provided Kitsap Aging an opportunity to demonstrate new approaches to solving service gaps.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

New and continuing grant proposals must fill out the Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Partners In Memory Care

A. GOAL	B. FACILITY	C. SW/ART/OT/BE/ET/VE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>(Date and Value)</small>	G. SOURCE
Maintain current placement of individuals diagnosed with neurocognitive (memory) disorders and exhibiting challenging behaviors.	Provide consultation services for individuals exhibiting challenging behaviors as a result of neurocognitive (memory) disorders and at risk of placement disruption	Provide up to 10 consultations to individuals at home a month; up to 10 consultations to facility staff a month; and up to 6 in-facility staff trainings per year.	<input checked="" type="checkbox"/> Output: Total served <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: 1/1/2020  Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: Monthly	Up to 20 consultations per month (variety of settings) beginning January 2020.  6 facility based trainings per year	Completed Screening and Referral with each consultation.
Satisfaction Survey: Dementia Consultant to measure quality of services and/or information received.	Complete Satisfaction survey to assess satisfaction of services. Optional satisfaction surveys are offered following each consultation.	Clients report a moderate to high satisfaction with services received as measured by the client satisfaction surveys. Surveys allow additional narrative comments to be provided.	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: 1/1/2020  Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: Varies	80% of clients report a moderate to high satisfaction with services each quarter.	Satisfaction Surveys; self report

### Total Agency or Departmental Budget Form

Agency Name: Kitsap County Division of Aging & Long Term Care

Project: Partners in Memory Care

Accrual  Cash

AGENCY REVENUE AND EXPENSES	2019		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 2,970,462.00	71%	\$ 3,132,434.00	73%	\$ 3,198,810.00	71%
WA State Revenue	\$ 1,074,099.00	26%	\$ 1,022,381.00	24%	\$ 1,152,824.00	26%
Local Revenue	\$ 40,000.00	1%	\$ 40,000.00	1%	\$ 40,000.00	1%
Private Funding Revenue	\$ 95,000.00	2%	\$ 104,214.00	2%	\$ 90,000.00	2%
Agency Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ -	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 4,179,561.00</b>		<b>\$ 4,299,029.00</b>		<b>\$ 4,481,634.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 493,900.00	12%	\$ 500,208.00	12%	\$ 505,762.00	11%
Staff	\$ 1,362,939.00	33%	\$ 1,495,975.00	35%	\$ 1,525,559.00	34%
Total Benefits	\$ 751,354.00	18%	\$ 858,359.00	20%	\$ 873,468.00	19%
<b>Subtotal</b>	<b>\$ 2,608,193.00</b>	<b>62%</b>	<b>\$ 2,854,542.00</b>	<b>66%</b>	<b>\$ 2,904,789.00</b>	<b>65%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 8,084.00	0%	\$ 5,250.00	0%	\$ 6,000.00	0%
Office Supplies	\$ 21,366.00	1%	\$ 19,250.00	0%	\$ 19,000.00	0%
Other (Scheduled Computer Equipment Upgrades)	\$ 3,100.00	0%	\$ -	0%	\$ 25,000.00	1%
<b>Subtotal</b>	<b>\$ 32,550.00</b>	<b>1%</b>	<b>\$ 24,500.00</b>	<b>1%</b>	<b>\$ 50,000.00</b>	<b>1%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 10,972.00	0%	\$ 13,500.00	0%	\$ 13,500.00	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ -	0%	\$ -	0%	\$ -	0%
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	0%
Postage/Printing	\$ 10,051.00	0%	\$ 9,100.00	0%	\$ 9,100.00	0%
Training/Travel/Transportation	\$ 37,570.00	1%	\$ 49,000.00	1%	\$ 49,000.00	1%
% Indirect	\$ 125,805.00	3%	\$ 172,726.00	4%	\$ 237,148.00	5%
Other (Miscellaneous/Leases/Prof. Services)	\$ 41,862.00	1%	\$ 40,000.00	1%	\$ 40,000.00	1%
<b>Subtotal</b>	<b>\$ 226,260.00</b>	<b>5%</b>	<b>\$ 284,326.00</b>	<b>7%</b>	<b>\$ 348,748.00</b>	<b>8%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts - Building	\$ 2,200.00	0%	\$ 2,200.00	0%	\$ 2,200.00	0%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ -	0%	\$ -	0%	\$ -	0%
Utilities	\$ -	0%	\$ -	0%	\$ -	0%
Other (IS Interfund Charges)	\$ 122,634.00	3%	\$ 128,267.00	3%	\$ 132,782.00	3%
Other (Building Rent/Lease)	\$ 35,151.00	1%	\$ 45,195.00	1%	\$ 45,195.00	1%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 159,985.00</b>	<b>4%</b>	<b>\$ 175,662.00</b>	<b>4%</b>	<b>\$ 180,177.00</b>	<b>4%</b>
<b>Other Costs</b>						
Senior Employment	\$ 147,337.00	4%	\$ -	0%	\$ -	0%
Other (Network Subcontracts)	\$ 1,005,236.00	24%	\$ 959,999.00	22%	\$ 997,920.00	22%
<b>Subtotal</b>	<b>\$ 1,152,573.00</b>	<b>28%</b>	<b>\$ 959,999.00</b>	<b>22%</b>	<b>\$ 997,920.00</b>	<b>22%</b>
<b>Total Direct Expenses</b>	<b>\$ 4,179,561.00</b>		<b>\$ 4,299,029.00</b>		<b>\$ 4,481,634.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Division of Aging &amp; Long Term Care

Project: Partners in Memory Care

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 2,488.00	\$ 1,294.73	52%	\$ 4,022.00	\$ 1,534.00	62%
Staff	\$ 995.00	\$ 23.71	2%	\$ 3,078.00	\$ 2,083.00	209%
Total Benefits	\$ 1,517.00	\$ 459.43	30%	\$ 2,900.00	\$ 1,383.00	91%
<b>SUBTOTAL</b>	<b>\$ 5,000.00</b>	<b>\$ 1,777.87</b>	<b>36%</b>	<b>\$ 10,000.00</b>	<b>\$ 5,000.00</b>	<b>100%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	0%	\$ -	\$ -	0%
Office Supplies	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	0%	\$ -	\$ -	0%
Audit/Accounting	\$ -	\$ -	0%	\$ -	\$ -	0%
Communication	\$ -	\$ -	0%	\$ -	\$ -	0%
Insurance/Bonds	\$ -	\$ -	0%	\$ -	\$ -	0%
Postage/Printing	\$ -	\$ -	0%	\$ -	\$ -	0%
Training/Travel/Transportation	\$ -	\$ -	0%	\$ -	\$ -	0%
% Indirect (Limited to 5%)	\$ 8,214.00	\$ 4,107.00	50%	\$ 2,000.00	\$ (6,214.00)	-76%
Dementia Specialist Subcontract	\$ 78,000.00	\$ 39,000.00	50%	\$ 78,000.00	\$ -	0%
Alzheimer's Association Subcontract	\$ 13,000.00	\$ -	0%	\$ -	\$ (13,000.00)	-100%
<b>SUBTOTAL</b>	<b>\$ 99,214.00</b>	<b>\$ 43,107.00</b>	<b>43%</b>	<b>\$ 80,000.00</b>	<b>\$ (19,214.00)</b>	<b>-19%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance Contracts	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance of Existing Landscaping	\$ -	\$ -	0%	\$ -	\$ -	0%
Repair of Equipment and Property	\$ -	\$ -	0%	\$ -	\$ -	0%
Utilities	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	0%	\$ -	\$ -	0%
Organization:	\$ -	\$ -	0%	\$ -	\$ -	0%
Organization:	\$ -	\$ -	0%	\$ -	\$ -	0%
Organization:	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Match)	\$ 18,391.00	\$ 9,196.00	50%	\$ 15,883.00	\$ (2,508.00)	0%
<b>SUBTOTAL</b>	<b>\$ 18,391.00</b>	<b>\$ 9,196.00</b>	<b>0%</b>	<b>\$ 15,883.00</b>	<b>\$ (2,508.00)</b>	<b>0%</b>
<b>Total Project Budget</b>	<b>\$ 122,605.00</b>	<b>\$ 54,080.87</b>	<b>44%</b>	<b>\$ 105,883.00</b>	<b>\$ (16,722.00)</b>	<b>-14%</b>

NOTE: 2020 Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Denise Hughes Consultation and Design      Project: Partners in Memory Care

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	0%	\$ -	\$ -	0%
Staff	\$ 74,850.00	\$ 34,120.00	46%	\$ 74,850.00	\$ -	0%
Total Benefits	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 74,850.00</b>	<b>\$ 34,120.00</b>	<b>0%</b>	<b>\$ 74,850.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	0%	\$ -	\$ -	0%
Office Supplies	\$ 300.00	\$ 200.00	67%	\$ 300.00	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 300.00</b>	<b>\$ 200.00</b>	<b>0%</b>	<b>\$ 300.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	0%	\$ -	\$ -	0%
Audit/Accounting	\$ -	\$ -	0%	\$ -	\$ -	0%
Communication	\$ 600.00	\$ 600.00	100%	\$ 600.00	\$ -	0%
Insurance/Bonds	\$ 1,000.00	\$ 1,000.00	100%	\$ 1,000.00	\$ -	0%
Postage/Printing	\$ -	\$ -	0%	\$ -	\$ -	0%
Training/Travel/Transportation	\$ 1,000.00	\$ 900.00	90%	\$ 1,000.00	\$ -	0%
% Indirect (Limited to 5%)	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Professional Service)	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 2,600.00</b>	<b>\$ 2,500.00</b>	<b>96%</b>	<b>\$ 2,600.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance Contracts	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance of Existing Landscaping	\$ -	\$ -	0%	\$ -	\$ -	0%
Repair of Equipment and Property	\$ -	\$ -	0%	\$ -	\$ -	0%
Utilities	\$ 250.00	\$ 200.00	80%	\$ 250.00	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 250.00</b>	<b>\$ 200.00</b>	<b>0%</b>	<b>\$ 250.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Project Budget</b>	<b>\$ 78,000.00</b>	<b>\$ 37,020.00</b>	<b>47%</b>	<b>\$ 78,000.00</b>	<b>\$ -</b>	<b>0%</b>

NOTE: 2020 Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

**Agency Name: Division of Aging & Long Term Care**

**Project: Partners in Memory Care**

<b>Description</b>	
Number of Professional FTEs	0.033
Number of Clerical FTEs	0.002
Number of All Other FTEs	0.000
<b>Total Number of FTEs</b>	<b>0.035</b>

<b>Salary Information</b>	
Salary of Executive Director or CEO	\$ 108,188.00
Salaries of Professional Staff	\$ 289,908.00
Salaries of Clerical Staff	\$ 40,588.00
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 438,684.00</b>
Total Payroll Taxes	\$ 33,559.00
Total Cost of Benefits	\$ 45,804.00
Total Cost of Retirement	\$ 56,415.00
<b>Total Payroll Costs</b>	<b>\$ 574,462.00</b>

Attachment I  
Letter of Resource Commitment

## Denise Hughes Consultation and Design

June 27, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs

Dear Citizens Advisory Committee:

I am writing to express my commitment for the Dementia Specialist grant proposal to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

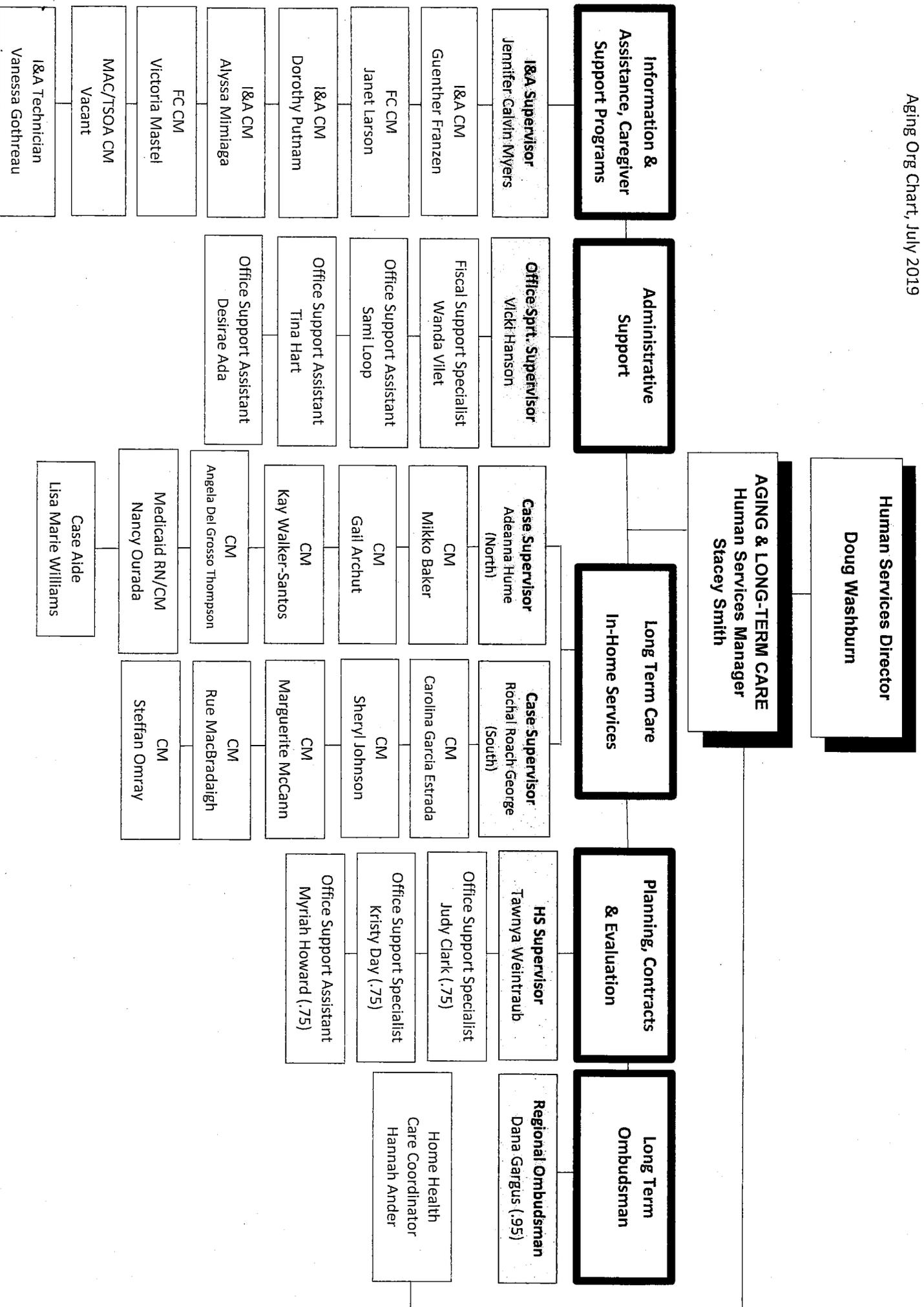
Denise Hughes Consultation and Design will commit to providing individual consultations to Kitsap County residents with dementia and their caregivers. I will continue to offer support to area nursing homes, boarding homes and adult family homes for both individual consultations and educational training. In addition, I will offer support to law enforcement for both consultation referrals and educational training with the goal of reducing calls to 911 by families who may benefit from increased use of other resources and education.

I believe our collaborative efforts will improve the lives of our citizens suffering from dementia, their caregivers who are at risk for burnout and the professionals who work diligently to keep them out of harm's way.

Respectfully,



Denise Hughes, MSN, RN, GMHS  
Denise Hughes Consultation and Design





## 2020 Continuation Grant Proposal Checklist Form

Program: Bremerton School & Community SEL Organization: Bremerton School District

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	x			LSD
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	x			LSD
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	x			LSD
Organization did receive funding for this project in 2019	x			LSD
Attachment A – Continuation Grant Proposal Summary Page	x			LSD
Attachment B – Continuation Grant Proposal Checklist Form	x			LSD
Organization checked, initialed and signed Continuation Grant Proposal Checklist	x			LSD
Attachment C – Continuation Grant Proposal Narrative Template	x			LSD
Proposal Narrative is limited to 10 pages	x			LSD
Attachment D – Continuation Grant Proposal Evaluation Worksheet	x			LSD
Attachment E – Total Agency Budget Form	x			LSD
Attachment F – Continuation Grant Proposal Special Project Budget Form	x			LSD
Indirect is limited to 5%	x			LSD
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget	x			LSD
Organization submitted Attachment G for each Sub-Contractor	x			LSD
Sub-Contractor indirect limited to 5%			x	LSD
Attachment H – Continuation Grant Proposal Project Salary Summary	x			LSD
Attachment I – Letter of Resource Commitment (optional)		x		LSD
No other attachments are included				LSD
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	x			LSD
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	x			LSD

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.



Signature of Individual Preparing Proposal



Signature of Organization's Chief Executive

7/8/19

Date

7.8.19

Date

## 2020 Continuation Grant Proposal Narrative Template

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### 1. Project Description (20 points)

#### A. Project Design

Our current grant proposal is to continue to address Gap #1 Behavioral Health Prevention, Early Intervention and Training by providing direct services and case management in our schools for students that despite a strong Tier I foundation and expanded Tier II interventions provided by our previous grant, are still struggling behaviorally and disengaged with the school and community. The Bremerton School District serves 5,200 students, prek-12 and 300 additional preschoolers by working with our Head Start and state and community preschool partner teachers. We have 430 homeless students. These students are living with under resourced families struggling with basic needs. Our elementary schools average 61% free and reduced lunch (FRL) with some schools at 78% FRL. Many of our students and their families are unaware of county and community resources and/or face barriers to accessing services. For our students that are involved in the juvenile detention and therapeutic court system as well as drug and alcohol treatments, many return to the same school environment without the re-entry supports from the school and guidance to make amends, set goals and change behavior.

Our project will use a Collective Impact Framework to join multiple county and community services for prevention of initial mental health services, provide direct services to students and families and further involve the criminal justice system in the re-entry and re-engagement of students.

Currently, we are working with the following county and community resources to provide direct services for students and their families; Olympic Educational Service District 114 (OESD) School Based Behavioral Health, Kitsap Community Resources Housing, Head Start and children and family services, Department of Social and Health services for foster care youth, Bremerton Police, Coffee Oasis Homeless Youth Intervention, Kitsap Public Health Services, and Kitsap Mental Health providing a cooperative program on site at elementary and secondary and extended supports, including coordinating mental health treatment in schools.

Most recently, we have met with representatives of the Juvenile Detention and Juvenile Therapeutic Court Services to identify needs and gaps in our services. In the past, students returned from these services, with little support for changing behavior and no formal process for re-engagement on the part of the schools. In this proposal we will expand and formalize our partnership and services. We have expanded our partnership with Peninsula Community Health Services and starting in the Fall, they will be opening a clinic on-site at our Mountain View Middle School.

Our proposed method of working with and coordinating services with the partners outlined above (i.e., behavioral health partners, community services, juvenile detention and therapeutic court programs) is to utilize a research-based, nationally recognized program, Restorative Justice Practices<sup>1</sup> (RJP). RJP changes behavior while utilizing all community resources to re-establish and re-engage students in their school community. It is most effective when used in a school setting.

In the past, schools often excluded students who exhibit the most challenging behaviors. When students re-entered, they lacked the support to change behaviors and re-engage into the school and community. As a result students were most likely to re-offend and at times the behaviors escalated. RJP is a comprehensive approach to changing the behaviors of staff and students to allow students to make amends, and re-engage with family, school and community. The initial training and overview of RJP that included intervention for minor offenses at each school (i.e., hitting on the playground, class disruption) has been provided by our current grant.

This comprehensive training to coordinate systems of service and change the behavior of both students and staff in the receiving school will focus on our four most impactful schools in terms of rate of suspensions and students and their families that utilize the most or are in need of and face the most barriers to accessing county-wide services; Armin Jahr PreK-5 Elementary, WestHills PreK-8 school, Mountain View Middle School and Bremerton High School. The National Center for Restorative Justice will train staff and students in a process and direct services to repair relationships and reduce juvenile detention through Restorative Justice.

Restorative Justice is a Relational Approach to Conflict. With this frame work we understand that in-order to nurture behavioral change we need to build relationships, practice low stakes accountability, and re-instate the student into the school and community. This strong Restorative Justice program will have three prongs: positive peer pressure, teacher support, and responses to significant harm. While it can be tempting to look only to the most severe cases and try to develop systems that address the needs of those youth, we miss opportunities to work within a whole system. When we treat youth who are causing significant harm as isolated from the broader community we miss the impact of peers and fostering the relationship between teachers and students. This impact toward behavior change can't be overstated.

To that end we are proposing a comprehensive RJ program that revolves around each of our four schools. Each school will receive in-depth staff training and specific teachers and interventionist/counselors will be trained to be a Restorative Justice (RJ) Coordinator. These RJ Coordinators will be partially funded by this grant and be responsible for three direct services.

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<sup>1</sup> National Center for Restorative Justice

1. Run a youth RJ leadership program. This program will instill a small group of youth from the school with an understanding of Restorative Justice including but not limited to accountability, actions of repair, supporting their peers, and valuing community. We want these youth trained and experienced in-order to sit in on our most severe cases. These youth will be selected with a mind for equity, experience, and social capital.
2. Support teachers in providing RJ practices of accountability in the classroom. All teachers will receive training on RJP and the RJ Coordinator will model and support the use of these practices in the classroom for specific students.
3. Involve all support teams and teachers in re-entry meetings. These meetings will be more restorative in nature. As a student is returning from a long term suspension or juvenile detention we will hold a re-entry meeting. We will focus on the value and importance of the youth re-entering school. They will have both peer support and peer accountability. They will make commitments and take action prior to returning to school. They will have meaningful opportunities to build skills, connections, and repair damaged relationships. A large part of their job will be to work with the community, families, and the school to provide the right balance of support and accountability. This balance is key to changing behavior. Students who need the most love often show it in the most unloving ways. We want to welcome students back to school and make it very clear that the disruptive behavior isn't tolerated here. Restorative Justice is consistently shown to reduce suspension, juvenile detention, and recidivism.<sup>2</sup>

## **B. Outreach**

For this continuing grant, our target population is students who continue to struggle despite the Tier I and expanded Tier II interventions that we have provided through our previous grants. These students are first identified using our social and emotional screening process. The students that are at risk, will be provided with Tier I and Tier II interventions that are monitored by our Multi-Tier System of Support (MTSS) teams and interventionist at each building. These teams were developed using our previous grants. In addition, we will receive referrals from and work with our multiple partners to provide direct services for our students and families. This includes Peninsula Community Health Services that will start a new on-site program at our middle school, Kitsap Mental Health that provides a partnership program at elementary and secondary, Olympic School District 114 that provides services at our elementary and secondary school, Juvenile Justice that currently provides services for 38 of our students, Kitsap Community Resources that provides housing and child care services for our families and Department of Social and Health Services who work with us to serve our foster care youth. The school setting is the most effective way to provide these services, as all of the identified target population attend our schools and as a result we are instrumental in identifying students, working with county resources and providing services.

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<sup>2</sup> Compiled outcomes on March 1, 2016 by Jon Kidde, Green Omega, L3C, PO Box 23, Vergennes, VT 05491  
JonKidde@GreenOmegaL3C.org

## 2. Accomplishments to Date (40 Points)

### A. Evaluation

Our evaluation plan for our continuation grant is to provide direct services and case management in our schools for students that despite a strong Tier I foundation and expanded Tier II interventions, are still struggling behaviorally and disengaged with the school and community. Our primary goals and outcomes are to:

1. Identify RJ Coordinators and teams that are committed to working with our county agencies and behavioral health services to re-engage students and families, to change behaviors, and reduce the number of students recycled through the pattern of escalated behavior violations, suspension, in and out of county and state services, and denied access to family services due to non-participation.
2. Train the teams at our four schools.
3. Identify the target population (students) that continue to struggle and use/need multiple services.
4. Establish a Youth Leadership Support Team that will work with the students that re-enter for accountability and support.
5. Establish a formal process for re-engagement meetings and cycle of behavioral change that coordinates and utilizes multiple agencies and services including providing, when possible, on-site services. This is led and modeled by the RJ Coordinator.
6. Change behavior and engage families in problem solving goals and solutions.
7. Provide classroom teachers with the tools and mentoring support to provide a welcoming and structured classroom environment with accountability to support change.
8. Reduce fragmentation of services by providing school support to implement a unified plan and provide services for the 6.5 hours that we have the students each day.
9. Reduce the number of students in the repetitive cycle of escalating behaviors, suspension, in and out of services, and increase the ability of families and students to participate in behavioral health services that support a change in behavior.

We are six months into our 2019 grant and our evaluation plan, primary goals and outcomes are listed below.

Primary Goals	Objectives	Results as of June 2019
Goal 1: Strengthen our Tier I instructional strategies to respond to	100% of school teams at elementary will create and implement an MTSS model to	All schools have established a MTSS team and have implemented the MTSS model.

the needs of students and their families.	provide support for students with behavior challenges.  80% of school-level pre-post inventories demonstrate XX amount of improvement.	33% demonstrate improvement
Goal 2: Strengthen our response in Tier II by training our Interventionist/ Counselors to address the needs of students that are still struggling after they have received a strong Tier I.	100% of students will be taught social skills and implement character challenges using Second Steps PreK-5 and Character Strong, 6-8.  80% Second Steps (PreK-5) and Character Strong (6-8) implemented at least 4 times weekly  80% of students demonstrate improvement over self (IOS) with current Panorama score against immediately previous score	75 classrooms are teaching SEL at least four times weekly
Goal 3: Reduce the number of students that require out of school behavioral placements/ services	100% of interventionist and designated persons at secondary will receive training and implement Restorative Justice Practices and check and connect Reduction in: 1. Out of classroom placements (30%)  2. In school suspensions (20 %)  Out of school suspensions (10%)	100% of interventionist and designated persons at secondary trained on the Restorative Practice year to date, for minor offences (i.e., hitting on the playground, disrupting class). This is not the comprehensive RJP described in this grant.
Goal 4: Provide families with information/ strategies to use at home with their children that support social and emotional skill development	Families will be provided culturally relevant training related to social and emotional learning	66 families have been trained

## B. Barriers to Implementation

The barriers to re-engage students, change student behavior and provide students and their families with a supportive network of behavioral health resources have all been addressed in this continuing grant proposal. Our school-based Restorative Justice Practices has the full support of the School Board and Administrative teams including principals and staff. This proposal works in partnership with county and state partners to provide direct services.

## C. Key Accomplishments

We are well on our way to creating a multi-tiered system of support with an equity focus for all of our students using Tier I prevention, extended Tier II direct services, preK-12.

- We are revising discipline policies and practices that are punitive and do not result in behavior changes.

- We have revised our hiring and evaluation processes to align with our project social and emotional learning and behavior efforts and goals.
- Our grant projects are now a part of our school wide system and supported with other funding sources and partners.
- 5,200 students are now taught social and emotional skills and receive character challenges using a research-based curriculum purchased by this grant and taught by classroom teachers. In the past students were disciplined for inappropriate behavior, but not provided the chance to learn these skills in the school setting.
- We have revised the role of our interventionist at each school to move to Tier II intervention and now support and train teachers using the most impactful behavioral and social and emotional strategies.
- We are working with multiple behavioral health services and will continue to expand partnerships to provide on-site services for our families and students.
- All classroom teachers and administrative staff have received training on social and emotional learning, how to provide welcoming and engaged classrooms, and how to respond to Adverse Childhood Experiences. We will continue this, using other funding resources.
- 66 Families including our Latinex families have received training on social and emotional learning and how to support their own children's development.
- 16 staff trained on how to use the basic Restorative Practice for minor offences (i.e., hitting on the playground, disrupting class). This is not the comprehensive RJP program described in this grant that is used with students that exhibit severe behaviors that result in suspension or expulsion.
- Three of our schools have partnered with Kitsap Strong and Olympic Educational Services 114 to become Trauma Informed Schools and we will be adding two more schools.

As a result of all the above project activities and other funding that we used to match our grant efforts, we have significantly reduced the out of school exclusions of 2-3 days for behavioral violations by 6% from the start of our grant. End of year data is pending.

- Our waiting list for our Kitsap Mental Health and Bremerton School District cooperative elementary and secondary program has been reduced by 40% as schools have implemented changes in practice to respond at the classroom and school level.
- We have increased the number of community partners providing services on our school site and will continue to expand using this grant so that students and their families are able to access and maximize services.
- Each school has established a Multi-Tiered System of Support Team using our first grant and these are the teams that examined our current data and identified the need for this continued grant proposal; to work with and re-engage students that have not responded to our Tier I and Tier II interventions.

### 3. Budget Narrative (30 Points)

#### A. Funding Request

Our first grant (2018) funding was used for training to implement a strong Tier I intervention and change of practice to address the needs of all our students, PreK-12 to learn the social and emotional skills prior to being disciplined and excluded for behavior that they were never taught. We hired a part time Behavior Specialist and paid for family trainings on a timesheet. This was successful in addressing the majority of our prevention needs. In our second grant (2019), we shifted the role of the interventionist to replace the behavior specialist and provide direct Tier II services to work with some students, teachers and families to address their behavior challenges in school versus suspension. This continued grant proposal (2020) is to address the gap in services for the students that despite all of the above efforts, still struggle with behaviors that are so significant that they have been suspended, expelled, and in many cases involved with our juvenile detention, therapeutic courts, Kitsap Mental Health and Drug and Alcohol services. These are the few students who require coordinated and comprehensive Tier II and III direct services to address the specific needs of the student and their family, using the RJP model to change behavior, and re-engage the student. Our goal is to reduce the cycle of suspensions, reduce fragmentation of family services that require more school support to maximize their effectiveness and address recidivism.<sup>3</sup> **Please note, that we have reduced our original request form \$390,000 to \$320,000**

- a. Staffing: RJ Coordinators partially funded at four schools – equivalent of 1.8 FTE = **\$255,000** (staff =\$165,750 plus \$89,250 for benefits) (new cost).
- b. Also under staffing, release time and subs to cover teachers to work with the RJ Coordinator and release the RJ Coordinator to observe the re-entry process, restorative circles and classroom support. = **\$10,000** (55 release days for four school teams, 20 staff). This is 3 release days per teacher per year.
- c. Training cost provided by the National Center for Restorative Justice for four schools; RJ Center Youth Training, 5 days of four hours of training on and off site, RJ Center Training for staff at each of the four schools, RJP training for RJ Coordinators that includes working alongside the RJ Coordinator every other week for 3 hours of coaching and modeling, Tailored facilitation of re-entry conference at each school that includes collaboration training to involve all agencies. Cost = **\$26,400** (new)
- d. Travel (transportation) for youth training program in Seattle 10 weeks = **\$7,850** (new).

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<sup>3</sup> Compiled outcomes on March 1, 2016 by Jon Kidde, Green Omega, L3C, PO Box 23, Vergennes, VT 05491  
[JonKidde@GreenOmegaL3C.org](mailto:JonKidde@GreenOmegaL3C.org)

- e. Assessment for behavior and social and emotional learning (Panorama) = **\$20,750** – continued cost
- f. No indirect cost

#### **A. Past Expenditures and Budget Modifications**

We are now six months into our current (2019) school year and spent 47% of our grant. This includes the cost of training families including our Latinex families (\$3,514.11 plus \$314.93 benefits), training for staff on check and connect, social and emotional learning, trauma informed practices (\$40,802.14), Character Counts for grades 6-12 and assessment (\$594.54) and indirect (\$2,261.29). As noted above, for this 2020 grant proposal we will not ask for indirects. On our proposed budget for grant cycle 2020, changes are in the following categories; Sub-contracting for the National Restorative Justice Training, and Panorama Assessment, Personnel staff to partially fund RJ Coordinators and release time for teachers and RJ Coordinators to participate in re-entry meetings, working with behavioral agencies and change classroom practices to change behavior and re-engage students, travel and transportation for participation in Restorative Justice Youth training. Other categories funded by our previous grant will continue using other funding sources described below.

#### **4. Sustainability (10 Points)**

##### **A. Sustainability Plan**

During the last budget period (2019) and the previous grant (2018) we have leveraged state, federal and local dollars to sustain and enhance our project. The research-based curriculum purchased for students and community partners, PreK-12 out of grant funds is now maintained out of our general ed District funds. The Behavior Specialist part time position paid out of grant funds has been eliminated and the duties assigned to each interventionist in the building (state funds). The social and emotional learning training provided by the grant has now been expanded and paid out of combined District funds (i.e., Federal Title I, Special Ed, State LAP funding, and local levy dollars). Staff that were trained using grant dollars are now training other staff members using the Best Mentorship Grant, and building funding. We have added other partners to address behavioral, mental health and drug and alcohol service needs.

For the cost of this new project, we will continue with the same sustainability plan. By purchasing parts of staff time to be an RJ Coordinator and release time for staff to be trained, we are creating a coordinated system that uses a combined funding model to utilize the best of our county services and offering up the schools as a place to change behavior, provide services and re-engage youth.

**PROJECT NAME: Bremerton School & Community Social and Emotional Learning (SEL)**

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>Goal 1: Identify and select the RDJ Coordinators at each school and teams to participate in RDJ training</p>	<p>Principals will nominate appropriate staff that are committed to working with agencies and staff to change behavior and support students.  The grant will fund the equivalent of .2FTE at AJ, .4FTE at WHSTEM, .6 FTE at MVMMS .6FTE at BHS to</p>	<p>100% of RDJ coordinators and teams will be committed to full participation in the RDJ Training, working in collaboration with other behavioral health services and providing the support needed for re-engagement that result in behavioral changes.  100% of the identified RDJ coordinators and teams will participate in RDJ training to implement the RDJ cycles.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on the overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                       If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long                       Start date: Jan 2020 – Jun 2020                      Frequency: <input checked="" type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual                      Other: _____</p>	<p>pre-data January 2020  Post data December 2020</p>	<p>RDJ Training evaluation forms provided by the National Center for Restorative Justice Practices (NCRJ)</p>
<p>Goal 2: Provide training for teams and in-depth training for RJ coordinators</p>	<p>RJ Coordinators at each school receive more in-depth training and conduct re-engagement meetings  RJ coordinators and staff receive on-going RDJ coaching.  RJ model classroom re-engagement strategies and coach other teachers in the process.</p>	<p>100% of RJ will participate in RJP In-depth training  RJ coordinators will co-lead re-engagement meetings  RJ coordinator will work with _____ of teachers to model classroom engagement strategies</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                       If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long                       Start date: Jan 2020                      Frequency: <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual                      Other: _____</p>	<p>Pre Jan 2020 Post Dec 2020</p>	<p>NCRJ evaluation data  classroom data</p>
<p>Goal 3: Select the target</p>	<p>Students identified through the Multi=Tiered</p>	<p>100% of the target population will be identified</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction</p>	<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium</p>	<p>Mar 2020</p>	<p>Meeting notes</p>

<p>population of students for direct services</p>	<p>System of Support Teams at each building. Outreach to all partner agencies to formalize the referral and support for this problem-solving process. All agencies that are able to provide on-site support and working with families will be included.</p>	<p>100% of resources and services will be identified that serve the target population and their families. 50% of identified students will engage in phase 1 of the re-engagement cycle</p>	<p><input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Long                  Start date: Jun 2020-Dec 2020                  Frequency: <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual                  Other: _____</p>	<p>post-Dec 2020</p>	<p>NCRJ Agency evaluation                  Inventory Student records</p>
<p>Goal 4: Establish the Youth Leadership Support Team and train these teams to provide support services to our student target population.</p>	<p>Baseline data on these students will be gathered.</p>	<p>90% of students selected will participate in training</p>	<p><input checked="" type="checkbox"/> Output  <input checked="" type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                  Start date: Mar 2020                  Frequency: <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual                  Other: _____</p>	<p>Mar 2020 - Dec 2020</p>	<p>NCRJ Center evaluation .</p>
<p>Goal 6: Create and implement a formal process of</p>	<p>Student(s) and their families will participate in a problem-solving, re-engaging meeting with</p>	<p>30% of the identified students and their families will participate in the problem-solving re-engaging</p>	<p><input checked="" type="checkbox"/> Output  <input checked="" type="checkbox"/> Outcome: Participant satisfaction</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p>	<p>Jun 2020 - Dec 2020</p>	<p>RJ coordinator and the team will monitor</p>

<p>re-engagement cycle) that includes all behavioral health services that the student and family are involved in/require</p>	<p>agencies to coordinate services.</p> <p>Student(s) will participate in the next phase of RDJ with support from the Youth Leadership Team, classroom teachers and staff to change behavior and set up accountability cycles</p> <p>RDJ coordinator and the team will monitor progress with other agencies to determine the next steps in the process.</p>	<p>meeting with agencies to coordinate services.</p> <p>100% of students listed above will participate in the next phase of RDJ with support from the Youth Leadership Team, classroom teachers and staff to change behavior</p>	<p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable: <input type="checkbox"/> Fidelity measure</p>	<p>Start date: Jun 2020</p> <p>Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual Other: _____</p>		<p>progress with other agencies to determine the next steps in the process.</p>
<p>Goal 6: Implement a problem-solving plan that engages family, school and community services that leads to behavioral change.</p> <p>Reduce fragmentation of services by providing school support to implement a unified plan and provide services for the 6.5 hours that we have the students each day.</p>	<p>Student(s) will continue in this RJ Supportive Cycle with the gradual release of support. This process may include extended time.</p> <p>Students will receive the support of agencies that are coordinated around a unified plan of action to change behavior within the context of the school and family.</p> <p>The agencies and services that are identified and part of the behavior plan</p> <p>Services that the student needs and families are accessing will work together on a unified plan to families and change student behavior.</p>	<p>90% of students and their families will continue in this RJ Supportive Cycle</p> <p>90% of students and their families will continue to participate if eligible in the outside support services that were identified in the plan</p> <p>Increase the number of students/families accessing the coordinated services from the agencies that are identified in the plan by _____%</p>	<p><input type="checkbox"/> Output</p> <p><input checked="" type="checkbox"/> Outcome: Participant satisfaction</p> <p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable: <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long</p> <p>Start date: Sept 2020</p> <p>Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual Other: _____</p>	<p>Sept 2020 - Dec 2020</p>	<p>Monitoring evaluation plan</p>

	<p>Priority will be to provide services on-site to increase access and coordination of services</p>			<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long</p>	<p>June 2020 - Dec 2020</p>	<p>Data on suspensions, out of school placements and expulsions over time Disaggregated by schools</p>
<p>Goal 7: Reduce the number of students in the repetitive cycle of escalating behaviors, suspension, in and out of services, and increase the ability of families and students to participate in behavioral health services that support a change in behavior.</p>	<p>Monitor our target population and progress made using the measurement of suspension, expulsion, etc.</p>	<p>Decrease the number of students in the target population that receive the treatment by _____% that re-offend, are suspended again and/or go to juvenile detention.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                  If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p>Start date: Dec 2020</p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>		

### Total Agency or Departmental Budget Form

Agency Name: Bremerton School District      Project: Bremerton School & Community Social and Emotional Learning (SEL)

X Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 5,459,501.00	8%	\$ 7,387,738.00	9%	\$ 7,816,441.00	9%
WA State Revenue	\$ 50,402,495.00	73%	\$ 65,919,453.00	79%	\$ 66,234,974.00	80%
Local Revenue	\$ 13,170,018.00	19%	\$ 10,352,807.00	12%	\$ 9,024,535.00	11%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ 47,874.00	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 69,079,888.00</b>		<b>\$ 83,659,998.00</b>		<b>\$ 83,075,950.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 3,481,064.00	5%	\$ 3,912,956.00	5%	\$ 4,160,000.00	5%
Staff	\$ 36,074,948.00	52%	\$ 43,523,062.00	54%	\$ 44,179,780.00	52%
Total Benefits	\$ 15,978,987.00	23%	\$ 17,872,670.00	22%	\$ 20,569,099.00	24%
<b>Subtotal</b>	<b>\$ 55,534,999.00</b>	<b>81%</b>	<b>\$ 65,308,688.00</b>	<b>82%</b>	<b>\$ 68,908,879.00</b>	<b>82%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 165,120.00	0%	\$ 320,626.00	0%	\$ 180,000.00	0%
Office Supplies	\$ 220,010.00	0%	\$ 230,620.00	0%	\$ 235,000.00	0%
Other (Describe) Class Supplies & Technology	\$ 5,308,912.00	8%	\$ 5,411,689.00	7%	\$ 6,000,000.00	7%
<b>Subtotal</b>	<b>\$ 5,694,042.00</b>	<b>8%</b>	<b>\$ 5,962,935.00</b>	<b>7%</b>	<b>\$ 6,415,000.00</b>	<b>8%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ 42,100.00	0%	\$ 60,000.00	0%	\$ 60,000.00	0%
Communication	\$ 212,568.00	0%	\$ 220,000.00	0%	\$ 240,000.00	0%
Insurance/Bonds	\$ 603,586.00	1%	\$ 667,507.00	1%	\$ 680,000.00	1%
Postage/Printing	\$ 174,974.00	0%	\$ 211,000.00	0%	\$ 220,000.00	0%
Training/Travel/Transportation	\$ 2,024,315.00	3%	\$ 2,311,000.00	3%	\$ 2,400,000.00	3%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 3,057,543.00</b>	<b>4%</b>	<b>\$ 3,469,507.00</b>	<b>4%</b>	<b>\$ 3,600,000.00</b>	<b>4%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ 2,058,323.00	3%	\$ 2,211,100.00	3%	\$ 2,050,000.00	2%
Maintenance Contracts	\$ 1,095,431.00	2%	\$ 1,855,440.00	2%	\$ 1,614,352.00	2%
Maintenance of Existing Landscaping	\$ 199,280.00	0%	\$ 218,277.00	0%	\$ 200,000.00	0%
Repair of Equipment and Property	\$ -	0%	\$ -	0%	\$ -	0%
Utilities	\$ 1,133,982.00	2%	\$ -	0%	\$ 1,400,000.00	2%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 4,487,016.00</b>	<b>7%</b>	<b>\$ 4,284,817.00</b>	<b>5%</b>	<b>\$ 5,264,352.00</b>	<b>6%</b>
<b>Other Costs</b>						
Debt Service	\$ 57,883.00	0%	\$ 1,061,891.00	1%	\$ 211,825.00	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 57,883.00</b>	<b>0%</b>	<b>\$ 1,061,891.00</b>	<b>1%</b>	<b>\$ 211,825.00</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 68,831,483.00</b>		<b>\$ 80,087,838.00</b>		<b>\$ 84,400,056.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Bremerton School District

Project: Bremerton School & Community  
Social and Emotional Learning (SEL)

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 7,500.00	\$ 3,514.11	47%	\$ 175,750.00	\$ 168,250.00	2243%
Total Benefits	\$ 1,200.00	\$ 314.93	26%	\$ 89,250.00	\$ 88,050.00	7338%
<b>SUBTOTAL</b>	<b>\$ 8,700.00</b>	<b>\$ 3,829.04</b>	<b>44%</b>	<b>\$ 265,000.00</b>	<b>\$ 256,300.00</b>	<b>2946%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 60,000.00	\$ 40,802.14	68%	\$ 7,850.00	\$ (52,150.00)	-87%
% Indirect (Limited to 5%)	\$ 4,350.00	\$ 2,261.29	52%	\$ -	\$ (4,350.00)	-100%
Other (Describe):Assessment	\$ 27,000.00	\$ 594.54	2%	\$ -	\$ (27,000.00)	-100%
<b>SUBTOTAL</b>	<b>\$ 91,350.00</b>	<b>\$ 43,657.97</b>	<b>48%</b>	<b>\$ 7,850.00</b>	<b>\$ (83,500.00)</b>	<b>-91%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Sub-Contracts</b>						
National Center for Resorative Justice	\$ -	\$ -	#DIV/0!	\$ 26,400.00	\$ 26,400.00	#DIV/0!
Panorama Education Services	\$ -	\$ -	#DIV/0!	\$ 20,750.00	\$ 20,750.00	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 47,150.00</b>	<b>\$ 47,150.00</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 100,050.00</b>	<b>\$ 47,487.01</b>	<b>47%</b>	<b>\$ 320,000.00</b>	<b>\$ 219,950.00</b>	<b>220%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: National Center for Restorative Justice

Project: Bremerton School & Community  
Social and Emotional Learning (SEL)

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
RJ Coaching and onsite training cycle	\$ -	\$ -	#DIV/0!	\$ 12,500.00	\$ 12,500.00	#DIV/0!
RJ Course work	\$ -	\$ -	#DIV/0!	\$ 9,000.00	\$ 9,000.00	#DIV/0!
RJ Center Training	\$ -	\$ -	#DIV/0!	\$ 2,000.00	\$ 2,000.00	#DIV/0!
RJ Youth training	\$ -	\$ -	#DIV/0!	\$ 1,450.00	\$ 1,450.00	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
on and off site coaching	\$ -	\$ -	#DIV/0!	\$ 1,450.00	\$ 1,450.00	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 26,400.00</b>	<b>\$ 26,400.00</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 26,400.00</b>	<b>\$ 26,400.00</b>	<b>#DIV/0!</b>

NOTE: Training provided to four schools

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Panorama Education Services

Project: Bremerton School & Community  
Social and Emotional Learning (SEL)

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers (Company Management fee)	\$ -	\$ -	#DIV/0!	\$ 2,000.00	\$ 2,000.00	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 2,000.00</b>	<b>\$ 2,000.00</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 20,750.00	\$ -	0%	\$ -	\$ (20,750.00)	-100%
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): annual license fee		\$ -	#DIV/0!	\$ 18,750.00	\$ 18,750.00	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 20,750.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 18,750.00</b>	<b>\$ (2,000.00)</b>	<b>-10%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 20,750.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 20,750.00</b>	<b>\$ -</b>	<b>0%</b>

NOTE: This is the same as previous grant, just detailed

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Bremerton School District**

**Project: Bremerton School & Community Social and Emotional Learning (SEL)**

Tier III Repairing Relationships  
and Reducing Exclusionary  
Discipline and/or Juvenile  
Detention through Restorative  
Justice Practices

**Description**

Number of Professional FTEs	1.80
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>1.80</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 165,750.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
subs for release time to participate in training & coaching (55 release days for four school teams, 20 staff). This is 3 release days per teacher per year.	\$ 10,000.00
	\$ -
Description:	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 175,750.00</b>
Total Payroll Taxes	\$ -
Total Cost of Benefits	\$ 89,250.00
Total Cost of Retirement	\$ -
<b>Total Payroll Costs</b>	<b>\$ 265,000.00</b>

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

**Organizational Information**

Organization Name: City of Poulsbo

Primary Contact: Kimberly Hendrickson, [kimberlyh@cityofpoulsbo.com](mailto:kimberlyh@cityofpoulsbo.com), 360 394 9794

Organization Address: 200 NE Moe Street, Poulsbo, WA 98370

Federal Tax ID Number: 91 6001488      Legal Status of Organization: local government

Individual Authorized to Sign Contracts:      Becky Erickson, Mayor

**Continuation Grant Proposal Information**

Proposal Title: Behavioral Health Outreach Program

Number of Individuals Screened: n/a

Number of Individuals Served: 2019 Q1 = 161

Requested Amount of Funding: \$480,858.00

Matching Funds: \$93,000 (estimated)

**Please check which area(s) of the Continuum this project addresses:**

<input checked="" type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input checked="" type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input checked="" type="checkbox"/> Crisis Intervention	<input checked="" type="checkbox"/> Recovery Support Services
<input type="checkbox"/> Outpatient treatment	

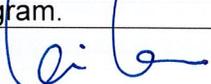
**Please check which area(s) of the County this project is focused:**

<input checked="" type="checkbox"/> South Kitsap	<input checked="" type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input checked="" type="checkbox"/> North Kitsap	<input type="checkbox"/> County-Wide

**Proposal Summary**

We request continued funding for the City of Poulsbo Behavioral Outreach Program which partners officers in four police departments (Poulsbo, Bremerton, Port Orchard, Bainbridge Island) with Behavioral Health Navigators. If this grant is awarded, three Navigators will be funded, and a fourth will be supported with city contributions. Navigators do outreach to individuals with mental illness, mental health disorders, and substance use disorders after police referral. They primarily connect to treatment and other needed services.

Funds are also requested for a part time program manager, a part time care coordinator (employed by Peninsula Community Health Services) and a part time data/crime analyst (employed by Bremerton Police Department) to enhance the work of Navigators and measure the impact of our Program.

	Program Manager	7.23.19
Signature	Title	Date
	Mayor	7/23/19
Signature	Title	Date

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program:

Organization Submitting:

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	✓			h
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	✓			h
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	✓			h
Organization did receive funding for this project in 2019	✓			✓
Attachment A – Continuation Grant Proposal Summary Page	✓			h
Attachment B – Continuation Grant Proposal Checklist Form	✓			h
Organization checked, initialed and signed Continuation Grant Proposal Checklist	✓			h
Attachment C – Continuation Grant Proposal Narrative Template	✓			h
Proposal Narrative is limited to 10 pages	✓			h
Attachment D – Continuation Grant Proposal Evaluation Worksheet	✓			✓
Attachment E – Total Agency Budget Form	✓			h
Attachment F – Continuation Grant Proposal Special Project Budget Form	✓			✓
Indirect is limited to 5%	✓			h
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	✓			h
Organization submitted Attachment G for each Sub-Contractor	✓			h
Sub-Contractor indirect limited to 5%	✓			h
Attachment H – Continuation Grant Proposal Project Salary Summary	✓			h
Attachment I – Letter of Resource Commitment (optional)	✓			h
No other attachments are included	✓			h
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	✓			h
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	✓			h

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

\_\_\_\_\_  
Signature of Individual Preparing Proposal

7.23.19  
Date

\_\_\_\_\_  
Signature of Organization's Chief Executive

7/23/19  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template  
City of Poulsbo Behavioral Health Outreach Program**

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### **Project Design**

Much policing, in Kitsap County and elsewhere, involves responding to people with mental illness, drug addiction, and other behavioral health disorders. Police are asked, as a part of their daily work, to help individuals in crisis, keep people safe who are a danger to themselves, and respond to parents, neighbors, and business owners when they report odd or disruptive behavior. Around two hundred and fifty 911 calls are closed, each month, as “CIO” by Kitsap 911, which means that dispatchers are aware of a behavioral health issue that requires specialized attention.<sup>1</sup> These calls range from situations that are highly dangerous and violent (rare) to non-criminal situations involving exhaustion and frustration with the local mental health system (frequent).

The Behavioral Health Outreach Program was developed to support police with these important, and difficult, obligations. The program partners three behavioral health specialists—or “Navigators”—with police in four police departments: Poulsbo, Bremerton, Port Orchard and Bainbridge Island. Navigators respond with officers to calls involving individuals whose behavior is affected by mental illness, mental health disorders, and/or co-occurring substance use disorders. More frequently, they take police referrals about these encounters and follow up with outreach, either independently or with an officer.

Each Navigator is assigned a department (or in the case of the North Kitsap Navigator, two departments). Poulsbo Police Department is the “home base” of the program and Navigators are supervised by Poulsbo Police Department Administrative Services Manager Kelly Ziemann (who works closely with sergeants in participating departments). Information is easily shared between police and Navigators because Navigators—as of March 2019—are police department employees; they have access to the records management system, communicate with 911, and share their notes with officers.

The Behavioral Outreach Program manages two additional initiatives that complement the work of Navigators. We work with staff from Peninsula Community Health Care Services to manage the Law Enforcement Assisted Diversion (LEAD) Program in Bremerton, which gives individuals with co-occurring mental health and substance use disorders access to ongoing care coordination. (These individuals need more than navigation to connect to services, achieve stability, and reduce contact with the criminal justice system.) In addition, we work with MCS Counseling and the Tyler Moniz Project

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<sup>1</sup> CIO refers to Crisis Intervention Officers, who are officers trained 40 hours or more in Crisis Intervention Team training and volunteer for this designation. CIO closed call information obtained from Kitsap 911 with the assistance of Philip Ramunno.

to provide no cost, quick access counseling to suicidal youth who, for whatever reason, lack access to mental health services.

There are three aims of the Behavioral Health Outreach program: (1) reduce the pressure on law enforcement to respond to behavioral health related calls (2) improve the effectiveness of police response to behavioral health related calls and (3) deflect and divert people with behavioral health issues away from the criminal justice system. Navigators are not treatment providers. Nor are they case managers. Their function is to support individuals with behavioral health disorders and connect them to treatment and services. Navigators often:

- Work with police to address behavioral health issues causing repeat 911 calls.
- Work with police to follow up to suicide ideation and attempts.
- Work with police to offer services to homeless and transient individuals.
- Work with prosecutors to find treatment options for individuals after they are charged with minor offenses.
- Work with individuals to overcome obstacles to treatment (we help with communication issues, insurance issues, transportation issues, appointments).
- Work with individuals and caregivers to share information about how the mental health system works and set appropriate expectations. (Parents are especially grateful for this service.)
- Work with neighbors of people with behavioral health disorders who call 911 to report concerns.
- Bring individuals struggling with severe mental health disorders to the attention of Designated Crisis Responders.
- Meet with individuals in jail to discuss post-release treatment options.
- Notify Department of Social and Health Services, Adult Protective Services and Child Protective Services of unsafe situations.
- Assist police working with schools to address the needs of students deemed a threat to themselves or others.

As noted, the Bremerton LEAD program and our youth counseling initiative provides more intensive, longer term services to individuals needing behavioral health assistance.

### **Collective Impact**

In addition to specific tasks, our program works, more generally, to improve services for people with behavioral health disorders by coordinating systems. We promote police/provider communication, encourage partnership between agencies, and bring people who have fallen through the cracks of the health care and social service system to multiple providers' attention.

Some examples:

- Navigators work closely with Designated Crisis Responders to address the needs of people at risk of self harm and crisis. We often bring individuals to DCRs attention who are struggling and need assistance and help supplement their information.
- Navigators work closely with Peninsula Community Health Care to connect individuals to medical services. Many individuals with behavioral health needs are more inclined to accept primary care services than mental health/addiction treatment--and having easy access to the PCHS "front door" is often the first step toward other services.
- Our program developed a working group in Bremerton called the "6th Street Collaborative" which supports the current LEAD Program. This group brings representatives from criminal justice and social services together on a regular basis to create shared strategies for people behavioral health issues who have frequent contact with police. Working with Peninsula Community Health, we developed a multi-party release of information form (ROI) which allows us to share information across agencies.
- Navigators work closely with agencies that address substance use disorders (Agape, West Sound Treatment Center, Peninsula, Kitsap Recovery Center, KMHS) and help community members understand options and insurance eligibility.
- Navigators work closely with schools, DSHS, Adult/Child Protective Services, shelters, and local housing agencies to connect individuals to services.

Navigators, in addition, have strong relationships with people in the county-wide criminal justice system: corrections officers, probation officers, prosecutors, defense attorneys, and judges. Their ability to work with both health care and criminal justice systems, and improve communication between them, is an essential part of our program.

### **Treatment Sales Tax Goals**

Our work addresses *five* of the County Commissioners' Treatment Sales Tax policy goals:

- Reduce the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services.
- Reduce the number of people in Kitsap County who recycle through criminal justice systems.
- Reduce the number of chemically dependent and mentally ill youth and adults from initial or further criminal justice system involvement.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth.

- Improve the health status and well-being of Kitsap County residents.

Co-responder teams—like our police/Navigator partnerships—are being adopted in cities across the country because of their positive effects. They have been recognized as a “best practice or promising” approach in the Kitsap County Behavioral Health Strategic Plan Review.

### **Modifications**

This proposal is the same as our previous year’s proposal with three important changes: we are increasing the size of our program from three Navigators to four (our North Kitsap Navigator is stretching herself thin between two departments), adding more care coordination services (we are proposing a .5 care coordinator instead of a .25), and adding a part time data/crime analyst to help gauge the impacts of our program.

### **Outreach**

Our outreach strategy is simple: we do outreach to any individual referred to us by police (and, occasionally, prosecutors) until our schedules are at capacity. We meet people—literally as well as figuratively—where they are, which means in the home, at the coffee shop, in the courthouse, hospital, or jail. (Navigators team with police officers to do outreach in private residences. They work alone, or with other mental health professionals, when meeting people in other settings.) A significant amount of outreach is also done by phone. Our outreach efforts typically end if an individual is not interested in our services. We often work with caregivers, family members, and case managers, however, when we are unable to make direct connections.

We seek out opportunities to educate police, prosecutors and judges about what we do, both through meetings and trainings. We meet with criminal justice partners (as well as social service partners) on a regular basis. Navigators and/or the program Manager have presented at the last three Crisis Intervention Team trainings in the county. Navigators keep office hours within each of the police departments we work with and make themselves easily accessible to officers.

Navigators are not a resource to the general public. For this reason, we do not broadly advertise our services. We hold occasional public events, like a crisis preparation workshop for parents of children with intellectual and developmental disabilities. We work closely with NAMI Kitsap and present several times a year at their meetings.

In terms of cultural competency, we use our knowledge of area resources to match individuals with the services that they need. Recent example: our Port Orchard Navigator was asked to assist a woman who is deaf and in need of support services. We hired an ASL translator to communicate with this individual and networked with the Olympic College ASL Club to find appropriate resources.

### **Accomplishments/Evaluation**

We have several ways of measuring the success of our program (see attachment D). The first is number of contacts, that is, the number of unduplicated individuals we give personalized attention to after police contact and referral. The second concerns referrals, or the number of times we are able to provide individuals with specific service suggestions and information about accessing them. A third concerns connection to services as a result of these referrals.

- From January to March 2019, our Navigators assisted 161 unduplicated individuals in Kitsap County.
- Our monthly average, this year, is 54, which is significantly higher than our monthly average in 2018 (26). The number of police reports related to behavioral health issues has stayed relatively constant; our numbers have doubled because officers are more likely to request Navigator services as they become more familiar with the program.
- In the process of assisting 161 individuals in 2019, Navigators made 329 personalized, specific connections to treatment, services, or housing providers.<sup>2</sup>
- We are aware of 112 instances where our referrals resulted in a successful connection to a treatment or service; there are likely many more.

*In addition:*

- From January to March 2019, Navigators assisted 22 individuals with court related obligations.
- During the same period, Navigators worked with school officials to assist 8 school-aged youth.
- We have connected 6 youth who have attempted suicide or expressed suicidal ideation to a no-fee counseling service provided through a partnership with our program, MCS Counseling, and the Tyler Moniz Project.
- We are assisting 6 Bremerton individuals who have frequent police contact through the Bremerton LEAD Program.

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<sup>2</sup> Note: some individuals are connected to more than one service.

- In our most recent survey (December 2018), 25 out of 33 police/prosecutor/judge respondents (76%) stated that they were “extremely satisfied” with the Navigators’ work. 8 of 33 respondents (24%) were “satisfied.” (None were dissatisfied.)
- In the same survey, 27 out of 35 respondents (77%) said that Navigators are “extremely effective” in connecting people to services and reducing the need for police contact. (20% said “somewhat” effective, 3% said “not effective” in this way.)

## Key Accomplishments

Our Navigators are integrated into four police departments (Poulsbo, Bremerton, Bainbridge, Port Orchard) and are used with increasing frequency by officers (as noted, their number of contacts has doubled from 2018). Our Navigators are given access to the jail and are called on, for assistance, by defense attorneys and prosecutors. This acceptance and appreciation has taken considerable effort, and it is one of our key accomplishments. We are very proud of the relationships we have built with our criminal justice partners and their support of our program.

We are able to offer navigation services to *anyone* with behavioral health issues referred by police and prosecutors, regardless of their diagnosis, location, criminal history, or ability to pay. We are particularly proud of the fact that we provide support to individuals after suicide attempts. One of our key accomplishments, in the first three months of 2019, was engaging with 61 people after suicide related events—and starting a partnership with MCS Counseling to connect some of these individuals to immediate, no cost, counseling.

Our proudest accomplishments, however, involve outcomes for specific individuals:

**Port Orchard Sergeant Main** encountered a Port Orchard woman, this summer, in need of support and treatment. **“Patty”** was addicted to heroin, pregnant, and in an abusive relationship. Port Orchard Navigator Melissa was able to arrange an immediate substance use assessment thanks to an excellent working relationship with Agape (wait times, for assessments, can often take many weeks) and found a residential facility able to treat Patty’s addiction and help her with her pregnancy. Patty is getting the help she needs and—if she sticks with the program—will be able to keep her baby.

**Poulsbo Officer Gesell** recently responded to a “dog escape” call involving an elderly Poulsbo resident. He saw things at the residence that made him concerned (lack of food, condition of house) and he called in Navigator Kelsey. Kelsey and Officer Gesell spent time with **“Greta”** and received permission to call her family. Greta’s children immediately flew in (they were not aware of her condition) and worked with Kelsey to connect Greta to medical and substance use treatment. Greta’s condition has improved and she is living safe at home. The children communicate with Kelsey about her needs and condition.

**Bremerton Court Officer Boynton** was concerned about the mental health of a man on home detention. Bremerton Navigator Laurel was looped in and recognized signs of suicidality—and the likelihood that he would soon be out of compliance with a court agreement. Laurel worked with “**Jeff**” to connect him to mental health and substance abuse treatment at KMHS. She helped him sign up for required parenting classes. She is working on a better living situation for him and his pets, they worked together to create employment goals (he’s had two job interviews). Jeff is feeling better and is in compliance with his legal obligations.

A young woman was brought to our attention this summer by **Bremerton Bike Officer Edje**. The woman, “**Andrea**,” has a parent involved in drug dealing and she struggles with addiction and mental illness. Andrea was booked into jail on a low-level offense and LEAD staff (project manager Kim and care coordinator Christine) worked with her, a family member, staff at the West Sound New Start Program, outside providers and a defense attorney to develop a treatment plan. Andrea was released from jail to LEAD staff, assessed within an hour, and brought to recovery housing run by West Sound Treatment Center. She was accepted into the Seadrunar residential program and transportation was arranged. Andrea did not make it to Seadrunar—she left WSTC before the transfer could take place—but we have an assessment ready and plan in place to help her when she’s ready.

Bainbridge Island officers frequently refer youth to Navigator Kelsey who are struggling with mental health issues. Many of these youth are suicidal or harm themselves as a coping mechanism. “**Beverly**” is a woman in her twenties brought to Kelsey’s attention after she engaged in dangerous behavior. She had a negative experience at Kitsap Mental Health and will not return; she can not afford private insurance. Beverly was introduced to a MCS Counselor affiliated with our program. They connected quickly and now Beverly has access to counseling, once a week, at donated office space on Bainbridge Island. This is a great example of collaboration encouraged by Treatment Tax funding: the Bainbridge Navigator, MCS Counseling, and the Tyler Moniz program are working together to help a young woman at risk of crisis.

### **Barriers to Implementation, Actions to Overcome**

Information sharing between Navigators and officers was a barrier to effectiveness in 2018. We have addressed that challenge by moving them into the Poulsbo Police Department and giving them access to the police records management system.

The short-term nature of navigation is very helpful for some people but insufficient for others. Many need *ongoing* support to connect to services and live safely in the community. We have addressed this problem, at least in part, by adding a Peninsula Community Health Services care coordinator to our program (she currently works for us

10 hours a week; we are proposing an increase to 20). We have applied for separate funding, from the Department of Justice and the Washington Association of Police Chiefs, for additional case management services.

Data about individuals with mental illness, mental health disorders, and substance use disorders in the criminal justice system is difficult to find. Kitsap 911, police, and jail record systems do not track these numbers with accuracy and we are unable to collect this information from HIPAA compliant entities such as hospitals or fire departments. It is difficult to gauge our impact on the criminal justice system without baseline data available. We have added a data analyst to our program in 2020 to help us find new ways to track our effectiveness.

Navigator service at KCSO has not begun because of legal and policy issues. These delays have impacted our numbers and geographical reach. We remain interested in working with Deputies and will continue to look for opportunities to partner.

### **Budget Narrative/2020 Funding Request**

We request \$480,858 from the Treatment Sales Tax for our 2020 program. Funds will be used to support three Navigators (a fourth will be supported through city contributions), a part time program manager, a part time care coordinator (employed by Peninsula Health Services) and a part time data/crime analyst (employed by Bremerton Police Department).

Our 2020 budget request includes \$418,652 for payroll-related expenses. Salaries for employees were established by comparing similar positions in other Washington jurisdictions. Navigators work full time for city government and therefore must be enrolled in health care and pension programs that are subject to cost of living increases. Our 2020 budget includes \$62,206 for non-payroll expenses. This amount includes funds for administration, professional services, training, travel, and supplies. It also includes an (approximately) 2% indirect fee which will fund operations and maintenance associated with the City of Poulsbo hosting and administering the program.

### **Budget Modifications and Actual Expenditures**

Our 2019 grant award was \$296,784. The actual grant funding for 2019 was 346,784 which includes \$50,000 in unspent 2018 funds we were allowed to carry over to the 2019 program. We are requesting \$480,858 from the Treatment Tax for our 2020 program.

This increased amount is the result of several factors:

- We would like to add a fourth Navigator to our program. City funds used to offset the three Navigators' salaries in the past will be used to fund a new position.
- We would like to increase our use of a Peninsula Health Care Services care coordinator.
- We would like to add a part time data analyst/crime analyst to our program.
- Program staff are City of Poulsbo employees and receive annual cost of living increases.
- Navigators are now Police Department employees; the insurance required for their positions has significantly increased.

It should be noted, however, that the Program Manager has dropped to part time status (the Police Department's Administrative Services Manager has taken over key areas of responsibility) and the City has reduced its request for indirect charges.

We have spent \$207,823 of our 2019 funding (2019 plus 2018 carry over funds) as of June 2019. This is approximately 60% our total County budget of \$346,784. We have \$138,961 remaining in Treatment Sales Tax funds to use in the second half of the year. Our anticipated shortfall of \$70,000-\$80,000 will be provided by cities benefitting from the program.

### **Sustainability Plan**

Much of the Program Manager's work, in 2019, has been an effort to find alternative funding. She has:

- Worked with local Mayors, police chiefs, and city councils to obtain financial contributions (the Cities of Poulsbo, Bainbridge, and Bremerton have pledged funds to the 2020 program; the Port Orchard City Council will consider a funding request later this year).
- Applied for federal and state funds to support the program (no award determinations have been made at the time of this application).
- Worked with the National LEAD Bureau to create a state fund for police-led diversion programs (legislation was passed for this purpose in 2019).
- Met with a representative from Molina to discuss potential cost savings of our program (a second meeting will be held in the fall).

- Presented at local and state meetings to build awareness of the program (we presented in Mason County and Jefferson County, and will be participating on three panels at the International CIT Conference in Seattle in August 2019).
- Made several requests to the county Criminal Justice Treatment Account board for funding.

Our plan, in 2020, is to continue to show the value of our program, both for the jurisdictions we work with and the individuals we assist. We anticipate an increase, in 2021, of our partnering cities' contributions. As our data collection improves with the addition of a data analyst/crime analyst, we will have better numbers to describe the work of our program when we apply for state and federal funding.

EVALUATION WORKSHEET

PROJECT NAME: City of Poulsbo 2019 Behavioral Health Outreach Program

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Divert individuals with BHI from criminal justice system after police contact by connecting individuals with BHI who have non-criminal police contact or a criminal offence to treatment and services.	Provide Navigators to do targeted outreach following police referrals with an aim to reduce criminal justice system involvement and connect individuals to treatment and services, after criminal offence pre-trial and after non-criminal contact.	50% of individuals receiving <b>ongoing</b> support from Navigators (defined as over 10 contacts) after police contact have reduced involvement with police. Navigators became police department employees in March of 2019; job duties no longer include ongoing support. Smart Objective no longer applicable.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>Jan-2019</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	77% of individuals receiving ongoing police navigator support have reduced CJ involvement in 2018. Sample size: 36.	police records system
		50% of individuals receiving ongoing support from Navigators (defined as over 10 contacts) after police contact have a reduction in police interactions in the 6 month period following compared to 6 month period prior to Navigator contact. Navigators became police department employees in March of 2019; job duties no longer include ongoing support. Smart Objective no longer applicable.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>January 2019</u> Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	police records system
		50% of individuals receiving ongoing support from Navigators (defined as over 10 contacts) after police contact have a reduction in calls to 911 in the 6 month period following compared to 6 month period prior to Navigator contact. Navigators became police department employees in March of 2019; job duties no longer include ongoing support. Smart Objective no longer applicable.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>January 2019</u> Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	Data obtained from Kitsap 911

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
		<p>50% of individuals receiving <b>ongoing</b> support from Navigators (defined as over 10 contacts) were successfully connected to behavioral health services. Navigators became police department employees in March of 2019; job duties no longer include ongoing support. Smart Objective no longer applicable.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>January 2019</u>                      Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>50% of individuals receiving ongoing police navigator support were connected to BH services in 2018. Sample size: 36.</p>	<p>Team reporting based on Team Reporting with ROI forms when possible</p>
<p>Provide referral and support services for individuals with BHI who have contact with police</p>	<p>Accept referrals from police and provide <b>quick, targeted</b> outreach services.</p>	<p>Engage in outreach to at least 60 individuals per month, noting the type of management provided and source of referrals. We are averaging outreach to 54 unduplicated individuals each month and 70 total individuals each month.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>January 2019</u>                      Frequency:  <input checked="" type="checkbox"/> monthly</p>	<p>In 2018, we provided assistance to an average of 40 individuals each month</p>	<p>Team reporting</p>
	<p>Provide outreach and case management to connect individuals to services.                      Note: Navigators do not perform case management.</p>	<p>Make at least 35 individualized, targeted referrals to services per month, noting the type of referral provided; track connections to services when possible. We are averaging 110 targeted referrals to services each month. We are aware of around 37 successful connections to services each month, but the number may be much higher.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>January 2019</u>                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> monthly</p>	<p>In 2018, we have made an average of 30 referrals per month.</p>	<p>Team reporting</p>
<p>Enhance capacity of police and prosecutors to employ diversion strategies.</p>	<p>Ongoing police/prosecutor/Navigator collaboration to promote successful diversion, address gaps in health care system.</p>	<p>75% of police and prosecutors working with Navigators report improved effectiveness of diversion strategies in 2019. According to our end of year survey in 2018, 77% of respondents believe navigators are "extremely effective" in</p>	<p><input type="checkbox"/> Output  <input checked="" type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p>	<p>0</p>	<p>Project satisfaction survey administered at end of 2018.</p>

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>Work with prosecutors to increase the effectiveness of diversion strategies</p>	<p>Ongoing prosecutor / Navigator collaboration to promote successful court supervised diversion agreements.</p>	<p>making service connections that reduce criminal justice involvement. (20% state they are "somewhat effective.") Work with prosecutors and defendants on at least 5 diversion agreements each month, either to create new agreements or encourage compliance with existing agreements. <b>Modified objective: assist individuals with their court obligations.</b> Navigators helped 22 people with court obligations in Q1, averaging 7 per month.</p>	<p><input type="checkbox"/> Fidelity measure</p> <p><input checked="" type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p>	<p>0</p>	<p>program data</p>
<p>Convene police partners to collaborate on procedures for working with individuals with BHI.</p>	<p>Convene an Advisory Group comprised of Crisis Intervention Officers from each law enforcement jurisdiction serving Kitsap County to work on policy, procedures, coding and data concerning individuals with bhi. <b>Group no longer meets. Navigator supervisor Kelly Ziemann regularly confers with partner agencies to discuss procedures.</b></p>	<p>100% of law enforcement jurisdictions have a CIO attend at least 1 Advisory Group meeting. <b>Group no longer meets. Navigator supervisor Kelly Ziemann regularly confers with partner agencies to discuss procedures.</b></p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Short</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>January 2019</u></p> <p>Frequency:</p> <p><input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input checked="" type="checkbox"/> Annual</p>	<p>N/A</p>	<p>Program data</p>
<p>Create and facilitate 6<sup>th</sup> Street Collaborative Working Group comprised of criminal justice and service agencies (police, prosecutor, PCHS, KMHS,</p>	<p>Advisory group develops county-wide policy and procedures for <del>responding to and coding BH calls</del> the Navigator program. <b>Done.</b> We have also written interlocal agreements for all participating cities.</p>	<p>Advisory group develops county-wide policy and procedures for <del>responding to and coding BH calls</del> the Navigator program. <b>Done.</b> We have also written interlocal agreements for all participating cities.</p>	<p><input checked="" type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>January 2019</u></p> <p>Frequency:</p> <p><input type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input checked="" type="checkbox"/> Annual</p>	<p>N/A</p>	<p>Program data</p>
<p>6<sup>th</sup> Street Collaborative Working Group comprised of criminal justice and service agencies (police, prosecutor, PCHS, KMHS,</p>	<p>After creation, 6<sup>th</sup> Street group meets monthly. <b>yes</b></p>	<p>After creation, 6<sup>th</sup> Street group meets monthly. <b>yes</b></p>	<p><input checked="" type="checkbox"/> Output</p>	<p><input checked="" type="checkbox"/> Short</p> <p><input type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>January 2019</u></p>	<p>n/a</p>	<p>Program data</p>

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
	housing, KRM, others) to develop shared care plans for individuals with BHI in the Bremerton geography (LEAD).	create care plans for 5 individuals per month and supplement with ongoing care coordination. Bremerton LEAD is currently working with 6 individuals.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit if applicable: <input type="checkbox"/> Fidelity measure	Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual  <input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: January 2019  Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual	n/a	Program data

Additional measure in 2019:

- Youth assisted in collaboration/cooperation with school officials. 8 in Q1; average of 2-3 per month.

## Total Agency or Departmental Budget Form

ATTACHMENT E

Department Name: **Poulsbo Police Department**

Project: BH Outreach Program

Accrual       Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE*</b>						
Federal Revenue	\$ 1.00	0%	\$ 1.00	0%	\$ 1.00	100%
WA State Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Local Revenue	\$ 3,794,584.00	100%	\$ 4,133,904.00	100%	\$ -	0%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ -	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 3,794,585.00</b>		<b>\$ 4,133,905.00</b>		<b>\$ 1.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 1.00	0%		0%	\$ 1.00	100%
Staff	\$ 2,243,456.00	59%	\$ 2,350,441.00	57%	\$ -	0%
Total Benefits	\$ 836,774.00	22%	\$ 926,420.00	22%	\$ -	0%
<b>Subtotal</b>	<b>\$ 3,080,231.00</b>	<b>81%</b>	<b>\$ 3,276,861.00</b>	<b>79%</b>	<b>\$ 1.00</b>	<b>100%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 3,139.00	0%	\$ 26,150.00	1%	\$ -	0%
Office Supplies	\$ 58,779.00	2%	\$ 40,500.00	1%	\$ -	0%
Other (Describe) uniforms	\$ 21,190.00	1%	\$ 24,555.00	1%	\$ -	0%
<b>Subtotal</b>	<b>\$ 83,108.00</b>	<b>2%</b>	<b>\$ 91,205.00</b>	<b>2%</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ 16,798.00	0%	\$ 18,800.00	0%	\$ -	0%
Insurance/Bonds	\$ 120,504.00	3%	\$ 149,028.00	4%	\$ -	0%
Postage/Printing	\$ 1,251.00	0%	\$ 1,300.00	0%	\$ -	0%
Training/Travel/Transportation (incl fuel)	\$ 76,599.00	2%	\$ 89,845.00	2%	\$ -	0%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe) dues and subscriptions	\$ 11,641.00	0%	\$ 20,543.00	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 226,793.00</b>	<b>6%</b>	<b>\$ 279,516.00</b>	<b>7%</b>	<b>\$ -</b>	<b>0%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ 15,297.00	0%	\$ 16,165.00	0%	\$ -	0%
Utilities	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe) professional services	\$ 15,992.00	0%	\$ 28,840.00	1%	\$ -	0%
Other (Describe) misc	\$ 3,587.00	0%	\$ 900.00	0%	\$ -	0%
Other (Describe) intergovernmental services	\$ 293,162.00	8%	\$ 317,318.00	8%	\$ -	0%
<b>Subtotal</b>	<b>\$ 328,038.00</b>	<b>9%</b>	<b>\$ 363,223.00</b>	<b>9%</b>	<b>\$ -</b>	<b>0%</b>
<b>Other Costs</b>						
Debt Service	\$ 76,414.00	2%	\$ 123,099.00	3%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 76,414.00</b>	<b>2%</b>	<b>\$ 123,099.00</b>	<b>3%</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 3,794,584.00</b>		<b>\$ 4,133,904.00</b>		<b>\$ 1.00</b>	

\*Note: there is a portion of Police Department revenue that comes from State Shared Taxes, General Fund Balance and Fines and Licensing . All funds are processed through the City of Poulsbo and are captured here as "local revenue."

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: City of Poulsbo

Project: BH Outreach

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -			\$ -	
Staff*	\$ 111,060.00	\$ 86,330.00	78%	\$ 269,763.00	\$ 158,703.00	143%
Total Benefits (includes retirement and taxes)	\$ 143,003.00	\$ 41,965.63	29%	\$ 148,889.00	\$ 5,886.00	4%
<b>SUBTOTAL</b>	<b>\$ 254,063.00</b>	<b>\$ 128,295.00</b>	<b>50%</b>	<b>\$ 418,652.00</b>	<b>\$ 164,589.00</b>	<b>65%</b>
<b>Supplies &amp; Equipment</b>						
Equipment		\$ -		\$ -	\$ -	
Office Supplies	\$ 800.00	\$ 447.61	56%	\$ 800.00	\$ -	0%
Other (Describe)		\$ -			\$ -	
<b>SUBTOTAL</b>	<b>\$ 800.00</b>	<b>\$ 447.61</b>	<b>56%</b>	<b>\$ 800.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -			\$ -	
Audit/Accounting	\$ -	\$ -		\$ 1,541.00	\$ 1,541.00	
Communication	\$ -	\$ -		\$ -	\$ -	
Insurance/Bonds	\$ 600.00	\$ 555.00	93%	\$ 5,844.00	\$ 5,244.00	874%
Postage/Printing	\$ -	\$ -		\$ 300.00	\$ 300.00	
Training/Travel/Transportation	\$ 10,000.00	\$ 6,161.99	62%	\$ 10,000.00	\$ -	0%
% Indirect (Limited to 5%)	\$ 15,732.00	\$ 14,347.69	91%	\$ 10,000.00	\$ (5,732.00)	-36%
Other: legal expenses				\$ 1,000.00	\$ 1,000.00	
Other: background investigation for fourth navigator		\$ -		\$ 3,000.00	\$ 3,000.00	
<b>SUBTOTAL</b>	<b>\$ 26,332.00</b>	<b>\$ 21,064.68</b>	<b>80%</b>	<b>\$ 31,685.00</b>	<b>\$ 5,353.00</b>	<b>20%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -		\$ -	\$ -	
Maintenance Contracts	\$ -	\$ -		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$ -		\$ -	\$ -	
Repair of Equipment and Property	\$ -	\$ -		\$ -	\$ -	
Utilities	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Sub-Contracts</b>						
Organization: PCHS**	\$ 15,589.00	\$ 8,016.06	51%	\$ 23,673.00	\$ 8,084.00	52%
Organization: City of Bremerton	\$ -	\$ -		\$ 6,048.00	\$ 6,048.00	
Organization:	\$ -	\$ -		\$ -	\$ -	
Organization:	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 15,589.00</b>	<b>\$ 8,016.06</b>	<b>51%</b>	<b>\$ 29,721.00</b>	<b>\$ 14,132.00</b>	<b>91%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Total Project Budget***</b>	<b>\$ 296,784.00</b>		<b>0%</b>	<b>\$ 480,858.00</b>	<b>\$ 184,074.00</b>	<b>62%</b>

\*The equivalent of one Navigator's salary is paid for by participating cities in 2019. In 2020, city funds will be used to hire a fourth Navigator.

\*\*some of PCHS' funds to MCS Counseling; approved by GN on 1/28/19 \*\*\*total project budget for 2019 is 346,784 (with 2018 carry over)

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: **Peninsula Community Hlth Services**      Project: **Behavioral Health Outreach 2020**

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -		\$ -	\$ -	
Staff	\$ 7,067.20	\$ 2,956.76	42%	\$ 16,120.00	\$ 9,052.80	128%
Total Benefits	\$ 1,766.80	\$ 739.19	42%	\$ 3,224.00	\$ 1,457.20	82%
<b>SUBTOTAL</b>	<b>\$ 8,834.00</b>	<b>\$ 3,695.95</b>	<b>42%</b>	<b>\$ 19,344.00</b>	<b>\$ 10,510.00</b>	<b>119%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -		\$ 975.00	\$ 975.00	
Office Supplies	\$ -	\$ -		\$ 300.00	\$ 300.00	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 1,275.00</b>	<b>\$ 1,275.00</b>	
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -		\$ -	\$ -	
Audit/Accounting	\$ -	\$ -		\$ -	\$ -	
Communication	\$ -	\$ -		\$ 660.00	\$ 660.00	
Insurance/Bonds	\$ -	\$ -		\$ -	\$ -	
Postage/Printing	\$ -	\$ -		\$ -	\$ -	
Training/Travel/Transportation	\$ 4,017.00	\$ 158.69	4%	\$ 1,206.40	\$ (2,810.60)	-70%
% Indirect (Limited to 5%)	\$ -	\$ -		\$ 1,188.02	\$ 1,188.02	
% Indirect (PCHS DeMinimis)	\$ -	\$ -		\$ 1,188.02	\$ 1,188.02	
% Indirect (5% In-Kind Indirect)	\$ -	\$ -		\$ (1,188.02)	\$ (1,188.02)	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 4,017.00</b>	<b>\$ 158.69</b>	<b>4%</b>	<b>\$ 3,054.42</b>	<b>\$ (962.58)</b>	<b>-24%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -		\$ -	\$ -	
Maintenance Contracts	\$ -	\$ -		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$ -		\$ -	\$ -	
Repair of Equipment and Property	\$ -	\$ -		\$ -	\$ -	
Utilites	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Other</b>						
Debt Service	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Total Project Budget</b>	<b>\$ 12,851.00</b>	<b>\$ 3,854.64</b>	<b>30%</b>	<b>\$ 23,673.42</b>	<b>\$ 10,822.42</b>	<b>84%</b>

**Funding for a part time community health care worker to help with care coordination**

2019 itemized Expenses are through 6/30/2019.

2019 = .25 FTE; 2020 = .5 FTE

19

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: **City of Bremerton** Project: **Behavioral Health Outreach**

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -		\$ -	\$ -	
Staff				\$ 5,760.00	\$ 5,760.00	
Total Benefits					\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 5,760.00</b>	<b>\$ 5,760.00</b>	
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -			\$ -	
Office Supplies	\$ -	\$ -			\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -		\$ -	\$ -	
Audit/Accounting	\$ -	\$ -		\$ -	\$ -	
Communication	\$ -	\$ -			\$ -	
Insurance/Bonds	\$ -	\$ -		\$ -	\$ -	
Postage/Printing	\$ -	\$ -		\$ -	\$ -	
Training/Travel/Transportation					\$ -	
% Indirect (Limited to 5%)	\$ -	\$ -		\$ 288.00	\$ 288.00	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 288.00</b>	<b>\$ 288.00</b>	
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -		\$ -	\$ -	
Maintenance Contracts	\$ -	\$ -		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$ -		\$ -	\$ -	
Repair of Equipment and Property	\$ -	\$ -		\$ -	\$ -	
Utilities	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Other</b>						
Debt Service	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Total Project Budget</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 6,048.00</b>	<b>\$ 6,048.00</b>	

NOTE: Indirect is limited to 5%

Funding for a part time data analyst to assist with Program metrics

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: City of Poulsbo**

**Project: Behavioral Health Outreach Program**

**Description**

Number of Professional FTEs (.75 mgr, 3 Navigators*)	3.75
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>3.75</b>

**Salary Information**

Salary of Executive Director or CEO	\$ 59,280.00
Salaries of Professional Staff	\$ 210,483.00
Salaries of Clerical Staff	
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 269,763.00</b>
Total Payroll Taxes	\$ 28,903.00
Total Cost of Benefits (includes retirement)	\$ 119,986.00
Total Cost of Retirement	
<b>Total Payroll Costs</b>	<b>\$ 418,652.00</b>

\*If this grant is awarded, partnering cities will fund a fourth Navigator in 2020.

\*Salary summary does not include a part time care coordinator or a part time data analyst; these are proposed as subcontracted positions. See Attachment G .

# City of Poulsbo

Office of Mayor Rebecca Erickson



To the Citizen Committee  
Mental Health, Chemical Dependency and Therapeutic Courts Request for Proposal  
Kitsap County, Washington

August 1, 2018

*POULSBO ON A BI ANNUAL  
BUDGET - FUNDS APPROVED  
FOR 2019 AND 2020.*

To All,

The City Council of the city of Poulsbo approved a letter of intent to be included with the application presented by the city of Poulsbo for the Behavioral Health Outreach Team. The City has committed to a cash match of \$60,000 along with in-kind services as presented in the grant application.

Our city supports this program and sees it as an extremely valuable piece of the necessary social service support in our community.

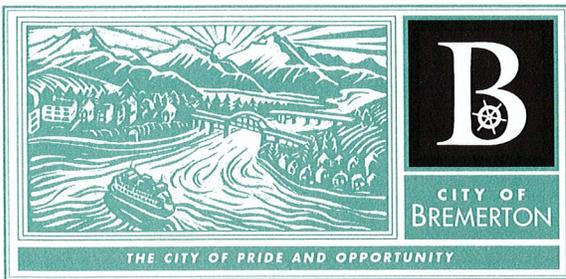
Following is our council summary where the commitment was made by the City Council.

Council Agenda Items			
July 18, 2018			
AGENDA ITEM	ACTION	RESPONSIBILITY	MEETING DATE
Approve Letter of Intent for Mental Health Grant	Approved	Hendrickson	07/18/18
Employee of the Quarter	Ceremony Held	Schoonmaker	07/18/18
Swearing In of Sergeant Nau	Ceremony Held	Schoonmaker	07/18/18
Introduction of Administrative Services Manager	Introduction Given	Schoonmaker	07/18/18
Ordinance No. 2018-16, 2 <sup>nd</sup> Quarter Budget Amendment	Adopted	Booher	07/18/18
First Reading of an Ordinance Granting PSE Short Term Franchise Agreement	First Reading Held	Booher/Kasiniak	07/18/18
Village/Liberty Bay Pump Station Project Acceptance	Approved	Kasiniak	07/18/18
Central Interceptor CIPP Project Change order and Budget Amendment	Approved	Kasiniak	07/18/18
Meeting Adjourned at 8:38 PM			

If you have further questions, please contact me.

Becky Erickson, Mayor

*22*



**BREMERTON POLICE DEPARTMENT**  
**CHIEF JIM BURCHETT**  
James.Burchett@ci.bremerton.wa.us

Tel 360-473-5224  
Fax 360-473-5890  
1025 Burwell Street  
Bremerton, WA 98337

July 23, 2019

Kitsap County Advisory Board  
c/o Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**RE: Letter of Resource Commitment, 2020 Behavioral Health Outreach Program**

To the Citizens' Advisory Committee:

I am writing to express my Department's support of the Behavioral Health Outreach Program and our continued interest in providing office space and financial support in 2020.

The Bremerton Police Department currently provides office space and equipment for our Police Navigator, Laurel MacIntyre-Howard. We will continue to provide space and equipment if the position continues in 2020, along with the same financial contribution of \$30,000 which we have committed to this year.

Thank you for your support of this important program.

JAMES BURCHETT  
Chief of Police

# Bainbridge Island Police Department

Jeffrey Horn, Interim Chief of Police

625 Winslow Way East • Bainbridge Island • WA • 98110

206-842-5211 [www.bainbridgewa.gov](http://www.bainbridgewa.gov)



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July 16, 2019

Kitsap County Advisory Board  
c/o Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**RE: Letter of Resource Commitment, 2020 Behavioral Health Outreach Program**

Members of the Citizens' Advisory Committee:

I am writing to express my Department's support of the Behavioral Health Navigator Program and our continued interest in providing a workspace and financial support in 2020.

The Bainbridge Island Police Department currently provides a workspace for our Police Navigator, Kelsey Lynch. We will continue to provide space if the position continues in 2020, along with the same financial contribution (\$30,000) we've committed to this year.

Thank you for your support of this important program.

Regards,

A handwritten signature in black ink, appearing to read "Jeffrey Horn". The signature is fluid and cursive, with the first name being the most prominent.

Jeffrey Horn  
Interim Chief of Police



**CITY OF PORT ORCHARD  
POLICE DEPARTMENT**

Matt Brown, Chief of Police  
546 Bay Street, Port Orchard, WA 98366  
Voice: (360) 876-1700 • Fax: (360) 876-5546  
police@cityofportorchard.us  
www.cityofportorchard.us

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Kitsap County Advisory Board  
c/o Kitsap County Human Services  
614 Division St. MS-23  
Port Orchard, WA 98366

July 16<sup>th</sup>, 2019

**Letter of commitment – 2020 Behavioral Health Outreach Program**

To the Citizens' Advisory Committee:

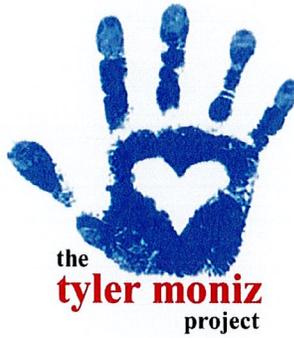
I am writing to express my Department's support of the Behavioral Health Outreach Program and our City's interest in providing office space and financial support in 2020.

The Port Orchard Police Department currently provides office space and equipment for our Police Navigator, Melissa Stern. We will continue to provide space and equipment if the position continues in 2020. I can not commit to a specific financial contribution at this time but will work towards any additional funding possible in the next budgetary cycle.

Thank you for your continuing support of this program.

Respectfully,

Matt Brown  
Chief of Police



Kitsap County Advisory Board  
c/o Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

July 5, 2019

**Letter of Resource Commitment, 2020 Behavioral Health Outreach Program**

To the Citizens' Advisory Committee:

I am writing to express my organization's support of the Behavioral Health Outreach Program and our commitment to providing office space to the Bainbridge Island Police Navigator in 2020.

The Tyler Moniz project currently provides office space for the Bainbridge Island Police Navigator at the Bainbridge Island Pavilion. This location is an important part of the Navigator's work, since it gives her a private and comfortable place to work with individuals referred to her by Bainbridge Police, who are in need of assistance. This space is also used for youth counseling referred by the Navigator and provided by MCS Counseling Services.

Thank you for your support of this important program.

**Lee Moniz**

Lee Moniz  
Founder and Director, The Tyler Moniz Project  
10468 Barkentine  
Bainbridge Island, WA 98110



## Peninsula Community Health Services

*Provides accessible, affordable, quality health and wellness services for our communities.*

July 23, 2019

Kitsap County Citizen Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Dear Citizens Advisory Committee,

I am writing to express my support and commitment to the City of Poulsbo's proposal to pursue funding for a Community Health Worker to assist with low to moderate patients who have been diagnosed with/or are struggling with mental illness and/or substance use disorders.

The City of Poulsbo has been a community partner to Peninsula Community Health Services (PCHS) for the last few 1/10<sup>th</sup> grant cycles and has been piloting innovative approaches to reduce the cost to the criminal justice system of individuals better treated in a healthcare environment for the last few years.

PCHS understands how important it is to provide integrated care to patients who face multiple challenges. We also recognize that mental health and substance use issues are often at the core of criminal behavior.

PCHS is committed to partnering with the City of Poulsbo to provide coordination for mental health and substance use disorder services as a way to improve access. We will provide a community health worker to the 2020 program and absorb \$2,463 of indirect costs from this partnership.

Thank you for giving City of Poulsbo's proposal your consideration.

Sincerely,

Jennifer Kreidler-Moss  
Chief Executive Officer



## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

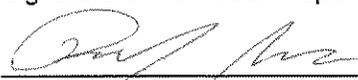
Name of Program: **Homeless Youth Intervention**Organization Submitting: **The Coffee Oasis**

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			
Organization did receive funding for this project in 2019	X			
Attachment A – Continuation Grant Proposal Summary Page	X			
Attachment B – Continuation Grant Proposal Checklist Form	X			
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			
Attachment C – Continuation Grant Proposal Narrative Template	X			
Proposal Narrative is limited to 10 pages	X			
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			
Attachment E – Total Agency Budget Form	X			
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			
Indirect is limited to 5%	X			
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			
Organization submitted Attachment G for each Sub-Contractor	X			
Sub-Contractor indirect limited to 5%	X			
Attachment H – Continuation Grant Proposal Project Salary Summary	X			
Attachment I – Letter of Resource Commitment (optional)	X			
No other attachments are included	X			
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
\_\_\_\_\_  
Signature of Individual Preparing Proposal

3/18/2019  
Date

  
\_\_\_\_\_  
Signature of Organization's Chief Executive

3/18/2019  
Date

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Narrative Template

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### 1. Project Description (20 points)

#### A. Project Design

The Homeless Youth Intervention Project assists unreached hurting and homeless youth struggling with mental illness and substance abuse by connecting them to services that will provide opportunities for restoration with their families and community. Our target population is unreached homeless youth ages 13-25 years in Kitsap County.

Our project provides a Continuum of Services for youth that will include:

**Crisis Intervention** strategies through an Outreach Specialist overseeing a 24-hour youth crisis text line and street outreach. Jail Case Manager meeting youth onsite at the Kitsap County Jail. **Mental Health interventions** with 2 mobile Coffee Oasis Based Therapists in partnership with Come Alive Youth Services (CAYS) will provide onsite therapy at our 4 drop-in centers. A Crisis Case Manager will provide case management wrap-around services and housing. **Recovery strategies** through a Chemical Dependency Professional, screening and assessment, counseling, and a youth-based recovery support group.

Our project addresses the gaps in crisis intervention and recovery support services, of the ***Policy Goals from the 2014 Kitsap County Behavioral Health Strategic plan:***

- Reduce the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services = through crisis outreach and the 24-Hour youth text line to resolve issues without calling 911.
- Reduce the number of chemically dependent and mentally ill youth and adults from initial or further criminal justice system involvement = through onsite jail case management, discharge planning, and safe housing upon release.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth = by providing therapeutic services onsite where youth feel safe and can develop a client-driven Mental Health Treatment Plan.
- Increase the number of stable housing options for chemically dependent and mentally ill residents of Kitsap County = through increasing alternative housing options, educating landlords and the community about mental health issues.

This project includes the following staff positions and support services:

- 1 FTE Outreach Crisis Specialist
- 24-Hour Crisis Text Line
- 1 FTE Jail Case Manager, focusing on discharge planning with clients onsite.
- 1 FTE Crisis Case Manager, focusing on housing and employment opportunities.
- 2 FTE Mobile Coffee-Oasis Based Therapists, Child and Family Services, one focusing on North Kitsap/Bremerton and the other South Kitsap/Bremerton.
- 1 FTE Chemical Dependency Professional providing one-on-one/group sessions.

- Emergency Youth Shelter, Host Homes Housing, Supportive Housing, and family reunification services.

This proposal is not requesting additional staff or resources. We will be strengthening our crisis intervention response in 2020 through:

- Expanding services to remote youth in North Kitsap with the opening of our Kingston youth drop-in center.
- Increasing strategic street-based and jail outreach targeting unreached youth in crisis.
- Increasing volunteer capacity and community awareness of the 24-Hour youth crisis text line.
- Ensuring that every youth who comes into housing and emergency shelter has access to mental health therapy.
- Providing chemical dependency one-on-one assessments, harm reduction plans, and connection to community inpatient and outpatient services.
- Implementing a Youth-based Recovery Group focusing on education, peer-to-peer support, and providing opportunities to uniquely express themselves, such as through art, writing, and music.
- Expanding alternative housing options, such as Host Homes and Home Share, for homeless youth who have experienced trauma and mental health crisis.
- Program housing options will include:
  - Youth Shelter (emergency) for youth 16-20 years old.
  - Host Homes (transitional) for youth 13-25 years old.
  - Home Share with partners (permanent) for youth 18-25 years old with an income.
  - Supportive Housing (permanent) for young women 18-25 years old in partnership with the City of Poulsbo.
  - Supportive Housing (permanent) for young women 18-25 years old exiting sexual exploitation in partnership with Shared Hope International.
  - Family reconciliation services (permanent) and aftercare support in partnership with the Dispute Resolution Center.

## B. Outreach

Mike O'Shaughnessy joined us as our new Street Hope Manager this year, leading our outreach team on the streets and in the schools. He has previous experience as the Executive Director of Kitsap Rescue Mission and is on the KHHC sub-committee Outdoor Homeless Committee as the Interim-Committee Lead. He is working with the Crisis Outreach Specialist to strategically target unreached youth in crisis on the streets and coordinating care with the Crisis Intervention Team. His expertise and experience will assist in reaching and serving youth in crisis, especially those in North and South Kitsap who lack transportation and access to services.

Outreach occurs systematically on the streets throughout Kitsap County, on-call, and in coordination with street outreach workers, first responders, and other agencies. 24 Hour Youth Crisis Text Line is manned 24 hours a day by staff and volunteers.

Our target population will learn about our program through culturally competent cards and brochures given to local service agencies, schools, and youth themselves. We will reach youth with disabilities, limited English speaking persons, and minority persons by building relationships with those population's gatekeepers through outreach and community partnerships. The Housing Solutions Center/Kitsap Community Resources will assist if an interpreter is needed. We have partnered with the Marvin Williams Center to reach youth of color and have a job training program onsite at their facility.

Behavioral health care services will meet the social and cultural needs of youth by meeting them in places where they feel safe such as our cafes, drop-in centers, even sitting outside. CAYS therapists have experience working with at-risk youth and have completed *Understanding the Streets: Youth Culture and Competency* training. Substance Abuse and Mental Health Administration (SAMHSA) advises youth need a highly individualized process and services that integrate an understanding of youth culture. Our program is tailored to their unique culture and recognizes the importance of trusting relationships and providing strength-based services, focusing on building the personal attributes of each youth.

## **2. Accomplishments to Date (40 Points)**

### **A. Evaluation**

Our 2020 evaluation plan will be similar to the previous year's outcomes, with an increase in the number of young adults served (outputs) and the same percentage of young adults showing positive impact (outcomes). Our focus this year is to streamline community partnerships for collective impact and assist youth in building protective factors of safety, well-being, permanent connections, and self-sufficiency, so they can be healthy productive members of the community.

Confidential data will be collected and maintained for all clients in our Youth Program Database, which complies with HIPPA standards. We will record demographics, disabling conditions, income, and health insurance information. Youth who engage in case management services will complete a Homeless Management Information System (HMIS) intake, Housing Stability Plan, and exit interview which will record their housing status upon completion of the program. Monthly and quarterly reports are reviewed by the leadership team and the Board of Directors evaluate the success and effectiveness of the program.

### **Expected outcomes for 2020**

#### Crisis Intervention Outreach:

- 70% of 250 youth in crisis contacted in outreach will engage in ongoing services (36% increase of youth to be contacted in 2020)

#### Reduce or prevent unnecessary use of emergency services:

- 24-Hour Crisis Text Line will respond to 25 texts a month, of which
  - 75% will be resolved over the phone with conversation and provision of services. (2019 has averaged 20 texts a month)

#### Provide behavioral health screening, brief intervention, and referral for treatment:

- 120 youth will be served by one of our mobile CAYS therapists, of which
  - 80% of youth who meet with a therapist will complete a Mental Health Treatment Plan. (This is a new measure)
  - 70% of youth completing and taking steps on their Mental Health Treatment Plan will show improved overall mental health and wellbeing.
  - 65% of youth served by a therapist will apply & acquire health insurance.

Provide substance abuse screening, brief intervention, and referral for treatment:

- 60 youth will be served by a Chemical Dependency Professional, of which
  - 50% will engage in ongoing services wherever they feel safe.

Wrap-around services provided through intensive case management:

- 75% of youth working with a therapist will engage in case management services and complete a housing stability plan that includes education and employment goals, of which
  - 55% will complete case management and exit into stable housing. We will focus on family reconciliation whenever possible.
- 75% of youth in therapy and youth in case management will share their satisfaction with the program services on a feedback survey.

In 2018, our Homeless Youth Intervention Project reached 254 unduplicated youth and by the second quarter of 2019, we have reached 183 unduplicated youth in crisis. The Crisis Outreach Specialist has been collaborating with law enforcement, fire departments, schools, hospitals, and first responders, who were seeking to be able to direct a youth who is not in imminent danger to a resource in the community. The outreach cards with the 24-Hour Youth Text Line have been utilized by these partners. Through these partnerships, the crisis team has been trained in Naloxone Rescue Kits for opioid overdose. We have also been collaborating with South Kitsap Fire and Rescue Department to create a task force dedicated to mental health response in partnership with our services. This will be the first of its kind, pilot program, which has the potential to be taken nationwide.

2018 and 2019 (Jan-Jun) Homeless Youth Intervention Evaluation results:

**Objective #1:** *70% of youth in crisis contacted engage in ongoing crisis services, 2018 66% of (127 ) youth and in 2019 YTD 80% (104) youth have continued care after a crisis intervention, with such services as counseling, case management, housing, and emergency resources.*

**Objective #2:** *Provide 24/7 crisis response to youth via a staffed text line (30 a month), 2018 195 texts (averaging 16/month) and in 2019 YTD 114 texts (averaging 19/month). Youth can text "CoffeeOasis" to 3603775560 and talk to a crisis responder (staff or trained volunteer) 24/7. The major causes youth text in is for depression, suicide/self-harm, anxiety/stress, and family conflict. Each text is followed up the next day and a week later to check on how they are doing. A third of the youth who have utilized the text line will text again to talk to a safe adult when they feel overwhelmed by a situation or are thinking of suicidal ideations. Crisis team encourages youth to utilize the text line whenever necessary to keep them safe.*

**Objective #3:** *50% of crisis calls are resolved over the phone with conversation and provision of community resources and referrals, 2018 87% (169) of texts were resolved and in 2019 YTD 67% (76)114 texts of calls were resolved without requiring additional emergency personnel or law enforcement at the time of the call and were able to connect them with a safe parent or friend to support them. A majority of the callers were between the ages of 15-20 years old.*

**Objective #4:** *At least 112 youth will be served by a therapist by December 31, 2018. 2018 63 youth and in 2019 YTD 53 youth have participated counseling sessions with the Mobile Therapist. We have been able to serve more youth this year with a second 1 FTE therapist. We anticipate over 100 youth accessing mental health services by the end of 2019. An exciting partnership has been with Miracle Ranch and One Heart Wild to provide TF-EAP (Trauma-Focused Equine Assisted Psychotherapy) group. Horse therapy has been one of the most effective tools of therapy to help youth process their feelings, thoughts, and reactions.*

**Objective #5:** *75% of youth completing more than 8 sessions with a therapist will show improved overall health and wellbeing, 2018 (46%) youth and in 2019 YTD 34% (18) youth have completed over 8 sessions. This has been a challenge due to the instability, lack of supports, and severity of mental health issues of our targeted youth, which we address in the Barriers section.*

**Objective #6:** *50% of youth served by a therapist will apply and acquire health insurance. In 2019 we increased this outcome to 65%. 2018 29% (18) youth and in 2019 83% (44) youth have successfully applied and acquired health insurance. The Crisis Case Manager helps youth apply for insurance with Peninsula Community Health Services Navigators.*

**Objective #7:** *75% of homeless youth served by a therapist agree or strongly agree that they are satisfied with program services quarterly. 2018 100% of youth and in 2019 100% of youth have expressed they were very satisfied with CAYS services. Youth complete an anonymous feedback survey each quarter. One youth commented on the form, "Thank you for just being able to listen. I needed someone to talk to. Thank you so much."*

**Objective #8:** *At least 60 youth will be served by a Chemical Dependency Professional (CDP) by December 31, 2019. 2018 5 youth and in 2019 19 youth received onsite assessment and counseling services. This outcome has greatly increased because of the new addition of a CDP this year. 70% of the youth at intake of our emergency shelter report they use drugs and alcohol and 50% use it to cope and survive. The next phase of 2019 will be implementing a youth-based recovery group.*

**Objective #9:** *50% of youth served by Chemical Dependency Professional will engage in ongoing services (attended appointment) wherever they feel most safe. 2018 0% youth and in 2019 63% (12) youth were connected with ongoing services in the community. West Sound Treatment Center has collaborated to streamline referrals.*

**Objective #10:** *(75%) of homeless youth working with a therapist participate in case management services. 2018 86% (54) youth and in 2019 49% (26) youth enrolled in case management and create a Housing Stability Plan that includes education and employment goals, in 2018 93% youth and 2019 100% youth completed their Housing Stability Plan, which often takes 2-3 meetings with youth to build trust and develop a client-driven goal plan. We project the outcome will increase this year as youth receive mental health services and feel empowered to dream again and to take steps towards their goals.*

**Objective #11:** *At least 55% of homeless youth complete case management services and exit into permanent housing with a focus on family reunification whenever possible. 2018 30% (16) youth and in 2019 42% (11) youth have acquired safe and stable housing, of which 2018 56% (9) youth and in 2019 36% (4) youth were reunited with their family. An average of 30% of youth are literally homeless, 55% at-risk of losing housing/unstably housed, and 15% staying with family. Youth who are not homeless we assist in maintaining housing by building protective factors, life skills, and job training.*

**Objective #12:** *75% of homeless youth within case management agree or strongly agree that they are satisfied with program services quarterly. 2018 93% and in 2019 89% youth expressed on a survey and feedback form they were very satisfied.*

## **B. Barriers to Implementation**

In 2016-17 Washington State suicide rates among 10-to-17-year-olds increased by 32% and the rates also rose among young adults 18-to-25-year-olds by 25%. Suicide is the second leading death among 10-24-year-olds. Suicide is a preventable death and yet is continuing to increase, even in our community. This year in Kitsap County 7 youth have died from suicide. The Kitsap County Suicide Prevention Coalition disbanded. This June was the highest volume of texts to the 24-Hour Youth Text Line for suicide ideation and depression. To overcome these overwhelming statistics and community losses we will begin a strategic awareness campaign of the 24-Hour Youth Text Line throughout Kitsap County, educate the community and young adults the risk signs and warning factors of suicide through trainings and social media, and expand mental health services without barriers to any youth who is hurting in our community.

M. had gone to the ER for attempted suicide in the past. She was couch surfing and doing her best to get by with little social support. M. connected to us through the 24-Hour Youth Text Line and began meeting with our mobile CAYS therapist. She eventually moved in with a coworker and things seemed to become stable, but she lost her job a month later after being assaulted by her employer. Over the course of time meeting together with the therapist she was able to process through her childhood trauma and neglect. M. moved into one of our supportive homes and has found healthy ways to cope. She has completed 6 weeks of job preparation classes and is about to complete her job training internship. She has enrolled in Olympic College and will be attending this fall. This is one of many youth that this project has saved from suicide.

It has been a challenge to have youth attend all eight therapy sessions, either because they feel they have overcome their crisis or because they are dealing with long-term mental health issues. We have experienced that youth in crisis and in need of mental health services have two tracks. The first track is a youth in crisis due to a circumstance or trauma and they meet with a therapist and work through a client-driven therapeutic plan, practice healthy coping skills, and then they feel strong enough to continue the steps on their own. This first track may only take 4 sessions. The second track is youth in crisis because they are dealing with severe psychiatric disorders and need intervention, build safe trusting relationships, and be connected with Kitsap Mental Health Services for ongoing services. The second track is youth who have great difficulty taking independent steps on their therapeutic plan but by building safe trusting relationships they can begin to understand the need and benefits of receiving mental health services. Essentially removing the stigma and fear of needing mental health services. The therapist with the case manager can assist the youth in acquiring health insurance, provide transportation, and accountability so they can smoothly transition to a service provider in the community. This second track may take 8 or more sessions. To overcome these difficulties, we have adjusted our projected outcomes in 2010 to capture both tracks of youth by tracking when youth have completed a mental health treatment plan and when they have shown improved overall mental health and wellbeing, which could be successfully utilizing healthy coping methods to deal with stress or connecting with ongoing mental health services.

### **C. Key Accomplishments**

A key accomplishment has been providing youth counseling services to 205 youth since 2017 who have experienced trauma and Adverse Childhood Experiences (ACEs). Not knowing where you are going to sleep each night compounds ACEs. Each youth who enters the emergency shelter or our housing program has the opportunity to meet with a therapist onsite where they feel most secure and safe to talk. Providing immediate onsite mental health services without barriers of needing ID, appointment, or health insurance before therapy occurs has significantly removed the stigma of asking for mental health services. It has changed the way youth perceive mental health issues and increased their confidence to ask for help. They feel empowered to create a safe plan to take steps towards breaking the cycle of homelessness, substance abuse, self-harm, and destructive behaviors.

L. is a young woman found great relief through our TF-EAP (Trauma-Focused Equine Assisted Psychotherapy) group. L. endured childhood trauma, neglect, and abuse. During a session, the horse she was working with mouthed her arm. He did not bite or harm her, but this created an opportunity for the therapy team to explore her response to such treatment. They pointed out to her that she seemed to accept this behavior, even though it could potentially lead to being hurt. After a time of discussion, she reengaged with the horse who again mouthed her arm. We discussed boundaries and assertiveness. L. then spent time working with her horse on boundaries and healthy connection. Towards the end of the session, she began to cry and said, "I forgive this horse. In forgiving him, I am also able to forgive my abuser." Forgiveness of her abuser also resulted in healing and forgiveness of herself.

Another key accomplishment is the 24 Hour Youth Text Line, which has had 379 unduplicated youth text in since 2018. The Crisis text line has also paved a way with numerous agencies to streamline crisis services for youth across the county and reduce the number of calls to 911 and emergency room visits. The text line has experienced recurring youth texting the line to talk. This is a positive trend that they are utilizing this service instead of self-harm or calling emergency services. Mental health stability takes time and volunteers regularly check in with high-risk youth to ask how they are doing.

N. a high utilizer using the right resources. N. is a 17-year-old male who received a touch card from a community member after struggling through age-appropriate situations. He initially texted stating that he was having difficulty because all his friends were moving out of the area and that he feels as if he is losing everyone. He went on to say that in school many different people were starting rumors about him. Volunteers were able to speak with him about his frustrations and eventually, he informed the volunteer that he was feeling better being able to talk out his frustrations. N. has texted in about once a week since each time indicating something that he was struggling with. Before texting our youth line, law enforcement was frequently called to his house due to his struggles and negative behaviors. Since then 911 calls have ceased as the text line has been a way for him to safely vent his feelings. N. continues to text into the line sometimes for struggles and other times just to update us on how he is doing.

### **3. Budget Narrative (30 Points)**

#### A. Funding Request

The total proposed budget is \$303,917.77. Direct costs \$295,485.22 and Indirect costs \$8,432.55 (3%). \$158,528.96 budgeted is for the subcontract with Come Alive Youth Services (CAYS).

Personnel involved in this project will be:

1. The 2 FTE CAYS Therapists will be subcontracted to TCO to provide onsite therapy services for homeless youth in crisis at all Coffee Oasis locations and 1 FTE CAYS Chemical Dependency Professional will be subcontracted to TCO to provide counseling services, establish a youth-based recovery group, and connect youth to local treatment provider services. These full-time positions are budgeted at 192,389.52, including benefits.
2. The 2 FTE Case Managers (Jail Case Manager and Crisis Case Manager) will work with the other members of the team to provide wrap-around services available through TCO and other community resources. These full-time positions are budgeted at \$82,781.15, including benefits.
3. The 1 FTE Crisis Team Manager will provide vision and leadership to the Crisis Team by building community relationships and providing oversight to the whole Crisis Team. This full-time position is budgeted at \$44,392.46, including benefits.

*Total Personnel expenses budgeted for the project (including taxes and benefits) are \$319,563.13 of which \$38,477.91 will be funded through insurance billing by the therapists and CDP. Total requested grant funds for personnel are \$281,085.22.*

Administration

1. Communications: \$3,600 is budgeted towards Crisis Line Texting service.
2. Training and Travel: \$2,400 is budgeted towards training and travel.
3. Insurance: \$1,200 is budgeted towards liability insurance for the project.
4. Indirect Administrative Costs – 3%: \$8,432.55 is budgeted towards indirect administrative costs needed to support this project.

*Total Budgeted for Administration is \$15,632.55*

Operations and Maintenance

1. Youth Assistance (e.g. Bus Passes and ID): \$2,400.00 is budgeted towards funds to assist youth in their progress.
2. Motel Vouchers: \$4,800.00 is budgeted to provide emergency motel vouchers (6/month) for youth in crisis needing immediate housing.

*Total Budgeted for Operations and Maintenance is \$7,200.00 which is being requested as grant funding.*

Milestones anticipated with the new funding request:

- Task-force implemented with South Kitsap Fire and Rescue Department for collaborative crisis intervention.
- 24-Hour Youth Crisis Line awareness and utility increased in the community through strategic plan of informing through social media, posters in schools, and distribution of cards with partners such as Kitsap Transit and the Parks Department.
- Increase of youth experiencing homelessness accessing mental health services onsite. Youth will have access to a therapist within 48 hours of entering housing.
- Youth-based Recovery Group meeting regularly at the youth shelter and at each of the supportive homes.

## B. Past Expenditures and Budget Modifications

<b>Budget Categories</b>	<b>Actual Expenditures (Jan. 1, 2019- June 30, 2019)</b>	<b>Remaining Balance</b>
Personnel	134,722	123,064 (48%)
Fringe Benefits	8,221	13,379 (62%)
Communication	1,565	2,035 (57%)
Indirect	8,497	7,596 (47%)
Youth Resources	845	1,555 (65%)
<b>Total:</b>	<b>153,850</b>	<b>147,629 (49%)</b>

51% of the total budget (\$301,479) has been expended thus far. The personnel and benefits remaining funds are for TCO salary and benefits (\$36,000) and (\$111,000) for the subcontract with CAYS. We are confident in our partnership with CAYS to provide onsite therapy and chemical dependency services at our shelter, housing, and each of our drop-in centers in Bremerton, Port Orchard, Poulsbo, and Kingston. The Therapists and CDP will conduct mental health assessments and referrals; provide brief intervention; trauma support; as well as individual and group counseling. The next phase in 2020 will be employee retention, program outcomes, and future sustainability.

The significant change to the 2020 proposed budget is that it is 16% less than last years' request and only 1% (2,438.77) above 2019 awarded amount (\$301,479). The budget for CAYS services of 2 FTE Therapists and 1 FTE CDP is: \$192,389.52 and CAYS will be providing 20% of their services through insurance billing, so the sub-contractors requested funding has been reduced to \$158,528.96. As youth acquire health insurance in the program they are connected to community service providers for ongoing services, so CAYS will be limited to billing client's insurance who already have private insurance when they enroll for therapy services. This is an exciting phase of the project to begin building additional funding sources and future sustainability for mental health services.

#### **4. Sustainability (10 Points)**

##### A. Sustainability Plan

This project has improved our ability to be competitive in applying for the Washington State Office of Homeless Youth grant programs. We were awarded a continuation grant for Street Outreach. We received a grant with the Kitsap Community Foundation – Foster Kids and Family Reconciliation Program in support of the youth shelter. Our Annual Hope Gala fundraiser in September is already sold out. Our end of the year campaign will be in support of the youth shelter. We will be applying with the Medina Foundation in the fall for a general operating grant, and will be continuing to seek additional grant opportunities/

The preliminary plan for sustainability in the following year will be a combination of this grant opportunity, fundraisers, and health insurance billing. We plan to increase other funding sources each year and reduce the funding request from this grant opportunity. This will be accomplished while at the same time expanding our services to additional locations, such as Bainbridge Island, further increasing the impact of the funds received through this grant. CAYS is working with a clinical supervisor to assist in establishing their capability of billing health private insurances and Medicaid.

We are collaborating with the Kitsap Housing and Homeless Human Services Department to apply with other counties in Washington State for the Federal Youth Demonstration Grant with the Administration with Children, Youth, and Families (ACYF). The project would focus on identifying homeless youth through outreach and working to quickly place them in safe and stable housing. This opportunity has a heavy emphasis on providing a connection of counseling services for runaway and homeless youth. This project has prepared our county to be able to launch this demonstration project because of the partnerships and communication that has created a culture for collective impact on a community level.

EVALUATION WORKSHEET

PROJECT NAME: Homeless Youth Intervention

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Crisis intervention outreach to homeless youth in Kitsap County with a focus on North and South Kitsap will help homeless youth in crisis stabilize and connect to needed supports.	Provide daily street and school outreach for building relationships with youth in crisis and provide them with information and referrals.	70% of youth in crisis contacted engage in ongoing crisis services (at least two contacts- call and/or text).	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit <i>30:1 from preventing emergency room visits/991 calls</i> If applicable: <input checked="" type="checkbox"/> Fidelity measure: <i>self-report checklists</i>	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>January 2020</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	2018 we reached 191 youth in crisis and 127 (66%) engaged in ongoing services. 2020 projecting 250 youth in crisis contacted.	Daily records kept by Outreach Specialist <sup>2</sup>
Reduce or prevent unnecessary use of emergency services (EMS, ED, etc.) by youth in crisis.	Provide 24/7 crisis response to youth via a staffed text line.	24 hour youth crisis text line will respond to at least 25 unduplicated youth texts per month.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure: <i>through structured observation</i>	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>January 2020</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	2018 we received 195 crisis texts and in Jan-Jun 2019, we received 114 crisis texts. 2020 projecting 300 texts.	Daily records kept by Outreach Specialist <sup>2</sup>
		75% of crisis texts are resolved over the phone with conversation and provision of community resources and referrals.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit <i>30:1 from preventing emergency room visits/991 calls</i> If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>January 2020</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	2018 we had 87% (169) and in Jan-Jun 2019 67% (76) crisis texts were resolved over the text line. 2020 projecting 225 resolved texts.	Daily records kept by Outreach Specialist <sup>2</sup>

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
<p>Provide behavioral health screening, brief intervention, and referral for treatment for hurting and homeless youth to their overall improve health and well-being.</p>	<p>Provide onsite therapy services at all Oasis Centers through 2 Mobile Coffee Oasis Based CAYS Therapists. Specially focusing on youth experiencing homelessness and entering emergency shelter and housing.</p>	<p>120 uninsured youth will be served by the therapists by December 31, 2020.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>January 2020</u>                      Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, 63 youth and in Jan-June 2019, 53 youth received therapy.</p>	<p>Tracked on Coffee Oasis Youth Program database.</p>
	<p>80% of youth who meet with a therapist will complete a Mental Health Treatment Plan.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input checked="" type="checkbox"/> Fidelity measure: <i>self-report checklists</i></p>	<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long                      Start date: January 2020                      Frequency:                      X Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, 29 (46%) completed 8 therapy sessions. Treatment plan should take 4 or less. 2020 project 96 youth.</p>	<p>Tracked on CAYS database</p>	
	<p>70% of youth completing and taking steps on their Mental Health Treatment Plan will show improved overall mental health and wellbeing.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input checked="" type="checkbox"/> Fidelity measure: <i>Multi-informant methods (feedback from therapist, client, &amp; permanent connections in clients life)</i></p>	<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long                      Start date: January 2020                      Frequency:  <input type="checkbox"/> Quarterly                      X Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>This is a new measure without a base line. 2020 project 84 youth.</p>	<p>Tracked on CAYS database</p>	

EVALUATION WORKSHEET

		<p>65% of youth served by therapist will apply and acquire health insurance.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input checked="" type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date:  <u>January 2020</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, 29% (18) and in 2019 Jan-Jun 83% (44) gained health insurance. 2020 project 78 youth gain health insurance.</p>	<p>Tracked on CAYS Program database.</p>
	<p>Assess participant satisfaction with program services.</p>	<p>75% of youth served by the therapist agree or strongly agree that they are satisfied with program services.</p>	<p><input type="checkbox"/> Output  <input checked="" type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date:  <u>June 2020</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, 100% of youth feedback agreed they were satisfied with program.</p>	<p>Participant survey form recorded in CAYS Program database.</p>
<p>Provide substance abuse screening, brief intervention, and referral for treatment for homeless youth to improve health and well-being.</p>	<p>Provide onsite assessment and counseling services through onsite Substance Abuse Counselor.</p>	<p>At least 60 youth will be served by a Chemical Dependency Counselor by December 31, 2020.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date:  <u>January 2020</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, 5 youth and in 2019 Jan-June 19 youth received assessment by CDP</p>	<p>Tracked on CAYS Program database.</p>

EVALUATION WORKSHEET

		<p>50% of youth served by Chemical Dependency Professional will engage in ongoing services (attended appointment) wherever they feel most safe.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input checked="" type="checkbox"/> Fidelity measure: <i>self-report checklists</i></p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>January 2020</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2019 Jan-Jun 63% (12) youth engaged in ongoing services in the community.</p>	<p>Referrals to tracked on CAYS Program database.</p>
<p>Behavioral health therapy and wrap-around services (provided through intensive case management) will support seriously emotionally disturbed youth to make progress toward stability.</p>	<p>Provide intensive case management that will provide necessary resources, job training, and housing services with a focus on family reunification.<sup>2</sup></p>	<p>75% of homeless youth working with therapist participate in <u>case management services</u> and complete a Housing Stability Plan that includes education and employment goals when appropriate.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input checked="" type="checkbox"/> Fidelity measure: <i>self-report checklists</i></p>	<p><input checked="" type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>January 2020</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, (54) 86% youth and in 2019 Jan-Jun, (26) 49% enrolled into case management project 90 youth.</p>	<p>Homeless Management Information System and The Coffee Oasis Youth Program Database.</p>
		<p>55% of homeless youth complete case management services and exit into <u>permanent housing</u> with a focus on family reunification whenever possible.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long</p> <p>Start date: <u>January 2020</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, (16) 40% exited and in 2019 Jan-Jun, 42% (11) youth entered safe and stable housing. 2020 project 50 youth enter safe and stable housing.</p>	<p>Homeless Management Information System and The Coffee Oasis Youth Program Database.</p>

EVALUATION WORKSHEET

<p>Assess participant satisfaction with program services</p>	<p>75% of homeless youth within case management agree or strongly agree that they are satisfied with program services quarterly.</p>	<p><input type="checkbox"/> Output  <input checked="" type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                  Start date:  <u>June 2019</u>                  Frequency:  <input type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>In 2018, 92% of youth and in 2019 Jan-Jun 89% of youth gave feedback they were satisfied with program.</p>	<p>Participant survey form recorded in The Coffee Oasis Youth Program database.</p>
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## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: The Coffee Oasis

Project: Homeless Youth Intervention

Accrual       Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ -	0%	\$ -	0%	\$ -	0%
WA State Revenue	\$ 125,081.00	3%	\$ 100,698.00	3%	\$ 74,400.00	2%
Local Revenue	\$ 1,058,049.00	29%	\$ 852,102.00	23%	\$ 900,000.00	23%
Private Funding Revenue	\$ 1,058,949.00	30%	\$ 1,340,820.00	36%	\$ 1,350,000.00	34%
Agency Revenue	\$ 1,339,941.00	37%	\$ 1,447,200.00	39%	\$ 1,600,000.00	41%
Miscellaneous Revenue	\$ 5,529.00	0%	\$ 15,000.00	0%	\$ 15,000.00	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 3,587,549.00</b>		<b>\$ 3,755,820.00</b>		<b>\$ 3,939,400.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 860,000.00	29%	\$ 1,060,000.00	31%	\$ 1,170,000.00	32%
Staff	\$ 792,000.00	27%	\$ 940,000.00	28%	\$ 980,000.00	27%
Total Benefits	\$ 84,322.00	3%	\$ 147,072.00	4%	\$ 200,000.00	5%
<b>Subtotal</b>	<b>\$ 1,736,322.00</b>	<b>59%</b>	<b>\$ 2,147,072.00</b>	<b>63%</b>	<b>\$ 2,350,000.00</b>	<b>64%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 113,388.00	4%	\$ 125,000.00	4%	\$ 100,000.00	3%
Office Supplies	\$ 59,452.00	2%	\$ 65,000.00	2%	\$ 70,000.00	2%
Cost of Goods Sold	\$ 502,161.00	17%	\$ 506,520.00	15%	\$ 560,000.00	15%
<b>Subtotal</b>	<b>\$ 675,001.00</b>	<b>23%</b>	<b>\$ 696,520.00</b>	<b>21%</b>	<b>\$ 730,000.00</b>	<b>20%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 20,185.00	1%	\$ 20,000.00	1%	\$ 25,000.00	1%
Audit/Accounting	\$ 7,500.00	0%	\$ 8,000.00	0%	\$ 8,400.00	0%
Communication	\$ 14,876.00	1%	\$ 16,000.00	0%	\$ 17,000.00	0%
Insurance/Bonds	\$ 19,397.00	1%	\$ 20,000.00	1%	\$ 22,000.00	1%
Postage/Printing	\$ 12,076.00	0%	\$ 14,000.00	0%	\$ 15,000.00	0%
Training/Travel/Transportation	\$ 13,401.00	0%	\$ 15,000.00	0%	\$ 20,000.00	1%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 87,435.00</b>	<b>3%</b>	<b>\$ 93,000.00</b>	<b>3%</b>	<b>\$ 107,400.00</b>	<b>3%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ 27,944.00	1%	\$ 36,000.00	1%	\$ 40,000.00	1%
Utilities	\$ 83,362.00	3%	\$ 94,800.00	3%	\$ 100,000.00	3%
Rent/Lease/Mortgage	\$ 68,887.00	2%	\$ 70,000.00	2%	\$ 73,000.00	2%
Fees/Dues/Licenses/Taxes	\$ 117,236.00	4%	\$ 125,000.00	4%	\$ 130,000.00	4%
Youth Resources/Stipends	\$ 54,676.00	2%	\$ 65,000.00	2%	\$ 70,000.00	2%
<b>Subtotal</b>	<b>\$ 352,105.00</b>	<b>12%</b>	<b>\$ 390,800.00</b>	<b>12%</b>	<b>\$ 413,000.00</b>	<b>11%</b>
<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Depreciation	\$ 67,910.00	2%	\$ 70,000.00	2%	\$ 73,000.00	2%
<b>Subtotal</b>	<b>\$ 67,910.00</b>	<b>2%</b>	<b>\$ 70,000.00</b>	<b>2%</b>	<b>\$ 73,000.00</b>	<b>2%</b>
<b>Total Direct Expenses</b>	<b>\$ 2,918,773.00</b>		<b>\$ 3,397,392.00</b>		<b>\$ 3,673,400.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: The Coffee Oasis

Project: Homeless Youth Intervention

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 110,688.00	\$ 57,847.00	52%	\$ 98,538.19	\$ (12,149.81)	-11%
Staff	\$ 147,098.00	\$ 76,875.00	52%	\$ 178,347.03	\$ 31,249.03	21%
Total Benefits	\$ 21,600.00	\$ 8,221.00	38%	\$ 4,200.00	\$ (17,400.00)	-81%
<b>SUBTOTAL</b>	<b>\$ 279,386.00</b>	<b>\$ 142,943.00</b>	<b>51%</b>	<b>\$ 281,085.22</b>	<b>\$ 1,699.22</b>	<b>1%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ 3,600.00	\$ 1,565.00	43%	\$ 3,600.00	\$ -	0%
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ 1,200.00	\$ 1,200.00	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ 2,400.00	\$ 2,400.00	#DIV/0!
% Indirect (Limited to 5%)	\$ 16,093.00	\$ 7,596.00	47%	\$ 8,432.55	\$ (7,660.45)	-48%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 19,693.00</b>	<b>\$ 9,161.00</b>	<b>47%</b>	<b>\$ 15,632.55</b>	<b>\$ (4,060.45)</b>	<b>-21%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Youth Resources	\$ 2,400.00	\$ 845.00	35%	\$ 2,400.00	\$ -	0%
Motel Vouchers	\$ -	\$ -	#DIV/0!	\$ 4,800.00	\$ 4,800.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 2,400.00</b>	<b>\$ 845.00</b>	<b>35%</b>	<b>\$ 7,200.00</b>	<b>\$ 4,800.00</b>	<b>200%</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 301,479.00</b>	<b>\$ 152,949.00</b>	<b>51%</b>	<b>\$ 303,917.77</b>	<b>\$ 2,438.77</b>	<b>1%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Come Alive Youth Services

Project: Homeless Youth Intervention

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 67,676.00	\$ 35,192.00	52%	\$ 54,145.73	\$ (13,530.27)	-20%
Staff	\$ 93,006.00	\$ 48,363.00	52%	\$ 99,765.88	\$ 6,759.88	7%
Total Benefits	\$ 12,000.00	\$ -	0%	\$ -	\$ (12,000.00)	-100%
<b>SUBTOTAL</b>	<b>\$ 172,682.00</b>	<b>\$ 83,555.00</b>	<b>48%</b>	<b>\$ 153,911.61</b>	<b>\$ (18,770.39)</b>	<b>-11%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 172,682.00</b>	<b>\$ 83,555.00</b>	<b>48%</b>	<b>\$ 153,911.61</b>	<b>\$ (18,770.39)</b>	<b>-11%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: The Coffee Oasis**

**Project: Homeless Youth Intervention**

**Description**

Number of Professional FTEs	6.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>6.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 254,009.60
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 254,009.60</b>
Total Payroll Taxes	\$ 22,875.62
Total Cost of Benefits	\$ 4,200.00
Total Cost of Retirement	\$ -
<b>Total Payroll Costs</b>	<b>\$ 281,085.22</b>

## MEMORANDUM OF UNDERSTANDING

THIS MEMORANDUM OF UNDERSTANDING ("MOU") dated effective January 1 2020 is made by and between Come Alive Youth Services, LLC with its principal place of business at 3367 NE Iverson Rd Poulsbo WA 98370, and The Coffee Oasis, having its principal place of business at 837 4th Street, Bremerton, WA 98337 ("TCO").

This MOU sets forth the basic terms of condition under discussion between Come Alive Youth Services and TCO with respect to the creation and delivery of locations for Come Alive Youth Services to provide confidential counseling services to clients of TCO. The summary of basic terms and conditions under discussion are as follows:

1. **Location:** TCO will provide secure and confidential rooms for use by Come Alive Youth Services. The rooms will have doors that closes such that conversations are not audible from the exterior. TCO will provide secure filing cabinets as needed on site
2. **Clients:** TCO will advertise the presence and availability of Come Alive Youth Services at the locations to the TCO clients and a means of referral of clients.
3. **Service:** Come Alive Youth Services will handle scheduling, counseling, and all paperwork relating to the counseling services provided to TCO clients. Come Alive Youth Services will provide drop-in therapy services within TCO centers and youth with in Hope Homes housing services will have direct access to CAYS for support to ensure our agencies are offering services to the homeless youth and young adults for Kitsap. Come Alive Youth Services will commit the following resources:
  - 2 FTE Therapist
  - 1 FTE Chemical Dependency Counselor
  - Administrative oversight of therapists and counselor with regular supervisory guidance

To serve client workload during regular TCO business hours. TCO shall have no role or responsibility with respect to the counseling services provided. However, will require monthly reporting for TCO outcomes as laid out by the 1 tenth of 1 percent grant (See attached). TCO will provide a coordination manager for crisis services and support of services for Come Alive Youth Services through TCO continuum of services

4. **Time Frame:** This agreement will commence on January 1<sup>st</sup> 2020 and remain effective for until December 31<sup>st</sup> 2020. Either party may terminate the agreement with 30 days' notice.
5. **No Partnership or Joint Venture.** The parties to this MOU do not intend, by this MOU alone, to create a partnership, principal/agent, master/servant or joint venture relationship, and nothing in this agreement shall be construed as creating such a relationship between the parties.
6. **Indemnification:** Each party will hold harmless and indemnify the other against and from any damage, loss, expense or liability including attorneys' fees and related costs, resulting from the performance of any of the terms, covenants and conditions herein. This hold harmless and indemnification shall survive the termination

of this Agreement from any cause whatsoever. If any claim or demand is asserted which is covered by this indemnification, the indemnified party shall give prompt written notice of such claim or demand to the indemnifying party so as to allow the indemnifying party the opportunity to contest and defend against such claim or demand.

7. **Notices.** All notices required pursuant to this MOU shall be in writing directed to the addresses set forth in this MOU or to such other addresses as may be provided in writing by any party to the other during the term of this MOU.

8. **Expenses.** Come Alive Youth Services LLC and TCO will each be responsible for their respective legal, accounting, advisory, and any other expenses relating to the negotiation, consummation, and operation of this transaction. TCO will provide \$147,054 to Come Alive Youth Services as awarded by the KITSAP COUNTY HUMAN SERVICES 1/10th of 1% Mental Health, Chemical Dependency and Therapeutic Courts grant. Come Alive Youth Services will submit a monthly invoice to TCO to receive payment for services of 2 FTE Therapist, 1 Chemical Dependency Counselor, and 3 % Administration costs. For sustainability TCO will provide 80% of the funding while CAYS will provide 20% of the ongoing funding All other related costs and supplies will be provided by Come Alive Youth Services.

9. **Governing Law and Disputes.** For all disputes or controversies which may arise, in connection with this MOU, its construction, interpretation, effect, performance or nonperformance, or the consequences thereof, the parties hereby consent to the exclusive jurisdiction of the Superior Court of Kitsap County, Washington.

10. **Authority:** The undersigned hereby represent and warrant individually and officers or members of the respective parties that they have the authority to execute this MOU.

11. **Effect:** It is understood that this MOU does not constitute a binding contract and that the parties do not intend to be legally bound until a definitive and final contract is executed by the parties; provided, however, that the parties agree to be legally bound by the provisions of Sections 5 through 10, which shall be binding in accordance with their material terms.

12. **Counterparts and Facsimiles.** This MOU may be executed in separate counterparts, neither of which need contain the signatures of both parties, each of which shall be deemed to be an original, and both of which taken together constitute one and the same instrument. For purposes of this MOU, facsimile, scanned, or digitally transmitted signatures shall be deemed to be original signatures. In addition, if any of the parties sign facsimile or scanned copies of this MOU, such copies shall be deemed originals.

IN WITNESS WHEREOF, the parties hereto have executed this MOU, effective as of the date first set forth above, in duplicate and each shall retain one original each hereof.

Come Alive Youth Services LLC

The Coffee Oasis



By: Dave Seacrest  
Its Executive Director



By: Patrick A Steele  
Its Senior Director of Youth Programs

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name:   Kitsap County District Court; Behavioral Health Court  

Primary Contact:   Claire Bradley     cabradle@co.kitsap.wa.us     360.337.4468    
Name Email Phone

Organization Address:   614 Division Street, MS-25, Port Orchard, WA 98366    
Street City State Zip

Federal Tax ID Number:   91-6001348   Legal Status of Organization:   County Government  

Individual Authorized to Sign Contracts:   Clint Casebolt     District Court Administrator    
Name Title

**Continuation Grant Proposal Information**

Proposal Title:   Kitsap County District Court: Behavioral Health Court  

Number of Individuals Screened:   181   Number of Individuals Served:   62  

Requested Amount of Funding:   \$318,156.00   Matching Funds:   \$0  

**Please check which area(s) of the Continuum this project addresses:**

<input checked="" type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input checked="" type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input checked="" type="checkbox"/> Crisis Intervention	<input checked="" type="checkbox"/> Recovery Support Services
<input checked="" type="checkbox"/> Outpatient treatment	

**Please check which area(s) of the County this project is focused:**

<input type="checkbox"/> South Kitsap	<input type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

The Behavioral Health Court (BHC) in Kitsap County District Court is respectfully requesting continued funding to support its burgeoning program. The program has a demonstrated need for and is therefore requesting funds for: two full-time Behavioral Health Specialist (BHS), one full-time Treatment Court Compliance Specialist, and a dedicated Public Defender (PD). Our program provides essential resources, education, and judicial monitoring to help improve the quality of life for Kitsap County residents with mental health and substance use disorders, reducing future involvement in the criminal justice system. Participant success is improved with structure, treatment, medication management, stable housing, and consistent monitoring.

  CLINT CASEBOLT     ADMINISTRATOR     072419    
Signature Title Date

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program: Behavioral Health Court

Organization Submitting: Kitsap County District Court

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			MNO
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			MNO
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			MNO
Organization did receive funding for this project in 2019	X			MNO
Attachment A – Continuation Grant Proposal Summary Page	X			MNO
Attachment B – Continuation Grant Proposal Checklist Form	X			MNO
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			MNO
Attachment C – Continuation Grant Proposal Narrative Template	X			MNO
Proposal Narrative is limited to 10 pages	X			MNO
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			MNO
Attachment E – Total Agency Budget Form	X			MNO
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			MNO
Indirect is limited to 5%	X			MNO
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			MNO
Organization submitted Attachment G for each Sub-Contractor	X			MNO
Sub-Contractor indirect limited to 5%	X			MNO
Attachment H – Continuation Grant Proposal Project Salary Summary	X			MNO
Attachment I – Letter of Resource Commitment (optional)	X			MNO
No other attachments are included	X			MNO
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			MNO
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			MNO

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

Mason-Dalry  
Signature of Individual Preparing Proposal

07/23/2019  
Date

LINT CASBOLT  
Signature of Organization's Chief Executive

072419  
Date

**KITSAP COUNTY DISTRICT COURT: BEHAVIORAL HEALTH COURT**

**PROJECT NARRATIVE**

**1. Project Description**

**A. Project Design**

The Kitsap County District Court Behavioral Health Court (BHC) is a standard therapeutic court that adheres to the 10 Key Components of Drug Courts Model with attention to The Essential Elements of a Mental Health Court<sup>1</sup>. The BHC program integrates treatment for both chemical dependency and mental health with justice system case processing using a non-adversarial approach and coordinated multidisciplinary response to participants' compliance. Participants are identified early through partnership with the Prosecutor's Therapeutic Court Unit (TCU) and continued collaboration with Kitsap Recovery Center (KRC) and Kitsap Mental Health Services (KMHS) allows for access to a continuum of substance use and mental health assessment and treatment. Eligible participants are screened by mental health professionals. Policies and procedures are in place for information sharing to facilitate communication among the court team<sup>2</sup>. Terms of participation are clearly defined in written diversion agreements and the program is a minimum of eighteen months in duration. Amendment or dismissal<sup>3</sup> of charges results upon successful completion of the program conditions. BHC accepts both felony and misdemeanor charges, provided charges are not precluded per Revised Code of Washington (RCW) Chapter 2.30.030 or our eligibility standards.

The 2014 Kitsap County Behavioral Health Strategic Planning Team (BHSP) established a continuum of care to identify gaps in the behavioral health needs of Kitsap County residents. The BHSP recommended expansion of mental health and substance abuse outreach, assessment, intervention, referral and treatment in adult therapeutic courts to address such gaps in services for individuals with mental illness and substance use disorders in the adult criminal justice system (Gap #3). The BHC Program aims to 1) reduce the number of people in Kitsap County who cycle through the criminal justice systems, 2) reduce the number of chemically dependent and mentally ill adults from further criminal justice involvement, and 3) improve the health status and well-being of Kitsap County residents. To accomplish these goals, District Court respectfully requests continued funding to support its burgeoning program.

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<sup>1</sup> The National Association of Drug Court Professionals (NADCP) 10 Key Components of Drug Courts provides definition for structural foundation for therapeutic courts, but there are significant differences between drug and mental health courts that require specialized attention hence the need to have additional guidance through The Essential Elements of a Mental Health Court.

<sup>2</sup> Includes court team members, collaborators, and stakeholders.

<sup>3</sup> It is projected that BHC will eventually take post-conviction cases, provided resources are available. Upon successful completion of the program participants will have the conviction vacated.

The funds previously awarded by the Kitsap County Mental Health, Chemical Dependency, and Therapeutic Court Grant have provided the BHC Program with the ability to develop a strong foundation to support program participants, allowed for timely participant identification and access to treatment services, reduce program entrance wait times, and provide much needed consistent legal representation for participants. With funding received, Behavioral Health Court has screened 181 individuals with 62 participants actively engaging in the diversion program.

The funding request for this proposal varies from our previous proposals. The proposal maintains funding requests for a dedicated public defender and two (2) 1.0 FTE Behavioral Health Specialists (BHS), but adds for a Compliance Specialist, participant needs gap funding<sup>4</sup>, and attendance at the 2020 Washington State Association of Drug Court Professionals Conference. Our request for additional funding aims to continue our efforts to align with therapeutic court best practice standards, including adherence to the 10 Key Components of Drug Courts and Essential Elements of a Mental Health Court.

The BHC Program Manager and Behavioral Health Specialists (BHS) have collaborated to fill the need for court compliance but continuing in this manner is problematic. Most notably, the role of the BHS is primarily intended to be a source of support for the participant and act as a liaison between the court system and treatment providers<sup>5</sup>. The BHS in a compliance role violates the basic objective of a therapeutic support role and causes participant confusion. A more detailed explanation of funding need and adjustment is included in Compliance Monitoring under Barriers to Implementation and Budget Modifications under Budget Narrative.

## **B. Outreach**

BHC began the year without a waitlist for the first time since program inception and we credit this to the precursory legal review and distribution of participant referrals by the Prosecutor's TCU. With such efficiencies our referrals slowed considerably, and we found ourselves wondering if we would have enough interest to support our plan for an additional calendar<sup>6</sup>. However, our referrals from the Prosecutor's TCU have increased dramatically in the past two months with seventeen current potential participants in referral status. We again find ourselves at a moment where the demand is greater than our capability<sup>7</sup>.

We continue to build new relationships and collaborate with partner agencies to ensure knowledge about and access to our program is readily available. The Prosecutor's TCU has created a therapeutic court application that is accessible via their website. BHC has a webpage and brochure with program information and resources. Program brochures

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<sup>4</sup> To address gaps in participant housing, transportation, and urinalysis testing not covered by insurance when no other viable alternative exists.

<sup>5</sup> Not to act as a probation or compliance officer.

<sup>6</sup> The decrease in referrals was, in large part, due to the TCU's adjustment in procedure and uncertain staffing at the beginning of the year.

<sup>7</sup> Due to staffing issues discussed under Barriers to Implementation.

are posted in the Office of Public Defense (OPD) and Kitsap County Jail (KCJ) for defendant access. Further, the BHC Program Manager attends the Criminal Practices and Procedures meeting which brings together judges, court administration, defense counsel, and the prosecuting attorneys to provide program information and referral procedures. The Behavioral Health Specialists periodically meet with outpatient teams at KMHS to discuss the program.

Objective eligibility criteria help to provide equivalent program access to historically disadvantaged groups. Periodic program data reviews assess adherence to equivalent retention, treatment/resource allocations, incentives/sanctions, and legal dispositions to monitor for unintentional bias against historically disadvantaged groups. Further, our partner treatment agencies maintain compliance with Washington Administrative Code (WAC) requiring documentation of annual cultural competency training. The judicial and court administration annual conferences include training components addressing cultural diversity. Our team hopes to attend the Washington State Association of Drug Court Professionals Conference to expand our knowledge and better meet the diverse needs of program participants.

## **2. Accomplishments to Date**

### **A. Evaluation**

Our program aims to provide resources, education, and judicial monitoring to help improve the quality of life for those with mental health and substance use disorders in Kitsap County, thereby reducing future involvement in the criminal justice system. We hope to show a reduction in jail days, recidivism rates, and homelessness. Participants will gain confidence in the legal system, greater independence, and an increased sense of well-being. We continually evaluate the program and make changes to policies and procedures based upon these evaluations.

BHC maintains 28 active program participants with 12 new admissions, 4 terminations, and 6 graduations in 2019. Our Behavioral Health Specialists processed 41 program referrals thus far. Unless otherwise noted, all reported outcomes below reference reporting period 01/01/19-07/01/19.

**Goal:** Reduce the number of jail days for program participants by 50%

Our program resulted in a remarkable 78% reduction in jail days for participants.

**Goal:** Maintain (or reduce) recidivism rates for program participants below the following thresholds: 1) current: 15%, 2) 6 month: 30%, 3) 12 month: 40%, and 4) 18 month: 50%

Five (of 28) active participants were charged with a new offense (9%). Those who graduated less than 6 months ago and those 13-18 months post-graduation have no

new charges. Two (29%) participants in the 6-12 months post-program group with new charges<sup>8</sup>.

**Goal:** Reduce homelessness among program participants by 30%

Our program resulted in a 36% reduction in homelessness among program participants.

**Goal:** Increase ratio of incentives to sanctions to best practice standards of 4:1

Our current incentive to sanction ratio is 3:1. We continue to develop methods for recognition of participant positive behavior to increase use of incentives to meet best practice standards. The team is using an incentive matrix and brainstorming new ideas for cost-free incentives.

**Goal:** Increase successful program completion rate to 25%

As more participants meet the time threshold for program duration (minimum of eighteen months), we continue to experience a rise in graduation rates. Six participants (16%) graduated this year. The program-to-date graduation rate has increased to 29%.

**Goal:** Participants regain/obtain independence through vocation (50%) and reinstatement of their driver's license (50%)

We have exceeded our goals with 71% of participants reengaging in the workforce or returning to school and an impressive 88% of participants reobtaining their license; no small feat considering many of them have not held a license in over ten years.

**Goal:** 75% of program participants report favorable service experience and confidence in the legal system.

We continue to receive favorable feedback from exiting participants<sup>9</sup> with a 100% satisfaction rate for reporting period 01/01/18-07/01/19. Just as impressive, our overall program inception to date rate is 93%. An additional measure to assess the accuracy of our theory regarding increased confidence in the legal system is confirmed with 100% of exiting participants reporting confidence. Last week a current participant stated in court, "this program has definitely changed my outlook on the judicial system in general."

**Goal:** 70% of participants report favorable outcomes with social relationships and overall life satisfaction.

We chose to track participant response to favorable outcomes with social relationships and overall life satisfaction as response to those measures provide an outlook on participant quality of life. Seventeen (17) participants (71%) of participants are content with their social relationships and 22 participants (92%) are pleased with their overall life

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<sup>8</sup> Tracked charges do not include minor traffic related offense.

<sup>9</sup> Regardless whether exit is due to termination, graduation, or transfer.

experience. Responses to these measures are highly fluid based on participant progress in the program and external events.

## **B. Barriers to Implementation**

(1) **Housing.** Housing remains the greatest barrier to program and participant accomplishment. Program compliance comes secondary when basic needs go unmet. Our program has partnered with Housing Solution Center, West Sound Treatment Center, Kitsap Recovery Services, Eagle's Wings, Naval Street Housing, Oxford Housing, and other local community entities to provide participants with housing options. Despite our best collaborative efforts, the resources for housing remain lacking county-wide with more community need than resources available. Housing, if found, is often temporary or tenuous at best. A comparative analysis between graduated and terminated participants validates housing as an essential element for success. During program duration, graduated BHC participants remained housed 96% of the time while terminated BHC participants were only housed 50% of the time.

(2) **Staffing.** At the outset of this year, BHC was fully prepared to execute our plan to expand the program by adding an additional court calendar and increasing participant capacity given we were fully staffed, and the Prosecutors Office had been approved for grant funding to support therapeutic court programs. Due to previous commitments, the Prosecutors Office was not able to supply our dedicated Deputy Prosecuting Attorney (DPA) until mid-March; she subsequently went on maternity leave at the end of June. BHS JoAnnia Wahrmond was recruited with greater pay by the Trueblood program and quit the team in May. BHS Matt Duthie has taken on the entire BHC caseload in the interim and filling a Master's Level grant funded position with six months remaining has proven difficult. Public Defender Maureen McKeeman vacated her position in June for a position with the City of Bremerton Prosecutors Office. Her associate Brandon Miller was awarded the remainder of the BHC contract and is in the process of familiarizing himself with the program participants and requirements. Social service partner agencies<sup>10</sup> have also struggled with staffing retention issues. High turnover rates can lead to participant confusion and setbacks. Program participants are often vulnerable and have trauma histories that further complicate development of therapeutic relationships and trust.

(3) **Compliance Monitoring.** BHC Program team members and partners meet on a quarterly basis to review program policies, procedures, practices, and assess alignment with program goals and objectives. During the last quarter of 2018, the team worked to develop coordinated response strategies to address participant non-compliant behaviors as well as encourage compliance. The team developed comprehensive incentive and sanction matrices to address such issues. The matrices were developed to include options for cuing into participant competence and motivation based on program phase level but were intentionally created with several response options to allow for reasonable discretion and individualized response. While team response to behavior has improved and participants are better informed of what

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<sup>10</sup> Includes KMHS and our substance use treatment agency partners.

behaviors may elicit an incentive or sanction, the team has struggled in reliable and consistent detection of participant compliance.

In its infancy the program made a conscious decision to have participant compliance co-monitored by the Behavioral Health Specialist and Program Manager roles. This decision was due to the BHS having ready access to treatment attendance records and was merely a stopgap measure to ensure program conditions were followed by participants. However, the BHS role was never intended to act in a compliance fashion as that negates the core philosophy of the role in providing therapeutic support and linkage between systems to the participant. BHS Matt Duthie has noted several times the conflictual nature of engaging participants in discussion regarding non-compliance with court orders. Likewise, participants have struggled with understanding if Matt is there to provide support or "get me in trouble." The BHS role was envisioned to 1) engage potential participants in resource needs and mental health assessments, 2) make the appropriate social services referrals, 3) provide encouragement and support for engagement in treatment, 4) maintain supportive contact with program participants once enrolled, and 5) use motivational interviewing techniques to encourage compliance<sup>11</sup>.

The position of District Court Treatment Court Programs Manager and Probation Services Supervisor was created in 2017 and is funded by the District Court. The role was designed to 1) develop policies and procedures, ensure program goals are being met, maintain quality assurance, communicate with stakeholders, plan projects, track progress, recommend process improvement, and provide supervision to program staff for all District Court therapeutic court programs and 2) supervise the Probation Services department of District Court, including the direct supervision of two (2) 1.0 FTE staff. Due to District Court supervisory staff turnover, the BHC Program Manager has had to take a more active role in other District Court matters including day-to-day supervisory operations, direct supervision of five (5) 1.0 FTE staff, and on-boarding/training of new supervisory staff. The greater reliance on the Program Manager in other areas has resulted in a reduction in time spent on BHC participant compliance matters.

Best practice standard guidelines recommend therapeutic court supervision monitors maintain caseloads between 30:1 and 50:1. These guidelines assume the compliance specialist is primarily assigned to a treatment court and not hampered with other professional obligations. It should be evident based on the information provided that the BHS and Program Manager are incapable and unsuited to fill the role of monitoring participant compliance<sup>12</sup>. Consistent and swift detection of participant non-compliance issues is imperative to program fidelity and participant success. Behavior modification techniques are not effective when delivery of sanctions is delayed or non-existent.

(4) **Data Management and Evaluation**. BHC has experienced some difficulties with maintenance and evaluation of participant data due to lack of an automated data management system. Presently, information for BHC is collected and tracked across

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<sup>11</sup> Motivational interviewing is a therapeutic approach for helping participants identify and resolve ambivalence that has prevented positive or beneficial change.

<sup>12</sup> Current program census is 28 with an additional 16 pending referrals.

several Excel spreadsheets. While the raw data is available, there is no ability to assess the program across periods of time. Further, human error in calculation may lead to inaccuracies in reporting. Kitsap County District Court (KCDC) is in the process of soliciting requests for proposal of a new case management system for all District Court case processing. It is the hope of this program that the newly selected case management system will be able to address treatment court monitoring and evaluation concerns.

### **C. Key Accomplishments**

**Reduced Homelessness.** A lack of stable housing is a definite barrier to success for our participants. We have had to come up with creative alternatives for housing in our efforts to keep participants stable while searching for more permanent housing solutions. Through hard work and our strong relationships with partner agencies, participant homelessness was reduced by 36% January 2019 through July 2019.

**Program Satisfaction.** Participants have responded with 100% satisfaction with their program experience regardless of exit method (i.e. termination or graduation) for the past 18 months (January 2018 through July 2019). A cumulative assessment of participant satisfaction program inception to date yields a 93% positive experience rate. Participants have returned to court after graduation to request the BHC Judge preside over their marriage or to obtain a homemade key chain<sup>13</sup>.

**Participant Independence.** Due to the individualized nature of our program and varying degree of illness severity among program participants, BHC team members made a conscious decision not to require employment or education as a conditional element though it is encouraged, and resources are offered. Each quarter, we continue to be impressed by the number of participants who seek reengagement in education and employment (71%) or reinstate their driver's license (88%). Program participants express a desire to "live a normal life" and "be a good member of society" and these tasks allow them to gain independence and develop healthy habits. Many of our participants have expressed a sense of pride felt for the first time in many years.

**Partnership with Kitsap Recovery Center.** KRC and BHC have developed a strong partnership to promote the chemical dependency recovery of program participants. All in-custody program referrals are quickly evaluated by a chemical dependency professional (CDP); if inpatient treatment is warranted, a bed date is secured, and transportation is arranged. Ashley Sonju has been a pleasure to work with and has increased our team's chemical dependency clinical acumen.

## **3. Budget Narrative**

### **A. Funding Request**

We are requesting continued funding to contract with the Office of Public Defense for a 1.0 FTE dedicated public defender in the amount of \$45,000 with no benefits or indirect

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<sup>13</sup> The BHC Judge makes a keychain for every participant that obtains or re-instates their driver's license. Participants appreciate these tokens immensely; one participant posted his on social media stating, "I actually got something other than a court order from the Judge."

costs and funding for two (2) 1.0 FTE Behavioral Health Specialists (\$175,122.00) through subcontracted services with KMHS. Subcontractor indirect costs are limited to 5% of the subcontractor budget; overall project indirect costs are \$12,702 (4.1% of overall project budget).

This year we are requesting \$77,016 (Staff and Total Benefits) in funds to support a 1.0 FTE Compliance Specialist position to work with our therapeutic courts and one-time equipment costs of \$5,800 associated with onboarding new personnel (Equipment<sup>14</sup>). Communication costs of \$450 will support the initial price of a mobile device and one-year of cellular phone services. Information services support costs total \$4,005 for one year (Ongoing Operations and Maintenance: Other).

Additional funding requests include \$1,400 to cover registration fees for the 2020 Washington State Association of Drug Court Professionals (WSADCP) for the entire BHC team (Training/Travel/Transportation) and \$5,000 in monies to support participant needs funding gaps (Ongoing Operations and Maintenance: Other). The BHC team has never attended WSADCP training and this training would benefit the team greatly.

## **B. Past Expenditures and Budget Modifications**

As of July 1, we have spent \$85,941.61 of our 2019 Treatment Sales Tax Grant funding<sup>15</sup>. Expenditures for the public defender subcontract are precisely where we would expect to see them at the midway point and quick turnaround in filling the vacated contract position will allow us to maintain course. The KMHS subcontract is below threshold for rate of expenditure. The biggest contributors to lack of expenditure are the unexpected vacancy of one Behavioral Health Specialist position and lack of use of training/travel/transportation and software funds. Funding requests for 2020 were adjusted downward 44% by KMHS in response to the lack of budget necessity.

Our program continues to experience rapid expansion and development. Our funding request has three significant changes that will help support the program and participants through continued growth. Most notably, our program is requesting funding to support the addition of a Therapeutic Court Compliance Specialist. Real-time compliance monitoring has become difficult with increased referrals, program census, and staffing retention issues. It is no longer feasible for the BHS and Program Manager to monitor participant compliance. As previously noted, best practice standards recommend caseloads between 30:1 and 50:1 without involvement in other professional obligations. A dedicated Therapeutic Court Compliance Specialist position will allow our program to expand its capability to monitor participant progress, conduct home and employment visits, and enforce curfews and travel restrictions. Moreover, this individual will engage participants in evidenced based risk, need, and responsivity assessments to develop supervision plans and deliver cognitive-behavioral interventions designed to improve participant problem-solving skills and alter criminal-thinking patterns.

Behavioral Health Court is requesting \$5,000 in participant needs gap funding to cover the cost of much needed temporary housing support services, transportation, and

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<sup>14</sup> Funding will cover purchase of a desk, chair, computer, scanner, and signature pad.

<sup>15</sup> We received \$232,711.00 in Treatment Sales Tax Grant funding for 2019.

urinalysis testing when no other viable alternative exists. Program participants are often assessed by chemical dependency personnel as requiring intensive inpatient co-occurring disorder (COD) treatment and available beds tend to be in Yakima or Spokane. Due to physical distance, discharge plans are tenuous at best and often not the most appropriate option for the participant when it comes to housing. This funding will provide opportunities to cover the expense of a hotel for one to three days while finding more appropriate sober housing solutions. Further, this funding will help offset the cost of transportation<sup>16</sup> when partner agencies are unable to tap into other funding sources and urinalysis testing when insurance companies decline payment for testing deemed not to fit medical necessity yet are essential to maintaining best practice standards for therapeutic courts.

Prior to program inception, members of the planning and implementation committee conducted site visits to learn from other mental health and drug court programs about best practice standards and develop policies and procedures. In April 2018, District Court funded all expenses for the BHC Program Manager to attend the three-day Arizona Problem Solving Courts Conference for continued education on the specialized needs of therapeutic courts. Unfortunately, the entire BHC team has not had the opportunity to attend continuing education workshops or conferences specific to treatment courts due to limited funding. The 10 Key Components of Drug Court and Essential Elements of Mental Health Courts recommend interdisciplinary education occur on an annual basis to support better program outcomes and increase cross-system knowledge. As such, our program is requesting \$1,400 in funding for the entire team to attend the 2020 Washington State Association of Drug Court Professionals (WSADCP) Conference.

#### **4. Sustainability**

##### **B. Sustainability Plan**

Kitsap County District Court judicial leadership and administration are highly attentive to exploration of other funding sources to support its therapeutic court programs. With the continued growth of BHC, expected growth of Human Trafficking Court (HTC), and intent to expand to include other therapeutic court options, District Court has requested funding through the County General Fund (budget process) for 1.0 FTE Compliance Specialist. It is expected the Kitsap County Commissioners will either support funding for this position through the County General Fund or "Kitsap County Mental Health, Chemical Dependency and Therapeutic Court" (Treatment Sales Tax) funds. Refusal, reduction, or termination of funding will drastically affect the number of people BHC can help and the quality of services we can provide.

The BHC Program Manager recently attended the Criminal Justice Treatment Account (CJTA) meeting to leverage \$5,000 in participant needs gap funding<sup>17</sup> to support both the Behavioral Health Court and Human Trafficking Court programs. To our dismay,

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<sup>16</sup> Examples include bus tickets, taxis, ferries, or other transportation methods for getting the participant to and from treatment locations.

<sup>17</sup> Identified as transportation, housing support services, and urinalysis testing for those participants with co-occurring disorders.

some committee members felt District Court treatment courts did not “fit the bill” for receiving funds and denied our request. RCW 71.24.580 Criminal Justice Treatment Account indicates moneys in the account may be expended for “substance use disorder treatment and treatment support services for offenders with substance use disorder that, if not treated, would result in addiction, against whom charges are filed by a prosecuting attorney in Washington State. At present, 93% of BHC participants and 100% of HTC participants have co-occurring disorders and are engaging in or have completed chemical dependency treatment programs; all are charged with a crime by a prosecuting attorney in the state of Washington. Unbeknownst to the BHC Program Manager, continued discussions have ensued regarding our request and it is possible the CJTA committee may honor our request for participant needs gap funding. A firm decision will not be made until August at earliest. If the CJTA committee opts to approve our \$5,000 request, we will withdrawal the request for participant needs gap funding from our proposal.

Although our program is requesting \$1,400 in funds to attend the 2020 WSADCP Conference, discussions are already in progress to determine other methods for sustainability. We are working with county partners to determine suitability for Northwest High Intensity Drug Trafficking Area (NW HIDTA) funds as an option as well as reviewing departmental budgets for accessibility to training funds. Our request for training funds is a one-time submission to help promote team member compliance with education best practice standards.

Our program has developed secure partnerships with the Office of Public Defense, Kitsap County Prosecuting Attorney, Kitsap County Sheriff’s Office, Kitsap County Superior Court, Kitsap Mental Health Services, Kitsap Recovery Center, West Sound Treatment Center, and NAMI of Kitsap County. Through these partnerships, we have been able to be judicious in our request for funding through the Treatment Sales Tax. Each partner supports BHC with significant contributions of in-kind donations to include goods, services, and expertise<sup>18</sup>. In addition, our treatment agency partners can leverage Federal Medicaid funds for participant mental health and chemical dependency treatment, as well as urinalysis testing. We are grateful to have so many willing to contribute staff time to our program and participants. We continue to find new methods for collaboration and look forward to developing new partnerships in the coming years.

This proposal sets forth a plan to increase the capacity and quality of much-needed Behavioral Health Court services. Our Program Manager, funded by District Court, continues to provide support and promote efficiencies in the program, share resources with other programs, look for new innovations, and seek out federal, state, and local grant funding for the program. It should be apparent from in-kind contributions that the partnerships already forged in this program are strong and will continue to grow.

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<sup>18</sup> Please see attached Letters of Commitment in Attachment I.

PROJECT NAME: BEHAVIORAL HEALTH COURT

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and date</small>	G. SOURCE
Stabilize those in crisis in our criminal justice system.	-BHC takes referrals from law enforcement and/or jail staff at earliest opportunity (1 <sup>st</sup> responders). -BHS and defense attorney facilitate and provide wraparound service referrals to include housing solutions, medications, treatment, care coordination. -BHS works with jail medical/mental health, corrections, and CD treatment staff to provide quicker provision of service and reduce jail days. -Work with family members/natural supports of participants to provide stable environment for participants and provide resources to family members to cope/understand the illness.	Reduce the number of jail days for program participants by 50%	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/2020 Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Q2 2019: 78% reduction in number of jail days for program participants.	BHC Program Manager will compile from jail records in conjunction with law enforcement reports, defendant case histories, and court management records.
		Maintain (or reduce) recidivism (charge) rates for program participants below the following thresholds: <ul style="list-style-type: none"> <li>• Current: 15%</li> <li>• Post-Program (Graduates) 6 months: 30%</li> <li>• 12 months: 40%</li> <li>• 18 months: 50%</li> </ul>	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: 1/1/2020 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	<ul style="list-style-type: none"> <li>• Current: 7%</li> <li>• Post-Program Graduates 6 months: 0%</li> <li>• 12 months: 29%</li> <li>• 18 months: 0%</li> </ul> *All baseline data represents end Q2 2019.	BHC Program Manager will compile from law enforcement reports, jail records, defendant case histories and court management records.

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data endline</small>	G. SOURCE
Divert people suffering from mental illness from the jail, from the	-Coordinated efforts to assist in-custody defendants by established partnerships with other entities: KMHS, KSCO, KCI, Correct Care Solutions, WSTC and KRC.	Reduce homelessness among program participants by 30%.  Aim for a ratio of incentives to sanctions at 4:1 to maintain best practice standards for year 2020.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/2020</u>  Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other:	17/28 participants were homeless at outset of program; by 2019 Q2 end 7/28 remained homeless (or were homeless again); 36% reduction in homelessness for 6-month cohort.  Current: End Q2 (cummm) is 108/36 or 3:1	Self-report by program participants, interactions with natural supports, and coordination with treatment agencies working with participants.  BHC Program Manager will compile from court

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>consequences of conviction, from contact with law enforcement, avoid crisis, and provide resources to promote a productive life.</p>	<p>-Felony Case Diversion. -Misdemeanor Case Diversion -Probation Technical Violations diverted. - BHS and defense attorney facilitate and provide wrap around service referrals to include housing, medication, treatment, and care coordination. - Develop and foster collaboration between criminal justice system agencies, social agencies, treatment agencies. -Provide family support for the family members of Participants. -Provide positive reinforcement for accomplishments and swift, certain, and fair sanctions for program infractions.</p>	<p>Increase proportion of participants who successfully complete diversion program and avoid conviction to 35%.</p>	<p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure</p>	<p>Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____</p>	<p>Cumulative grad rate: 29% (program-to-date) 16% (2019 semi-annual)</p> <p>Start date: 1/1/2020 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: _____</p>	<p>BHC Program Manager will compile from: law enforcement reports, jail records, treatment records, defendant case histories, and court management records.</p>
		<p>Program participants regain / obtain their independence by:</p>	<p><input type="checkbox"/> Output</p>	<p><input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long</p>	<p>Current Vocacion: Q2 71% of participants have</p>	<p>Self-report by program participants</p>

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and/or Info	G. SOURCE
	<p>-Program Manager administers Satisfaction Survey at end-of-services (Likert Scale)</p>	<ul style="list-style-type: none"> <li>Obtaining a job or re-engaging with education: 60%</li> <li>Obtaining a driver's license: 60%</li> </ul>	<p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p>Start date: 1/1/2020</p> <p>Frequency:</p> <p><input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input checked="" type="checkbox"/> Other: _____</p>	<p>re-engaged in vocation</p> <ul style="list-style-type: none"> <li>Current Driver's License: 88% of participants have reinstated their driver's license</li> </ul>	<p>with verification from educational program and/or company.</p> <p>Self-report by program participants with verification from DOL records.</p>
	<p>-Program Manager administers Satisfaction Survey at end-of-services (Likert Scale)</p>	<ul style="list-style-type: none"> <li>80% of program participants report favorable feedback about service experience.</li> <li>75% of program participants report confidence in the legal system</li> </ul>	<p><input type="checkbox"/> Output</p> <p><input checked="" type="checkbox"/> Outcome: Participant satisfaction</p> <p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: 1/1/2020</p> <p>Frequency:</p> <p><input type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input type="checkbox"/> Other: _____</p>	<ul style="list-style-type: none"> <li>Q2 2019 (cummm): 100% report favorable feedback</li> <li>Q2 2019 (cummm): 100% report confidence in the legal system</li> </ul>	<p>BHC Program Manager engages participants in an Exit Survey.</p>
	<p>-BHS administers Quality of Life Survey every 3 months</p>	<p>70% of program participants* report</p>	<p><input type="checkbox"/> Output</p>	<p><input type="checkbox"/> Short</p> <p><input type="checkbox"/> Medium</p> <p><input checked="" type="checkbox"/> Long</p>	<p>Social Relationships Q2 2019: 71% (67% cum avg)</p>	<p>Quality of life survey</p>

A GOAL	B ACTIVITY	C SMART OBJECTIVE	D TYPE OF MEASURE	E TIMELINE	F BASELINE <small>Date and time</small>	G SOURCE
	(Likert Scale)	Favorable outcomes for the following: <ul style="list-style-type: none"> <li>• Social relationships</li> <li>• Overall life satisfaction</li> </ul> *Results will be shown cumulative and grouped by months in service.	<input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	Start date: 1/1/2020 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Overall Life Satisfaction Q2 2019: 92% (82% cum avg)	

**Total Agency or Departmental Budget Form**

Agency Name: District Court of Kitsap County

Project: Behavioral Health Court

 Accrual Cash

AGENCY REVENUE & EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent

**AGENCY REVENUE**

Federal Revenue	\$ -	0%	\$ -	0%	\$ -	0%
WA State Revenue	\$ 99,000	4%	\$ 93,000	4%	\$ 93,000	4%
Local Revenue	\$ 2,487,811	96%	\$ 2,169,850	96%	\$ 2,169,850	96%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ 2,122	0%	\$ 2,500	0%	\$ 2,500	0%
Miscellaneous Revenue	\$ 406	0%	\$ 200	0%	\$ 200	0%
<b>TOTAL AGENCY REVENUE</b>	<b>\$ 2,589,339</b>		<b>\$ 2,265,550</b>		<b>\$ 2,265,550</b>	

**AGENCY EXPENSES**

<b>Personnel</b>						
Managers	\$ 957,828	38%	\$ 1,020,215	38%	\$ 1,069,592	39%
Staff	\$ 923,551	36%	\$ 882,635	33%	\$ 879,337	32%
Total Benefits	\$ 664,118	26%	\$ 753,378	28%	\$ 778,515	29%
<b>SUBTOTAL</b>	<b>\$ 2,545,497</b>	<b>100%</b>	<b>\$ 2,656,228</b>	<b>100%</b>	<b>\$ 2,727,444</b>	<b>100%</b>

<b>Supplies/Equipment</b>						
Equipment	\$ 41,321	64%	\$ 34,306	65%	\$ 34,306	65%
Office Supplies	\$ 23,107	36%	\$ 18,800	35%	\$ 18,800	35%
Other	\$ -	0%	\$ -	0%	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 64,428</b>	<b>100%</b>	<b>\$ 53,106</b>	<b>100%</b>	<b>\$ 53,106</b>	<b>100%</b>

<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ 1,171	0%	\$ 1,940	0%	\$ 1,940	0%
Insurance/Bonds	\$ 9,486	2%	\$ 19,561	4%	\$ 19,561	4%
Postage/Printing	\$ 4,421	1%	\$ 2,500	1%	\$ 2,500	1%
Training/Travel/Transportation	\$ 23,823	5%	\$ 24,650	5%	\$ 24,650	5%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Dues, Subscriptions, Memberships	\$ 6,198	1%	\$ 5,000	1%	\$ 5,000	1%
Professional Services	\$ 231,291	51%	\$ 238,080	50%	\$ 238,080	50%
IS Interfund Services	\$ 180,732	40%	\$ 180,859	38%	\$ 180,859	38%
<b>SUBTOTAL</b>	<b>\$ 457,122</b>	<b>100%</b>	<b>\$ 472,590</b>	<b>100%</b>	<b>\$ 472,590</b>	<b>100%</b>

<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment & Property	\$ 709	0%	\$ -	0%	\$ -	0%
Utilities	\$ -	0%	\$ -	0%	\$ -	0%
Other	\$ -	0%	\$ -	0%	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 709</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>

<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Other	\$ -	0%	\$ -	0%	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>

<b>TOTAL DIRECT EXPENSES</b>	<b>\$ 3,067,756</b>		<b>\$ 3,181,924</b>		<b>\$ 3,253,140</b>	
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**District Court - Expenditures Exceeding 10% of Budget**

Business Unit	Object Account	Subsidiary	Account Description	2016 Actual	2017 Budget	2018 Budget	
9061	5101		REGULAR SALARIES	1,631,882	1,714,598	1,758,865	
9062	5101		REGULAR SALARIES	210,774	216,476	221,886	
9061	5102		OVERTIME PAY	3,084			
9062	5102		OVERTIME PAY	1			
9061	5103		LONGEVITY PAY	15,849	13,071	31,099	
9062	5103		LONGEVITY PAY	3,455	3,860	3,624	
9061	5106		ANNUAL LEAVE PAYOUT	11,826			
9061	5112		BAILIFF	4,508	6,000	6,000	
9061	5190		MISCELLANEOUS PAY	-	15,126		
9062	5190		MISCELLANEOUS PAY		3,414		
9061	5201		INDUSTRIAL INSURANCE	16,879	18,856	20,051	
9062	5201		INDUSTRIAL INSURANCE	2,167	2,571	2,734	
9061	5202		SOCIAL SECURITY	115,611	133,417	137,391	
9062	5202		SOCIAL SECURITY	15,736	17,024	17,251	
9061	5203		PERS RETIREMENT	195,918	224,542	230,961	
9062	5203		PERS RETIREMENT	27,304	28,652	29,001	
9061	5209		WA STATE FAM & MED LEAVE	77		2,580	
9062	5209		WA STATE FAM & MED LEAVE	10		326	
9061	5215		DISABILITY INSURANCE	1,472	1,632	1,632	
9062	5215		DISABILITY INSURANCE	193	384	384	
9061	5224		DEFERRED COMPENSATION			8,794	
9062	5224		DEFERRED COMPENSATION			1,109	
9061	5229		BENEFITS BUCKET	254,100	287,144	287,144	
9062	5229		BENEFITS BUCKET	34,650	39,156	39,156	
9061	5299		SAL/BENE ATTRITION BUDGET		(61,767)	(64,418)	
9062	5299		SAL/BENE ATTRITION BUDGET		(7,928)	(8,126)	
				<b>2,545,497</b>	<b>2,656,228</b>	<b>2,727,444</b>	<b>Managers, Staff, &amp; Benefits</b>
9061	5914		I/F FLEET RECOVERY	407	7,066	7,066	
9061	5922		I/F I.S. PROJECTS	17,512	14,072	14,072	
9062	5922		I/F I.S. PROJECTS	3,079	968	968	
9061	5451		OPERATING RENTAL/LEASES	2,742	4,000	4,000	
9061	5351		SMALL TOOLS & EQUIPMENT	115		-	
9061	5352		COMPUTER SOFTWARE	8,825	200	200	
9061	5353		SMALL COMPUTER EQUIPMENT	8,641	8,000	8,000	
				<b>41,321</b>	<b>34,306</b>	<b>34,306</b>	<b>Equipment</b>
9061	5311		OFFICE/OPERATING SUPPLIES	23,347	18,000	18,000	
9061	5499		OTHER	(240)	800	800	
				<b>23,107</b>	<b>18,800</b>	<b>18,800</b>	<b>Office Supplies</b>
9061	5413		MEDICAL, DENTAL & HOSPITAL	1,350	2,500	2,500	
9061	5416		SPECIAL LEGAL SERVICES	-		-	
9061	5416	10	PRO TEM JUDGES	63,806	57,000	57,000	
9061	5416	16	INTERPRETERS	43,046	30,000	30,000	
9061	5913		I/F I.S. PROG MAINT & DEV CHGS	115,395	137,862	137,862	
9062	5913		I/F I.S. PROG MAINT & DEV CHGS	7,536	4,318	4,318	
9061	5419		OTHER PROFESSIONAL SERVICES	168	6,000	6,000	
9061	5495		WITNESS FEES	(10)	400	400	
				<b>231,291</b>	<b>238,080</b>	<b>238,080</b>	<b>Professional Services</b>
9061	5912		I/F I.S. SERVICE CHARGES	173,790	175,714	175,714	
9062	5912		I/F I.S. SERVICE CHARGES	6,942	5,145	5,145	
				<b>180,732</b>	<b>180,859</b>	<b>180,859</b>	<b>IS Interfund Charges</b>

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County District Court

Project: Behavioral Health Court

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modification	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ 52,250.00	\$ 52,250.00	100%
Total Benefits	\$ -	\$ -	#DIV/0!	\$ 24,766.00	\$ 24,766.00	100%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 77,016.00</b>	<b>\$ 77,016.00</b>	<b>100%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ 5,800.00	\$ 5,800.00	100%
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 5,800.00</b>	<b>\$ 5,800.00</b>	<b>100%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ 450.00	\$ 450.00	100%
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ 1,400.00	\$ 1,400.00	100%
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ 4,363.00	\$ 4,363.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 6,213.00</b>	<b>\$ 6,213.00</b>	<b>100%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other: Information Services Support	\$ -	\$ -	#DIV/0!	\$ 4,005.00	\$ 4,005.00	100%
Other: Participant Needs Gap Funding	\$ -	\$ -	#DIV/0!	\$ 5,000.00	\$ 5,000.00	100%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 9,005.00</b>	<b>\$ 9,005.00</b>	<b>100%</b>
<b>Sub-Contracts</b>						
Organization: OPD	\$ 45,000.00	\$ 22,500.00	50%	\$ 45,000.00	\$ -	0%
Organization: KMHS	\$ 187,711.00	\$ 63,441.61	34%	\$ 175,122.00	\$ (12,589.00)	-7%
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 232,711.00</b>	<b>\$ 85,941.61</b>	<b>37%</b>	<b>\$ 220,122.00</b>	<b>\$ (12,589.00)</b>	<b>-5%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 232,711.00</b>	<b>\$ 85,941.61</b>	<b>37%</b>	<b>\$ 318,156.00</b>	<b>\$ 85,445.00</b>	<b>37%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Kitsap Mental Health Services

Project: Behavioral Health Court

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 8,516.00	\$2,600.00	31%	\$ 6,240.00	\$ (2,276.00)	-27%
Staff	\$ 118,998.00	\$46,142.61	39%	\$ 110,595.00	\$ (8,403.00)	-7%
Total Benefits	\$ 31,821.00	\$7,161.59	23%	\$ 42,073.00	\$ 10,252.00	32%
<b>SUBTOTAL</b>	<b>\$ 159,335.00</b>	<b>\$ 55,904.20</b>	<b>35%</b>	<b>\$ 158,908.00</b>	<b>\$ (427.00)</b>	<b>0%</b>
<b>Supplies &amp; Equipment</b>						
Equipment			#DIV/0!		\$ -	#DIV/0!
Office Supplies	\$ 1,100.00	\$514.87	47%	\$ 945.00	\$ (155.00)	-14%
Other (Describe):			#DIV/0!		\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,100.00</b>	<b>\$ 514.87</b>	<b>47%</b>	<b>\$ 945.00</b>	<b>\$ (155.00)</b>	<b>-14%</b>
<b>Administration</b>						
Advertising/Marketing			#DIV/0!		\$ -	#DIV/0!
Audit/Accounting			#DIV/0!		\$ -	#DIV/0!
Communication	\$ 1,510.00	\$421.71	28%	\$ 2,268.00	\$ 758.00	50%
Insurance/Bonds	\$ 1,510.00	\$366.81	24%	\$ 1,512.00	\$ 2.00	0%
Postage/Printing	\$ 720.00	\$207.58	29%	\$ 882.00	\$ 162.00	23%
Training/Travel/Transportation	\$ 3,740.00	\$75.00	2%	\$ 252.00	\$ (3,488.00)	-93%
% Indirect (Limited to 5%)	\$ 17,066.00	\$5,767.43	34%	\$ 8,339.00	\$ (8,727.00)	-51%
Other (Describe): Software	\$ 2,730.00	\$184.01	7%	\$ 2,016.00	\$ (714.00)	-26%
<b>SUBTOTAL</b>	<b>\$ 27,276.00</b>	<b>\$ 7,022.54</b>	<b>26%</b>	<b>\$ 15,269.00</b>	<b>\$ (12,007.00)</b>	<b>-44%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Utilities	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Other (Describe): Supervisor Space & Occup	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Other (Describe):	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
Other (Describe):	\$ -	\$0.00	#DIV/0!		\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$0.00	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$0.00	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 187,711.00</b>	<b>\$ 63,441.61</b>	<b>34%</b>	<b>\$ 175,122.00</b>	<b>\$ (12,589.00)</b>	<b>-7%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Office of Public Defense

Project: Behavioral Health Court

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modification	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 45,000.00	\$ 22,500.00	50%	\$ 45,000.00	\$ -	0%
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 45,000.00</b>	<b>\$ 22,500.00</b>	<b>50%</b>	<b>\$ 45,000.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 45,000.00</b>	<b>\$ 22,500.00</b>	<b>50%</b>	<b>\$ 45,000.00</b>	<b>\$ -</b>	<b>0%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Kitsap County District Court**

**Project: Behavioral Health Court**

<b>Description</b>	
Number of Professional FTEs	4.10
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>4.10</b>

<b>Salary Information</b>	
Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 214,085.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 214,085.00</b>
Total Payroll Taxes	\$ 15,440.00
Total Cost of Benefits	\$ 39,999.00
Total Cost of Retirement	\$ 11,400.00
<b>Total Payroll Costs</b>	<b>\$ 280,924.00</b>

July 17, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Services grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

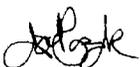
Administered by the Kitsap County District Court, the Behavioral Health Court offers a judicial option to intervene in criminal behaviors that result from substance abuse and co-occurring mental illnesses. Kitsap County District Court is proposing to continue the services of a KMHS affiliated behavioral health therapist to provide assessment and treatment for adults participating in the Behavioral Health Court.

Kitsap Mental Health Services will commit the following resources to the proposal submitted by Kitsap County District Court:

- KMHS will commit to provide two (2) 1.0 FTE Master's Level Therapists to serve as Behavioral Health Court Liaison, and including .1 hours of clinical supervision, should this application be funded;
- Continue to provide one (1) .25 FTE Care Coordinator to serve as the primary clinician for Behavioral Health Court participants and attend BHC case staffings, and program meetings;
- Continue to provide one (1) .125 FTE Master's Level Clinical Supervisor to provide oversight and supervision to the Care Coordinator

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

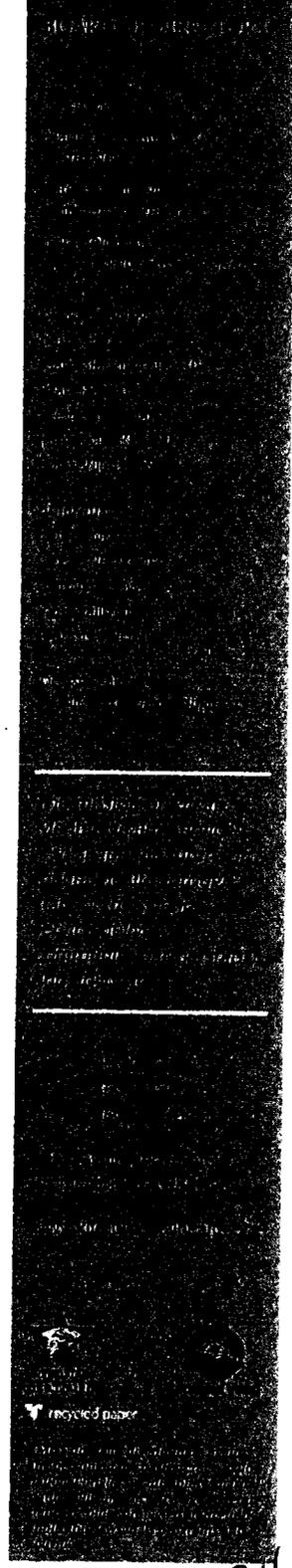
Sincerely,



Joe Roszak  
Chief Executive Officer



**KITSAP  
MENTAL  
HEALTH  
SERVICES**





## Kitsap County Office of Public Defense

---

July 12, 2019

Kevin M. Anderson  
Chief Public Defender

Steven M. Lewis  
Supervising Public  
Defender

Susan Taylor  
Office Manager

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Behavioral Health Court grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County District Court, the Behavioral Health Court offers a judicial option to intervene in criminal behaviors that result from mental health and co-occurring substance use issues. Kitsap County District Court is proposing the services of two (2) KMHS affiliated behavioral health therapists to provide assessment and resource provision for adults participating in the Behavioral Health Court. District Court is also requesting funding for a compliance specialist to increase participant accountability and program integrity and a dedicated public defender to represent the participants of Behavioral Health Court.

**The Office of Public Defense (OPD) will commit the following resources to the proposal submitted by Kitsap County District Court:**

- **Oversee and administer the grant funded position, .05 FTE Support Staff**
- **.10 FTE OPD attorney for overflow, conflict cases, and/or special projects;**
- **Collaborate with BHC on policies, procedures, BHC Defense Attorney training and grant funding;**

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin M. Anderson", written over a horizontal line.

Kevin M. Anderson,  
Chief Public Defender  
Kitsap County Office of Public Defense





# Kitsap County Prosecuting Attorney Chad M. Enright



## CRIMINAL DIVISION

**Ione George**  
Chief of Staff

**Cami Lewis**  
Felony & Juvenile  
Division Chief

**Justin Zaug**  
District & Municipal  
Division Chief

**Rebecca Graunke**  
Criminal Program  
Manager

July 17, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Behavioral Health Court grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County District Court, the Behavioral Health Court program offers a judicial option to intervene in criminal behaviors that result from mental health and co-occurring substance use issues. Kitsap County District Court is proposing the services of two (2) KMHS affiliated behavioral health therapists to provide assessment, treatment and resource provision for adults participating in the Behavioral Health Court. District Court is also requesting funding for a compliance specialist to increase participant accountability and program integrity and a dedicated public defender to represent the participants Behavioral Health Court.

The Kitsap County Prosecutor's Office will commit the following resources to the proposal submitted by Kitsap County District Court:

- Continue to provide one (1) .50 FTE Deputy Prosecutor to oversee the BHC program, review referrals, prepare case studies, attend team case staffings and team meetings, appear in court, and provide input on program improvement;
- Continue to act as a liaison to other therapeutic courts;
- Continue to provide one (1) .25 FTE Support Staff to prepare chargings, set cases on the calendar, track charges, and provide other administrative support to the program;
- Provide meeting room space for weekly staffings as well as quarterly program meetings.

Adult Criminal & Administrative • Juvenile • Special Assault Unit  
614 Division Street, MS-35 • Port Orchard, WA 98366 • (360) 337-7174 • FAX (360) 337-4949  
Kitsapgov.com/pros • kcpa@co.kitsap.wa.us

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely yours,

A handwritten signature in black ink that reads "Chad Enright". The signature is written in a cursive style with a long horizontal flourish at the end.

CHAD M. ENRIGHT  
Prosecuting Attorney



# Kitsap Recovery Center

A Department of Human Services

July 17, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Behavioral Health Court grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County District Court, the Behavioral Health Court offers a judicial option to intervene in criminal behaviors that result from mental health and co-occurring substance use issues. Kitsap County District Court is proposing the services of two (2) KMHS affiliated behavioral health therapists to provide assessment and resource provision for adults participating in the Behavioral Health Court. District Court is also requesting funding for a compliance specialist to increase participant accountability and program integrity and a dedicated public defender to represent the participants of Behavioral Health Court.

**Kitsap Recovery Center (KRC) will commit the following resources to the proposal submitted by Kitsap County District Court:**

- **Continue to provide one (1) .40 FTE Chemical Dependency Professional (CDP) to serve as the primary clinician for Behavioral Health Court participants, conduct in-custody chemical dependency evaluations, attend BHC case staffings, and BHC program meetings;**
- **Continue to provide one (1) .05 FTE Clinical Supervisor to provide oversight and supervision to the CDP.**



# Kitsap Recovery Center

A Department of Human Services

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,

Keith Winfield, LSWAIC, CDP  
Clinical Manager  
Kitsap Recovery Center  
[KWinfield@co.kitsap.wa.us](mailto:KWinfield@co.kitsap.wa.us)  
360-337-5640



Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Behavioral Health Court grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County District Court, the Behavioral Health Court offers a judicial option to intervene in criminal behaviors that result from mental health and co-occurring substance use issues. Kitsap County District Court is proposing the services of two (2) KMHS affiliated behavioral health specialists to provide assessment and resource provision for adults participating in the Behavioral Health Court. District Court is also requesting funding for a compliance specialist to increase participant accountability and program integrity and a dedicated public defender to represent the participants of Behavioral Health Court.

**NAMI Kitsap, an affiliate of NAMI Washington, agrees to offer the following resources to the proposal submitted by Kitsap County District Court:**

- **Provide one (1) volunteer to attend court weekly and provide outreach to family members and other natural supports;**
- **Provide one (1) volunteer to conduct group or individual support meetings to family members or other natural supports of participants, and/or refer them to resources in the community;**
- **Collaborate with BHC on policies and procedures.**

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,

Larry Brixius  
\_\_\_\_\_  
Larry Brixius, President NAMI Kitsap

Date: July 12, 2019

**Kitsap County District Court**  
**State of Washington**



**CLAIRE A. BRADLEY**  
JUDGE, DEPARTMENT 1

**JEFFREY J. JAHNS**  
PRESIDING JUDGE, DEPARTMENT 2

614 DIVISION STREET  
PORT ORCHARD, WA 98366  
360-337-7109

**MARILYN G. PAJA**  
JUDGE, DEPARTMENT 3

kitsapgov.com/dc KCDC@co.kitsap.wa.us

**KEVIN P. KELLY**  
JUDGE, DEPARTMENT 4

**CLINT L. CASEBOLT**  
COURT ADMINISTRATOR

July 23, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Behavioral Health Court grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County District Court, the Behavioral Health Court offers a judicial option to intervene in criminal behaviors that result from mental health and co-occurring substance use issues. Kitsap County District Court is proposing the services of two (2) KMHS affiliated behavioral health specialists to provide assessment and resource provision for adults participating in the Behavioral Health Court. District Court is also requesting funding for a compliance specialist and a dedicated public defender to represent the participants Behavioral Health Court.

**The Kitsap County District Court will commit the following resources to the proposal submitted by Kitsap County Behavioral Health Court:**

- **Continue to provide (1) .30 FTE Judge to preside over BHC;**
- **Continue to provide (1) .75 FTE Program Manager;**
- **Continue to provide (1) .10 FTE Court Clerk for all BHC hearings;**
- **Continue to provide (1) .20 FTE Office Support Coordinator for budget, creation of forms, and assistance with equipment issues;**
- **Provide courtroom space, office equipment, and office supplies.**

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to continuing to work with you on this endeavor.

Sincerely,

A handwritten signature in black ink that reads "CLINT CASEBOLT". The letters are connected and written in a cursive style.

Clint Casebolt, Court Administrator  
Kitsap County District Court



OFFICE OF  
GARY SIMPSON

# KITSAP COUNTY SHERIFF

614 DIVISION ST. MS-37 • PORT ORCHARD, WASHINGTON 98366 • (360) 337-7101 • FAX (360) 337-4923

July 17, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

## **Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County District Court Behavioral Health Court grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County District Court, the Behavioral Health Court offers a judicial option to intervene in criminal behaviors that result from mental health and co-occurring substance use issues. Kitsap County District Court is proposing the services of two (2) KMHS affiliated behavioral health therapists to provide assessment and resource provision for adults participating in the Behavioral Health Court. District Court is also requesting funding for a compliance specialist to increase participant accountability and program integrity and a dedicated public defender to represent the participants of Behavioral Health Court.

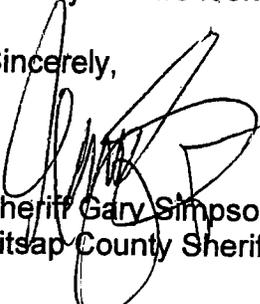
**The Kitsap County Sheriff's Office Corrections Division will commit the following resources to the proposal submitted by Kitsap County District Court:**

- **Continue to provide corrections staff to observe and obtain random urine drug screens with additional EtG testing for program participants;**
- **Continue to collaborate with BHC program manager on outstanding fees owed by participants;**
- **Provide one (1) Supervisor (FTE Sergeant and/or Lieutenant) for case staffings (on ad hoc basis), and for team meetings.**



We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,



Sheriff Gary Simpson  
Kitsap County Sheriff's Office

cc: Mark Rufener, Chief of Corrections, Kitsap County Sheriff's Office  
Lt. Penelope Sapp, Kitsap County Sheriff's Office



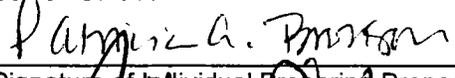
## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program: Enhanced Juvenile Therapeutic Courts

Organization Submitting: Juvenile Services

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			PAB
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			PAB
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			PAB
Organization did receive funding for this project in 2019	X			PAB
Attachment A – Continuation Grant Proposal Summary Page	X			PAB
Attachment B – Continuation Grant Proposal Checklist Form	X			PAB
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			PAB
Attachment C – Continuation Grant Proposal Narrative Template	X			PAB
Proposal Narrative is limited to 10 pages	X			PAB
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			PAB
Attachment E – Total Agency Budget Form	X			PAB
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			PAB
Indirect is limited to 5%			X	PAB
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			PAB
Organization submitted Attachment G for each Sub-Contractor	X			PAB
Sub-Contractor indirect limited to 5%	X			PAB
Attachment H – Continuation Grant Proposal Project Salary Summary	X			PAB
Attachment I – Letter of Resource Commitment (optional)	X			PAB
No other attachments are included	X			PAB
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			PAB
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			PAB

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
Signature of Individual Preparing Proposal

7/24/19  
Date

  
Signature of Organization's Chief Executive

7/24/19  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative**

**Enhanced Juvenile Therapeutic Courts**

---

**1. Project Description (20 points)**

A. Project Design

The 2014 Kitsap County Behavioral Health Strategic Plan identified the lack of sufficient Outpatient Treatment – Psychiatric, Medical and Medication management, Counseling Services (Gap #3), and Recovery Support Services (Gap #6) as gaps in local behavioral health services. To address these gaps, the Behavioral Health Strategic Plan recommended (1) the expansion of evidence and research-based programs found to decrease depression, suicidal behavior and substance abuse among juvenile justice involved youth; (2) expansion of behavioral health prevention, outreach, assessment, intervention, referral and treatment within the juvenile justice system; (3) establishing a dedicated Behavioral Health Specialist to serve Individualized Treatment Court (ITC) and to be available for consultation to probation counselors dealing with the general population, and, 4) increasing supportive services, case monitors, UA collection, incentives and prosocial activities in all Juvenile Therapeutic Courts.

**Since initial funding in 2014, 122 youth have participated in a Juvenile Therapeutic Court program; 70 youth in JDC and 52 in ITC.** In this proposal, Juvenile Services seeks continued funding for a dedicated Behavioral Health Specialist (BHS) to (1) serve all participants in ITC who are not already engaged in treatment with an outside therapist, and, (2) provide mental health services to Juvenile Drug Court (JDC) participants in need of mental health services. We also request continued funding for a Therapeutic Court Case Monitor (1.0 FTE), and support services, including funding for the testing of designer drugs, transportation costs (gas cards, bus tokens, taxi fare, etc.) to assist youth in meeting program requirements, and incentives to reward program compliance.

Our policy goals are to (1) reduce the number of chemically dependent and mentally ill youth from further criminal justice system involvement; and, (2) reduce the incidence and severity of chemical dependency and/or mental health disorders in youth.

There are no additional requests in this proposal from the original proposal in 2014. We are not requesting funding for the attendance of Juvenile Therapeutic Court staff at Drug Court conferences or for the purchase/maintenance of a Drug Court Case Management system. Juvenile Therapeutic Court data is currently maintained in the case management system utilized by Juvenile Services (RiteTrack).

**Collective Impact**

Since April 2017, Juvenile Services has collaborated with MCS Counseling Group to enhance Juvenile Therapeutic Court services to provide a dedicated Behavioral Health Specialist (BHS) for ITC and JDC participants. The BHS is a member of a team of

professionals working collectively to redirect and restore the lives of youth and reduce the likelihood of further involvement in the juvenile justice system.

Since January 2018, 14 JDC youth have received substance use disorder treatment with Agape' Unlimited. Treatment included Moral Reconciliation Therapy (MRT), a cognitive behavioral approach that positively addresses an adolescent's ego, social, moral, and positive behavioral growth. The treatment provider also works collaboratively with the JDC team.

Since January 2018, 13 Juvenile Therapeutic Court youth have been referred to the Student Assistance Program and Intervention Specialist (SAPIS) program with Olympic Educational Services District (OESD). This partnership supports a more robust continuum of care for Juvenile Therapeutic Court youth, providing ongoing support services during and after Therapeutic Court involvement. The goal is to reduce factors associated with risk to re-offend, including low levels of performance and involvement in school, and problems with alcohol and/or other drugs.

#### A. Outreach

The target population for the Juvenile Therapeutic Court programs are youth between the ages of 12 and 17 who are charged with a criminal offense and who have been diagnosed with a mental health disorder, substance use disorder, or co-occurring diagnosis. Youth are identified for potential participation in Juvenile Therapeutic Court by the Intake Court Services Officer (CSO) and/or the assigned defense attorney. Final determination is made by the prosecuting attorney. Following legal determination of eligibility, the CSO or assigned defense attorney refer the youth to a treatment provider for a diagnostic assessment. If diagnosed with a mental health or substance use disorder, eligible youth can sign a Drug Court or ITC contract. Youth are permitted a two-week "opt out" period to decide whether to continue in the program. If not, the youth enters the regular court process. If the youth chooses to continue in the Juvenile Therapeutic Court program, a final JDC/ITC order is entered.

#### Cultural Competence

WAC 388-877-0510 requires that each agency licensed by the department to provide any behavioral health service must maintain a personnel record for each person employed by the agency that contains documentation of training, including documentation that the employee successfully completed training on cultural competence. WAC 388-877-0600 requires each agency licensed by the department providing any behavioral health service to develop a statement of individual participant rights, including: 1) the right to receive services without regard to race, creed, national origin, religion, gender, sexual orientation, age or disability; and, 2) the right to be reasonably accommodated in case of sensory or physical disability, limited ability to communicate, limited English proficiency, and cultural differences.

## **2. Accomplishments to Date (40 Points)**

Behavioral Health Specialist: Juvenile Services contracts with MCS Counseling Group (MCS) to provide a dedicated Behavioral Health Specialist to provide mental health

services to ITC and JDC participants. Amie Greist, a licensed mental health counselor with the Washington State Department of Health, has been the dedicated BHS since February 2018. She provides mental health treatment to youth in the ITC program. She also provides mental health treatment to JDC youth with co-occurring mental health and substance use disorders. Ms. Greist uses Cognitive Behavioral Therapy (CBT) techniques in her sessions with Juvenile Therapeutic Court participants. CBT is a research-based modality that emphasizes individual accountability and teaches justice system-involved youth strategies to overcome cognitive deficits, distortions, and flawed thinking processes that can cause criminal behavior.

Ms. Greist meets with youth in their home, school, coffee houses, and the Department of Children, Youth and Families (DCYF) office, traveling to various locations in Kitsap County. Her responsibilities include attendance at weekly pre-court meetings and court hearings and outreach activities, including meetings with parents and foster parents of ITC youth outside of therapeutic settings, contacts/meetings with other professionals as needed (school officials, physicians, caseworkers, and Guardians ad litem), community resource-gathering, and consultation with probation counselors regarding non-therapeutic court youth.

Private therapists do not attend pre-court meetings and court hearings. Ms. Greist acts as a liaison in these cases, contacting private therapists every week to obtain progress reports, which she then reports to the Juvenile Therapeutic Court Team at pre-court meetings.

Since January 2019, the BHS has spent 126 hours in therapeutic sessions with ITC youth and 48 hours with JDC youth. She has logged 3,274 miles driving to therapeutic sessions with Juvenile Therapeutic Court participants and to meetings with parents, foster parents and other providers.

Therapeutic Court Case Monitor: The Therapeutic Court Case Monitor provides support services to the JDC and ITC Court Services Officer who has a caseload of 22 youth and is responsible for maintain weekly contact with each participant to ensure compliance with court-ordered obligations. The Case Monitor assists in data collection and urinalysis collection for testing. She is accessible to Juvenile Therapeutic Court team members throughout the week and her comprehensive reports have facilitated informed decision-making. The Case Monitor's position has proven to be a valuable service to Juvenile Therapeutic Court youth, their parents, and the Court.

#### A. Evaluation

The Juvenile Therapeutic Courts have met the following goals as developed in collaboration with the Kitsap County Public Health Department's assigned Epidemiologist:

**Goal:** Improve the continuity of treatment services to participants in ITC by establishing a dedicated Behavioral Health Specialist to serve all participants in ITC who are not already engaged in treatment with an outside therapist.

**Outcome: 80% of ITC youth will receive services from the dedicated Behavioral Health Specialist.** From January 1, 2018 to June 30, 2019, 23 youth participated in ITC. Twenty of the ITC participants (87%) received services from a BHS during that time, exceeding our target of 80%. In the first year of funding (2014-2015), 72% of ITC youth received the services of the BHS.

**Outcome: 80% of ITC weekly pre-court meetings and hearings will be attended by the Behavioral Health Specialist.** Since April 1, 2018, the BHS has attended 49 of 52 ITC hearings and pre-court meetings (94%). In the current grant year, she has attended 100% of ITC hearings and pre-court meetings.

**Goal:** Enhance treatment services for participants in JDC requiring mental health services by establishing a linkage to JDC for youth in need of mental health services.

**Outcome: 40% of JDC youth will receive mental health treatment services by the Behavioral Health Specialist.** From January 1, 2018 to June 30, 2019, 17 youth participated in JDC. During that time, 12 JDC youth received services by the BHS (71%), exceeding our target of 40%. In the first year of funding 41% of JDC youth received the services of the BHS.

**Goal:** Increase law-abiding behavior and long-term abstinence from alcohol and other drugs by maintaining supportive services in Juvenile Therapeutic Courts, including the utilization of a Case Monitor, urinalysis testing and data collection.

**Outcome: 75% of youth in Juvenile Therapeutic Court will successfully complete or continue in the program.** From January 1, 2018 to December 31, 2018, 25 youth (80%) successfully completed a Juvenile Therapeutic Court program or continued in the program after December 2018, exceeding our target of 75%.

Completion rates are reported annually at the end of a grant cycle. In the fifth year of funding, we changed the measurement of completion from “participants who complete the program” to “participants who complete the program or continue in the program.” The addition of “or continue” is intended to capture participants remaining in the program at the conclusion of a grant cycle (12/31/18) because they have not yet completed the program; not due to termination or drop out, but because they started the program close to the end of the funding cycle.

**Outcome: 80% of youth in Juvenile Therapeutic Court who successfully complete the program will remain crime-free for one year following the completion of the program.** Fifty-three youth who began participating in a Juvenile Therapeutic Court program on or after July 1, 2014 have successfully completed the program 12 months ago or longer; 32 from JDC and 21 from ITC. Forty-eight have remained crime free for at least one year since completion of the program (91%), exceeding our target of 80%.

**Outcome: 70% of youth in Juvenile Therapeutic Court who successfully complete the program will remain crime-free for 18 months following completion of the program.** Fifty-two youth who began participating in a Juvenile Therapeutic Court program on or after July 1, 2014 successfully completed the program 18 months ago or

longer; 31 from JDC and 21 from ITC. Forty-four have remained crime-free since completion of the program (85%), exceeding our target of 70%.

**Outcome: 80% of youth screened for the use of designer drugs will test negative.**

In the fourth quarter of the second year of funding (April - June 2016), the JDC team learned that some youth in the program were using LSD and that JDC participants believed the JDC staff could not test for the use of LSD. Based on this information, all JDC youth were tested for LSD use by Redwood Toxicology Laboratory. Four youth tested positive. Since July 2016, 292 tests for the use of synthetic stimulants (“bath salts”), synthetic cannabinoids (“spice”), and LSD/hallucinogens have been done on 37 youth. One youth (3%) tested positive for LSD on 8/11/16. Since then all test results for designer stimulants, synthetic cannabinoids and LSD/hallucinogens have been negative.

**Goal:** Program services meet participant needs and support improvements in health, wellbeing, and stability.

**Outcome: 80% of participants agree or strongly disagree that: (a) their physical health has improved; (b) their mental/emotional health has improved; (c) they are more confident they can reduce/eliminate their substance use; and, (d) they are more confident in their ability to remain crime-free after graduation.**

In June 2019, seventeen (17) Juvenile Therapeutic Court youth completed an anonymous survey designed to capture participants opinions regarding the above-referenced items. (1) improved physical health; (2) improved mental/emotional health; (3) confidence in reducing/eliminating their substance use; and, (4) confidence in their ability to remain crime-free after graduation. The following are the results of the 17 youths surveyed.

1. Ten participants agreed or strongly agreed that their physical health has improved (59%).
2. Eleven participants agreed or strongly agreed that their mental/emotional health has improved (65%).
3. Ten participants agreed or strongly agreed that they are more confident they can reduce/eliminate their substance use (59%).
4. Sixteen participants agreed or strongly agreed that they are more confident in their ability to remain crime-free after graduation (94%).

The survey separated length of time in the program into five categories: 0-3 months, 4-6 months, 7-9 months, 10-12 months, and over 12 months. Youth in Juvenile Therapeutic Court for three months or less were less likely to agree that they experienced improved physical and mental/emotional health and felt less confident in their ability to reduce/eliminate their substance use. In contrast, one hundred percent (100%) of the youth in Juvenile Therapeutic Court for longer than 12 months agreed or strongly agreed that their mental/emotional health had improved. Of the 17 participants surveyed, 14 were satisfied or highly satisfied in their overall experience in Therapeutic Court (82%).

## B. Barriers to Implementation

In the second and third year of funding, Juvenile Therapeutic Court youth were without the services of a dedicated BHS for a total of 11 months due to the resignations of the BHS. During that time ITC youth received services, such as individual counseling, family counseling and/or wrap around services, from outside agencies (KMHS, MCS, Bremerton Naval Hospital, Peninsula Psychological Center, and other private therapists). Juvenile Services has since contracted with MCS for a dedicated BHS. The current BHS has provided mental health services to 87% of ITC participants and 71% of JDC participants. She has attended 94% of hearings and pre-court meetings.

## C. Key Accomplishments

Primary goals of Juvenile Therapeutic Courts are the reduction of criminal behavior and long-term abstinence from alcohol and other drugs by decreasing the criminogenic needs of youth involved in the juvenile justice system.

### Recidivism

Ninety-one percent (91%) of youth who completed Juvenile Therapeutic Court 12 months ago or longer have remained crime-free. Eighty-five percent (85%) of those completing the program 18 months ago have remained crime-free. Only nine therapeutic court graduates have recidivated (15%).

### Long-Term Abstinence

Since August 11, 2016, all test results for synthetic stimulants, synthetic cannabinoids, and LSD/hallucinogens have been negative, reducing a potentially serious public health and safety concern.

## **3. Budget Narrative (30 Points)**

### A. Funding Request

Our funding request totals \$189,238.00 to support the continued enhancement for Juvenile Therapeutic Courts for one additional budget year. This is a 2% or \$3,838.00 increase and mostly relates to the standard increase to salary and benefits of the Case Monitor position. To ensure that we are not supplanting funds, we continue to cover the cost of salary and benefits related to one full-time Court Services Officer, one full-time Program Supervisor, County Interfund charges related to those positions for supplies, computer, phone, and insurance. We also cover non-designer drug urinalysis (UA) testing for youth participating in Juvenile Therapeutic Court. It is important to note that we are not a treatment provider, the UA's collected from the youth are related to their probation only so we are not able to seek Medicaid funding in these expenses.

Details of our funding need for an additional year are listed below.

Amount Requested	Line Item	Cost Break Down
\$82,310.00	Staff Full-Time Case Monitor (CM)	\$56,749.00 Salary \$ 4,341.30 FICA 7.65% \$ 6,889.33 Retirement 12.14% \$ 911.00 Workers Comp \$13,052.00 Benefit Bucket \$ 284.00 Deferred Comp \$ 83.00 WA Paid Family Leave
\$ 294.00	Office Supplies	Office supplies for CM
\$ 516.00	Communication	\$43.00 Per month for 12 months phone for CM
\$ 241.00	Insurance / Bonds	Insurance for CM Interfund charge from County
\$ 4,055.00	Computer Network Charges	Computer charges for access to the County Network related to the CM computer
\$88,262.00	Sub-Contract	Contract with MCS for Behavioral Health Specialist (indirect is 4.22%)
\$ 1,700.00	Transportation	\$ 200.00 Transportation to/from Court \$ 200.00 Gas cards 8 @ \$25.00 \$1,300.00 Secure transport to treatment
\$ 8,460.00	Enhanced Drug Testing and Alcohol Monitoring	\$7,650.00 Urinalysis for Designer Drugs 85 @ \$90.00 each \$ 810.00 Transdermal Alcohol Monitoring 90 days @ \$9.00 day
\$ 3,400.00	Program Incentives and Graduations	\$3,200.00 Incentives @ \$16.00 each \$ 200.00 Quarterly Pizza Incentive

#### B. Past Expenditures and Budget Modifications

For January 1, 2019 to December 31, 2019, we were awarded \$185,400.00. Target utilization through June 2019 is 50%. Through June, we have vouchered for \$87,469.81 (47%).

The table below breaks down the modifications from last year's request to this year's request; it accounts for increases and decreases that result in a bottom-line increase of \$3,838 (2%) in this year's request.

Item	Difference in Request	Explanation
Staff	\$2,737.00	Regular step increases of CM
Benefits	\$2,003.00	Increase in retirement, workers comp, benefit bucket, and new paid WA family leave.

Office Supplies	0	Status quo
Communication	\$ 12.00	Increase in phone charge
Insurance / Bonds	\$ 90.00	Increase in charge from County
Computer Network Charges	\$ 304.00	Increase in charge from County
Sub-Contract with MCS	-\$1,573.00	Savings in contract
Transportation	-\$ 175.00	Savings due to less due to lack of current and projected utilization
Enhanced Drug <i>Testing</i> & Alcohol Monitoring	\$ 240.00	Increase due to projected utilization
Program Incentives and Graduations	\$ 200.00	Increase due to projected utilization

#### 4. Sustainability (10 Points)

##### A. Sustainability Plan

Our proposal sets forth a plan to sustain the enhancements of Juvenile Therapeutic Courts, incorporating dedicated mental health treatment services, monitoring of program participants by a Case Monitor, the continued provision of designer drug testing, incentives and transportation that, without additional funding, would not otherwise be available. Juvenile Therapeutic Court will continue to collaborate with the Department of Children, Youth and Families (DCYF) to secure funding for a Court Services Officer who provides community supervision of the youth in Juvenile Therapeutic Court. Any decline in funding may require us to cut the enhancements to our Therapeutic Courts. Juvenile Therapeutic Courts relies on funding from the Therapeutic Sales Tax as outlined in RCW 82.14.460 and we will continue to seek funding to support the enhancements.

EVALUATION WORKSHEET

PROJECT NAME: Juvenile Therapeutic Courts

<p>Improve the continuity of treatment services to participants in ITC.</p>	<p>Establish a dedicated Behavioral Health Specialist to serve all participants in ITC who are not already engaged in treatment with an outside therapist.</p>	<p>80% of youth in ITC will receive services from the dedicated Behavioral Health Specialist.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>January 1, 2018</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>From 1/1/18 to 6/30/19, 20 out of 23 ITC youth received BHS services (87%).</p>	<p>RiteTrack Case Management System                  Behavioral Health Specialist's Monthly Statistical Report</p>
<p>Enhance treatment services for participants in Juvenile Drug Court requiring mental health services.</p>	<p>Establish a dedicated Behavioral Health Specialist to serve all participants in ITC who are not already engaged in treatment with an outside therapist.</p>	<p>80% of ITC weekly pre-court meetings and hearings will be attended by the Behavioral Health Specialist.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>April 1, 2018</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>From 4/1/18 to 6/30/19: 52 Therapeutic Court hearings and pre-court meetings held; 49 attended by BHS (94%).</p>	<p>Court Scheduler's Records                  Behavioral Health Specialist's Monthly Statistical Report</p>
<p>Enhance treatment services for participants in Juvenile Drug Court for youth in need of mental health services.</p>	<p>Establish a linkage to Juvenile Drug Court for youth in need of mental health services.</p>	<p>40% of qualifying youth in Juvenile Drug Court will receive mental health treatment services by the Behavioral Health Specialist.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>January 1, 2018</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>From 1/1/18 to 6/30/19, 12 out of 17 JDC youth received BHS services (71%).</p>	<p>RiteTrack Case Management System                  Behavioral Health Specialist's Monthly Statistical Report</p>

EVALUATION WORKSHEET

<p>Increase law abiding behavior and long-term abstinence from alcohol and other drugs.</p>	<p>Maintain supportive services in Juvenile Therapeutic Courts (Case Monitor, urinalysis, data collection, incentives).</p>	<p>75% of youth in Therapeutic Court will successfully complete or continue in the program.</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>January 1, 2018</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>Between 1/1/18 and 12/31/18, 20 youth (80%) completed or continued in Therapeutic Court.</p>	<p>Juvenile Services RiteTrack Case Management System</p>
	<p>Maintain supportive services in Juvenile Therapeutic Courts (Case Monitor, urinalysis, data collection, incentives).</p>	<p>80% of youth in Therapeutic Court who successfully complete the program will remain crime-free for one year following the completion of the program.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long</p> <p>Start date: <u>July 1, 2014</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>Between 7/1/14 and 6/30/19, 48 youth (91%) remained crime-free one year after completion of Therapeutic Court.</p>	<p>Statewide Adult and Juvenile Information Services (JIS) database</p>
	<p>70% of youth in Therapeutic Court who successfully complete the program will remain crime-free for 18 months following the completion of the program.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input checked="" type="checkbox"/> Long</p> <p>Start date: <u>July 1, 2014</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>Between 7/1/14 and 6/30/19, 44 youth (85%) remained crime-free 18 months after completion of Therapeutic Court.</p>	<p>Statewide Adult and Juvenile Information Services (JIS) database</p>	

EVALUATION WORKSHEET

	<p>Maintain supportive services in Juvenile Therapeutic Courts (Case Monitor, urinalysis testing, data collection, incentives).</p>	<p>80% of youth screened for the use of designer drugs will test negative.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>July 1, 2016</u></p> <p>Frequency:  <input checked="" type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>From 7/1/16 to 6/30 19: 292 UAs for designer drugs; 37 youth tested; an average of 8 per youth; one tested positive for LSD on 8/11/16 (97%)</p>	<p>Juvenile Service's RiteTrack Case Management System</p>
<p>Program services meet participant needs and support improvements in health, wellbeing, and stability.</p>	<p>80% of participants agree or strongly agree that their physical health has improved.</p> <p>80% of participants agree or strongly agree that their mental/emotional health has improved.</p> <p>80% of participants agree or strongly agree that they are more confident they can reduce/eliminate their substance use.</p> <p>80% of participants agree or strongly agree that they are more confident in their ability to remain crime-free after graduation.</p>	<p>Assess participant improvement in health status.</p>	<p><input type="checkbox"/> Output  <input checked="" type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>June 27, 2019</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other: _____</p>	<p>Improved Physical Health (59%)</p> <p>Improved Mental/Emotional Health (65%)</p> <p>More Confident in Ability to Reduce or Eliminate Substance Use (59%)</p> <p>More Confident in ability to Remain Crime-Free (94%)</p>	<p>Semi-Annual Satisfaction Survey.</p>

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Kitsap County Juvenile and Family Court Services

Project: Enhancement for Juvenile Therapeutic Courts

Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 77,844.33	3%	\$ 23,856.00	1%	\$ 20,000.00	1%
WA State Revenue	\$ 879,003.25	32%	\$ 885,827.00	31%	\$ 877,369.00	30%
Local Revenue	\$ 89,356.51	3%	\$ 76,397.00	3%	\$ 76,397.00	3%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ 115,366.54	4%	\$ 95,909.00	3%	\$ 109,837.00	4%
Miscellaneous Revenue	\$ 1,571,743.32	58%	\$ 1,769,466.00	62%	\$ 1,807,238.00	63%
<b>Total Agency Revenue (A)</b>	<b>\$ 2,733,313.95</b>		<b>\$ 2,851,455.00</b>		<b>\$ 2,890,841.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 424,030.18	6%	\$ 439,339.00	5%	\$ 453,326.00	5%
Staff	\$ 3,977,872.60	52%	\$ 4,103,518.00	49%	\$ 4,198,435.00	50%
Total Benefits	\$ 1,792,648.25	24%	\$ 1,822,552.00	22%	\$ 1,820,509.00	22%
<b>Subtotal</b>	<b>\$ 6,194,551.03</b>	<b>81%</b>	<b>\$ 6,365,409.00</b>	<b>77%</b>	<b>\$ 6,472,270.00</b>	<b>77%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 78,348.21	1%	\$ 67,757.00	1%	\$ 67,757.00	1%
Office Supplies	\$ 101,966.81	1%	\$ 152,580.00	2%	\$ 152,580.00	2%
Fuel Consumed	\$ 13,135.61	0%	\$ 15,295.00	0%	\$ 15,295.00	0%
<b>Subtotal</b>	<b>\$ 193,450.63</b>	<b>3%</b>	<b>\$ 235,632.00</b>	<b>3%</b>	<b>\$ 235,632.00</b>	<b>3%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 9,808.44	0%	\$ 14,000.00	0%	\$ 14,000.00	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ 22,727.03	0%	\$ 19,857.00	0%	\$ 19,857.00	0%
Insurance/Bonds	\$ 11,987.00	0%	\$ 19,154.00	0%	\$ 19,154.00	0%
Postage/Printing	\$ 4,926.80	0%	\$ 4,462.00	0%	\$ 4,462.00	0%
Training/Travel/Transportation	\$ 18,748.00	0%	\$ 35,474.00	0%	\$ 35,474.00	0%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 68,197.27</b>	<b>1%</b>	<b>\$ 92,947.00</b>	<b>1%</b>	<b>\$ 92,947.00</b>	<b>1%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Information Svcs Special Projects	\$ 21,840.72	0%	\$ 16,097.00	0%	\$ 16,097.00	0%
Repair of Equipment and Property	\$ 127,607.16	2%	\$ 460,085.00	6%	\$ 460,085.00	5%
Utilities	\$ 138,839.52	2%	\$ 178,955.00	2%	\$ 178,955.00	2%
Rental Leases / Copiers / Computers	\$ 283,918.78	4%	\$ 259,989.00	3%	\$ 259,989.00	3%
Professional and Medical Services	\$ 574,760.86	8%	\$ 667,640.00	8%	\$ 667,640.00	8%
Licenses, food storage, program incentives	\$ 21,579.28	0%	\$ 24,625.00	0%	\$ 24,625.00	0%
<b>Subtotal</b>	<b>\$ 1,168,546.32</b>	<b>15%</b>	<b>\$ 1,607,391.00</b>	<b>19%</b>	<b>\$ 1,607,391.00</b>	<b>19%</b>
<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 7,624,745.25</b>		<b>\$ 8,301,379.00</b>		<b>\$ 8,408,240.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Juvenile and Family Court Services

Project: Enhancement for Juvenile Therapeutic Courts

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	0%	\$ -	\$ -	0%
Staff	\$ 54,012.00	\$ 26,445.87	49%	\$ 56,749.00	\$ 2,737.00	5%
Total Benefits	\$ 23,558.00	\$ 12,433.84	53%	\$ 25,561.00	\$ 2,003.00	9%
<b>SUBTOTAL</b>	<b>\$ 77,570.00</b>	<b>\$ 38,879.71</b>	<b>50%</b>	<b>\$ 82,310.00</b>	<b>\$ 4,740.00</b>	<b>6%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	0%	\$ -	\$ -	0%
Office Supplies	\$ 294.00	\$ -	0%	\$ 294.00	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 294.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 294.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	0%	\$ -	\$ -	0%
Audit/Accounting	\$ -	\$ -	0%	\$ -	\$ -	0%
Communication	\$ 504.00	\$ 240.89	48%	\$ 516.00	\$ 12.00	2%
Insurance/Bonds	\$ 151.00	\$ 60.37	40%	\$ 241.00	\$ 90.00	60%
Postage/Printing	\$ -	\$ -	0%	\$ -	\$ -	0%
Training/Travel/Transportation	\$ -	\$ -	0%	\$ -	\$ -	0%
% Indirect (Limited to 5%)	\$ -	\$ -	0%	\$ -	\$ -	0%
Computer Network Charges Information Svcs	\$ 3,751.00	\$ 2,027.52	54%	\$ 4,055.00	\$ 304.00	8%
<b>SUBTOTAL</b>	<b>\$ 4,406.00</b>	<b>\$ 2,328.78</b>	<b>53%</b>	<b>\$ 4,812.00</b>	<b>\$ 406.00</b>	<b>9%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance Contracts	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance of Existing Landscaping	\$ -	\$ -	0%	\$ -	\$ -	0%
Repair of Equipment and Property	\$ -	\$ -	0%	\$ -	\$ -	0%
Utilities	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Sub-Contracts</b>						
Organization: MCS Counseling	\$ 89,835.00	\$ 42,699.39	48%	\$ 88,262.00	\$ (1,573.00)	-2%
<b>SUBTOTAL</b>	<b>\$ 89,835.00</b>	<b>\$ 42,699.39</b>	<b>48%</b>	<b>\$ 88,262.00</b>	<b>\$ (1,573.00)</b>	<b>-2%</b>
<b>Other</b>						
Transportation	\$ 1,875.00	\$ 50.00	3%	\$ 1,700.00	\$ (175.00)	-9%
Enhanced Drug Testing & Alcohol Monitor	\$ 8,220.00	\$ 2,624.55	32%	\$ 8,460.00	\$ 240.00	3%
Program Incentives & Graduations	\$ 3,200.00	\$ 887.38	28%	\$ 3,400.00	\$ 200.00	6%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 13,295.00</b>	<b>\$ 3,561.93</b>	<b>27%</b>	<b>\$ 13,560.00</b>	<b>\$ 265.00</b>	<b>2%</b>
<b>Total Project Budget</b>	<b>\$ 185,400.00</b>	<b>\$ 87,469.81</b>	<b>47%</b>	<b>\$ 189,238.00</b>	<b>\$ 3,838.00</b>	<b>2%</b>

NOTE: Indirect is limited to 5%

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## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: MCS Counseling

Project: Enhancement for Juvenile Therapeutic Courts

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	0%	\$ -	\$ -	0%
Staff MHP Salary	\$ 54,608.00	\$ 28,800.00	53%	\$ 62,400.00	\$ 7,792.00	14%
Total Benefits	\$ 13,260.00	\$ 6,630.00	50%	\$ 8,369.00	\$ (4,891.00)	-37%
<b>SUBTOTAL</b>	<b>\$ 67,868.00</b>	<b>\$ 35,430.00</b>	<b>52%</b>	<b>\$ 70,769.00</b>	<b>\$ 2,901.00</b>	<b>4%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	0%	\$ -	\$ -	0%
Office Supplies	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Clinical Supervision Data Collection	\$ 200.00	\$ 99.96	50%	\$ 5,460.00	\$ 5,260.00	2630%
Mileage Reimbursement	\$ 3,600.00	\$ 1,647.36	46%	\$ 3,800.00	\$ 200.00	6%
Assessment Material	\$ 6,000.00	\$ 246.00	4%	\$ 500.00	\$ (5,500.00)	-92%
Insurance/Bonds	\$ -	\$ -	0%	\$ -	\$ -	0%
Postage/Printing	\$ -	\$ -	0%	\$ -	\$ -	0%
Training/Travel/Transportation	\$ 4,000.00	\$ 1,192.59	30%	\$ 4,000.00	\$ -	0%
% Indirect (Limited to 5%)	\$ 8,167.00	\$ 4,083.48	50%	\$ 3,733.00	\$ (4,434.00)	-54%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 21,967.00</b>	<b>\$ 7,269.39</b>	<b>33%</b>	<b>\$ 17,493.00</b>	<b>\$ (4,474.00)</b>	<b>-20%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance Contracts	\$ -	\$ -	0%	\$ -	\$ -	0%
Maintenance of Existing Landscaping	\$ -	\$ -	0%	\$ -	\$ -	0%
Repair of Equipment and Property	\$ -	\$ -	0%	\$ -	\$ -	0%
Utilities	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	0%	\$ -	\$ -	0%
Other (Describe):	\$ -	\$ -	0%	\$ -	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Project Budget</b>	<b>\$ 89,835.00</b>	<b>\$ 42,699.39</b>	<b>48%</b>	<b>\$ 88,262.00</b>	<b>\$ (1,573.00)</b>	<b>-2%</b>

NOTE: Indirect is limited to 5%

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**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Kitsap County Juvenile and Family Court Services**

**Project: Enhancement for Juvenile Therapeutic Courts**

**Description**

Number of Professional FTEs	1.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>1.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 56,749.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 56,749.00</b>
Total Payroll Taxes	\$ 4,341.00
Total Cost of Benefits	\$ 14,331.00
Total Cost of Retirement	\$ 6,889.00
<b>Total Payroll Costs</b>	<b>\$ 82,310.00</b>



MCS Counseling Group, LLC

9633 Levin Road NW Suite 100  
Silverdale, WA 98383  
(360) 698 - 5883

July 8, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap County Juvenile and Family Court Services grant proposal to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Administered by the Kitsap County Superior Court pursuant to RCW 13.04.035, Kitsap County Juvenile and Family Court Services operates two therapeutic courts, Juvenile Drug Court and Individualized Treatment Court, which are designated to intervene in criminal behaviors that result from either substance abuse and/or mental illnesses for youth. Juvenile Services is proposing the following project: The continuation of a dedicated behavioral health therapist to provide assessment and treatment for youth involved in Individualized Treatment Court and Juvenile Drug Court.

MCS Counseling Group, LLC will commit the following resources to the proposal submitted by Kitsap County Juvenile and Family Court Services:

- Master's Level Therapist devoted to project

MCS Counseling Group LLC will provide a Master's Level Therapist who will be responsible for mental health assessment and treatment of youth participating in the Juvenile Drug Court and Individualized Treatment Court. The therapist will be a member of a team that includes a judge, prosecutor, defense attorneys, treatment court coordinator, probation counselor, and therapeutic court case manager working collectively to redirect and restore the lives of youth and reduce the likelihood of their involvement in the justice system.

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,

Julie Canterbury  
Owner of MCS Counseling Group

9633 Levin Rd NW, Suite 100  
Silverdale, WA 98383  
360-698-5883



July 19, 2019

Kitsap County Juvenile Therapeutic Court Programs  
1338 SW Old Clifton Rd,  
Port Orchard, WA 98367

Re: Letter of Commitment to provide Adolescent Substance Use Disorder treatment services

Agapé' Unlimited, a state certified drug and alcohol program, is committed to the collaborative relationship that we began July 1, 2017 to provide substance use disorder services to Kitsap County Juvenile Therapeutic Court involved youth.

The services Agapé' provides are substance use disorder assessments, referrals to Level .05 early intervention education and Level 3.5 intensive inpatient, Level 1 outpatient and Level 2.1 intensive outpatient group and individual therapy at our Bremerton treatment center. Agapé' also provides assessments and inpatient referral intervention services within the Juvenile Detention Center, as needed. A Chemical Dependency Professional has been designated as a liaison working with the Kitsap County Juvenile and Family Services and participates in weekly Drug Court Team meetings and court sessions.

Agapé' unlimited employs best practice/evidenced based cognitive behavioral therapy utilizing: Matrix, Change Company and Moral Reconciliation Therapy curriculum.

Currently Agapé' Unlimited is the sole Level 2.1 adolescent substance use disorder treatment provider in the central and south Kitsap County area. We believe our support and commitment will significantly improve the availability of Mental Health and Chemical Dependency services in the county. This collaborative effort will benefit our community by reducing truancy, substance use and criminal activity among our youth. We look forward to continuing this collaborative relationship that provides a vital service to our community.

Sincerely,



Kathleen Duncan MA, CDP  
Clinical Director

PROHIBITION ON REDISCLOSURE: This notice accompanies a disclosure of information concerning a patient in alcohol/drug abuse treatment, made to you with the consent of such patient. This information has been disclosed to you from records protected by federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.



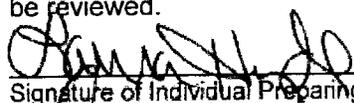
## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program: Kitsap County Substance Abuse Prevention

Organization Submitting: Kitsap County Prevention and Youth Services

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			NS
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			NS
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			NS
Organization did receive funding for this project in 2019	X			NS
Attachment A – Continuation Grant Proposal Summary Page	X			NS
Attachment B – Continuation Grant Proposal Checklist Form	X			NS
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			NS
Attachment C – Continuation Grant Proposal Narrative Template	X			NS
Proposal Narrative is limited to 10 pages	X			NS
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			NS
Attachment E – Total Agency Budget Form	X			NS
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			NS
Indirect is limited to 5%	X			NS
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			NS
Organization submitted Attachment G for each Sub-Contractor	X			NS
Sub-Contractor indirect limited to 5%	X			NS
Attachment H – Continuation Grant Proposal Project Salary Summary	X			NS
Attachment I – Letter of Resource Commitment (optional)	X			NS
No other attachments are included	X			NS
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			NS
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			NS

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
Signature of Individual Preparing Proposal

7/22/19  
Date

  
Signature of Organization's Chief Executive

7/24/19  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template**

**All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.**

**1. Project Description (20 points)**

**A. Project Design:**

We will grow and sustain the community-based prevention services that are being provided through our 2019 grant. It is our hope to increase youth substance abuse prevention services in the South Kitsap, Central Kitsap, and Bainbridge Island School District communities not being served by prevention coalitions. We will also concentrate county-wide prevention efforts focused on substances that are not being addressed by other funding. This program would grow the much-needed prevention service gaps that exist county-wide in the prevention of alcohol, opioid, methamphetamine, Kratom, club drugs, and other substances. All the substance abuse prevention strategies proposed in this application are environmental services. It is our estimate we will reach at least 60% of Kitsap County Residents (159,848) with these services.

The following is a description of the evidence-based, promising, and innovative practices we propose to deliver during this grant cycle:

**Strategy 1: Positive Social Norms** - Social norms marketing is based on the central concept of social norms theory – that people's behavior is influenced by their perceptions of what is "normal" or "typical." The problem is that we often severely misperceive the typical behaviors or attitudes of our peers. For example, if people believe that the majority of their peers smoke, then they are more likely to smoke. Using social norms marketing to inform people that the majority of their peers do not smoke can potentially lead them to avoid smoking. Thus, informing people that the majority of their peers are acting in a positive or healthy way can create an environment in which people actively strive to emulate what they believe is typical of their peers.

<https://www.hazeldenbettyford.org/education/bcr/addiction-research/social-norms-ru-915>) We will offer campaigns that focus on youth, parents and the many other adults that support youth.

Mass communications through social media, radio, newspapers or billboards are an effective and low-budget way to reach the community. We will accomplish this using state approved Positive Social Norms media campaigns targeting Youth and Adults

across the community with added outreach to cultural groups that have been identified to have higher incidence of substance abuse and ACEs such as African Americans, LGBTQ, Native Americans, and Hispanic/ Latino groups.

**Strategy 2: Information Dissemination:**

This strategy is an environmental strategy that provides information regarding the nature of drug use, abuse, addiction and the effects on individuals, families and communities. It also provides information about available prevention programs and services.

<https://www.samhsa.gov/capt/practicing-effective-prevention/prevention-approaches>

One added benefit to using the state approved campaigns is that most of them have translations in several languages which will be helpful with reaching non-English speaking groups. This will be accomplished using electronic distribution, social media, and printed materials.

The Information Dissemination program will target the community as a whole and focus additional efforts to cultural groups with a higher incidence of substance abuse and Adverse Childhood Experiences or ACEs.

[http://theathenaforum.org/sites/default/files/CPWICS\\_2017\\_Core\\_English\\_20170804.pdf](http://theathenaforum.org/sites/default/files/CPWICS_2017_Core_English_20170804.pdf)

We will provide education to alcohol, tobacco, and marijuana retailers regarding regulations and general youth substance use prevention strategies.

**Strategy # 3: Prevention Education:**

Prevention education is an Innovative Strategy that involves two-way communication and is distinguished from disseminating information by the fact that it is based on an interaction between the educator and the participants. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills and critical analysis (e.g. of media messages). Education will be provided mainly through, event-based community trainings, and group presentations. Additional outreach efforts will be given to cultural groups found to have a higher incidence of substance abuse.

Educational materials and resources will be shared prior to, during, and/or after these events. Examples include toolkits, posters, and science-based materials will be provided to the general public as part of presentations or at the request from service providers, educators, and community members. Pre and Post tests will be administered and used in evaluation.

At least 10 presentations regarding science-based prevention strategies, the proper use of Naloxone for opioid overdose, and general wellness will be delivered to community groups during this grant cycle. To measure the short-term effectiveness, we will

administer pre and posttests designed during the 2019 grant cycle. We will provide naloxone overdose kits to the community during naloxone trainings.

**The Kitsap Substance Abuse Prevention Program strategies to address the key recommendations listed in the 2014 Kitsap County Behavioral Health Strategic Plan are as follows:**

**Gap #1: Behavioral Health Prevention, Early Intervention and Training are as follows:** Through our community partnerships for prevention education we will grow and support shared plans through collaboration and increased care coordination among mental health, substance abuse, positive youth development programs, and schools through joint projects, blended funding, information sharing, and cross-training to prevent and reduce youth behavioral health issues. We also will support and actively seek funding to expand mental health and substance abuse prevention coalitions countywide. We will provide evidence based mental health and substance abuse early prevention parent education in partnership with the Nurse Family Partnership Program and the Strengthening Families program. We will offer professional development for educators, youth development and community agencies on youth mental health and substance abuse issues, concerns and supportive intervention strategies.

**Gap #2: Crisis Intervention/Triage Services**

We will expand school-based mental health and substance use prevention, outreach, assessment, intervention, referral and treatment by providing professional development, educational materials, and information to staff, students, and parents. Program staff will promote the increase of crisis response for youth through education of the community and partners on crisis response and recovery services and supports. In the efforts to reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth we will utilize evidence-based practice strategies to support this goal area.

**Gap #3: Outpatient Care – Psychiatry, Medical and Medication Management, Counseling Services**

We will advocate for increased access to community mental health and substance use disorder outpatient treatment for non-Medicaid and uninsured youth. We will share information about local services and partners during our events and services.

We will offer evidence and research-based strategies found to decrease depression, suicidal behavior and substance abuse among juvenile justice involved youth. Program staff will support substance abuse disorder and suicide prevention, screening, brief

intervention, and referral for treatment for youth through information sharing, collaboration with mental health, substance abuse prevention, law enforcement, healthcare professionals, and the community by providing education, information, and materials. In efforts to support suicide prevention and intervention we will educate school and youth service professionals.

Program staff will promote the increase of crisis response for youth through education of the community and partners on crisis response and recovery services and supports. In the efforts to reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth we will utilize evidence-based practice strategies to support this goal area.

**Gap #6: The Kitsap Substance Abuse Prevention Coalitions will promote Recovery Support Services**

We will expand parent and family education, involvement and support activities for youth and adults in behavioral health treatment by sharing information with the community, partnering programs and agencies, as well as recovery support programs.

We will help to address barriers to accessing treatment through community awareness efforts, sharing of needs assessment data findings, collaborative efforts with key partners and identifying alternative funding streams.

We will continue to assist in the opening of a Recovery Café in Kitsap County that provides prevention services as well.

The program will support youth involvement in the Kitsap County Juvenile Department Diversion Program, so youth can increase engagement a substance free lifestyle. We will offer training for staff and families of youth involved in Juvenile Department services.

**Collective Impact:**

Kitsap County Human Services is one of the driving factors in the Kitsap County Collective Impact process. The Kitsap County Human Services Department and the Kitsap County Prevention and Youth Services Program staff have participated in this process since the Collective Impact process began here in Kitsap. In 2014, youth substance abuse was identified as one of the six Kitsap County Community Health Priorities. We continue to participate in this process.

**Outreach:**

Outreach strategies focus on our staff connecting with our existing partners and reaching out to new partners inform them of the menu of science-based prevention strategies and services we offer with a focus on Kitsap's underserved communities. We will also seek out new partnerships with community groups and event planning committees. This will be accomplished through contact at community events as well as during shared meetings and initiatives. It will also involve researching community services and the sharing of information about these services with partnering agencies and the community. We will initiate contact utilizing in-person, email, social media, and phone strategies. Attention will be given to engaging all cultures and key leaders within the community. Partnerships include, but are not limited to the Q Center, the Kitsap Immigration Assistance Center, Kitsap Parent Coalition, Elk's, YWCA, The Suquamish Tribe, Port Gamble S'Klallam Tribe, Headstart/ECAP, Boys and Girls Clubs, local churches, Living Life Leadership, The Marvin Williams Center, Salvation Army, Stand Up for Kids, Kitsap Immigration Assistance Center, Salish Recovery Coalition, Kitsap Mental Health Services, Bremerton Housing Authority, Coffee Oasis, Kitsap Community Resources, and Peninsula Community Health Services.

**2. Accomplishments to Date (40 Points)****A. Evaluation:**

In our 2019 New Grant application We selected our goal to measure long-term success of decreasing substance abuse in Kitsap County by 20% before 2025 through collaborative support, education, and outreach. To measure this, we selected several sources of data from a variety of assessments and agencies. Our medium-term success measure was to increase the perception of harm (30%) associated with substance use through the implementation of evidence based and promising practice strategies and programming. Our short-term measure was to increase substance abuse prevention and awareness among youth, parents, and the community by providing positive social norms messaging, education, evidence-based campaigns, information dissemination and community education. When we began our work on this grant, one of the first steps was to work with staff member Philip Ramunno on evaluation. There is an inherent lack of data available that fit the one year contracting period. In fact, the prevention field in general is challenged to quantify "the prevention of something that didn't occur" Mr. Ramunno provided his great expertise in this area to assist with the development of an entirely new Evaluation System with new goals, activities and measures to complete evaluation within the one-year grant timeline. Pre and Post tests for events, programs, and campaigns were created as a way to specifically measure success within the timeline of this grant.

The new evaluation tool was completed and available to us over six months into the grant cycle. With the changes to evaluation, our scope of work in 2019 has shifted. The challenges encountered by our program with the County hiring process has played a huge role in the length of time necessary to fully implement services. Although delayed, we are confident we can fully deliver the 2019 contracted services. With this continuation grant we are asking for additional time to bring this program to its full potential.

### **B. Barriers to Implementation:**

This continuation grant would allow us to expand community-based prevention services across Kitsap County that began with our 2019 grant.

We were not able to bring staff on-board as quickly as planned and as a result, have been limited in the scope of services offered.

In order to deliver the majority of the 2019 services it was necessary to hire a new staff member as planned in our application. Unfortunately, we had many unforeseen delays to the hiring process. The first step was to see if our job duties fit the existing classifications of Analyst which had much more complex duties and skill sets than we needed. After examining the existing job classifications, it was determined that we needed to create a new classification as the job duties were significantly different than our two existing prevention positions. Doing this involved coordination among 4 staff members with their schedules for multiple meetings and tasks. It also involved official Board of County Commissioners approval to create a new position.

### **C. Key Accomplishments**

The Staff position has been created, job advertised, applicants screened and interviewed. Interviews were held on July 19, 2019 and we have two qualified candidates who are now in the background check stage. We anticipate making an offer of employment by 7/26.

We also provided one youth marijuana prevention training and one Parent/Mentor Vaping and Marijuana prevention training in partnership with the Marvin Williams Center and Living Life Leadership Program. These trainings were offered during spring break at the Youth Empowerment Conference (4/3/19) These trainings were offered as a breakout session for youth and after hours for the parents and mentors. The camp was open to all Kitsap County Youth.

We provided prevention education and materials during the *Kingston Have a Heart, Save a Life* training in partnership with the Suquamish Wellness Department. This event was a training on how to administer Naloxone in the event of an opioid overdose. It included a module on prevention of opioid abuse. Laura Hyde received training free of charge and was provided with the 2-dose nasal kit (\$50.00 value). 51 individuals

attended the training and 47 kits were given out. Suquamish Wellness has agreed to partner with us to provide future trainings including offering the Trainer free of charge.

While attending the CADCA (Community Anti-Drug Coalitions of America) national conference in Washington D.C. (funded by another program) Laura Hyde learned about impending federal funding to provide Naloxone kits to the community and began making inquiries to WA State Department of Health and applied for and were selected for the grant when it became available. The grant provides for 200 Naloxone kits (value \$10,000) and a Facilitator Training for the county. We are in the scheduling process for the Facilitator Training but are also in the planning process for community trainings and kit distribution to be held in the South, Central, and Bainbridge districts. A training was held at Kitsap Public Health District last month that distributed 15 kits and trained 15 individuals.

Additionally, we are participating in the planning of a new Recovery Café to come to Kitsap County that will partner with our prevention program to include Parents, Staff, Volunteers, and the community with prevention education events and materials as an integral part of the activities centered on supporting individuals in substance abuse and mental health recovery. "Parent substance use and parent experience of a SUD can have negative effects on children. Children with a parent who has a SUD are more likely than children who do not have a parent with an SUD to have lower socioeconomic status and increased difficulties in academic and social settings and family functioning. Children having a parent with a SUD are at risk of experiencing direct effects, such as parental abuse or neglect, or indirect effects, such as fewer household resources. Children of parents who have experienced addiction to a substance are 6 times more likely to become addicted.

[https://www.samhsa.gov/data/sites/default/files/report\\_3223/ShortReport-3223.html](https://www.samhsa.gov/data/sites/default/files/report_3223/ShortReport-3223.html)

### **3. Budget Narrative (30 Points)**

#### **A. Funding Request:**

We are requesting \$63,985 for 2020 to deliver these services. This includes a .5FTE Prevention Specialist and .1 FTE Program Manager, educational materials, printing, travel/training and other necessary expenses to operate the program. This is a \$625 cost savings while increasing staff time and services. By classifying the new staff member as a Program Specialist, we have a cost savings that provides us the ability to increase the Manager's time on the project to participate in planning, networking, community education, event coordination, meetings, billing and reporting. We reduced our indirect to 5% and did not add these expenses included in our 2019 grant to the program budget. We will leverage funding to cover the other administrative costs. Our only added expense is \$1000 to purchase a computer with necessary software for the Prevention Specialist to use exclusively.

## **B. Past Expenditures and Budget Modifications:**

We plan to hire our staff member this week. We chose not to charge the Manager's time to the 2019 grant until we were certain we would be able to hire a staff member to deliver the bulk of the contracted services.

The accomplishments listed in this application were completed by the Program Manager. We will be billing for her time during the month of July.

Both candidates for the part-time Specialist position have agreed to work full time until the end of the year. This has been approved by the County Management team and Gay Neal.

We are confident we will be able to fully expend the program funds. We will be offering education, events, educational materials, and prevention campaigns as planned and billing accordingly.

## **4. Sustainability (10 Points)**

### **A. Sustainability Plan:**

There is every indication the Naloxone funding secured in 2019 will be continued in 2020. (Value exceeds \$10,000 for 2019) We are currently in the process of scheduling community trainings. The Trainer has been committed by the Suquamish Wellness Department free of charge and will be reported as Program Match. We are scheduling for a Kitsap Facilitator Training now to provide a cadre of County employees and partners to serve as trainers for future events. We also have an in-kind offer from the Marvin Williams Center to provide a venue for the training event and approval to use county facilities in other areas.

On July 22nd we were notified that we been approved by the Suquamish Tribal Council to receive new funding from the Suquamish Tribe to expand prevention services. We are currently negotiating on amount and specific services to be provided. We will update Gay Neal as information becomes available.

In addition, we are always exploring other prevention funding including any opportunity that may present itself through the changes in the behavioral health delivery system. As a board member of the Washington Association of Substance Abuse and Violence Prevention (WASAVP) Laura Hyde will be made aware of federal, state, and other agency opportunities as they arise. We will pursue funding from the county general fund and other private grants to sustain county-wide youth substance abuse prevention covering the entire county and the range of substances abused by our youth.

EVALUATION WORKSHEET

PROJECT NAME: Kitsap County Prevention and Youth Services

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Decrease youth substance abuse in Kitsap County	Engage prevention partners and the community in coordinated efforts to reach individuals, especially youth that are using drugs or at risk of using drugs through collaborative support, education and outreach.	Decrease in substance use for youth: - Alcohol (20%) - Marijuana (20%) - Cigarettes (20%) - Vaping (20%)	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: <u>1/2/20</u> Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	# Referrals of students to Substance Abuse Professionals	INACTIVE
Increase substance abuse prevention and awareness among parents and the community.	Provide opportunities to increase the exposure to positive social norms messaging, education, attend events and engage in collaborative community wellness efforts through the use of state approved, evidence-based campaigns, information dissemination, community education and activities.	30% increase of awareness of tools, resources and services that support at healthy and drug free community (e.g. cessation, support, treatment) by 12/31/20 as result of Prevention Education presentations and events.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>1/2/20</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Pre and Post Tests administered at events, presentation, and programs	Pre and Post Tests administered at events, presentation, and programs
Increase the perception of harm among youth, parents and the community	Provide opportunities to increase the exposure to positive social norms messaging, education, attend events and engage in collaborative community wellness efforts through the use of state approved, evidence-based campaigns, information dissemination, and community education and activities.	30% increase of the perception of harm regarding the use of: - Alcohol - Marijuana - Opioids - Tobacco - Vaping among participants.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>1/2/20</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Pre and Post Tests administered at events, presentation, and programs	Pre and Post Tests administered at events, presentation, and programs
Increase the knowledge/confi	Provide opportunities to increase the exposure to	30% increase in confidence to talk with a friend about why they	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium	Pre and Post Tests	Pre and Post Tests

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. RATIONALE/ MEASURE	E. TIMELINE		F. BASELINE <small>Data and time</small>	G. SOURCE
<p>dence, and the ability to act among youth</p>	<p>positive social norms messaging, education, attend events and engage in collaborative community wellness efforts using state approved, evidence-based campaigns, information dissemination and community education and activities.</p>	<p>shouldn't use drugs or alcohol among participants. 30% increase in knowledge of: what to say to a friend who you are concerned about vaping - how to get help for a friend who is using drugs or alcohol - the signs of substance use among participants.</p>	<p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Long Start date: 1/2/20 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____</p>	<p>administered at events, presentation, and programs</p>	<p>administered at events, presentation, and programs</p>	
<p>Increase the knowledge, confidence/ ability to act among adults</p>	<p>Provide opportunities to increase the exposure to positive social norms messaging, education, attend events and engage in collaborative community wellness efforts using state approved, evidence-based campaigns, information dissemination and community education and activities.</p>	<p>30% increase in confidence to: to share ideas and resources to help a friend who has a teenager that is using drugs or alcohol - talk with teens about why they shouldn't use drugs or alcohol among participants. 30% increase in knowledge of: the signs of substance use among participants.</p>	<p><input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/2/20 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____</p>	<p>Pre and Post Tests administered at events, presentation, and programs</p>	<p>Pre and Post Tests administered at events, presentation, and programs</p>	
<p>Improve knowledge of How opioid overdose can be prevented and the resources that are available to parents</p>	<p>Implement evidence based, promising practice and community needs identified strategies, services, and programs. Administer pre and post tests before and after Naloxone events.</p>	<p>30% increase in knowledge of: the signs and symptoms of someone experiencing an opioid overdose - how to revive an individual experiencing an opioid overdose using a naloxone kit - the laws around who can administer Naloxone and when - what to do after administering naloxone - how opioid overdoses can be prevented</p>	<p><input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/2/20 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____</p>	<p>Pre and Post Tests administered at events, presentation, and programs # of kits given out Reports to staff</p>	<p>Pre and Post Tests administered at events, presentation, and programs Sign out sheets A list generated by staff documenting the # of individuals revived using</p>	
<p>Improve knowledge about how to revive an individual</p>							

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>experiencing an overdose of Opioids</p> <p>Increase the number of Naloxone kits available in the community and the number of individuals trained to administer the kits.</p> <p>Revive 15 individuals experiencing Opioid overdose using Naloxone kits provided to the community</p>		<p>the resources available to parents to prevent and opioid addiction among participants.</p> <p>Distribute 200 Naloxone kits to individuals attending the naloxone educational events.</p> <p>4 recipients of the Naloxone kits will self-report after use</p>				<p>the naloxone kits.</p>

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Kitsap County Prevention and Youth Services

Kitsap County Substance Abuse Prevention Program

Accrual       Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 167,000.00	74%	\$ 167,000.00	74%	\$ 167,000.00	74%
WA State Revenue	\$ 54,000.00	24%	\$ 54,000.00	24%	\$ 54,000.00	24%
Local Revenue		0%	\$ -	0%	\$ -	0%
Private Funding Revenue		0%	\$ -	0%	\$ -	0%
Agency Revenue		0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ 4,000.00	2%	\$ 4,000.00	2%	\$ 4,000.00	2%
<b>Total Agency Revenue (A)</b>	<b>\$ 225,000.00</b>		<b>\$ 225,000.00</b>		<b>\$ 225,000.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers		0%	#VALUE!		\$ 1.00	0%
Staff	\$ 127,554.00	57%	\$ 127,554.00	57%	\$ 127,554.00	56%
Total Benefits	\$ 46,820.00	21%	\$ 46,820.00	21%	\$ 46,820.00	21%
<b>Subtotal</b>	<b>\$ 174,374.00</b>	<b>77%</b>	<b>\$ 174,374.00</b>	<b>77%</b>	<b>\$ 174,375.00</b>	<b>77%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 500.00	0%	\$ 500.00	0%	\$ 500.00	0%
Office Supplies	\$ 1,800.00	1%	\$ 1,800.00	1%	\$ 1,800.00	1%
Other (Describe)		0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 2,300.00</b>	<b>1%</b>	<b>\$ 2,300.00</b>	<b>1%</b>	<b>\$ 2,300.00</b>	<b>1%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 500.00	0%	\$ 500.00	0%	\$ 500.00	0%
Audit/Accounting		0%	\$ -	0%		0%
Communication		0%	\$ -	0%		0%
Insurance/Bonds	\$ 1,408.00	1%	\$ 1,408.00	1%	\$ 1,408.00	1%
Postage/Printing	\$ 3,000.00	1%	\$ 3,000.00	1%	\$ 3,000.00	1%
Training/Travel/Transportation	\$ 14,937.00	7%	\$ 14,937.00	7%	\$ 14,937.00	7%
% Indirect	\$ 9,538.00	4%	\$ 9,538.00	4%	\$ 10,491.80	5%
Other (Describe) <u>computer charges</u>	\$ 7,943.00	4%	\$ 7,943.00	4%	\$ 8,737.30	4%
<b>Subtotal</b>	<b>\$ 37,326.00</b>	<b>17%</b>	<b>\$ 37,326.00</b>	<b>17%</b>	<b>\$ 39,074.10</b>	<b>17%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service		0%	\$ -	0%	\$ -	0%
Maintenance Contracts		0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping		0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property		0%	\$ -	0%	\$ -	0%
Utilities		0%	\$ -	0%	\$ -	0%
		0%	\$ -	0%	\$ -	0%
Other (Describe) <u>Prof. services</u>	\$ 11,000.00	5%	\$ 11,000.00	5%	\$ 11,000.00	5%
Other (Describe)		0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 11,000.00</b>	<b>5%</b>	<b>\$ 11,000.00</b>	<b>5%</b>	<b>\$ 11,000.00</b>	<b>5%</b>
<b>Other Costs</b>						
Debt Service		0%	\$ -	0%	\$ -	0%
Other (Describe)		0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 225,000.00</b>		<b>\$ 225,000.00</b>		<b>\$ 226,749.10</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Prevention and Youth Services

Project: Kitsap County Substance Abuse Prevention P

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 3,400.00	\$ 650.00	19%	\$ 8,560.00	\$ 5,160.00	152%
Staff	\$ 34,959.00	\$ -	0%	\$ 28,181.00	\$ (6,778.00)	-19%
Total Benefits and payroll taxes	\$ 9,905.00	\$ 255.00	3%	\$ 16,445.00	\$ 3,223.00	33%
<b>SUBTOTAL</b>	<b>\$ 48,264.00</b>	<b>\$ 905.00</b>	<b>2%</b>	<b>\$ 53,186.00</b>		<b>0%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ 1,000.00	\$ 1,000.00	#DIV/0!
Office Supplies	\$ 200.00	\$ -	0%	\$ 200.00	\$ -	0%
Other (Describe): Ed. Materials	\$ 3,000.00	\$ -	0%	\$ 3,160.00	\$ 160.00	5%
<b>SUBTOTAL</b>	<b>\$ 3,200.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 4,360.00</b>	<b>\$ 1,160.00</b>	<b>36%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!		#VALUE!	#VALUE!
Audit/Accounting	\$ 1,744.00	\$ -	0%		\$ (1,744.00)	-100%
Communication	\$ 1,000.00	\$ -	0%		\$ (1,000.00)	-100%
Insurance/Bonds	\$ 500.00	\$ -	0%		\$ (500.00)	-100%
Postage/Printing	\$ 500.00	\$ -	0%	\$ 400.00	\$ (100.00)	-20%
Training/Travel/Transportation	\$ 3,000.00	\$ -	0%	\$ 3,000.00	\$ -	0%
% Indirect (Limited to 5%)	\$ 6,402.00	\$ -	0%	\$ 3,039.00	\$ (3,363.00)	-53%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 13,146.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 6,439.00</b>	<b>\$ (6,707.00)</b>	<b>-51%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 64,610.00</b>	<b>\$ 905.00</b>	<b>1%</b>	<b>\$ 63,985.00</b>	<b>\$ (5,547.00)</b>	<b>-9%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: N/A

Project: Kitsap County Substance Abuse Prevention

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Kitsap County Prevention and Youth Services**

**Project: Kitsap County Substance Abuse Prevention Program**

**Description**

Number of Professional FTEs	0.60
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>0.60</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 28,181.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description: Manager Salary at 10%	\$ 8,560.00
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 36,741.00</b>
Total Payroll Taxes	\$ 3,317.00
Total Cost of Benefits	\$ 8,631.00
Total Cost of Retirement	\$ 4,497.00
<b>Total Payroll Costs</b>	<b>\$ 53,186.00</b>

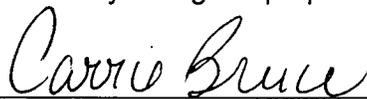


## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program: Prosecutor's Office Therapeutic Courts Unit Organization Submitting: Prosecutor's Office

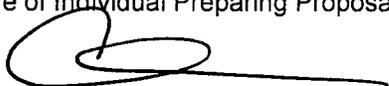
Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			cb
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			cb
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			cb
Organization did receive funding for this project in 2019	X			cb
Attachment A – Continuation Grant Proposal Summary Page	X			cb
Attachment B – Continuation Grant Proposal Checklist Form	X			cb
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			cb
Attachment C – Continuation Grant Proposal Narrative Template	X			cb
Proposal Narrative is limited to 10 pages				cb
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			cb
Attachment E – Total Agency Budget Form	X			cb
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			cb
Indirect is limited to 5%	X			cb
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form			X	cb
Organization submitted Attachment G for each Sub-Contractor			X	cb
Sub-Contractor indirect limited to 5%			X	cb
Attachment H – Continuation Grant Proposal Project Salary Summary	X			cb
Attachment I – Letter of Resource Commitment (optional)	X			cb
No other attachments are included	X			cb
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			cb
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			cb

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.



Signature of Individual Preparing Proposal

7/24/2019  
Date



Signature of Organization's Chief Executive

7/24/2019  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template**

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**All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.**

**1. Project Description (20 points)**

**A. Project Design:**

The Kitsap County Prosecuting Attorney's Office (KCPAO) currently participates in every Therapeutic Court Program in the Kitsap County District and Superior Courts. Pursuant to statute, the KCPAO is the gatekeeper regarding potential participants' eligibility for admission into the programs.<sup>1</sup> The KCPAO has worked for over two decades to cultivate and foster its partnerships with the courts, law enforcement, and community agencies involved in Kitsap County Superior Court's Adult Drug Court,<sup>2</sup> and the other therapeutic courts that have followed.<sup>3</sup> The KCPAO wants to continue this important work, offering alternatives to prosecution for individuals suffering from mental health or chemical dependency issues who face criminal charges that are a result of untreated behavioral health conditions.

The KCPAO has a vested interest in the success of therapeutic-court participants. The therapeutic-court model diverts the eligible defendant away from the standard criminal prosecution model that requires enormous amounts of time and resources to punish a defendant but does little to address underlying causes of criminal behavior. Kitsap County has extremely limited fiscal resources available for probation supervision and services, which leaves defendants who plead guilty or are convicted after trial, and who suffer from mental health or substance abuse issues, doomed to perpetually cycle through the criminal justice system, never able to truly address the issues that land them before the court in the first place.

Identifying and treating the core issues that bring these individuals into the criminal justice system has proven far more efficient both to address criminal recidivism and to protect the community. The KCPAO's Therapeutic Court Unit (TCU) recognizes the value in addressing and treating the individual behavioral health conditions that led to the criminal behavior in the first place. Indeed, therapeutic courts exist because of the recognized gap in the criminal justice system when addressing offenders whose criminal behavior is primarily the result of unidentified and/or untreated behavioral health conditions. These untreated health conditions result in negative consequences for the

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<sup>1</sup> R.C.W. 2.30.030(1). "...In criminal cases, the consent of the prosecutor is required."

<sup>2</sup> The first therapeutic court in Kitsap County, first established in 1999.

<sup>3</sup> Veteran's Treatment Court; and through District Court, the Felony Diversion Program, Human Trafficking Court and Behavioral Health Court.

local community and offenders alike because both are doomed to suffer the consequences of recidivist criminal conduct.

The Washington State Department of Corrections (DOC) tracks recidivism rates for offenders released from prison on a three-year basis. In 2013, DOC reported that the overall recidivism rate of offenders within three years following release from prison was 27.8%.<sup>4</sup> In contrast, the recidivism rate of Kitsap County Adult Drug Court graduates within five years following graduation is just 14.59%.<sup>5</sup> Programs like these have proven their effectiveness year after year, not just in Kitsap County, but across the nation. The KCPAO is committed to participating in and fostering the growth of the therapeutic court programs as long as the courthouse is in operation.

The Kitsap County Prosecutor's Office Therapeutic Court Unit was created to provide cohesive and integrated prosecutorial services to all county therapeutic courts. "Pursuing justice with integrity and respect" is the core mission of the KCPAO. To the elected prosecutor and his deputy attorneys, this means so much more than "lock up criminals". The KCPAO recognizes the power in the Prosecutor's charging authority, and the office ceaselessly works to ensure that power is tempered by acknowledging that many offenders have great potential for rehabilitation. The KCPAO is committed to continue narrowing the gap in services available to these offenders, while understanding that no program is a "one size fits all" and that each therapeutic court participant's needs must be met on an individualized basis. It is the multidisciplinary team approach to treatment that distinguishes the therapeutic court model and provides the best foundation for participant success. Without continued funding to support the TCU, the KCPAO would be forced to begin to narrow the path to the Therapeutic Courts as we are a necessary partner for continued success.

The therapeutic courts require:

**(1) Court presence of a prosecuting attorney.** At its inception, Drug Court was in session one afternoon a week. Today, Drug Court is held Wednesday afternoon, all day Thursday, one hour on Friday mornings, with occasional brief hearings when needed on an emergent basis. In total it is two full days a week of in-court time. Veteran's Court takes up the rest of Friday mornings, or two-and-one-half hours a week. Felony Diversion and Human Trafficking Diversion are held every other week, at two hours a session for each program. The Behavioral Health Court (BHC) is held all afternoon on Thursdays and has plans to double in size. Residential Drug Offender Sentencing Alternative (ResDOSAs) hearings are heard for two hours once each month. All these hearings require a prosecuting attorney to be present in court and support staff to prepare the cases for court.

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<sup>4</sup> Washington State DOC 3-year Recidivism Rates, DOC Research Unit—June 2013.

<sup>5</sup> Kitsap Superior Court Adult Drug Court (ADC) Drug Court Case Management statistics, as collected by ADC Treatment Court Manager Samantha Lyons.

(2) **Attorney participation in court staffing sessions:** Along with court time, Drug Court, Veterans Court, Human Trafficking Court and Behavioral Health Court require staffing meetings with the treatment team, compliance team, judge and the defense attorney. For Drug Court, these meetings take all Wednesday morning and 30 minutes before each of the three drug court sessions. Staffing lasts for one hour before the Veteran's Court session. For Behavioral Health Court, staffing occurs all morning on Thursdays (three hours), and Human Trafficking Court staffing lasts one hour. In total, staffings consume approximately ten hours of every week<sup>6</sup>. The result is that a prosecuting attorney is needed in court or in staffing for the equivalent of about four days' worth of work each week. This does not include the time spent on these cases outside of court or staff meetings.

(3) **Case Review:** Beyond the court presence and the required staffing meetings, a Deputy Prosecuting Attorney (DPA) is required to review whether the defendant is statutorily eligible for these programs as well as whether the defendant meets each program's eligibility standards. Determining eligibility requires the DPA to review the facts of the current case, criminal history, treatment history, behavior while in jail, behavior while on DOC supervision, investigate the facts of prior cases, contact victims, and determine restitution. In fact, it is this aspect of the therapeutic courts that involves the lion's share of work for the assigned DPA. This type of thorough review is increasingly difficult given the demands of court and staffing meetings and insufficient time can negatively affect the quality of the analysis used in making the serious decision to divert a criminal offender from the traditional criminal-justice model of punishment toward the therapeutic court rehabilitative model.

(4) **Terminations:** Therapeutic-court programs do not work for every participant and when it does not, the DPA must prepare all the program termination and sentencing paperwork. The DPA must essentially prepare a document trail of the bench trial, verdict, and sentence involved in the termination process. As a practical matter, it is quite time-consuming for the DPA to accurately generate these critical documents.

Therapeutic courts must continue to grow and expand to meet the increasing demand that has resulted from continued and expanding recognition that some criminal behavior is caused by unidentified and untreated behavioral health conditions. The therapeutic courts have demonstrated over the last two decades that collaborative efforts between criminal justice agencies and local, community-based treatment and other service providers can redirect a life toward long-term stability. To support these collaborations and to ensure the continued growth and expansion of the therapeutic courts, the KCPAO must continue its' participation with

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<sup>6</sup> Nine hours on the weeks that Felony Diversion is held, Ten hours on the weeks of Human Trafficking Court.

sufficient resources to fully engage in these proven and effective partnerships. Only then can the KCPAO and its' partners truly maximize the potential collective impact of these programs in our community.

#### Evidence-Based Practices Used by Kitsap County Therapeutic Courts:

- Crisis Intervention Model;
- Therapeutic Court Model Components<sup>7</sup>:
  - Use of collaborative, non-adversarial team approach with prosecution, defense, Drug Court team (chemical dependency counselors, treatment aides, educational and vocational training counselor, behavioral health counselor, etc.), Behavioral Health Court team (Behavioral Health Specialists, chemical dependency treatment services, etc.), and judge presence at staffings, while promoting public safety and protecting constitutional rights of participants;
  - Access to continuum of care for mental health and chemical dependency treatment, and other related services;
  - Coordinated, individuated response to participants' compliance or non-compliance;
  - Abstinence monitored by random UA and/or other testing;
  - Early identification of potential candidates and address program entry barriers;
  - Multi-disciplinary team partnerships created and maintained;
  - Judicial interaction/connection made with each participant;
  - System of rewards/incentives created;
  - Consequences/sanctions are on graduated/progressive basis, are consistent, fair and proportionate to the violation, and designed to create a learning moment (e.g., written assignment in lieu of jail);
  - All team members continue inter-disciplinary education regularly to stay abreast of current law and research on best practices;
  - Continued monitoring, evaluation and strategic planning to promote effective practice, procedure and operations;
  - Ensuring that historically disadvantaged groups have equal access, and are provided the same opportunities, to participate in the appropriate therapeutic court.

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<sup>7</sup> See "Adult Drug Court Best Practices Standards, Volume II," National Association of Drug Court Professionals, 2015.

Outreach:

All persons interested in participating in one of the therapeutic courts must first fill out a TCU application. The application is accessible online on the KCPAO website. No longer must a defendant wait for their attorney to affirmatively seek to get the case placed on a “view” calendar. The submittal of the application is the trigger to getting the case under review by one of the TCU DPAs. Referrals come from a wide variety of sources, including family members, corrections officers, and most often, defense attorneys. As long as the prospective participant is willing to abide by program requirements and wants to effectuate change, the application is the first step towards accomplishing a different life for themselves.

The TCU is developing a brief therapeutic court unit fact sheet. The fact sheet will be a one-page summary of the available therapeutic courts with a short description of each; information on how to access the on-line application; and a contact point for further questions. This flyer will be posted in various high-volume locations in the courthouse, such as in the jail, in each court clerk’s office, on the District Court board, in the prosecutor’s reception area, the public defender’s lobby, and so on. The best outreach of all, of course, tends to be word-of-mouth. Nearly half of all interested prospective participants learn of therapeutic court opportunities from other defendants, whether it be while in jail, in court, or in the community. The KCPAO strives to be transparent with program opportunities, while making sure the information is accessible to anyone interested.

## **2. Accomplishments to Date (40 Points)**

### **A. Evaluation:**

Beginning in 2019, the KCPAO was able to restructure a portion of the felony division by virtue of the grant monies received through this project. Grant funds allowed for development of a focused unit, the TCU, in which two experienced Deputy Prosecuting Attorneys and one full-time Legal Assistant now process, review, and decide on all new TCU referrals. First, the TCU implemented the use of a single, universal application that did away with having six different application processes for six different therapeutic courts. This process was converted to an online application available to defense attorneys to complete for his/her client to be considered for any of the treatment courts. Next, all program applications are being reviewed by the two DPAs in the TCU. The two DPAs collaborate and communicate constantly, oftentimes round-tabling an application to determine which court is most appropriate for that person’s needs. This practice has resulted in streamlining the application process to eliminate “court-shopping” for an applicant seeking the least onerous program, which was a program goal from inception.

To fully address and adequately support the therapeutic courts, the KCPAO developed the TCU, made up of three experienced and dedicated people

with whom all responsibility for providing prosecutorial services to the treatment courts lies. The two significant effects the creation of the TCU had were:

- (1) TCU eliminated the ad-hoc, piecemeal approach of having multiple prosecutors involved in the therapeutic courts in differing capacities. The streamlined process now engages designated deputy prosecutors for each of the different therapeutic courts, fostering continuity in service, minimizing confusion regarding responsibilities, and simplifying the process to access a prosecutor when needed by a treatment, compliance, or court team member; and
- (2) The TCU is now the centralized referral unit for all of the therapeutic courts in the county. TCU has eliminated the likelihood that criminally charged individuals will try to “forum-shop” for the least onerous therapeutic court option, as all requests are funneled through the same two DPAs, who are experienced enough to separate serious applicants from those “shopping” with insincere motives.

The development of the TCU, working in partnership with the Superior and District Courts, has fostered growth in the ability of the therapeutic court programs to provide Recovery Support Services as defined in the 2014 Kitsap County Behavioral Health Strategic Plan. The primary policy goal the TCU can positively influence is to reduce the number of people in Kitsap County who recycle through the criminal justice systems. For a substantial number of Adult Drug Court participants, by way of example, maintaining abstinence from drugs and alcohol means freedom from crime. In other words, if the participant is not using drugs, they do not commit crimes. Similarly, for Behavioral Health Court participants, access to treatment through the court and case management eradicates frequent non-emergent emergency room visits. These simple facts, while secondary to the participant’s primary goal of a life free from substance abuse or one in which his/her mental health issues are controlled and treated, have an enormous ripple effect on the greater community.

The sky is the limit when it comes to program potentiality from the KCPAO’s perspective. The grant award from 2019 enabled the KCPAO to develop this unit; if awarded monies in 2020 the KCPAO plans to continue providing the prosecutorial services each therapeutic court relies heavily on while being open to future adaptation. In 2019, the BHC had planned to expand and the KCPAO was prepared to accommodate that expansion with uninterrupted prosecutorial support during the process. As it turned out, BHC has experienced some staffing issues in that Kitsap Mental Health (KMH) is not currently fully staffing the program with qualified mental health specialists. The expectation is that as soon as KMH is able to fill that second position with a qualified Behavioral Health Specialist, the

BHC will begin its expansion as previously planned, and the KCPAO will be standing by ready to handle the additional influx of participants.

B. Barriers to Implementation

At the launch of the TCU, there was some resistance from the defense bar to the uniform application process. Complaints were typically of the sort that it was thought the application would delay entry into the programs by clogging up the pathway to participation. However, once the TCU began functioning, these concerns were quickly dispelled by the clear fact that applications were processed more efficiently than what had previously been the case.

As noted above, the BHC is experiencing a shortage of qualified staff from Kitsap Mental Health which has thwarted the program's plan to expand maximum participant capacity in 2019. This hurdle is expected to be temporary, and once resolved, KCPAO will accommodate the program growth that is anticipated.

Additionally, another issue with which the TCU has struggled during the process of establishing this program has to do with accurate collection and recording of data related to the TCU. As this program has just been developed, it wasn't clear exactly what data should be collected or what the best mechanism for collecting it would be. Between first and second quarter reporting, as some kinks have been worked out, the numbers showed a drastic change in expediency that was falsely elevated due to normal program trial and error as well as just ensuring the process in place to record the pertinent data worked as efficiently as possible. There were also several additional informational requests made that necessitated re-formatting the reports obtained from the KCPAO's data collection system. It appears that those kinks have been worked out and moving forward, the expectation is that the collection, compilation, and interpretation of said data should be streamlined and accurate.

C. Key Accomplishments

The fluidity of the application process is the biggest and most impactful accomplishment of the TCU. Gone are the days when an applicant was juggled back and forth between multiple therapeutic courts as the parties volleyed to determine which best suited the applicant's needs. No longer does an applicant's request get lost in the shuffle or buried under mountains of competing prospective participants. From the moment a TCU application arrives at the KCPAO, that request travels seamlessly through a criminal history assessment, a probable cause review, and a consult with any victims for a restitution decision on its way to an eligibility determination. Such determination is then announced to the defense attorney and therapeutic court team as the participant gets closer to admittance into his/her desired program. All the while maintaining a transparent process proving to be effective reaching the desired result of accurate, appropriate

therapeutic court placement for those individuals in need of behavioral health services that will deviate their future conduct away from involvement in the criminal justice system.

### 3. **Budget Narrative (30 Points)**

#### A. Funding Request

2 FTE Attorney 2 (Deputy Prosecutors). Funding (\$225,731.04) is requested for two full time Attorney 2 positions to meet the demonstrated need to current and expanding Therapeutic Courts (Behavioral Health Court, Drug Court, Veteran's Court, Human Trafficking Court, Felony Diversion, ResDOSA Court)

1 FTE Office Support Specialist (Legal Assistant). Funding (\$73,316.84) is requested for 1 full time Legal Assistant is requested to support the workload of the Therapeutic Courts.

#### B. Past Expenditures and Budget Modifications

In 2019 we made the same request for the creation of our Therapeutic Courts Unit with the finding of two full-time DPAs and one full-time Legal Assistant, totaling \$291,653. As of June 30, 2019, we have expended \$116,843.52. We also requested \$7,200 for supplies and equipment. As of June 30, 2019, we have expended \$4,279.68. We have not requested any budget modifications.

### 4. **Sustainability (10 Points)**

#### A. Sustainability Plan:

Long term sustainability of Therapeutic Courts is a high priority for the Kitsap County Prosecutor's Office. The KCPAO has aligned as partners with the Superior Court, the District Court and many other agencies involved in the Mental Health, Chemical Dependency and Therapeutic Courts Programs. We will utilize data obtained during this grant funded program to demonstrate the successes reached and the benefits gained by the creation of the Therapeutic Courts Unit in the Prosecutor's Office. The additional statistics collected through the remainder of the year and beyond, will illustrate the project goals that have been met, along with the desired outcomes which benefit not only the program participants but the entire community.

It is the Prosecutor's position that the therapeutic-court programs have become an expected, important and effective alternative to the traditional criminal-justice paradigm. The Therapeutic Court Unit in the Prosecutor's Office is a necessary part of the Therapeutic Courts program, was a whole, and should ultimately be funded through the Prosecutor's annual budget.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

Continuation Grant Proposals must include a completed Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Prosecutor's Office Therapeutic Courts Unit

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
Continue providing comprehensive, consistent, and knowledgeable prosecutorial services to the therapeutic courts	Maintain the dedicated Therapeutic Court Unit within the Prosecutor's Office, comprised of two full-time, experienced deputy prosecutors and one legal assistant.	Streamline application process so 100% of referrals filter through the TCU	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: 01/01/2020 Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: _____	For established courts, a baseline of the past three years; for courts not in existence three years, since inception	Prosecutor Case Management System Statistical and Comparison Reports
Increase the number of participants in the Behavioral Health Court	Click here to enter text.	Support and foster sustainable growth in Behavioral Health Court	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/01/2020 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Marked increase each quarter moving forward of 3-5 additional beyond current cap	Prosecutor Case Management System Statistical and Comparison Reports
Reduce perpetual cycle of those in the criminal justice system stuck in the "revolving door" of the courts and jails by diverting appropriate cases from the traditional prosecution track	TCU centralized application process identifying cases with defendants in need of substance abuse treatment or mental health treatment whose criminal involvement demonstrated a nexus between the MH/CD issues and the criminal behavior	Increase participant numbers by reviewing and approving for entry all appropriate candidates	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/01/2020 Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	ongoing	Prosecutor Case Management System Statistical and Comparison Reports

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Kitsap County Prosecuting Attorney

Project: Therapeutic Courts Unit

Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 1,075,182.00	42%	\$ 1,098,952.00	40%	\$ 1,098,952.00	40%
WA State Revenue	\$ 715,945.00	28%	\$ 686,276.00	25%	\$ 686,276.00	25%
Local Revenue	\$ 262,705.00	10%	\$ 318,858.00	12%	\$ 318,858.00	12%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ 533,979.00	21%	\$ 611,051.00	23%	\$ 611,051.00	23%
Miscellaneous Revenue	\$ 724.00	0%	\$ 469.00	0%	\$ 469.00	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 2,588,535.00</b>		<b>\$ 2,715,606.00</b>		<b>\$ 2,715,606.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 1,336,016.00	14%	\$ 1,465,570.00	15%	\$ 1,465,570.00	15%
Staff	\$ 5,189,170.00	53%	\$ 5,322,278.00	53%	\$ 5,322,278.00	53%
Total Benefits	\$ 2,271,792.00	23%	\$ 2,249,757.00	23%	\$ 2,249,757.00	23%
<b>Subtotal</b>	<b>\$ 8,796,978.00</b>	<b>89%</b>	<b>\$ 9,037,605.00</b>	<b>91%</b>	<b>\$ 9,037,605.00</b>	<b>91%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ -	0%	\$ -	0%	\$ -	0%
Office Supplies	\$ 56,973.00	1%	\$ 64,173.00	1%	\$ 64,173.00	1%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 56,973.00</b>	<b>1%</b>	<b>\$ 64,173.00</b>	<b>1%</b>	<b>\$ 64,173.00</b>	<b>1%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ -	0%	\$ -	0%	\$ -	0%
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	0%
Postage/Printing	\$ -	0%	\$ -	0%	\$ -	0%
Training/Travel/Transportation	\$ -	0%	\$ -	0%	\$ -	0%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe) All Services (5415-5499)	\$ 338,050.00	3%	\$ 308,050.00	3%	\$ 308,050.00	3%
<b>Subtotal</b>	<b>\$ 338,050.00</b>	<b>3%</b>	<b>\$ 308,050.00</b>	<b>3%</b>	<b>\$ 308,050.00</b>	<b>3%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ -	0%	\$ -	0%	\$ -	0%
Utilities	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe) Misc/Other (6971)	\$ 142,527.00	1%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 142,527.00</b>	<b>1%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>
<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe) Interfund	\$ 535,804.00	5%	\$ 573,978.00	6%	\$ 573,978.00	6%
<b>Subtotal</b>	<b>\$ 535,804.00</b>	<b>5%</b>	<b>\$ 573,978.00</b>	<b>6%</b>	<b>\$ 573,978.00</b>	<b>6%</b>
<b>Total Direct Expenses</b>	<b>\$ 9,870,332.00</b>		<b>\$ 9,983,806.00</b>		<b>\$ 9,983,806.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Prosecutor's Office

Project: Therapeutic Courts Unit

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 209,665.00	\$ 78,618.90	37%	\$ 228,286.92	\$ 18,621.92	9%
Total Benefits	\$ 81,989.00	\$ 38,224.62	47%	\$ 70,760.96	\$ (11,228.04)	-14%
<b>SUBTOTAL</b>	<b>\$ 291,654.00</b>	<b>\$ 116,843.52</b>	<b>40%</b>	<b>\$ 299,047.88</b>	<b>\$ 7,393.88</b>	<b>3%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ 4,000.00	\$ 3,834.97	96%	\$ -	\$ (4,000.00)	-100%
Office Supplies	\$ 3,200.00	\$ 444.71	14%	\$ -	\$ (3,200.00)	-100%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 7,200.00</b>	<b>\$ 4,279.68</b>	<b>59%</b>	<b>\$ -</b>	<b>\$ (7,200.00)</b>	<b>-100%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 298,854.00</b>	<b>\$ 121,123.20</b>	<b>41%</b>	<b>\$ 299,047.88</b>	<b>\$ 193.88</b>	<b>0%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

**Agency Name:** Prosecutor's Office  
**Project:** Prosecutor's Office Therapeutic Courts Unit

<b>Description</b>	
Number of Professional FTEs	2.00
Number of Clerical FTEs	1.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>3.00</b>

<b>Salary Information</b>	
Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 160,950.40
Salaries of Clerical Staff	\$ 48,110.40
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 209,060.80</b>
Total Payroll Taxes	\$ 19,226.12
Total Cost of Benefits	\$ 43,071.00
Total Cost of Retirement	\$ 27,689.96
<b>Total Payroll Costs</b>	<b>\$ 89,987.08</b>
<b>Grand Total</b>	<b>\$ 299,047.88</b>

**Kitsap County District Court**  
State of Washington



**CLAIRE A. BRADLEY**  
JUDGE, DEPARTMENT 1

**JEFFREY J. JAHNS**  
PRESIDING JUDGE, DEPARTMENT 2

614 DIVISION STREET  
PORT ORCHARD, WA 98366  
360-337-7109

**MARILYN G. PAJA**  
JUDGE, DEPARTMENT 3

[kitsapgov.com/dc](http://kitsapgov.com/dc) [KCDC@co.kitsap.wa.us](mailto:KCDC@co.kitsap.wa.us)

**KEVIN P. KELLY**  
JUDGE, DEPARTMENT 4

**CLINT L. CASEBOLT**  
COURT ADMINISTRATOR

July 2, 2019

Kitsap County Citizens Advisory Board  
c/o Kitsap County Human Services  
614 Division Street, MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizen's Advisory Committee:

I am writing to express my commitment for the Kitsap County Prosecutor's Office grant application to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

The Kitsap County Prosecutor's Office provides undeniably crucial support to all to the therapeutic courts in Kitsap County. The Prosecutor's Office was instrumental in creating the county's first therapeutic court almost two decades ago when Kitsap Superior Court's Drug Court was created. Since the Drug Court's inception, the Prosecutor's Office has been the gatekeeper for all therapeutic court and alternative sentencing programs. They have provided a deputy prosecutor (DPA) to review cases for eligibility of potential participants, have provided a DPA to file charges and to appear for all case staffing, team meetings and court hearings. Over the many years, the Drug Court has expanded significantly, and many other therapeutic courts and alternative programs have been created.

**The Kitsap County District Court will commit the following resources to the proposal submitted by the Kitsap County Prosecutor's Office:**

- Provide one (1) 1.0 Probation Compliance Monitor;
- Provide one (1) .20 FTE Judge to preside over BHC;
- Provide one (1) .25 BHC Program Manager;
- Provide one (1) .10 court clerk for all BHC hearings;

- Provide one (1) .05 Office Support Coordinator for budget, creation of forms, and assistance with equipment issues;
- Provide weekly courtroom space, use of computers, office equipment and office supplies.

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County.

We look forward to working with you on this exciting adventure.

Sincerely,

A handwritten signature in black ink that reads "CLINT CASEBOLT". The signature is written in a cursive, slightly slanted style.

Clint Casebolt, Court Administrator  
Kitsap County District Court

THE SUPERIOR COURT OF THE STATE OF WASHINGTON  
FOR KITSAP COUNTY

614 DIVISION STREET, MS-24  
PORT ORCHARD, WASHINGTON 98366  
(360) 337-7140

JEANETTE M. DALTON, JUDGE  
DEPARTMENT NO. 1  
MICHELLE ADAMS, JUDGE  
DEPARTMENT NO. 2  
MELISSA A. HEMSTREET, JUDGE  
DEPARTMENT NO. 3  
WILLIAM C. HOUSER, JUDGE  
DEPARTMENT NO. 4  
JEFFREY P. BASSETT, JUDGE  
DEPARTMENT NO. 5

KEVIN D. HULL, JUDGE  
DEPARTMENT NO. 6  
JENNIFER A. FORBES, JUDGE  
DEPARTMENT NO. 7  
SALLY F. OLSEN, JUDGE  
DEPARTMENT NO. 8  
-----  
MATTHEW L. CLUCAS  
COURT COMMISSIONER  
FRANK A. MAIOCCO, JR.  
COURT ADMINISTRATOR

June 27, 2019

Kitsap County Citizens Advisory Board  
c/o Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Re: Letter of Support to provide Prosecution in Chemical Dependency, Mental Health  
and Therapeutic Court Programs

Dear Citizen Advisory Committee:

I write to express my continuing support for the Kitsap County Prosecutor's grant application for 2020 Substance Abuse, Mental Health and Therapeutic Court program funding. The Prosecutor's Office is a necessary and essential partner for the effective operations of Kitsap County's therapeutic courts. It was instrumental in creating the County's first therapeutic court almost two decades ago when Kitsap Superior Court's Drug Court was created; and, it has continued to work collaboratively with the Court to expand, innovate, and grow.

The Prosecutor's Office serves as the gatekeeper for all therapeutic courts and alternative sentencing programs, providing a deputy prosecutor (DPA) to review cases for individual treatment court eligibility. Further, the assigned DPA serves as an integral member of the Court's executive team, filing charges and holding participants accountable, and appearing for weekly case staffings, team meetings and court hearings. As noted last year, the Drug Court has expanded significantly, and many other therapeutic courts and alternative programs have been created. However, until your generous investment last year, the Prosecutor's Office had been unable to procure funding for additional personnel and struggled to support all of these programs.

The Prosecutor's Office grant renewal proposes to sustain the critical personnel necessary to support and potentially expand the County's existing therapeutic court programs. The application seeks to sustain funding for two 1.0 FTE Deputy Prosecutors, and one 1.0 FTE support staff. Absent these resources, the Prosecutor's Office will have to reduce its much-needed presence and support to the Adult Drug Court, Veterans Treatment Court, Juvenile Drug Court, Individualized Treatment Court, Behavioral Health Court and

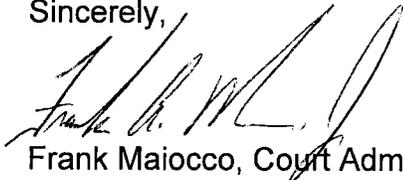
Human Trafficking Court. Notably, this impacts six separate therapeutic court programs spanning the Superior, Juvenile, and District Courts.

The Kitsap County Superior Court/Drug Court will continue to provide the following resources in order to effectively partner with the Kitsap County Prosecutor's Office:

- Provide one 0.50 FTE Judge to preside over the Adult Drug Court and Veterans Treatment Court;
- Provide one 1.00 FTE Treatment Court Manager;
- Provide one 1.00 FTE Office Support Coordinator for budget, creation of forms, and assistance with equipment issues;
- Provide three 1.00 FTE Drug Court Compliance Specialists;
- Provide courtroom space, office equipment, and office supplies;

With these resources, we believe our collaboration with the Prosecutor's Office will continue to improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services throughout Kitsap County.

Sincerely,



Frank Maiocco, Court Administrator  
Kitsap County Superior Court

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name: Kitsap County Sheriff's Office

Primary Contact: Penelope Sapp [psapp@co.kitsap.wa.us](mailto:psapp@co.kitsap.wa.us) 360-337-4514

Organization Address: 614 Division Street MS#33 Port Orchard, Wa. 98366

Federal Tax ID Number: 91-6001348 Legal Status of Organization: Kitsap County Sheriff's Office

Individual Authorized to Sign Contracts: Sheriff Gary Simpson

**Continuation Grant Proposal Information**

Proposal Title: Crisis Intervention Training Project

Number of Individuals Screened: \_\_\_\_\_

Number of Individuals Served: 40 +

Requested Amount of Funding: \$22,500.00

Matching Funds: \$20,000.00

**Please check which area(s) of the Continuum this project addresses:**

<input type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input checked="" type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Recovery Support Services
<input type="checkbox"/> Outpatient treatment	

**Please check which area(s) of the County this project is focused:**

<input type="checkbox"/> South Kitsap	<input type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

**Crisis Intervention Training is an important tool that we can provide all our county deputies, city police officers and corrections officers. This training and education are essential to assisting these staff members in effectively managing a crisis event. The training teaches them techniques to deescalate someone in a crisis, and what local resources are available at that immediate time. This training has changed the culture of Kitsap County first responders and the approaches they use when interacting with someone in a behavioral health crisis. The advanced training adds another skill level and enhancing a well-trained law enforcement cadre in Kitsap County.**

*Penelope Sapp*  
Signature

*LT*  
Title

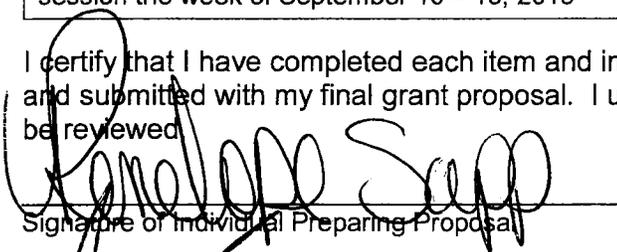
*7/23/19*  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Checklist Form**

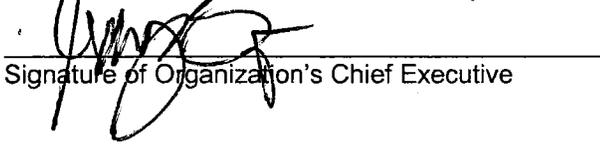
Name of Program: Crisis Intervention Training    Organization Submitting: Kitsap County Sheriff's Office

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			PS
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			PS
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			PS
Organization did receive funding for this project in 2019	X			PS
Attachment A – Continuation Grant Proposal Summary Page	X			PS
Attachment B – Continuation Grant Proposal Checklist Form	X			PS
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			PS
Attachment C – Continuation Grant Proposal Narrative Template	X			PS
Proposal Narrative is limited to 10 pages	X			PS
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			PS
Attachment E – Total Agency Budget Form	X			PS
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			PS
Indirect is limited to 5%	X			PS
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			PS
Organization submitted Attachment G for each Sub-Contractor	X			PS
Sub-Contractor indirect limited to 5%	X			PS
Attachment H – Continuation Grant Proposal Project Salary Summary	X			PS
Attachment I – Letter of Resource Commitment (optional)		X		PS
No other attachments are included	X			PS
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			PS
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			PS

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
Signature of individual Preparing Proposal

7/23/19  
Date

  
Signature of Organization's Chief Executive

7/23/19  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template**

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**All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.**

**1. Project Description (20 points)**

- A. Project Design-This proposal is to continue the 2/40 Crisis Intervention Training (CIT), advanced training and funding for a collaborative resource brochure. This funding has allowed all law enforcement agencies in Kitsap County to have local access in providing deescalate training. This training has been the focus of many stakeholders throughout Washington State, and even more so with the passing of I-940. Law enforcement leaders throughout Kitsap County want all their staff to attend the 40-hour CIT course in order to add this tool to their belt. The CIT teaches de-escalation skills, understanding those that suffer from a behavioral health issue, and what types of local resources are available. Keeping this training localized allows the consistency of training, a local resource information, which would not be available with the training provided outside of the county. The local training is more cost effective, without having travel expenses be a factor. Often times when law enforcement is trying to balance cost, out of county training becomes less of a priority. Without this localized training, we would not have the high caliber of law enforcement trained in CIT. Positive de-escalation skills will likely reduce a negative interaction and possible law violation. This training introduces law enforcement to the services that are available for someone in crisis and diverting people from jail.

The funding for the advanced training that is being requested allows us to provide training on important topics that are surfacing. We try and find the best training that will be beneficial to law enforcement and will address the current issues. This is a fluid area, because topics and challenges change every year.

The final area of funding we are requesting is the "How to Get Help" resource brochure. This brochure is a collaborative process, working with several stakeholders in the community. The brochure is provided to all local law enforcement, so they can hand this out to those that need services.

This proposal addresses the Policy Goals from the 2014 Kitsap County Behavioral Health Strategic Plan under:

- Reduce the number of people in Kitsap County who recycle through the criminal justice systems, including jails and prisons.

- Reduce the number of chemically dependent and mentally ill youths and adults from initial or further criminal justice system involvement.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth.
- Improve the health status and wellbeing of Kitsap County residents.

This training is beneficial in meeting these goals, because they learn about the signs and symptoms of mental illness and co-occurring disorders. Law enforcement will recognize the signs and symptoms of a crisis and safely deescalate the crisis. Finally, they will be able to utilize the community resources available. The higher probability of a positive outcome.

- B. Outreach-Law enforcement is called to handle crisis calls every day. Since May of this year, local law enforcement agencies have responded to 944 calls categorized as suicidal calls, and 320 categorized as mental health calls. These calls are very time consuming and for those that have attended the CIT classes, they have more techniques to utilize for a positive outcome. Law enforcement engages with people in crisis multiple times a day and they have learned through this training to redirect people into services.

The CIT classes we have provided over the years has changed the culture of law enforcement in our community. They slow down, manage the situation, and assess what is going on with the person in crisis. They have adopted a more empathetic approach versus trying to rush closing the call. They are collaborating more the with Navigators and Designated Crisis Responders (DCR)s, working to find a solution. Everyone is working together to meet a common goal, to assist those in crisis.

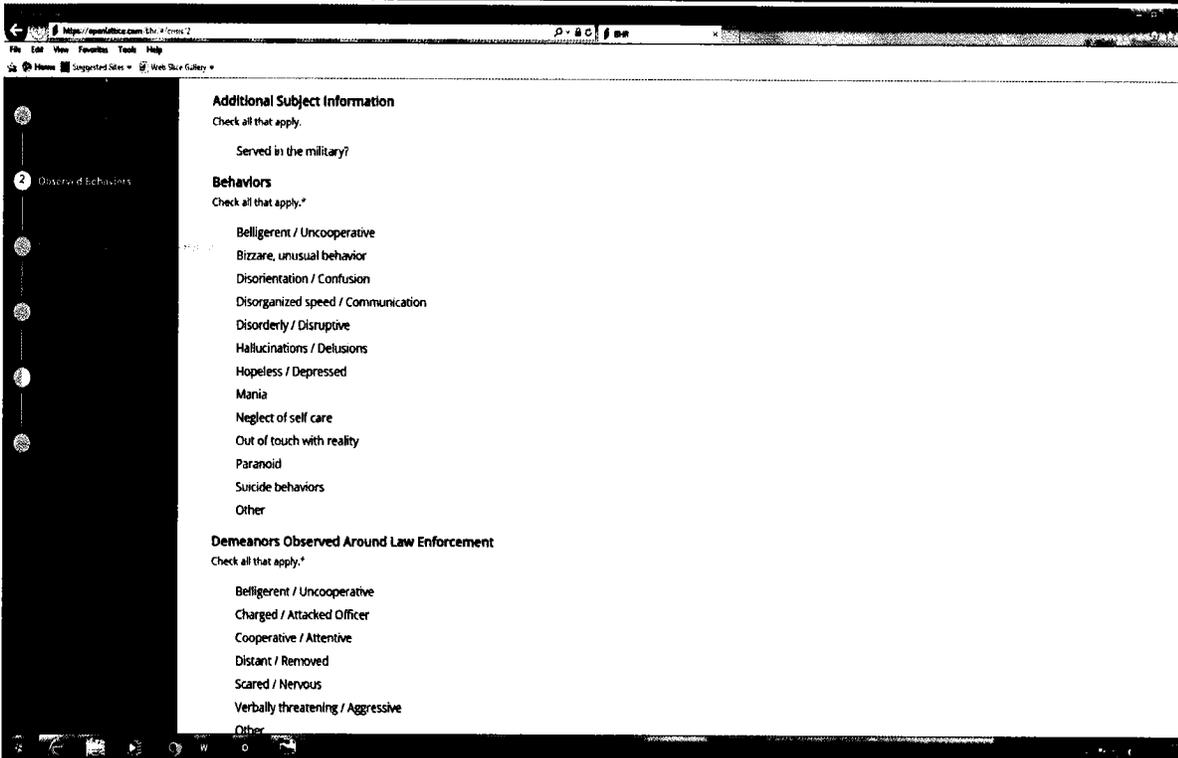
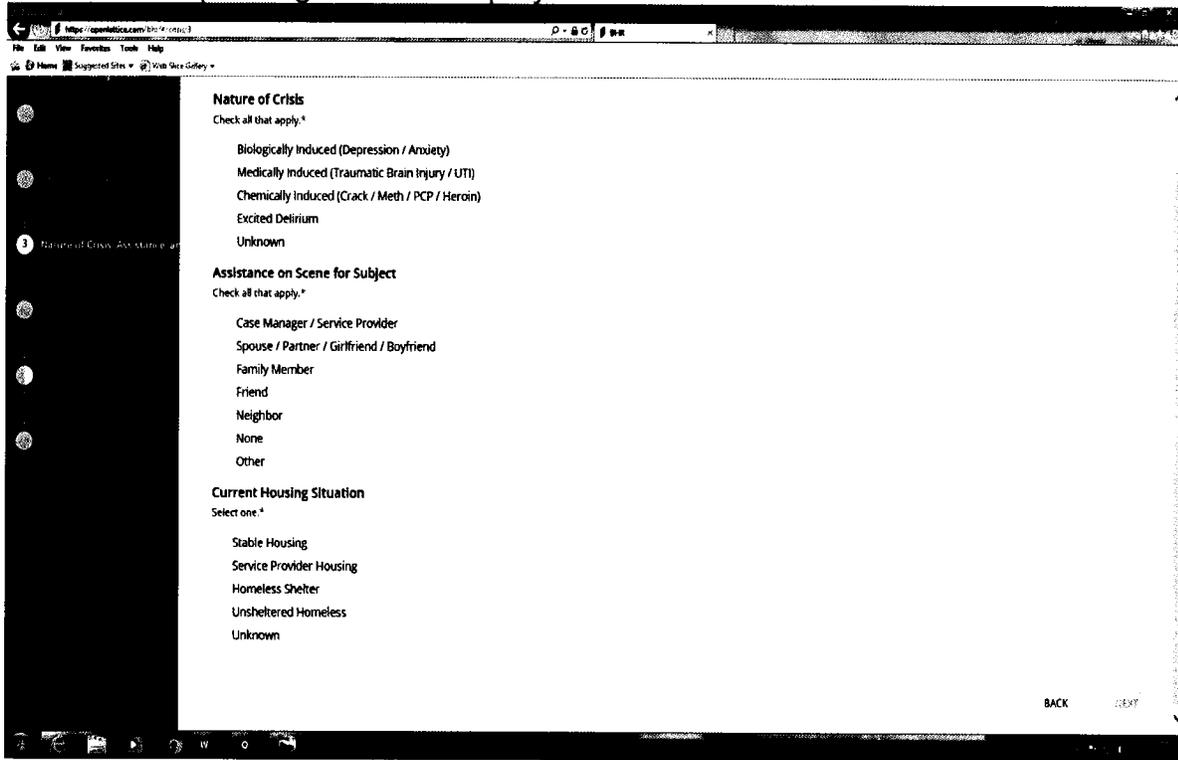
## **2. Accomplishments to Date (40 Points)**

- A. Evaluation-In Attachment D, we have provided three goals to measure. The first is to increase the number of county deputies, city officers and corrections staff with the basic 40-hour CIT course. We will accomplish that by holding the 2/40-hour courses annually. We will measure their knowledge with a pre/posttest. This year we clearly identified the classification of corrections officers. We feel that they too should be required to have this training, just as patrol deputies and officers are. Corrections officers interact with people in crisis every day and the techniques they are taught will help deescalate, and possibly avoid, a crisis.

The second goal is to provide advanced annual training. Again, this topic will depend on the issues law enforcement is currently facing.

The final goal is to collect data from Openlattice, formally RideAlong. This program was funded for 2018, and now has been acquired from a new company. Openlattice will be ready for a full launch later in July, or early August, and we

can begin tracking those interactions, response plans, and dispositions of the calls. Below are screen shots of a portion of the templates, nature of crisis, behaviors and finally disposition. Please note, on the third screen shot it asks if the responding officer or deputy has attended 40-hour CIT.



The screenshot shows a web browser window displaying a 'Behavioral Health Report' form. The browser's address bar shows 'https://openlattice.com:8080/#/crls3'. The page title is 'Behavioral Health Report' and the user is logged in as 'Kitsap County Sheriff's Office'. The form is divided into several sections:

- Specialists On Scene:**
  - Officer with 40-hour CIT training
  - Co-responder (mental health professional)
- Disposition:**

Check all that apply.\*

  - Notified Someone
  - Verbal Referral
  - Courtesy Transport
  - Hospital
  - Administered naloxene or narcan
  - Arrestable offense
  - No action possible
- Additional Details:**

Incident date/time\*

07/04/2019 11:30 AM

Report info\*

  - Incident has a report or CFS number
  - No report or CFS number

At the bottom right of the form, there are 'BACK' and 'REVIEW' buttons. The sidebar on the left shows a 'New Crisis Template' with a progress indicator where 'Disposition' is the current step.

We recognize that this application has taken a significant amount of time to launch and will in 2019. This will be a great tool to measure data.

The 2019 evaluation was similar, nothing changing with the exception of the RideAlong name to Openlattice. To date, we have held one 40-hour CIT course in June where approximately sixteen attended. Of those sixteen, six were local patrol officers or deputies, seven were from Kitsap County Sheriff's Office Jail, two were from local service providers, and one was a dispatcher. Our classes are certified through the Criminal Justice Training Commission (CJTC), and we try to reduce as much costs from the grant money as we can. If we can find an instructor that has no fees, but delivers excellent training and CJTC qualified, we use them. Our next 40-hour Course is in September.

Our advanced training is scheduled for October 18<sup>th</sup>, and nationally known Dr. Bryant Marks will be providing training on Implicit Bias. This training will provide an overview of the 21st Century Policing Task force, it's report and give a description of specific recommendations from the report that are likely to reduce biased policing.

### Learning Objectives:

- What is implicit bias?
- What does implicit bias look like in the real world?
- What causes implicit bias?
- How is implicit bias measured?
- How does implicit bias affect the person who holds the bias?
- How does implicit bias affect the attitudes and behaviors of the affected group?
- How does implicit bias affect community-police interactions and trust?
- How can the potential impact of implicit bias on policing be reduced?

Dr. Marks has taught to law enforcement throughout the county, including all of Los Angeles. He is currently holding classes to train all of King County Sheriff's Office. We will be holding 2/3.5 hour classes on the 16<sup>th</sup>, allowing 100 participants in each class. Sheriff Simpson and all the City Chiefs are requiring their staff to attend this class. They are also encouraging civilian stakeholders to attend in order to experience the high caliber training we are providing.

The final evaluation goal, the data collection for RideAlong, now Openlattice, will be available in late third quarter. We are expecting full launch late July. We did not expect this buyout of RideAlong, but the new company is showing outstanding progress.

- B. Barriers to Implementation-With the exception of RideAlong, we have not experienced too many other barriers. We would like to see an increase in attendees for the 40-hour CIT. We are working on funding for back-fill for overtime to help increase the numbers, but we are still seeing success. We will see a dramatic increase of attendees with the advanced course coming in October.
- C. Key Accomplishments-Because we have only held one class thus far, we can only report on that class. Each attendee was given a pre and post survey and it 75% of them showed an increase in knowledge. The class provided them more insight into the local resources and most importantly their confidence and ability to handle situations involving people suffering from mental illness increased. These participants walked out of that training with techniques they did not possess before.

There are some specific examples we can provide to show you this training is effective. This past June, Deputies were called to a mental health facility because a client behavior had escalated and was out of control. The deputies took their time, communicating with the individual, trying to gain cooperation to successfully remove this individual. This is a mental health facility where the staff are trained far more than law enforcement in the area of mental health, yet they were called

to assist. The deputies were successful in gaining some compliance and were able to remove the person from the premises.

Some months back deputies were dispatched to a Port Orchard residence for suicidal threats via social media. The victim had been sending messages to a friend on the east coast threatening to end his life. Deputies arrived and found him holding a rifle between his knees with the barrel in his mouth. Deputies began a dialogue to get the man to surrender his rifle. The man would move the barrel of the rifle back and forth between his mouth and his head while crying and talking to the deputies. He told them he didn't want to hurt anyone other than himself. After a several minutes of negotiating, one of the deputies convinced the man to drop his rifle at which time both deputies entered the apartment to retrieve it. The man told the deputies that he had tried to kill himself several times in the past but today was the day. The rifle barrel had been pressed so hard to the man's forehead, it left a mark.

Deputies regularly contact suicidal subjects during their duties and intervene in a way that hopefully makes a long-term difference in that person's life. However, it is much less common that one of those people is armed with a devastating weapon that in the blink of an eye could be turned against the deputies trying to help. Faced with the choice to back away from the apartment door, or stay and selflessly attempt to disarm the man through communication displayed incredible bravery and compassion on the part of the deputies, and saved this man's life.

### **3. Budget Narrative (30 Points)**

- A. Funding Request- The CIT training is another unfunded expectation that law enforcement leaders struggle to meet. With the recent passing of I-940, and Senate House Bill 1064, new Washington Administrative Codes (WAC)s have recently passed to add more unfunded mandates. I-940 was highly supported by community stakeholders such as Deescalate Washington I-940 Citizen Sponsor, Disability Rights Washington, ACLU of Washington and NAMI Washington, to name just a few. From the passing of I-940 an entire new WAC section has been developed, titled Law Enforcement Training and Community Act. This chapter defines the training that law enforcement must attend, the initial training is 40 hours. The majority of this training is more focused on patrol tactics, managing the scene, and de-escalation. This 40-hour mandated training does not include the 40-hour CIT requirement. They are completely different approaches of deescalate a person. Funding this proposal will allow us to continue with the 40-hour CIT, while law enforcement leaders try to manage the new mandates.

The training you have funded through the years has had a return on investment when you look at the culture of our law enforcement agencies versus others in the state and country. Internally we are changed the culture to be more

understanding of those with mental illness. The CIT course are an expectation that all patrol officers and deputies must meet. We have seen more patience in those that have attended, controlling the scene and trying to resolve the crisis in a positive manner, when it is possible.

This funding that we have requested will be matched with the OT/Backfill the Sheriff's Office and City Police Departments payout. Having this training local is so much more cost effective and allows the attendees to learn about local resources. We calculate the matching funds to be about \$20,000.00, and that is just an estimate.

- B. Past Expenditures and Budget Modifications- The expenditures to date are \$1,175.31, and this is for the June CIT class. We have received a few more invoices from instructors for about \$1,500.00 that will be billed in July. The brochure printing should occur soon, so that money will be spent. In September we have another 40-hour CIT, and in October we are holding our advanced training that will cost \$9,000.00. We expect to spend almost all of this funding for 2019.

The funding request remains consistent as in years past, with the exception of asking for an increase with the brochure costs. We ask for \$19,000.00 to pay for the instructors that provide the 40-hour CIT and advanced classes. We request funding for supplies for the class, which is \$1500.00. Finally, we are asking for \$2000.00 for the printing of the "How to Get Help" brochure. We have been utilizing volunteers in the community to help design this, and the turnaround is very slow. With the extra funding we can pay a professional to get the brochure done in a timely manner.

#### **4. Sustainability (10 Points)**

- A. Sustainability Plan-We continue to find grants that will help with the OT/Backfill, but the training funding has been a challenge. The Law Enforcement Training and Community Act is now the major focus of the State and funding seems to be directed more towards that requirement, but CIT is still expected as well. It is our hope we will soon have the majority of patrol officers/deputies and corrections staff trained in CIT, but staffing turnover continues to be a challenge.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

Continuation Grant Proposals must include a completed Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Crisis Intervention Training

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
<p>Increase the number of Kitsap County Deputies, city officers and corrections staff with the basic training that improves their competence in conducting crisis intervention</p>	<p>Provide 40 hours of instruction on crisis intervention training to Kitsap County Deputies, city officers and corrections staff.</p> <p>Administer pre/post 40 hour CIT survey to all participants.</p>	<p>Provide 2/40 hours classes to 30 different Kitsap County Deputies, city officers and corrections staff, and others, twice a year. Note, others are referring to mental and medical health staff members, and EMS.</p> <p>Increase knowledge attitude, and skills scores 25% from baseline at conclusion of 40-hour class</p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>June 2020 will be first class</u></p> <p>Frequency:</p> <p><input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input type="checkbox"/> Other: _____</p>	<p>Pretest will be baseline of knowledge</p>	<p>Pre/post test survey is developed to measure Roster of attendance</p>
<p>Provide Kitsap County Deputies, city officers and corrections staff with advanced training that enhances their skill set to deescalate someone in a crisis.</p>	<p>Provide an annual advanced class that focuses on the current topics in this area. For example, implicit bias or empathy skills.</p>	<p>Have a 100% capacity (30/class 1x per year) of the Kitsap County Deputies, city officers and corrections staff attend the advanced course.</p>	<p><input checked="" type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>June 2020 will be first class</u></p> <p>Frequency:</p> <p><input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input type="checkbox"/> Other: _____</p>	<p>At least 30 attend the course</p>	<p>Class roster</p>
<p>Data from OpenLattice</p>	<p>Pulling data from Openlattice template to deliver a clear picture of crisis related calls.</p>	<p>Data collected</p> <p>Number of crisis templates generated</p> <p>Disposition of crisis calls</p> <p>If responding LE was trained in 40-hour CIT</p> <p>Number of response plans</p>	<p><input checked="" type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>First quarter 2020</u></p> <p>Frequency:</p> <p><input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input type="checkbox"/> Other: _____</p>	<p>Currently Openlattice is close to fill launch. By 2020 we will have a robust data platform to retrieve information</p>	<p>OpenLattice</p>

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Kitsap County Sheriff's Office

Project: Crisis Intervention Training

Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 23,006.98	0%	\$ -	0%	\$ -	#DIV/0!
WA State Revenue	\$ 88,871.56	1%	\$ 48,600.00	1%	\$ -	#DIV/0!
Local Revenue	\$ 6,893,598.81	74%	\$ 6,599,521.00	72%	\$ -	#DIV/0!
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Agency Revenue	\$ 2,247,592.78	24%	\$ 2,548,720.00	28%	\$ -	#DIV/0!
Miscellaneous Revenue	\$ 39,159.25	0%	\$ 8,000.00	0%	\$ -	#DIV/0!
<b>Total Agency Revenue (A)</b>	<b>\$ 9,292,229.38</b>		<b>\$ 9,204,841.00</b>		<b>\$ -</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Staff	\$ 20,418,118.24	53%	\$ 21,790,793.00	52%	\$ -	#DIV/0!
Total Benefits	\$ 8,082,235.50	21%	\$ 8,688,888.00	21%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 28,500,353.74</b>	<b>74%</b>	<b>\$ 30,479,681.00</b>	<b>73%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 424,973.36	1%	\$ 161,090.00	0%	\$ -	#DIV/0!
Office Supplies	\$ 1,675,610.10	4%	\$ 1,513,725.00	4%	\$ -	#DIV/0!
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 2,100,583.46</b>	<b>5%</b>	<b>\$ 1,674,815.00</b>	<b>4%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ 502.85	0%	\$ 6,200.00	0%	\$ -	#DIV/0!
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Communication	\$ 74,517.56	0%	\$ 79,400.00	0%	\$ -	#DIV/0!
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Postage/Printing	\$ 22,630.45	0%	\$ 30,800.00	0%	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 147,793.95	0%	\$ 189,800.00	0%	\$ -	#DIV/0!
% Indirect	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe) Contract Medical & Operating Re	\$ 1,924,192.37	5%	\$ 3,164,936.00	8%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 2,169,637.18</b>	<b>6%</b>	<b>\$ 3,471,136.00</b>	<b>8%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Repair of Equipment and Property	\$ 154,073.34	0%	\$ 273,495.00	1%	\$ -	#DIV/0!
Utilities	\$ 448,301.93	1%	\$ 505,050.00	1%	\$ -	#DIV/0!
Other (Describe) Miscellaneous	\$ 85,515.52	0%	\$ 106,650.00	0%	\$ -	#DIV/0!
Other (Describe) Intergovernmental	\$ 651,239.92	2%	\$ 646,938.00	2%	\$ -	#DIV/0!
Other (Describe) Capital Outlay	\$ 173,051.89	0%	\$ 100,000.00	0%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 1,512,182.60</b>	<b>4%</b>	<b>\$ 1,632,133.00</b>	<b>4%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other Costs</b>						
Debt Service	\$ 4,272.21	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe)	\$ 4,115,806.37	11%	\$ 4,374,509.00	11%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 4,120,078.58</b>	<b>11%</b>	<b>\$ 4,374,509.00</b>	<b>11%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Direct Expenses</b>	<b>\$ 38,402,835.56</b>		<b>\$ 41,632,274.00</b>		<b>\$ -</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Sheriff's Office

Project: Crisis Intervention Training

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ 1,500.00	\$ 175.31	12%	\$ 1,500.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,500.00</b>	<b>\$ 175.31</b>	<b>12%</b>	<b>\$ 1,500.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ 1,000.00	\$ -	0%	\$ 2,000.00	\$ 1,000.00	100%
Training/Travel/Transportation			#DIV/0!		\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,000.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 2,000.00</b>	<b>\$ 1,000.00</b>	<b>100%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 2,500.00</b>	<b>\$ 175.31</b>	<b>7%</b>	<b>\$ 3,500.00</b>	<b>\$ 1,000.00</b>	<b>40%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: TBD

Project: Crisis Intervention Training

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies			#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 19,000.00	\$ 1,000.00	5%	\$ 19,000.00	\$ -	0%
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 19,000.00</b>	<b>\$ 1,000.00</b>	<b>5%</b>	<b>\$ 19,000.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 19,000.00</b>	<b>\$ 1,000.00</b>	<b>5%</b>	<b>\$ 19,000.00</b>	<b>\$ -</b>	<b>0%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Kitsap County Sheriff's Office**

**Project: Crisis Intervention Training Project**

**Description**

Number of Professional FTEs	0.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>0.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$	-
Salaries of Professional Staff	\$	-
Salaries of Clerical Staff	\$	-
Other Salaries (Describe Below)	\$	-
Description:	\$	-
<b>Total Salaries</b>	<b>\$</b>	<b>-</b>
 Total Payroll Taxes	 \$	 -
Total Cost of Benefits	\$	-
Total Cost of Retirement	\$	-
<b>Total Payroll Costs</b>	<b>\$</b>	<b>-</b>

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

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Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name: Kitsap County Sheriff's Office  
 Primary Contact: Penelope Sapp [psapp@co.kitsap.wa.us](mailto:psapp@co.kitsap.wa.us) 360-337-4514  
 Organization Address: 614 Division Street MS#33 Port Orchard, Wa. 98366  
 Federal Tax ID Number: 91-6001348 Legal Status of Organization: Kitsap County Sheriff's Office  
 Individual Authorized to Sign Contracts: Sheriff Gary Simpson

**Continuation Grant Proposal Information**

Proposal Title: Reentry Officer and Coordinator Position  
 Number of Individuals Screened: 201      Number of Individuals Served: 201  
 Requested Amount of Funding: \$193, 538.00      Matching Funds: \$15,428.00

**Please check which area(s) of the Continuum this project addresses:**

<input type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input type="checkbox"/> Crisis Intervention	<input checked="" type="checkbox"/> Recovery Support Services
<input type="checkbox"/> Outpatient treatment	

**Please check which area(s) of the County this project is focused:**

<input type="checkbox"/> South Kitsap	<input type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

**Requesting funds in order to continue the Reentry Officer and Coordinator Program. To date this program has seen 201 prisoners in the jail, conducted surveys and referrals to behavioral health services to 162 prisoners. To date we have seen a reduction in bed days, and most importantly people getting the services they need.**

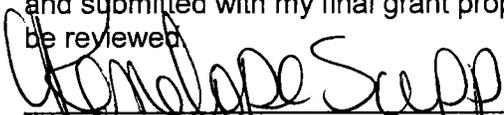
*Penelope Sapp*      *LT*      *7/23/19*  
 \_\_\_\_\_  
 Signature      Title      Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Checklist Form**

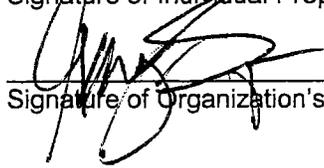
Name of Program: Reentry Officer and Coordinator Program Organization Submitting: Kitsap County Sheriff's

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			PS
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			PS
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			PS
Organization did receive funding for this project in 2019	X			PS
Attachment A – Continuation Grant Proposal Summary Page	X			PS
Attachment B – Continuation Grant Proposal Checklist Form	X			PS
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			PS
Attachment C – Continuation Grant Proposal Narrative Template	X			PS
Proposal Narrative is limited to 10 pages	X			PS
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			PS
Attachment E – Total Agency Budget Form	X			PS
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			PS
Indirect is limited to 5%	X			PS
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			PS
Organization submitted Attachment G for each Sub-Contractor	X			PS
Sub-Contractor indirect limited to 5%	X			PS
Attachment H – Continuation Grant Proposal Project Salary Summary	X			PS
Attachment I – Letter of Resource Commitment (optional)		X		PS
No other attachments are included	X			PS
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			PS
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			PS

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
 \_\_\_\_\_  
 Signature of Individual Preparing Proposal

7/23/19  
 \_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 Signature of Organization's Chief Executive

7/23/19  
 \_\_\_\_\_  
 Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template**

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**All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.**

**1. Project Description (20 points)**

- A. Project Design- The Reentry Officer and Coordinator Program was initially funded starting January 1, 2019 and has grown very quickly showing outstanding success. The Reentry Officer and Coordinator Program was funded to help oversee all the services that are embedded in the jail. Allowing those that need the services the most to have access.

Prior to the funding of this program, services such as Westsound Treatment would only have access to prisoners classified as low risk. This was to ensure the professional staff providing these services are safe. We did not have an officer to sit in the classroom, so we could only allow the service providers to interact with those classified as low risk. We realized there was a larger untouched population that could not receive services because of their charges. This is the population that reoffends more frequently and truly needs the services to succeed. Having the Reentry Officer in the classroom allows those classified as high risk to engage in treatment and referral services. The Reentry Officer also conducts the Correctional Assessment and Intervention System (CAIS) interviews, to help strategize with the prisoner what services are needed to help them succeed. Although we had not hired our Reentry Coordinator until April, the Reentry Officer was building the program and receiving many requests from prisoners. The Reentry Officer was also responsible for selecting the name of our program, "Breaking the Cycle." Prisoners that are in the jail can request to participate in this program through our KIOSK system.

The Reentry Coordinator's responsibilities are to help oversee the multiple service providers we have in the facility, locate others where we see gaps, conduct CAIS, and help assist with the Request of Information (ROI) gathering in order to share information with the services helping the prisoners. This additional staff member has been important in making contacts in the community to find new services for the prisoners. She is also responsible for assisting the Support Lieutenant in tracking the people who participate in Breaking the Cycle, so that we can report out the success. This is a very time-consuming job, and she still manages to take on our newest services we provide in the jail, Medical Assisted Treatment (MAT). The Reentry Coordinator screens prisoners that are interested in participating in the MAT program, which is a completely different process

compared to the CAIS. Both staff members have helped create a full reentry program from the ground up.

We are proud to say that the Reentry Officer and Coordinator Program address the Policy Goals from the 2014 Kitsap County Behavioral Health Strategic Plan under:

- Reduce the number of people in Kitsap County who recycle through the criminal justice systems, including jails and prisons.
- Reduce the number of chemically dependent and mentally ill youths and adults from initial or further criminal justice system involvement.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth.
- Improve the health status and wellbeing of Kitsap County residents.

That is four out of the six policy goals that you have set. If we had the evidence to support it, we would most likely meet the policy goal of “Reduce the number of People in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services.” Because of the difficulty of sharing information, this goal would be hard to quantify. But we do believe in that area with the services we are providing, we are making a difference in that area.

We are requesting that you fund this program again, and we are asking for nothing to change from the current year’s proposal. We will remain to be conservative on our evaluation, with the requirements to provide services to 100 prisoners per year. Please recognize that we have already surpassed that number by double in just the first six months of operations. Because of the uncertainty of the transition from the Behavioral Health Organization to Managed Care Organization, we are unsure of what to expect with the changes. We are requesting lower funds, because we do not need any finding for the CAIS that you provided before.

- B. Outreach-The Reentry Officer and Coordinator Program has expanded far faster than anticipated. Regarding outreach to the possible participants, this was easily done by adding the program to our KIOSK system in the housing units, Breaking the Cycle, and word of mouth. When a request is made from a prisoner, the reentry team will visit with the prisoner and start an assessment. Additionally, when someone is booked, they are asked a series of questions related to chemical dependency, and if they qualify our reentry team will meet with them to see if they are interested in our MAT program, and a CAIS may be completed. We have not had any difficulty reaching out to those that need services to help guide them towards success.

Our program has expanded the services that are offered in the jail. Before 2019, the following services were available to prisoners which might have qualified due to their housing:

**YWCA (Domestic Violence Advocacy)**- Provided by YWCA. Provides outreach and support for women who may be victims of domestic violence or are in relationships. 8-10 per week.

**Dispute Resolution**- Provided by Kitsap DRC. Teaches coping strategies for resolving conflict in healthy manners. Class is held once a month and is usually full at 10 per class (alternates male/female monthly).

**Tribal Culture Class**- Port Gamble. Provides tribal members access to services available and teaches arts. Restricted to tribal members. 3-8 monthly.

**Job Skills**- Provided by Port Gamble/Work Source. Hosts up to 20 inmates a month. Teaches skills for interviewing and resume building. Skills for being gainfully employed.

**Coffee Oasis**- Can provided housing assistance, job placement, and case management for those 18-25 who are exiting jail homeless. Inmates will be referred to this program through our Breaking the Cycle screening.

**Veterans Assistance Outreach**- VA contact through kiosk. Any requests for VA assistance is forwarded to Gary Hughes for follow up. Screening is not required.

**Division of Child Support**- Provided by DSHS. Assistance with payment plans and order modifications. Available through Kiosk in jail.

**The above services are still available, but we have added more because the Reentry Officer is available. We have added some outstanding services that help address the needs of our prisoners to help them succeed when they are released, and they are:**

**MAT Program**-Provided by NaphCare and Peninsula Community Health Medication assisted treatment (MAT) is the use of medications in combination with counseling and behavioral therapies for the treatment of substance use disorders. A combination of medication and behavioral therapies is effective in the treatment of substance use disorders and can help some people to sustain recovery.

**Trauma Informed Care/Recovery**- Provided by Kitsap Recovery Center. Class focused on recovery from traumatic events and coping skills. Also designed to identify other risk factors for behaviors leading to incarceration. 20 inmates monthly on average.

**DSHS-** Access through the kiosk kite system to DSHS services. Upon nearing a planned release inmate are afforded opportunity to reinstate benefits before releasing to the street.

**Parent Child Assistance Program-** Can provide case management and other services form mothers during pregnancy through age two. Referrals are made through Breaking the Cycle screening.

**Coping Skills-** Provided by Naphcare Mental Health Staff. Class twice a week averaging 20 inmates per week. Teaches strategies for coping with anxiety and depression and gives tools for dealing with these conditions both in custody and out of custody.

**Educational Outreach Services-** Provided by Olympic Community College/Tacoma Community College. Outreach to inform incarcerated of educational opportunities (GED, further education) available upon release. Class is held monthly.

We have expanded the program options to our prisoners trying to provide a variety to meet their needs. With the Reentry Officer and Coordinator available, these classes and services are easily accessible and has lower impact on jail operations. We continue to meet with new service providers to expand what even more.

## **2. Accomplishments to Date (40 Points)**

- A. Evaluation-Attachment D shows our proposed goals and outcomes for this continuation grant. The first is to increase the number of prisoners that receive services. Prior to 2019, we have no tracking mechanism to provide evidence of how many people are getting services and what services were being provided. The service providers would come into the jail, see people, but we had no idea of the impact they were making on the prisoner population. We are now the oversight and keep track of those receiving services and track those individuals. Our objective is 25 per quarter, but we have already suppressed that to date. We can provide information on how many are getting referrals for chemical dependency, mental health, or co-occurring disorders.

Our second goal is to decrease bed days. We track those that receiving/referred services and count the days they are currently in custody and count the days they are out of custody. We are also adding to the goal, the number that are in service and how many return. We feel that it would be beneficial to show the reduction of recidivism rates with this data.

Our final goal is to calculate bed day savings. We feel showing the return on investment for these staff positions, it would be beneficial to provide financial savings. Quantifying it with a dollar amount. Although this is a small piece, because at the end we truly just want to help people succeed, this is excellent data to provide.

Because of our robust tracking system, we can easily provide this information and show the effectiveness not only of our program, but help other services track as well. The jail can access arrest information in the county and really provide a more accurate positive impact these services provide.

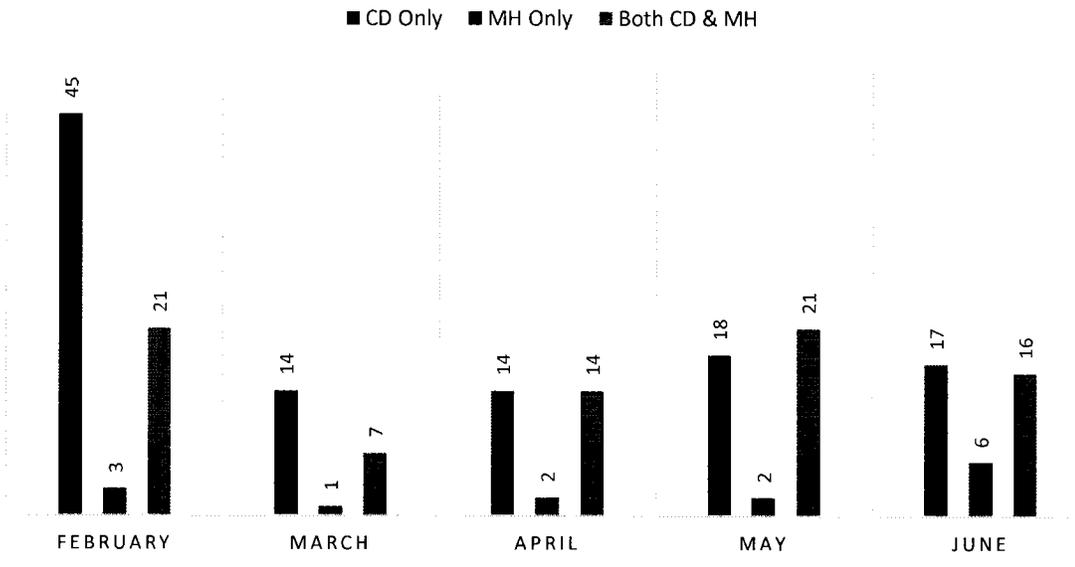
Attachment D from our last proposal had two goals, increase number of prisoners receiving services in jail and reduce bed days. When working on our evaluation for the current grant, we realized that we needed to quantify it more. Because this program was new, we were unsure how immediate we would show success. Thankfully we are fully staffed and can provide a more valid measure in 2020 to evaluate our program.

- B. Barriers to Implementation-We are happy to note there have been very few barriers to report. One barrier we did discover was the inability to share information with the other service providers, because of the protected information. We have collaborated with many of these service providers and worked on ROIs for everyone. This has been helpful so the reentry team can follow up if someone was accepted into certain services, we referred them to, and their progress.

There have been some smaller challenges, such as staffing changes with the service providers. This slows the process down for referrals, but the service providers have been helpful when we needed them in emergent situations. The Reentry Officer and Coordinator have built positive relationships with many service providers to help with other options when needed.

- C. Key Accomplishments-We are very proud to report that the Reentry Officer and Coordinator have interacted with 201 prisoners over the course of six months. Below is a chart of the referrals by month:

## RE-ENTRY REFERRALS



This chart does not have information for January, because the Reentry Officer was in CAIS training and developing the program himself. Although he was alone until early April, you can see that he managed to show progress quickly. To date, the Reentry Officer and Coordinator have referred 108 for chemical dependency services, 14 for mental health only, and 79 for co-occurring (both chemical dependency and mental health). The reentry team works hard to make sure those that are high risks in these areas are referred to services that will help meet their needs. Service providers such as Westsound Treatment, Kitsap Recovery Center, Kitsap Mental Health, or Peninsula Community Health Services. The jail utilizes these services in order to assist people in getting their needs met and avoid reoffending.

Another key accomplishment is the MAT program. The Kitsap County Jail was very progressive in implementing a full MAT program within a few months. There are very few jails in the State of Washington that provide MAT, but we recognized that this is important to those incarcerated and to the community. We partnered with NaphCare and Peninsula Community Health Services to help provide these MAT services. This program was fully implemented at the end of March and we have already inducted 73 people into the MAT program. Of those 73, only 13 have been discharged for not following up with the program upon release. We recognize the number of discharges will increase, but if half of the people addicted to OPIOIDS remain on the program, it is a success. The reentry team helps screen these people for the program finding those that are serious about getting the help they need.

Our next key accomplishment is the CAIS, allowing the Reentry Officer and Coordinator to spend time with the prisoner finding out why they commit crimes.

This interaction has been so beneficial because it has allowed the prisoner to share information about themselves that would not have occurred before. During this interview there have been occurrences when a prisoner will divulge that they are in a relationship or situation that places them in harm's way. The chemical dependency and law breaking are a result of the emotions they are suffering from their living situations. Our reentry staff place this person on their priority list, enrolling them in MAT, outpatient treatment contacts, and helping them reach family to pick them up upon release. These assessments help break down barriers and help prisoners find a way to let us help them. This would not be occurring if it were not for the staffing positions dedicated to making a difference. Prior to this funding, these people would have completed their sentence and upon release go back to their unstable living environments.

Our final key accomplishment is the data we can provide that shows a return in investment. We are currently tracking 201 former prisoners that we have referrals into some type of program. Of those 201 former prisoners, only 38 have returned. While we want to remain cautious in believing these numbers will remain the same, we are showing success. The 201 prisoners that we are tracking spent a total of 10,123 days in jail during their incarceration that we initiated reentry services. To date, they have been out of custody for 8,868.

### **3. Budget Narrative (30 Points)**

- A. Funding Request-The funding that we are requesting in this proposal is the for the Reentry Officer and Coordinator's pay and benefits for 2020. The Reentry Officer's salary is \$71,091.00 and his benefits are \$32,819.00. The Reentry Coordinator's salary is \$62,452.00 and \$27,176.00 for benefits. We are requesting only the funding for the staffing positions, and nothing else.

We will be matching some of these funds providing office space, computers, printers/scanners, phone lines, technology licenses, approximately \$7,000.00. We must also provide annual training these staff members, which equates to about \$2,500.00. Finally, the support lieutenant spends 10 hours a month training new service providers the safety and security class for jail, and all data collection needed for grant reporting. This equates to about \$5,928.00. The overall total is 15,428.00

- B. Past Expenditures and Budget Modifications- To date we have spent \$56,340.67 in salary and expenses for the Reentry Officer and Coordinator. There was about three months when the Reentry Coordinator had not been hired, so we did not spend a portion of the money allocated. We held the CAIS training and billed the \$10,000.00 for the assessment tool.

For the current proposal, our request has dropped because we are not asking for any training or assessment tools.

**4. Sustainability (10 Points)**

- A. Sustainability Plan-It is the plan for the Kitsap County Sheriff's Office to have these two positions permanently funded through the general budget in Kitsap County General Fund. We will continue to track the participants and provide evidence these two positions are a valid return on investment.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

Continuation Grant Proposals must include a completed Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Reentry Officer and Coordinator Program

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
Provide reentry services to those incarcerated in jail.	Conduct risk and needs assessment for those that request services from the jail and facilitate getting the resources they need.	03/31/2020 25 prisoners will get assistance with direct services 06/30/2020: 50 total prisoners will get assistance with direct services 09/30/2020: 75 total prisoners will get assistance with direct services 12/31/2020: 100 total prisoners will get assistance with direct services	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 01/01/2020  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	To date, we have assisted over 200 prisoners receive services. The SMART Objectives are set low, but we have exceeded those numbers to date.	The reentry team has a very robust spreadsheet to track everyone that has been assessed and referred services. We track jail bed days, returns, and bed days saved.
Jail Bed Days saved	Track those that have been assessed or received services through our reentry team and monitor if they return or not.	Reduce jail bed days by 20% for pre/post clients  Track how many returns versus served.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 01/01/2020  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	The jail recidivism rates have been consistently high, at about 85%. This is measured by those arrested in 2017 and rearrested in 2018.	The reentry tracking spreadsheet provides this information.
Cost savings in decrease of bed days	Provide data throughout the quarters to show the financial impact the reentry team provides, by the reduction of bed days	Reduce jail bed days by 20% and providing the savings in dollar amount.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 01/01/2020  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual	Track their previous in custody days and compare post release.	The reentry tracking spreadsheet provides this information

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
			if applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Annual <input type="checkbox"/> Other: _____		

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Kitsap County Sheriff's Office

Project: Reentry Officer and Coordinator Project

Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 23,006.98	0%	\$ -	0%	\$ -	#DIV/0!
WA State Revenue	\$ 88,871.56	1%	\$ 48,600.00	1%	\$ -	#DIV/0!
Local Revenue	\$ 6,893,598.81	74%	\$ 6,599,521.00	72%	\$ -	#DIV/0!
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Agency Revenue	\$ 2,247,592.78	24%	\$ 2,548,720.00	28%	\$ -	#DIV/0!
Miscellaneous Revenue	\$ 39,159.25	0%	\$ 8,000.00	0%	\$ -	#DIV/0!
<b>Total Agency Revenue (A)</b>	<b>\$ 9,292,229.38</b>		<b>\$ 9,204,841.00</b>		<b>\$ -</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Staff	\$ 20,418,118.24	53%	\$ 21,790,793.00	52%	\$ -	#DIV/0!
Total Benefits	\$ 8,082,235.50	21%	\$ 8,688,888.00	21%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 28,500,353.74</b>	<b>74%</b>	<b>\$ 30,479,681.00</b>	<b>73%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 424,973.36	1%	\$ 161,090.00	0%	\$ -	#DIV/0!
Office Supplies	\$ 1,675,610.10	4%	\$ 1,513,725.00	4%	\$ -	#DIV/0!
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 2,100,583.46</b>	<b>5%</b>	<b>\$ 1,674,815.00</b>	<b>4%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ 502.85	0%	\$ 6,200.00	0%	\$ -	#DIV/0!
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Communication	\$ 74,517.56	0%	\$ 79,400.00	0%	\$ -	#DIV/0!
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Postage/Printing	\$ 22,630.45	0%	\$ 30,800.00	0%	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 147,793.95	0%	\$ 189,800.00	0%	\$ -	#DIV/0!
% Indirect	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe) Contract Medical & Operating Re	\$ 1,924,192.37	5%	\$ 3,164,936.00	8%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 2,169,637.18</b>	<b>6%</b>	<b>\$ 3,471,136.00</b>	<b>8%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	#DIV/0!
Repair of Equipment and Property	\$ 154,073.34	0%	\$ 273,495.00	1%	\$ -	#DIV/0!
Utilities	\$ 448,301.93	1%	\$ 505,050.00	1%	\$ -	#DIV/0!
Other (Describe) Miscellaneous	\$ 85,515.52	0%	\$ 106,650.00	0%	\$ -	#DIV/0!
Other (Describe) Intergovernmental	\$ 651,239.92	2%	\$ 646,938.00	2%	\$ -	#DIV/0!
Other (Describe) Capital Outlay	\$ 173,051.89	0%	\$ 100,000.00	0%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 1,512,182.60</b>	<b>4%</b>	<b>\$ 1,632,133.00</b>	<b>4%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other Costs</b>						
Debt Service	\$ 4,272.21	0%	\$ -	0%	\$ -	#DIV/0!
Other (Describe)	\$ 4,115,806.37	11%	\$ 4,374,509.00	11%	\$ -	#DIV/0!
<b>Subtotal</b>	<b>\$ 4,120,078.58</b>	<b>11%</b>	<b>\$ 4,374,509.00</b>	<b>11%</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Direct Expenses</b>	<b>\$ 38,402,835.56</b>		<b>\$ 41,632,274.00</b>		<b>\$ -</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Sheriuff's Office

Project: Reentry Officer and Coordinator Program

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 140,795.00	\$ 45,545.17	32%	\$ 133,543.00	\$ (7,252.00)	-5%
Total Benefits	\$ 59,925.00	\$ 10,795.50	18%	\$ 59,995.00	\$ 70.00	0%
<b>SUBTOTAL</b>	<b>\$ 200,720.00</b>	<b>\$ 56,340.67</b>	<b>28%</b>	<b>\$ 193,538.00</b>	<b>\$ (7,182.00)</b>	<b>-4%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): Assessment tool	\$ 10,000.00	\$ 10,000.00	100%	\$ -	\$ (10,000.00)	-100%
<b>SUBTOTAL</b>	<b>\$ 10,000.00</b>	<b>\$ 10,000.00</b>	<b>100%</b>	<b>\$ -</b>	<b>\$ (10,000.00)</b>	<b>-100%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 210,720.00</b>	<b>\$ 66,340.67</b>	<b>31%</b>	<b>\$ 193,538.00</b>	<b>\$ (17,182.00)</b>	<b>-8%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Kitsap County Sheriff's Office

Project: Reentry Officer and Coordinator Program

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Kisap County Sheriff's Office**

**Project: Reentry Officer and Coordinator Program**

**Description**

Number of Professional FTEs	2.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>2.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 133,543.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 133,543.00</b>
Total Payroll Taxes	\$ -
Total Cost of Benefits	\$ 59,995.00
Total Cost of Retirement	\$ -
<b>Total Payroll Costs</b>	<b>\$ 193,538.00</b>

## 2020 Continuation Grant Proposal Summary Page

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

### Organizational Information

Organization Name: Kitsap County Superior Court

Primary Contact: Samantha Lyons [slyons@co.kitsap.wa.us](mailto:slyons@co.kitsap.wa.us) 360-337-4508

Organization Address: 614 Division Street, Port Orchard, WA 98366

Federal Tax ID Number: 91-6001348 Legal Status of Organization: Government

Individual Authorized to Sign Contracts: Frank Maiocco, Superior Court Administrator

### Continuation Grant Proposal Information

Proposal Title: Kitsap County Superior Court Adult Drug Court

Number of Individuals Screened: 155

Number of Individuals Served: 175

Requested Amount of Funding: \$640,787.00

Matching Funds: 0

**Please check which area(s) of the Continuum this project addresses:**

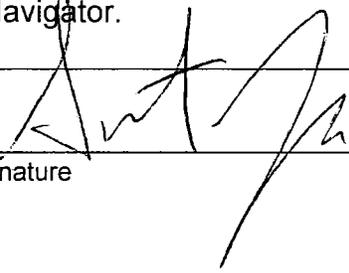
<input type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Recovery Support Services
<input checked="" type="checkbox"/> Outpatient treatment	

Please check which area(s) of the County this project is focused:

<input type="checkbox"/> South Kitsap	<input type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

The 2014 Kitsap County Behavioral Health Strategic Plan identified the lack of sufficient Outpatient Care, Medical and Medication Management, Counseling Services (Gap #3) as one of the local gaps in services for individuals with mental illness and substance abuse disorders in the adult criminal justice system. To address this gap, the Behavioral Health Strategic Planning Team recommended the expansion of mental health and substance abuse outreach, assessment, intervention, referral and treatment in existing adult therapeutic courts. In this proposal, the Superior Court requests sufficient funding to address this need by (1) continuing mental health screenings, diagnoses and treatment services to its, otherwise, successful adult drug court program; (2) increasing the number of individuals who can receive these services to a service level that meets the community's demonstrated demand, and; (3) continuing to fund a Vocational Navigator.

 Treatment Court Manager 7-23-19

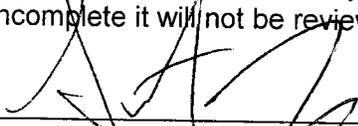
Signature Title Date

## 2020 Continuation Grant Proposal Checklist Form

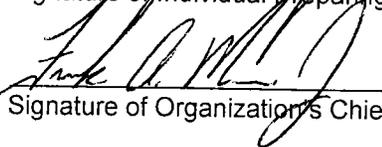
Name of Program: Kitsap County Adult Drug Court  
 Organization Submitting: Kitsap County Superior Court

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			aj
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			aj
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			aj
Organization did receive funding for this project in 2019	X			aj
Attachment A – Continuation Grant Proposal Summary Page	X			aj
Attachment B – Continuation Grant Proposal Checklist Form	X			aj
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			aj
Attachment C – Continuation Grant Proposal Narrative Template	X			aj
Proposal Narrative is limited to 10 pages	X			aj
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			aj
Attachment E – Total Agency Budget Form	X			aj
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			aj
Indirect is limited to 5%	X			aj
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			aj
Organization submitted Attachment G for each Sub-Contractor	X			aj
Sub-Contractor indirect limited to 5%	X			aj
Attachment H – Continuation Grant Proposal Project Salary Summary	X			aj
Attachment I – Letter of Resource Commitment (optional)			X	aj
No other attachments are included	X			aj
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			aj
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			aj

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
\_\_\_\_\_  
Signature of Individual Preparing Proposal

7-23-19  
Date

  
\_\_\_\_\_  
Signature of Organization's Chief Executive

7/23/19  
Date

## 2020 Continuation Grant Proposal Narrative Template

All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.

### 1. Project Description (20 points)

#### A. Project Design

The 2014 Kitsap County Behavioral Health Strategic Plan identified the lack of sufficient Outpatient Care, Medical and Medication Management, Counseling Services (Gap #3) as one of the local gaps in services for individuals with mental illness and substance abuse disorders in the adult criminal justice system. To address this gap, the Behavioral Health Strategic Planning Team recommended the expansion of mental health and substance abuse outreach, assessment, intervention, referral and treatment in existing adult therapeutic courts. In this proposal, the Superior Court requests sufficient funding to address this need by (1) continuing mental health screening, diagnoses and treatment services to its, otherwise, successful adult drug court program; (2) continuing to partner with West Sound Treatment Center to provide educational/vocational services and, (3) increasing the number of individuals who are able to receive services by utilizing the TAD alcohol detection transdermal bracelets to effectively monitor participants with histories hallmarked by DUI offenses.

The Adult Drug Court program is a collaborative approach to address criminal defendants challenged with substance use disorders in order to holistically restore these individuals so that they may more fully contribute to the community. Because the drug court combines the criminal justice system with clinical treatments, the program relies heavily upon the collaboration of multiple agencies. These include the Superior Court, the Kitsap County Prosecutor's Office, the local Office of Public Defense, the Kitsap Recovery Center (KRC), Agape Unlimited, The Salish Behavioral Health Organization, West Sound Treatment Center, Peninsula Community Health Services, and the Kitsap County Sheriff's Office. Additionally, this continuation proposal seeks to draw upon many needed mental health services in order to expand the opportunity for comprehensive recovery for drug court participants.

Through the grant received from the Kitsap County Mental Health, Chemical Dependency and Therapeutic Court Programs, the Kitsap County Superior Court/Adult Drug Court has been afforded the opportunity to expand in size from 100 to 150 participants while enhancing ancillary services.

The purpose of this project is to maintain, by 50, the increased number of treatment slots for criminal defendants who require substance abuse and/or mental health

treatment through the delivery of expanded services; and, to augment a time-tested therapeutic court program with resources, such as mental health and vocational services, that further address the local service gaps outlined in the 2014 Behavioral Health Strategic Action Plan.

While there are additions to this year's proposal, there are also several reductions. Modifications include **no funding request** for the following: MRT training materials, NADCP Conference, funding for Chemical dependency Professionals (CDP's), maintenance of the Drug Court Case Management System (DCCM), and annual fees for Risk and Needs Triage (RANT) risk assessment screening tool.

## B. Outreach

Outreach for the Adult Drug Court takes place in several forms: Participant word of mouth, referral by a prosecutor, judge, and or defense attorney, treatment agency referrals, public presentations made to the Commission on Law and Justice, and law enforcement referrals.

With respect to delivering culturally competent behavioral health care services, all Chemical Dependency Professionals in Washington State must adhere to the following WAC requirements:

### **WAC 388-877-0510 - Personnel—Agency record requirements.**

Each treatment agency licensed by the department to provide any behavioral health service must maintain a personnel record for each person employed by the agency.

(1) The personnel record must contain all of the following:

(a) Documentation of annual training, including documentation that the employee successfully completed training on cultural competency.

Kitsap Mental Health Services (KMHS) requires annual cultural competency training as well as "special population" consultations for any new client identifying as part of a particular group (racial/ethnic/gender/sexual identities and developmental delays).

Court and treatment personnel attend the National Association of Drug Court Professional's Annual Training Conference yearly, or bi-annually, and attended the following workshops May, 2018, in Houston, TX (Please note a large portion of our drug court team will be attending the NADCP conference this year in Washington DC July 13<sup>th</sup>-17<sup>th</sup>) :

- Intersections of Trauma Responses: Gender and Culturally Responsive Approaches for Justice-Involved Women in Treatment Courts.
- Tribal Nations Forum.

- Assessing Diversity, Disparity and Best Practices: Do Disparities Exist in Treatment Courts and What Do We Do About It?

Additionally, court personnel periodically attend Cultural Competency trainings provided by Kitsap County Human Resources Department.

## **2. Accomplishments to Date (40 Points)**

### A. Evaluation

The Drug Court Team utilizes a web-based database called the Drug Court Case Management System (DCCM). The system is utilized to collect information which assists with reporting on the following primary goals and expected outcomes, developed in collaboration with the evaluation team working with the Citizens Advisory Committee.

### B. Barriers to Implementation

We have had no barriers to implementation.

### C. Key Accomplishments

The Kitsap County Adult Drug Court strives to utilize best practices to improve outcomes for our Adult Drug Court Participants. As such, the following **goals have been achieved** with the assistance of funding from the Citizen's Advisory Board in FY2014, FY 2015, FY 2016, FY 2017, FY 2018, and FY 2019:

- The elimination of the waitlist in June 2015 allows the Adult Drug Court to provide immediate treatment services to all Adult Drug Court participants upon admission.
- Deployment and implementation of the Drug Court Case Management system (DCCM) in April 2014 allows the Court to track and manage data outcomes. This data is used to report quarterly statistics to the Citizens Advisory Board.
- A standardized mental health screening tool, the DLAY 20, was selected by KMHS as the screening tool utilized for all Adult Drug Court Participants. The DLAY 20 evaluates 20 dimensions of everyday living and offers initial treatment recommendations. As a result, seventy (70) participants, or 42%, have received the screening since FY'17.
- A total of one hundred and fifty-three (153) participants have received mental health services via the deployed KMHS FTE dedicated to providing treatment to the Adult Drug Court.

- As part of the Adult Drug Court expansion, Medication Assisted Treatment (MAT) is being offered to any participant who is deemed appropriate by an Addiction Medicine Specialist.
- A partnership with West Sound Treatment Center's Compass Vocational program has afforded the Drug Court participants the opportunity to engage more fully and meaningfully in educational and vocational endeavors. As a result, 95% of participants who graduate the Adult Drug Court are involved in work or school activities upon graduation.
- The acquisition of the RANT risk and needs assessment tool has assisted in confirming that the Court is targeting the correct "high-risk/high-needs" participants. Ninety percent (95%) of those individuals screened for admission into the ADC fall into the "high-risk/high-needs" quadrant.
- Number of unduplicated participants **enrolled** from 7/1/18-6/30/19 = 214
- Number of participants who successfully **graduated** from 7/1/18-6/30/19= 40
- Number of participants who were **terminated unsuccessfully** during the period 7/1/18-6/30/19 = 42

**GOAL: Reduce the termination rate to no more than 20% by December 31, 2019.**

This goal has been achieved. During the reporting period 7/1/18-6/30/19, 42 participants (18%) were terminated.

**GOAL: 75% of program participants report moderate to high levels of satisfaction with services.**

This goal has been achieved. Satisfaction surveys were distributed to all participants on both 10/23/17 and 4/23/18. Eighty (80%) percent indicated they were satisfied with both the court hearings as well as the treatment and ancillary services received.

**GOAL: 40% of program participants receive ongoing psychiatric services.**

This goal has not been achieved. During the previous reporting period 7/1/18-6/30/19, 31 participants (18%) received ongoing psychiatric services at KMHS. During this reporting period 7/1/18-6/30/19, 41 participants (18%) received ongoing psychiatric services at KMHS. One reason this number is unexpectedly low is because our contracted KMHS Therapist was on maternity leave between April 1<sup>st</sup>, 2017-July 10<sup>th</sup>, 2017, creating an interruption in services. KMHS provided a temporary BA level therapist, but many participants chose not to avail themselves of mental health services until the dedicated Adult Drug Court therapist returned to work. The Adult Drug Court met with leaders from KMHS in May 2019 to discuss the reduction in services. To remedy this, it has been decided that our dedicated MH therapist will screen every participant as they are admitted into the program to proactively determine which participants could benefit from mental health services.

**GOAL: 90% of program participants with co-occurring disorders will graduate at the same rate as those without mental health issues.**

This goal has been achieved. We have achieved this goal for the reporting period 7/1/18-6/30/19. 100% of program participants with a co-occurring disorder have graduated at the same rate as those participants who do not receive mental health services.

**GOAL: 100% of all program participants will be screened by the Vocational Navigator within the first 90 days of program participation.**

This goal has been achieved. During the reporting period 7/1/18-6/30/19, 106 (100%) participants were screened by the Vocational Navigator within the first 90 days of program participation.

**GOAL: 90% of program participants are either employed and/or involved in educational/vocational services upon graduation from the Adult Drug Court.**

This goal has been met for the reporting period 7/1/18-6/30/19. During this reporting period, 42 graduates, or 100% of graduates were involved in educational or vocational pursuits upon graduation.

**GOAL: 80% of individuals completing Drug Court will remain crime-free 5 years post-graduation (conviction only).**

During the reporting period 7/1/18-6/30/19, 1 graduate (2.5%) was convicted of a new charge post-graduation. Overall, since the acquisition of our Drug Court Case Management System (DCCM) in 2014, we have had 185 graduates and of those, 27 graduates, or 14.5%, have been convicted of a new crime.

**GOAL: Reduce the number of positive urinalysis testing for 80% of program participants who assess as having a Substance Use Disorder (SUD).**

During the reporting period 7/1/18-6/30/19, 10,139 urinalysis tests were conducted, and of those 10,139 tests, 204, or 2.01% were positive. Thus, approximately 98% of the urinalysis conducted on program participants screened negative for both alcohol and illicit substances.

### **3. Budget Narrative (30 Points)**

#### **A. Funding Request**

The proposed budget is broken into two parts – one for funding to support the Superior Court, and one that provides funding to non-Court agencies, as follows:

#### **Direct Superior Court Support**

**Continued** funding (\$80,468) is requested to sustain a full-time Compliance Specialist position working with the Adult Drug Court. (**Managers and Staff and Fringe Benefits**).

**Continued** funding for an Administrative Assistant position (\$79,401) is requested to support the work of the Adult Court team, judge and treatment court manager; and, to

help the Court develop and support a more robust data collection system to improve outcome measures and reports. (**Managers and Staff and Fringe Benefits**).

**Continued** funding for office supplies (**\$2,500**) is requested to fund graduation refreshments, coins, shirts, and other incidentals which have historically been funded personally by the Adult Drug Court Judge. (**Office Supplies**).

**Continued** funding for Transdermal Alcohol Device (TAD) to continuously monitor alcohol intake. Based on the average monthly cost of installations over the last eighteen months, the Court is requesting \$22,500 to continue this critical monitoring function. This is a reduction of \$7,500 for the Court's request in 2019. Total cost: **\$22,500 (Other)**.

The Superior Court requests an additional **\$235,000** for urinalysis collection and testing that comports with national best practice standards. The requested amount is intended to supplement State Criminal Justice Treatment Account funding, and will be expended only if the Court's 2020 CJTA allocation is insufficient to cover the entire year's costs. **Total new cost: \$235,000 (Other)**.

### **Indirect Non-Court Support**

**Continued** funding for mental health services (**\$119,023**) in 2020, to include an expansion of assessments among the entire Adult Drug Court population and an increased presence by the dedicated mental health treatment professional. The Court anticipates releasing a Request for Proposals (RFP) in late 2019 to procure the necessary services. (**Maintenance Contracts**).

**Continued** funding is requested to maintain a 1.0 FTE Vocational Navigator Vocational Navigator (**\$98,850**) contracted through West Sound Treatment Center for educational and vocational counseling. (**Maintenance Contracts**).

### **B. Past Expenditures and Budget Modifications**

Due to our ability to leverage Federal Medicaid funding, this year's request has been reduced by 1.0 FTE Chemical Dependency Counselor, and all costs associated with urinalysis testing are now covered under Medicaid. Additionally, all funding requests for training have been removed (NADCP Annual Training Conference and MRT Training).

For 2019, the Kitsap County Commissioners approved a total Superior Court budget allocation of \$369,144 for the Court's independent program funding. Through June 30, 2019, the Superior Court has expended \$121,806 of this budget, as follows:

Line Item	2019 Budget	YTD Expense	Balance
Manager & Staff	104,500	38,783	65,717
Fringe Benefits	46,262	18,242	28,020
Supplies	2,500	1,110	1,390
Postage/Printing	3,750	3,750	0
Other: TAD Bracelets	30,000	7,316	22,684
Maintenance Contracts	175,382	45,855	129,527
Other – DCCM Renewal	6,750	6,750	0
<b>Total</b>	<b>369,656</b>	<b>121,806</b>	<b>247,338</b>

#### 4. Sustainability

Adult Drug Court leaders are highly vigilant in exploring the availability of Medicaid (ACA) and/or CJTA funding to offset or underwrite continued substance abuse and/or mental health treatment services for drug court participants. This exploration has included ongoing consultation with the Salish Behavioral Health Organization and Kitsap County Human Services Department, through which this funding is made available. As described above, leveraging the Medicaid funding has allowed the Adult Drug Court to no longer request funding for a CDP staff at KRC and all urinalysis testing costs. However, for 2020, recent Health Care Authority guidelines related to the funding of urinalysis testing in therapeutic court environments has required the Court to seek a new funding model to accomplish this fundamental program requirement.

##### A. Sustainability Plan

This proposal sets-forth a plan to sustain the Adult Drug Court maximum capacity of 150 participants, incorporating mental health screening and treatment services, and vocational services that have, without additional funding, otherwise not been available. The Adult Drug Court will continue to collaborate with the County's Department of Administrative Services and the SBHO/ASO to secure primary funding for overall program support, reducing the program's sales tax funding requests to focus on supplemental, secondary support and/or new innovations. A decline in funding will require the Court to either reduce its overall service capacity or significantly curtail the breadth of services envisioned in this proposal. The Treatment Courts also rely on funding from the Sales and Use Tax, as outlined below:

##### **RCW 82.14.460**

(3) Moneys collected under this section must be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic

court programs and services. For the purposes of this section, "programs and services" includes, but is not limited to, treatment services, case management, transportation, and housing that are a component of a coordinated chemical dependency or mental health treatment program or service. Every county that authorizes the tax provided in this section shall, and every other county may, establish and operate a therapeutic court component for dependency proceedings designed to be effective for the court's size, location, and resources.

(4) All moneys collected under this section must be used solely for the purpose of providing new or expanded programs and services as provided in this section, except as follows:

(d) Notwithstanding (a) through (c) of this subsection, moneys collected under this section may be used to support the cost of the judicial officer and support staff of a therapeutic court.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

New and continuing grant proposals must fill out the Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Kitsap County Superior Court Adult Drug Court

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
Individuals successfully complete therapeutic drug court.		Reduce termination rate to no more than 20% by December 31, 2018.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: <u>1/1/19</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	Program Database (DCCM)
Click here to enter text.	Assess participant satisfaction in an anonymous survey every 6 months.	75% of participants report moderate to high level of satisfaction with services.	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>1/1/19</u> Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	Program Survey
Additional services help adult drug court participants with co-occurring disorders to graduate at the same rate as other participants.	Provide treatment to individuals with co-occurring disorders (substance abuse and mental health issues) (Maintain funding for one (1) KMHS-contracted therapist)	40% of Adult Drug Court participants in need receive ongoing (engaged with therapist) psychiatric services.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>1/1/18</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	KMHS clinician to input all psychiatric contacts in the DCCM
Adult drug court participants gain needed skills for	Refer every program participant to the Compass Program's on-site	100% of new participants will be screened by the Vocational Navigator within the first 90 days	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long	n/a	Program Database (DCCM)

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
employment which help them to be successful in the program and decrease possibility of relapse.	Vocational Navigator to complete the Participant Initial Vocational Assessment.	of participation in the Adult Drug Court.	<input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	Start date: <u>1/1/18</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____		
	Complete all counseling sessions, group educational workshops, testing, and vocational guidance services recommended by the Vocational Navigator.	90% of all program participants are either employed and/or involved in educational/vocational services upon graduation from the Adult Drug Court.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	Start date: <u>1/1/18</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	Program Database (DCCM)
To decrease the number of criminal justice contacts post-graduation.	Run names of all previous graduates in I/LEADS system.	70% of individuals completing Drug Court will remain conviction-free during the 5 years post-graduation.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	Start date: <u>1/1/19</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	Program Administrative Assistant to run names of all graduates in I/LEADS system, quarterly
Decrease the number of positive urinalysis testing	Require random urinalysis a minimum of 2 times per week for every participant who screens positive for a substance use disorder.	A reduction in the number of positive urinalysis testing for 80% of program participants who screen positive for substance use disorders.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior	Start date: <u>1/1/19</u>	n/a	Program database-DCCM

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
		<p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit if applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Process</p> <p><input type="checkbox"/> Output</p> <p><input checked="" type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input checked="" type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p>Frequency:</p> <p><input checked="" type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>1/1/19</u></p> <p>Frequency:</p> <p><input type="checkbox"/> Quarterly</p> <p><input checked="" type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input type="checkbox"/> Other: _____</p>	N/A	Program Focus Groups and Interviews
	<p>Conduct focus groups and/or interviews quarterly to gather participants input on program satisfaction.</p>	<p>A reduction in the number of positive urinalysis testing for 80% of program participants who screen positive for substance use disorders: Overall.</p> <ul style="list-style-type: none"> <li>- The number of positive urinalysis testing for XX% of program participants who screen positive for substance use disorders: Phase 1.</li> <li>- The number of positive urinalysis testing for XX% of program participants who screen positive for substance use disorders: Phase 2.</li> <li>- The number of positive urinalysis testing for XX% of program participants who screen positive for substance use disorders: Phase 3.</li> <li>- The number of positive urinalysis testing for XX% of program participants who screen positive for substance use disorders: Phase 4.</li> </ul>				

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: **Kitsap County Superior Court**

Project: **Adult Drug Court Continuation Grant**

Accrual       Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 26,222.00	6%	\$ 29,245.00	4%	\$ 26,886.00	4%
WA State Revenue	\$ 22,406.00	5%	\$ 95,732.00	15%	\$ 24,952.00	3%
Local Revenue	\$ 418,915.00	90%	\$ 532,956.00	81%	\$ 688,965.00	93%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ -	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 467,543.00</b>		<b>\$ 657,933.00</b>		<b>\$ 740,803.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 981,218.00	30%	\$ 1,071,389.00	31%	\$ 1,175,541.00	30%
Staff	\$ 1,035,551.00	31%	\$ 1,058,061.00	31%	\$ 998,771.00	25%
Total Benefits	\$ 501,971.00	15%	\$ 477,991.00	14%	\$ 605,314.00	15%
<b>Subtotal</b>	<b>\$ 2,518,740.00</b>	<b>77%</b>	<b>\$ 2,607,441.00</b>	<b>76%</b>	<b>\$ 2,779,626.00</b>	<b>71%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 15,945.00	0%	\$ 6,000.00	0%	\$ 21,750.00	1%
Office Supplies	\$ 16,587.00	1%	\$ 21,500.00	1%	\$ 21,500.00	1%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 32,532.00</b>	<b>1%</b>	<b>\$ 27,500.00</b>	<b>1%</b>	<b>\$ 43,250.00</b>	<b>1%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ -	0%	\$ -	0%	\$ -	0%
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	0%
Postage/Printing	\$ -	0%	\$ -	0%	\$ -	0%
Training/Travel/Transportation	\$ 32,059.00	1%	\$ 34,767.00	1%	\$ 34,767.00	1%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 32,059.00</b>	<b>1%</b>	<b>\$ 34,767.00</b>	<b>1%</b>	<b>\$ 34,767.00</b>	<b>1%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ 399,296.00	12%	\$ 473,257.00	14%	\$ 760,398.00	19%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ 12,145.00	0%	\$ 15,500.00	0%	\$ 10,500.00	0%
Utilities	\$ 293,641.00	9%	\$ 289,313.00	8%	\$ 289,313.00	7%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 705,082.00</b>	<b>21%</b>	<b>\$ 778,070.00</b>	<b>23%</b>	<b>\$ 1,060,211.00</b>	<b>27%</b>
<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 3,288,413.00</b>		<b>\$ 3,447,778.00</b>		<b>\$ 3,917,854.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Superior Court

Project: Adult Drug Court Continuation Grant

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 104,500.00	\$ 38,783.00	37%	\$ 108,902.00	\$ 4,402.00	4%
Total Benefits	\$ 46,262.00	\$ 18,242.00	39%	\$ 50,262.00	\$ 4,000.00	9%
<b>SUBTOTAL</b>	<b>\$ 150,762.00</b>	<b>\$ 57,025.00</b>	<b>38%</b>	<b>\$ 159,164.00</b>	<b>\$ 8,402.00</b>	<b>6%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ 2,500.00	\$ 1,110.00	44%	\$ 2,500.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 2,500.00</b>	<b>\$ 1,110.00</b>	<b>44%</b>	<b>\$ 2,500.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ 3,750.00	\$ 3,750.00	100%	\$ 3,750.00	\$ -	0%
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 3,750.00</b>	<b>\$ 3,750.00</b>	<b>100%</b>	<b>\$ 3,750.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ 6,750.00	\$ 6,750.00	100%	\$ -	\$ (6,750.00)	-100%
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): TAD Bracelets	\$ 30,000.00	\$ 7,316.00	24%	\$ 22,500.00	\$ (7,500.00)	-25%
Other (Describe): UA collection/testing	\$ -	\$ -	#DIV/0!	\$ 235,000.00	\$ 235,000.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 36,750.00</b>	<b>\$ 14,066.00</b>	<b>38%</b>	<b>\$ 257,500.00</b>	<b>\$ 220,750.00</b>	<b>601%</b>
<b>Sub-Contracts</b>						
Organization: West Sound Treatment Ctr	\$ 96,770.00	\$ 45,855.00	47%	\$ 98,850.00	\$ 2,080.00	2%
Organization: Kitsap Mental Health Svcs	\$ 78,612.00	\$ -	0%	\$ -	\$ (78,612.00)	-100%
Organization: TBD - mental health svcs	\$ -	\$ -	#DIV/0!	\$ 119,023.00	\$ 119,023.00	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 175,382.00</b>	<b>\$ 45,855.00</b>	<b>26%</b>	<b>\$ 217,873.00</b>	<b>\$ 42,491.00</b>	<b>24%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 369,144.00</b>	<b>\$ 121,806.00</b>	<b>33%</b>	<b>\$ 640,787.00</b>	<b>\$ 271,643.00</b>	<b>74%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: West Sound Treatment Center

Project: Adult Drug Court Continuation Grant

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 63,320.00	\$ 29,760.00	47%	\$ 65,220.00	\$ 1,900.00	3%
Total Benefits	\$ 6,000.00	\$ 2,820.00	47%	\$ 6,180.00	\$ 180.00	3%
<b>SUBTOTAL</b>	<b>\$ 69,320.00</b>	<b>\$ 32,580.00</b>	<b>47%</b>	<b>\$ 71,400.00</b>	<b>\$ 2,080.00</b>	<b>3%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ 1,000.00	\$ 297.00	30%	\$ 1,000.00	\$ -	0%
Office Supplies	\$ 500.00	\$ 235.00	47%	\$ 500.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,500.00</b>	<b>\$ 532.00</b>	<b>35%</b>	<b>\$ 1,500.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 750.00	\$ 353.00	47%	\$ 750.00	\$ -	0%
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 750.00</b>	<b>\$ 353.00</b>	<b>47%</b>	<b>\$ 750.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ 2,000.00	\$ 1,000.00	50%	\$ 2,000.00	\$ -	0%
Other (Describe): Incentives, bus passes	\$ 7,000.00	\$ 3,290.00	47%	\$ 7,000.00	\$ -	0%
Other (Describe): Office space/mortgage	\$ 16,200.00	\$ 8,100.00	50%	\$ 16,200.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 25,200.00</b>	<b>\$ 12,390.00</b>	<b>49%</b>	<b>\$ 25,200.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 96,770.00</b>	<b>\$ 45,855.00</b>	<b>47%</b>	<b>\$ 98,850.00</b>	<b>\$ 2,080.00</b>	<b>2%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: TBD - Mental Health Services

Project: Adult Drug Court Continuation Grant

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 57,580.00	\$ -	0%	\$ 80,000.00	\$ 22,420.00	39%
Total Benefits	\$ 21,032.00	\$ -	0%	\$ 29,200.00	\$ 8,168.00	39%
<b>SUBTOTAL</b>	<b>\$ 78,612.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 109,200.00</b>	<b>\$ 30,588.00</b>	<b>39%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ 1,000.00	\$ 1,000.00	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ 500.00	\$ 500.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 1,500.00</b>	<b>\$ 1,500.00</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ 750.00	\$ 750.00	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ 5,573.00	\$ 5,573.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 6,323.00</b>	<b>\$ 6,323.00</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ 2,000.00	\$ 2,000.00	#DIV/0!
Other (Describe): Incentives, bus passes	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): Office space/mortgage	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 2,000.00</b>	<b>\$ 2,000.00</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 78,612.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 119,023.00</b>	<b>\$ 40,411.00</b>	<b>51%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name:** Kitsap County Superior Court

**Project:** Adult Drug Court Continuation Grant

**Description**

Number of Professional FTEs	1.00
Number of Clerical FTEs	1.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>2.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 54,891.00
Salaries of Clerical Staff	\$ 54,011.00
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 108,902.00</b>
 Total Payroll Taxes	 \$ 10,153.00
Total Cost of Benefits	\$ 26,104.00
Total Cost of Retirement	\$ 14,005.00
<b>Total Payroll Costs</b>	<b>\$ 159,164.00</b>

## 2020 Continuation Grant Proposal Summary Page

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Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

### Organizational Information

Organization Name: Kitsap County Superior Court

Primary Contact: Samantha Lyons [slyons@co.kitsap.wa.us](mailto:slyons@co.kitsap.wa.us) 360-337-4508

Organization Address: 614 Division Street, Port Orchard, WA 98366

Federal Tax ID Number: 91-6001348 Legal Status of Organization: Government

Individual Authorized to Sign Contracts: Frank Maiocco, Superior Court Administrator

### Continuation Grant Proposal Information

Proposal Title: Kitsap County Superior Court Veterans Treatment Court

Number of Individuals Screened: 41

Number of Individuals Served: 37

Requested Amount of Funding: \$93,428.00

Matching Funds: 0

**Please check which area(s) of the Continuum this project addresses:**

<input type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Recovery Support Services
<input checked="" type="checkbox"/> Outpatient treatment	

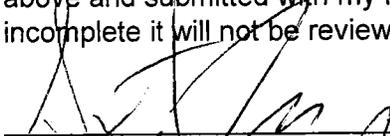


## 2020 Continuation Grant Proposal Checklist Form

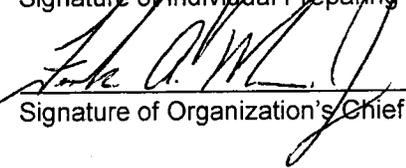
Name of Program: Kitsap County Veterans Treatment Court  
 Organization Submitting: Kitsap County Superior Court

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			AJ
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			AJ
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			AJ
Organization did receive funding for this project in 2019	X			AJ
Attachment A – Continuation Grant Proposal Summary Page	X			AJ
Attachment B – Continuation Grant Proposal Checklist Form	X			AJ
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			AJ
Attachment C – Continuation Grant Proposal Narrative Template	X			AJ
Proposal Narrative is limited to 10 pages	X			AJ
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			AJ
Attachment E – Total Agency Budget Form	X			AJ
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			AJ
Indirect is limited to 5%	X			AJ
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form			X	AJ
Organization submitted Attachment G for each Sub-Contractor			X	AJ
Sub-Contractor indirect limited to 5%			X	AJ
Attachment H – Continuation Grant Proposal Project Salary Summary	X			AJ
Attachment I – Letter of Resource Commitment (optional)			X	AJ
No other attachments are included	X			AJ
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			AJ
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			AJ

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
\_\_\_\_\_  
Signature of Individual Preparing Proposal

7-23-19  
Date

  
\_\_\_\_\_  
Signature of Organization's Chief Executive

7/23/19  
Date

**2020 NARRATIVE TEMPLATE FOR CONTINUATION  
GRANT PROPOSALS**

**MENTAL HEALTH, CHEMICAL DEPENDENCY, AND THERAPEUTIC COURTS RFP  
KITSAP COUNTY HUMAN SERVICES DEPARTMENT**

**All Continuation Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.**

**1. Project Description (20 points)**

**A. Project Design**

There are currently 38,689 veterans (2018 Census Bureau) who call Kitsap County home. Within the County are the Bremerton Naval Shipyard, Sub-base Bangor, NAVSEA Keyport, Retsil Veteran's Home, Bremerton Naval Hospital and Manchester Fuel Depot, all of which employ active duty military and veterans. Of the veterans residing in Kitsap County, a growing number of them are recent returnees from combat operations in Iraq and Afghanistan.

The Superior Court currently operates a Veterans Treatment Court program that serves up-to 25 veterans. Prior to entry into the program, participants are screened by the Kitsap County Prosecutor's Office to ensure they are legally eligible to participate in the Veteran's Treatment Court. Veterans are then screened through the Veterans Administration to determine each individual's service record, eligibility for treatment services, and other demographics.

The Veterans Treatment Court is comprised of 25 treatment slots dedicated specifically for veterans who are facing criminal charges, and who require substance abuse and/or mental health treatment through the delivery of treatment services that address the local service gaps outlined in the 2014 Behavioral Health Strategic Action Plan. The success of this effort is currently measured by the steady rate at which veterans who have entered the program successfully progress through the phases of the program, a proportionally higher number of program graduates when compared against program terminations, and a low recidivism rate among graduates.

While all local treatment court programs already make use of a wide variety of community resources to address these needs, the great value of the collaboration with the Veterans Affairs offices is that the veteran in the Veteran's Treatment Court program will also be able to tap into a much larger network of services available only to qualified veterans and targeted to the particular needs of the veteran.

The process for accessing these services begins as soon as the veteran is criminally charged and identified as having a military service background, either through the Incarcerated Veteran Service representative who is frequently on-site at the jail, or through defense counsel. Once identified as potentially eligible for veteran's benefits, the Washington Department of Veterans Affairs (WDVA) is contacted to confirm the veteran's status as well as to conduct a criminal history search and Washington State Patrol background check to ensure the veteran remains eligible for services.

All needed services are identified in the case plan developed by the counselor based upon the comprehensive assessment. The Superior Court compliance specialist maintains a continuous follow-through effort to ensure the veteran is able to access all needed services and helps him or her deal with applications and/or overcome other hurdles that may impede service delivery. The compliance specialist and VA representative will continue close coordination and, in conjunction with the treatment court manager, maintain constant monitoring of service delivery and client access.

#### B. Outreach

Outreach for the Veteran's Treatment Court takes place in many forms:

- Participant word of mouth
- Referral by prosecutor, Judge, and/or defense attorney
- Treatment Agency referrals
- Public presentations made to the Commission on Law and Justice
- Law enforcement referrals
- Washington State Department of Veterans Affairs
- Retsil Veterans Home

With respect to delivering culturally competent behavioral health care services, all Chemical Dependency Professionals in Washington State must adhere to the following WAC requirements:

#### **WAC 388-877-0510 - Personnel—Agency record requirements.**

Each agency licensed by the department to provide any behavioral health service must maintain a personnel record for each person employed by the agency.

(1) The personnel record must contain all of the following:

(a) Documentation of annual training, including documentation that the employee successfully completed training on cultural competency.

KMHS requires annual cultural competency training as well as "special population" consultations for any new client identifying as part of a particular group (racial/ethnic/gender/sexual identities and developmental delays).

Veterans Court personnel attended the National Association of Drug Court Professional's Annual Training Conference yearly, or bi-annually, and have attended the following workshops June, 2018, in Houston, Texas:

- Intersections of Trauma Responses: Gender and Culturally Responsive Approaches for Justice-Involved Women in Treatment Courts.
- Assessing Diversity, Disparity and Best Practices: Do Disparities Exist in Treatment Courts and What Do We Do About It?
- Periodically attend Cultural Competency trainings provided by Kitsap County Human Resources Department.

The Veteran's Treatment Court Team will attend the NADCP training conference in Washington DC July 13<sup>th</sup>-17<sup>th</sup>, 2019, and will have additional opportunities for training in cultural competency issues in therapeutic courts.

### C. Evaluation

The Drug Court Team utilizes a web-based database system called the Drug Court Case Management (DCCM) system. The application is used to collect information which assists with reporting on the following primary goals and expected outcomes, developed in collaboration with the evaluation team working with the Citizens Advisory Committee.

Progress toward the goals for the Veteran's Treatment Court can be found in the next section, under **Progress to Date**.

## 2. Accomplishments to Date

### A. Progress to Date

- Number of unduplicated participants **enrolled** from 7/1/18-6/30/19 = 35
- Number of participants who successfully **graduated** 7/1/18-6/30/19 = 10 (28%)
- Number of participants who were unsuccessful and **terminated** during reporting period 7/1/18-6/30/19 = 1 (2.8%)

**GOAL:** 100% of program participants will be screened using ASAM Patient Placement criteria within one (1) week of admission into the Veteran's Treatment Court.

This goal has been achieved. As of 6/30/19, 100% of all program participants have been screened by either the VAMC American Lake or West Sound Treatment Services Center within one (1) month of admission into the VTC.

**GOAL:** All participants who screen positive for needing substance use disorder treatment will be placed at either the VAMC American Lake, or West Sound Treatment Center within two (2) weeks of that determination.

This goal has been achieved. As of 6/30/19, this goal has been achieved for 100% of all program participants.

**GOAL:** A reduction in positive urinalysis testing for 80% of participants who screen positive for substance use disorders.

This goal has been achieved. During the reporting dates 7/1/18- 6/30/19, 95.4% of program participants screened negative during their urinalysis testing, yielding a positive result for 4.6% of program participants.

**GOAL:** One hundred percent (100%) of program participants will be screened for military trauma utilizing the PCL-M within two weeks of admission into the Veteran's treatment Court.

This goal has been achieved. As of 6/30/18, one hundred percent (100%) of all program participants have been screened using the PCL-M within one week of admission.

**GOAL:** Ninety percent (90%) of program participants who screen positive for needing mental health services will be placed in treatment services in either the VAMC American Lake or KMHS within one (1) week of their assessment.

This goal has been achieved. As of 6/30/18, one hundred percent (100%) of all program participants who screened positive for needing mental health services were placed into either the VAMC American Lake or KMHS within two (2) weeks of their assessment.

**GOAL:** Reduce termination rate to no more than twenty percent (20%).

This goal has been achieved. During the reporting period 7/1/18-6/30/19, 1 participant, or 2.8% was terminated.

**GOAL:** Seventy-five (75) percent of program participants report high level of satisfaction with services.

Satisfaction surveys were distributed to all participants on 5/6/19. Eighty-five (85%) percent indicated they were satisfied with both the court hearings as well as the treatment and ancillary services received.

**GOAL:** Seventy percent (70%) of VTC graduates will remain crime-free 5 years post-graduation.

This goal has been achieved. During the reporting period 7/1/18-6/30/19, 90.91% of program graduates have remained crime-free.

## **B. Barriers to Implementation**

We have had no barriers to implementation.

### C. Key Accomplishments

The Kitsap County Veteran's Treatment Court strives to utilize best practices to improve outcomes for our Veteran's Treatment Court participants. As such, the following **goals have been accomplished** with the assistance of funding from the Citizen's Advisory Board in FY2014, FY 2015, FY 2016, FY 2017, FY 2018, and FY 2019.

The Veterans Treatment Court is a collaborative approach to address criminal defendants with military veteran's status who are confronted with substance abuse and/or mental health issues, and holistically restore them so that they may more fully contribute to the community. Because the Veterans Court combines the criminal justice system with clinical treatment, the program relies heavily upon the collaboration of multiple agencies. These include the Superior Court, the Kitsap County Prosecutor's Office, the local Office of Public Defense, the Veterans Administration, the Washington State Veterans Affairs office, the Kitsap Recovery Center, and the Kitsap County Sheriff's Office. Specifically, the VTC integration and collective impact activities include:

- Inpatient substance abuse treatment.
- Referral to the Access to Recovery (ATR) program which provides assistance and funds to overcome barriers to treatment.
- Mental health services via KMHS and VAMC American Lake.
- Specialized assessment and licensed mental health treatment for PTSD through WDVA-contracted community providers.
- Housing assistance, to include veterans housing units available in Port Orchard, WA; referrals to local transitional housing or other shelters such as Retsil; as well as rental assistance.
- Washington State's WorkSource program, which considers veterans a priority population. WorkSource centers across the state offer free workshops, skill and interest assessments and help veterans transfer military skills to civilian employment while marketing them to local businesses. WorkSource also connects veterans to services that help with health care, food, clothing or housing.
- Veterans Conservation Corps, a program that helps veterans obtain training, certification, and employment in the field of environmental restoration and management. The program has demonstrated benefits for many veterans coping with post-traumatic stress disorder or other mental health or substance abuse disorders.
- The Homeless Veterans Reintegration Program (HVRP). The HVRP offers a structured, individually designed case management plan to assist veterans become employable and has proven to be successful in getting homeless veterans off the street and back to being productive members of society.
- Assistance of a Benefits Service Officer. The benefits service officer works directly with the veteran to identify and apply for financial benefits and/or disability allowances the veteran may not be aware of. For example, many veterans are not aware that their service in Vietnam presumes exposure to Agent

Orange for which medical services are available to treat the resultant effects of diabetes or certain types of cancer.

- Funds from the Kitsap County Veterans Assistance program to help veterans with such things as emergency housing, paying utilities, purchasing work clothes, and obtaining household items.
- Transportation assistance obtained through specially-issued transit coupons
- Assistance with family issues- where the veteran may have issues regarding family reconciliation, the WDVA is able to access programs designed for veterans and operated by local Catholic Community Service (CCS) organizations, including anger management courses related to domestic violence.

### **3. Budget Narrative**

#### **A. Funding Request**

##### **Superior Court Direct Support**

Funding (**\$39,428**) is requested to sustain one-half of an existing **Program Specialist** position (including benefits) to meet weekly with veterans. This funding would supplement existing General Fund appropriations for the second half of the position which is dedicated to a portion of the adult drug court population. The amount requested here is only intended to support the veterans in this specialized program (**Personnel**).

**Incentives and Office Supplies** funding (**\$2,500**) is requested to fund necessary operational supplies and provide graduation refreshments, coins, shirts, and other incidentals (**Office Supplies**).

##### **Indirect Non-Court Support**

Funding for the cost of alcohol monitoring bracelets, or **TAD (Transdermal Alcohol Detection)** in order to monitor alcohol usage 24 hours per day. Based on the average monthly cost of **\$1200** per month over the previous eighteen months, the Superior Court requests \$14,500 for 2020 to continue this critical monitoring function. **Total cost = \$14,500 (Other)**

Funding for the **public defender (\$12,000)**, is based on the calendar time necessary for the Veterans Court hearings and staffing. It is critical that we retain the same public defender we have been working with since the inception of the program, as he has a wealth of institutional knowledge of the Veteran's Treatment Court program that is invaluable when making difficult team decisions about a particular policy or participant (**Maintenance Contracts**).

The Superior Court requests an additional **\$25,000** for urinalysis collection and testing that comports with national best practice standards. The requested amount is intended to supplement State Criminal Justice Treatment Account funding and is calculated at 25

participants x 2.5 UA's per week x \$15.00 per test x 12 weeks, and will be expended only if the Court's 2020 CJTA allocation is insufficient to cover the entire year's costs. **Total new cost: \$25,000 (Other).**

## **B. Past Expenditures and Budget Modification**

The following funding modifications have been made:

- The annual subscription cost of \$4,000 for the Drug Court Case Management (DCCM) system will be absorbed into the Superior Court 2020 General Fund budget.
- The Superior Court has sufficient MRT workbooks and materials for current and new veterans through December 2020, so the \$1,250 found in prior grant applications has been removed in this application.
- The annual subscription cost of \$2,750 for the Risk and Needs Triage (RANT) system will be absorbed into the Superior Court 2020 General Fund budget.

## **4. Sustainability Plan (10 points)**

Veteran's Treatment Court leaders are highly vigilant in exploring the availability of Medicaid (ACA) and/or CJTA funding to offset or underwrite continued substance abuse and/or mental health treatment services for Veteran's Treatment Court participants. This exploration has included ongoing consultation with the Salish Behavioral Health Organization and Kitsap County Human Services Department, through which this funding is made available. As described above, leveraging Medicaid funding has allowed the Veteran's Treatment Court to eliminate its prior year requests for funding CDP staff at KRC and all urinalysis testing costs. However, for 2020, recent Health Care Authority guidelines related to the funding of urinalysis testing in therapeutic court environments has required the Court to seek a new funding model to accomplish this fundamental program requirement.

This proposal sets-forth a plan to sustain the Veteran's Treatment Court maximum capacity of 25 participants, incorporating mental health screening and treatment services, and vocational services that have, without additional funding, otherwise not been available. The Veteran's Treatment Court will continue to collaborate with the County's Department of Administrative Services and the SBHO/ASO to secure primary funding for overall program support, reducing the program's sales tax funding requests to focus on supplemental, secondary support and/or new innovations. A decline in funding will require the Court to either reduce its overall service capacity or significantly curtail the breadth of services envisioned in this proposal. The Treatment Courts also rely on funding from the Sales and Use Tax, as outlined below:

### **RCW 82.14.460**

(3) Moneys collected under this section must be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services. For the purposes of this section, "programs and services" includes, but is

not limited to, treatment services, case management, transportation, and housing that are a component of a coordinated chemical dependency or mental health treatment program or service. Every county that authorizes the tax provided in this section shall, and every other county may, establish and operate a therapeutic court component for dependency proceedings designed to be effective for the court's size, location, and resources.

(4) All moneys collected under this section must be used solely for the purpose of providing new or expanded programs and services as provided in this section, except as follows:

(d) Notwithstanding (a) through (c) of this subsection, moneys collected under this section may be used to support the cost of the judicial officer and support staff of a therapeutic court.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

New and continuing grant proposals must fill out the Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Kitsap County Superior Court Veterans Treatment Court

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Program participants receive appropriate Substance Use Disorder services while participating in the VTC.	Screen all participants for substance use disorders	100% of program participants will be screened using the ASAM criteria within one month of admission into the VTC (due to availability at VA).	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	ASAM tool	Program database-DCCM
Click here to enter text.	Refer all participants who screen positive for substance use disorders using ASAM criteria for treatment at either the VAMC American Lake or KRC.	100% of participants who screen positive for needing substance use treatment will be placed in services within two weeks of that determination.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Screen for military discharge status to inform where to participate in treatment services.	VAMC Veteran's Justice Outreach worker will screen for VAMC eligibility/KRC CDP will screen for KRC.
Click here to enter text.	Assess ongoing substance use for participants who screened positive for treatment services.	100% of participants' treatment plans reviewed and revised if necessary by clinical provider according to VA recommendation every ninety days to ensure the individual is receiving the clinically indicated level of treatment.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	ASAM patient placement model	Clinicians at the VAMC and/or KRC.

EVALUATION WORKSHEET

A. GOALS	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
Reduce the number of positive urinalysis testing	Require random urinalysis a minimum of 2 times per week for every participant who screens positive for a substance use disorder.	A reduction in the number of positive urinalysis testing for 80% of program participants who screen positive for substance use disorders.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Click here to enter text.	Program database-DCCM
Treat mental health disorders as a result of reintegration post-deployment.	Screen all new participants using the PCL-M (military PTSD checklist).	100% of program participants will be screened (using PCL-M assessment) for military trauma within two weeks of acceptance into the VTC.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	PCL-M	Compliance Specialist assigned to the VTC to complete the PCL-M upon acceptance into the VTC.
Click here to enter text.	Refer all participants who screen positive for needing mental health services on the PCL-M will go to either the VAMC American Lake or KMHS.	90% of participants who screen positive for needing mental health services will be placed in treatment services within one month of assessment.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	PCL-M	Assigned therapist at VAMC or KMHS.

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Date and time</small>	G. SOURCE
		70% of individuals completing VTC will remain conviction-free during the 5 years post-graduation.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: 1/1/19 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	n/a	Program Administrative Assistant to run names of all graduates in I/LEADS system, quarterly
Veteran's Treatment Court participants are able to complete requirements of court and graduate successfully.		Reduce termination rate to no more than 20% by December 31, 2019.	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: 1/1/19 Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: _____	I/LEADS	Program database-DCCM
	Assess participant satisfaction in an anonymous survey quarterly.	75% of participants report moderate to high level of satisfaction with services.	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/19 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____		Program Survey
	Conduct focus groups and/or interviews quarterly	All focus groups and/or interviews are coded for themes to reflect qualitative results.	<input checked="" type="checkbox"/> Process <input type="checkbox"/> Output	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long	N/A	Program Focus Groups and Interviews

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Date and time	G. SOURCE
	to gather participants input on program satisfaction.		<input checked="" type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	Start date: <u>1/1/19</u>  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____		

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: **Kitsap County Superior Court**

Project: **Veterans Treatment Court Continuation Grant**

Accrual       Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 26,222.00	6%	\$ 29,245.00	4%	\$ 26,886.00	4%
WA State Revenue	\$ 22,406.00	5%	\$ 95,732.00	15%	\$ 24,952.00	3%
Local Revenue	\$ 418,915.00	90%	\$ 532,956.00	81%	\$ 688,965.00	93%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ -	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 467,543.00</b>		<b>\$ 657,933.00</b>		<b>\$ 740,803.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 981,218.00	30%	\$ 1,071,389.00	31%	\$ 1,175,541.00	30%
Staff	\$ 1,035,551.00	31%	\$ 1,058,061.00	31%	\$ 998,771.00	25%
Total Benefits	\$ 501,971.00	15%	\$ 477,991.00	14%	\$ 605,314.00	15%
<b>Subtotal</b>	<b>\$ 2,518,740.00</b>	<b>77%</b>	<b>\$ 2,607,441.00</b>	<b>76%</b>	<b>\$ 2,779,626.00</b>	<b>71%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 15,945.00	0%	\$ 6,000.00	0%	\$ 21,750.00	1%
Office Supplies	\$ 16,587.00	1%	\$ 21,500.00	1%	\$ 21,500.00	1%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 32,532.00</b>	<b>1%</b>	<b>\$ 27,500.00</b>	<b>1%</b>	<b>\$ 43,250.00</b>	<b>1%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ -	0%	\$ -	0%	\$ -	0%
Communication	\$ -	0%	\$ -	0%	\$ -	0%
Insurance/Bonds	\$ -	0%	\$ -	0%	\$ -	0%
Postage/Printing	\$ -	0%	\$ -	0%	\$ -	0%
Training/Travel/Transportation	\$ 32,059.00	1%	\$ 34,767.00	1%	\$ 34,767.00	1%
% Indirect	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 32,059.00</b>	<b>1%</b>	<b>\$ 34,767.00</b>	<b>1%</b>	<b>\$ 34,767.00</b>	<b>1%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ 399,296.00	12%	\$ 473,257.00	14%	\$ 760,398.00	19%
Maintenance of Existing Landscaping	\$ -	0%	\$ -	0%	\$ -	0%
Repair of Equipment and Property	\$ 12,145.00	0%	\$ 15,500.00	0%	\$ 10,500.00	0%
Utilities	\$ 293,641.00	9%	\$ 289,313.00	8%	\$ 289,313.00	7%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 705,082.00</b>	<b>21%</b>	<b>\$ 778,070.00</b>	<b>23%</b>	<b>\$ 1,060,211.00</b>	<b>27%</b>
<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Direct Expenses</b>	<b>\$ 3,288,413.00</b>		<b>\$ 3,447,778.00</b>		<b>\$ 3,917,854.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap County Superior Court

Project: Veterans Treatment Ct Continuation Grant

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 28,839.00	\$ 8,403.00	29%	\$ 26,780.00	\$ (2,059.00)	-7%
Total Benefits	\$ 12,123.00	\$ 4,050.00	33%	\$ 12,648.00	\$ 525.00	4%
<b>SUBTOTAL</b>	<b>\$ 40,962.00</b>	<b>\$ 12,453.00</b>	<b>30%</b>	<b>\$ 39,428.00</b>	<b>\$ (1,534.00)</b>	<b>-4%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ 2,500.00	\$ -	0%	\$ 2,500.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 2,500.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 2,500.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ 1,250.00	\$ -	0%	\$ -	\$ (1,250.00)	-100%
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,250.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ (1,250.00)</b>	<b>-100%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ 19,000.00	\$ 3,000.00	16%	\$ 12,000.00	\$ (7,000.00)	-37%
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): TAD Bracelets	\$ 8,600.00	\$ 5,941.00	69%	\$ 14,500.00	\$ 5,900.00	69%
Other (Describe): UA collection/testing	\$ -	\$ -	#DIV/0!	\$ 25,000.00	\$ 25,000.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 27,600.00</b>	<b>\$ 8,941.00</b>	<b>32%</b>	<b>\$ 51,500.00</b>	<b>\$ 23,900.00</b>	<b>87%</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 72,312.00</b>	<b>\$ 21,394.00</b>	<b>30%</b>	<b>\$ 93,428.00</b>	<b>\$ 21,116.00</b>	<b>29%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Kitsap County Superior Court**

**Project: Veterans Treatment Court Continuation Grant**

**Description**

Number of Professional FTEs	0.50
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>0.50</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 26,780.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 26,780.00</b>
Total Payroll Taxes	\$ 2,544.00
Total Cost of Benefits	\$ 6,526.00
Total Cost of Retirement	\$ 3,578.00
<b>Total Payroll Costs</b>	<b>\$ 39,428.00</b>

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name: Kitsap Public Health District

Primary Contact: Kelsey Stedman kelsey.stedman@kitsappublichealth.org 360.633.0783  
Name Email Phone

Organization Address: 345 6<sup>th</sup> St Suite 300 Bremerton, WA 98337  
Street City State Zip

Federal Tax ID Number: 42-1689063 Legal Status of Organization: Governmental

Individual Authorized to Sign Contracts: Keith Grellner Administrator  
Name Title

**Continuation Grant Proposal Information**

Proposal Title: Kitsap Connect

Number of Individuals Screened: ~ 100 Number of Individuals Served: 100 (30 intensively)

Requested Amount of Funding: \$574,598 Matching Funds: \$113,023

**Please check which area(s) of the Continuum this project addresses:**

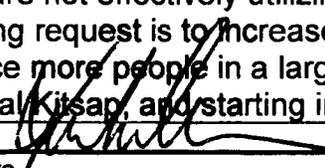
<input type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input checked="" type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Recovery Support Services
<input type="checkbox"/> Outpatient treatment	

**Please check which area(s) of the County this project is focused:**

<input checked="" type="checkbox"/> South Kitsap (new for 2020)	<input checked="" type="checkbox"/> City of Bremerton
<input checked="" type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input type="checkbox"/> County-Wide

**Proposal Summary**

Kitsap Connect is a multi-disciplinary collective impact program that provides innovative outreach, engagement, and care coordination services to Kitsap residents who are inappropriately engaged with costly health and social services including emergency medical systems (EMS), emergency departments (ED), law enforcement and jail, and who are not effectively utilizing existing health and social resources. The increased funding request is to increase FTEs and expand the Kitsap Connect team to be able to service more people in a larger area of Kitsap County to include the City of Bremerton, Central Kitsap, and starting in 2020, South Kitsap.

Signature:  Title: ADMINISTRATOR Date: 7/24/2019

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Checklist Form**

Name of Program: Kitsap Connect

Organization Submitting: Kitsap Public Health District

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	X			YES
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	X			YES
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	X			YES
Organization did receive funding for this project in 2019	X			YES
Attachment A – Continuation Grant Proposal Summary Page	X			YES
Attachment B – Continuation Grant Proposal Checklist Form	X			YES
Organization checked, initialed and signed Continuation Grant Proposal Checklist	X			YES
Attachment C – Continuation Grant Proposal Narrative Template	X			YES
Proposal Narrative is limited to 10 pages	X			YES
Attachment D – Continuation Grant Proposal Evaluation Worksheet	X			YES
Attachment E – Total Agency Budget Form	X			YES
Attachment F – Continuation Grant Proposal Special Project Budget Form	X			YES
Indirect is limited to 5%	X			YES
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	X			YES
Organization submitted Attachment G for each Sub-Contractor	X			YES
Sub-Contractor indirect limited to 5%	X			YES
Attachment H – Continuation Grant Proposal Project Salary Summary	X			YES
Attachment I – Letter of Resource Commitment (optional)	X			YES
No other attachments are included	X			YES
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	X			YES
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	X			YES

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

Ke Spedman, RN  
Signature of Individual Preparing Proposal

7/24/2019  
Date

[Signature]  
Signature of Organization's Chief Executive

7/24/2019  
Date

## 1. Project Description

### A. Project Design

Kitsap Connect is a multi-disciplinary collective impact program that provides innovative outreach, engagement, and care coordination services to Kitsap's most vulnerable residents who are "high-utilizers" of health and social services. The project aim is to promote wellness and self-sufficiency while reducing the overuse and misuse of costly services such as emergency department (ED) visits, ambulance/fire (EMS) transports, and jail stays. Any local agency may refer a client struggling with a substance use disorder and/or mental illness who the agency believes is over-utilizing these services. After being vetted for eligibility, we have found that most clients taken onto caseload are also experiencing homelessness, have a co-morbid physical health condition, and are not effectively utilizing existing health and social resources. Kitsap Connect team members are the problem solvers of last resort for people who are falling through the cracks and needlessly suffering in our county. The increased funding request for next year is to address proposed service changes as outlined throughout this proposal, mainly to expand the Kitsap Connect team to be able to serve more people in a larger area of Kitsap including the City of Bremerton, Central Kitsap, and starting in 2020, South Kitsap. At this early stage of the 2020 budgeting process, there are still questions about funding commitments from other agency's for Kitsap Connect elements, such as the security guard funding from the City of Bremerton.

Kitsap Connect was launched in 2016 as a collective impact pilot project by Kitsap Public Health District (KPHD), Kitsap Mental Health Services (KMHS), Kitsap Community Resources (KCR), Bremerton Housing Authority (BHA), and the Salvation Army (TSA). Peninsula Community Health Services (PCHS) became another integral partner in 2018, while KMHS declined to continue with Kitsap Connect. Members of the participating agencies have intentionally modified the design of the program based on lessons learned and system improvements between partnering agencies. The biggest lesson learned to date is that the individuals served by Kitsap Connect are much more complex than originally anticipated and therefore require more intensive services from a wide range of service providers, for a longer time, to remain stable and successfully housed as compared to the original design. As such, this proposal has components of program design that represent improvements and modifications as follows:

**Expansion of the Kitsap Connect team.** For the past two years the Kitsap Connect team has been comprised of a full-time Program Coordinator and full-time Public Health Nurse employed by KPHD and a 0.75 FTE Housing Outreach Coordinator employed by Housing Solutions Center (HSC). Beginning in 2019, PCHS took over the leadership role in behavioral health and chemical dependency expertise within the Kitsap Connect team and provided the program with a 0.6 FTE Licensed Mental Health Counselor, 0.25 FTE Community Health Worker and 0.2 FTE Chemical Dependency Professional.

Kitsap Connect clients tend to have extremely complex and multi-faceted mental, physical, emotional, legal, financial, and housing needs at intake. All clients struggle with a mental illness, substance use disorder, or both. Ninety one percent (91%) of clients are homeless at intake and the majority are "tri-morbid," meaning they struggle with at least one mental illness, substance use disorder *and* a chronic medical condition

such as heart failure or diabetes. At intake, many of our clients do not have a valid ID, social security card, or cell phone, all of which are necessary to apply for shelter, income, or employment. Aiding clients to replace these crucial forms of ID demands significant time of Kitsap Connect. Adding two additional full-time FTEs to coordinate the many needs of our clients and assist clients with these time-consuming, often competing, tasks are part of the proposed service design changes.

Currently, there are only two full-time positions on staff with the Kitsap Connect team-- the Public Health Nurse and the Program Coordinator. These are also the only two team members that do not have restrictions on which clients they can work with (for example, our PCHS staff can only work intensely with PCHS patients) or where they can work with them (some partners have restrictions on home and community visits). The primary role of the Public Health Nurse is to be the expert on chronic health conditions and medical management. Chronic disease and acute illness often need to be addressed in order to help clients achieve the level of physical wellness needed to successfully engage in recovery and mental health services. The Program Coordinator oversees the Kitsap Connect program, including coordination across multiple partner agencies and searching for other funding opportunities to continue this work in a sustainable way. Because there are no other full-time staff without limitation on who they can serve, in addition to their primary roles, the Nurse and Coordinator have ended up managing the many needs of the active clients, delegating tasks to other team members as needed. These extra responsibilities decreased the number of clients that can be on active caseload at any given time. Therefore, our first proposed service design change is to add a full-time Case Manager position to the Kitsap Connect team. This position would oversee and prioritize the needs of clients on active caseload, coordinate with other team members as appropriate and follow up as needed, without restriction on who and where they can serve clients. Not only would this added position allow us to increase our caseload, it is more fiscally responsible as it allows our specialists to work to the full scope of their licenses as opposed to spending a large portion of time on general care coordination. Salvation Army has come forward as a strong supporter of this proposed change and offered to hire a grant-funded 1.0 FTE Case Manager with in-kind supervision and administrative support to fill this dire need.

As a result of mental illness and/or long-term substance use, the team has also identified that many Kitsap Connect clients are unable to effectively self-advocate for their needs at places like the Social Security Administration, Department of Licensing, DSHS, court, etc. Therefore, the second proposed design change is to add a full-time AmeriCorps Advocate to support clients in getting their needs met in the community. Without help, our clients end up being denied access to resources needed to move forward in life, such as subsidized housing or SSI, because the lengthy applications are only partially completed or completed incorrectly. This Advocate would also be utilized to help connect clients to long-term community supports such as the Senior Center, YMCA, the library, AA/NA etc. The CAC has already permitted the program to re-allocate a portion of underspent 2019 funds to hire an AmeriCorps Advocate for an 11-month term starting in September 2019. The team would like to formalize this design change and apply for another AmeriCorps Advocate after the initial term is over. HSC has offered to apply for and hire this Advocate and provide in-kind supervision.

**Change in client enrollment period.** Another proposed service design change for 2020 is that Kitsap Connect clients will no longer formally “graduate,” but the level of engagement will decrease as they become more stable and connected to long-term supports. Originally, Kitsap Connect was designed to “outreach and engage” clients, connecting them to more long-term, already existing resources. While many clients become engaged with long-term services like medical and mental health providers, the team has realized they still require some level of care coordination to stay engaged with these supports and address issues promptly as they arise. People with mental illness and/or substance use disorders often have periods of stability but can quickly cycle back into chaos. While our team has been intent on working with community partners to have a strong support plan for clients prior to discharge, almost one in five discharged clients (20%) has been re-referred to us after successful stabilization and graduation because Kitsap does not currently have any long-term programs to provide the care coordination services at the level these clients require to maintain stability.

The need for some level of long-term Kitsap Connect engagement became most apparent in our clients who transition from long-term homelessness to being housed. People in this population often experience an initial “honeymoon” phase upon being housed, they are happy, stable, and secure. In the past, this is when we transitioned clients over to KCR’s Housing Stabilization Specialist and Kitsap Connect graduation happened. However, the honeymoon phase is often followed by an extreme depression as the client transitions from a world of survival into a world of calm and quiet. Past traumas and issues begin to surface and clients may slip into old habits or make choices that seem irresponsible to those who are not trained in the long-term effects trauma has on the brain. Landlords begin to look to us to help ensure our clients pay rent on time, abide by city ordinances such as quiet hours and trash days, and that their houses remain safe, inside and out. Many of our more disabled clients need help to apply for in-home caregiving services once they become housed (a process that takes months), medication management often becomes more challenging, and due to years of being a part of a community of people without homes, frequent overnight guests are usually an on-going problem. The Housing Stabilization Specialist alone is not enough support for these on-going, complex needs. Best practice is for a social worker, case manager, nurse, medical provider, peer support specialist, and psychiatrist to be available 24/7 for supporting those with serious-mental illness trying to thrive in housing after being homeless<sup>1</sup>. While we are not at that level yet, we would like to move toward this model to give our clients and community the highest chance of success by keeping them on caseload to support the Housing Stabilization Specialist, landlords, neighbors, and the community at large.

Lastly, programs like Kitsap Connect, that serve the most difficult to serve, for example, Seattle’s Law-Enforcement Assisted Diversion (LEAD), and Boston’s Healthcare for the Homeless Street Outreach Team, do not ever “graduate” clients for the aforementioned reasons. Our proposed change to keep clients on caseload is not a large change in the program as many of the clients have been on caseload two or more years already and we have still been able to serve close to 30 clients per year. Our request is to formalize this process and change our outcomes accordingly which will be expanded upon in the Evaluation section.

**Expanded service area.** Kitsap Connect was original designed as a pilot program for Bremerton and Central Kitsap only. Over the years, the team has had to turn away multiple referrals from Port Orchard as there has not been the staff to support referrals from anywhere outside Bremerton and Central Kitsap. If funding for additional FTEs is granted, the Kitsap Connect team plans to begin taking referrals from South Kitsap starting in 2020. This is another proposed service design change.

To recap, acceptance of this proposal would allow the 2020 Kitsap Connect team to add a 1.0 FTE Case Manager employed by the Salvation Army and a 1.0 FTE AmeriCorps Advocate employed by KCR/HSC to the already existing Kitsap Connect team, provide time to help clients reclaim vital forms of ID, lengthen the enrollment period, and expand the service area. This would create a team composition and staff to client ratio that more closely aligns with the best-practices from other successful programs similar to Kitsap Connect<sup>1</sup>. With these changes, Kitsap Connect aims to intensively serve at least 30 clients in 2020 and provide additional referrals and linkages to services for at least 70 other community members in need, including South Kitsap.

Kitsap Connect addresses the following policy goals from the 2014 Kitsap County Behavioral Health Strategic Plan: (a) Increase the number of stable housing options for chemically dependent and mentally ill residents of Kitsap County (b) Reduce the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services (c) Reduce the number of people in Kitsap County who recycle through the criminal justice systems, including jails and prisons (d) Reduce the number of chemically dependent and mentally ill youth and adults from initial or further criminal justice system involvement (e) Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults (f) Improve the health status and wellbeing of Kitsap County residents. The success in addressing these goals will be highlighted in "Accomplishments to Date."

## **B. Outreach**

Kitsap Connect continues to receive referrals from law enforcement officers, EMS providers, behavioral health organizations, social service agencies, emergency departments, inpatient social workers and homeless service providers. Bremerton Fire Department and Harrison Medical Center have provided feedback that the clients we serve include those in the top 95% of their own high-utilizer lists, verifying we are serving the intended population. Once taken onto caseload, the team is responsible for engaging and outreaching to clients via telephone, face to face meetings, home visits, encampments, Kitsap Rescue Mission (KRM), court dates, hospitals and the street. The Kitsap Connect office is also strategically located at Salvation Army in order to be able to meet clients where they already congregate for other services and meals. Overall, the Kitsap Connect team has been extremely successful at being in contact with hard to reach individuals, so much so, that other providers often reach out to us when they are trying to locate a mutual client.

The Kitsap Connect team was chosen to participate in a 50-hour training provided by Kitsap Strong on neuroscience, epigenetics, adverse childhood experiences and resiliency to deepen the understanding of the social and cultural needs of our clients. The most recent meeting focused on cultural humility. The team will also continue to

attend trainings provided by the Healthcare for the Homeless Coalition and other credible organizations to ensure we are utilizing the most up-to-date evidence-based, culturally competent, practices.

## 2. Accomplishments to Date

### A. Evaluation

In 2020, we will measure many of the same outcomes as years prior including: number of clients served, client satisfaction, client well-being and client improvement in “problem areas” such as: Mental Health, Substance Use, Healthcare Supervision, Income and Residence (See Attachment D). We have met or exceeded our targets in nearly every outcome each year, resulting in higher targets for the following year which we continue to meet. For example, over 87% of clients have increased Knowledge, Behavior and Status in the above-mentioned problem areas. Over 80% of clients self-report increased well-being and over 90% report satisfaction with the program. We will maintain our current eligibility criteria for “high-utilization” (See Attachment D) and the requirement that all referrals have a mental illness, substance use disorder, or both. The team has already received 24 referrals in 2019. Of these referrals, 10 people were eligible for services, three have been taken onto caseload and seven more are on our waitlist, showing that partners continue to look to us as a resource and there continues to be an unmet need for these services. Although the aim is to *intensively* serve 30 individuals per year who misuse or overutilize ER/EMS and/or jail services, we frequently provide referrals and linkages to other community members because of our known presence in the downtown area. For 2020, we will capture this additional work and aim to provide at least 70 additional citizens with linkages to resources. We will also begin tracking the amount of time spent on these “non-client” activities as time investments can vary greatly across requests. In one example, someone simply needed to know where to go for shelter on a weekend. In another example, an individual experiencing homelessness was newly diagnosed with both HIV and lymphoma. His HIV Case Manager reached out to us locate a safe place for him to sleep and find a site to complete community service within the next two weeks to avoid jail time, all while undergoing chemotherapy and radiation.

We will also continue to collect data on the utilization of costly services. To date, we have nearly met or met each target in these areas as well. As of December 2018, sixty-nine percent (69%) of clients served have shown reductions in their use of costly services, exceeding the 50% target. Fifty-two percent (52%) of EMS high-utilizers have reduced their EMS calls by the targeted 15% or more and 54% of ED high utilizers have reduced their ED visits by the targeted 30% or more. As of June 2019, there has been a 49% reduction in jail nights and a 50% reduction in arrests, program to date. As clients continue to be on caseload for multiple years data availability becomes limited. As such, outcomes for utilization data will be based on the 12 months prior to enrollment with Kitsap Connect as compared with the most recent 12 months the client is in services. If a client is in services less than 12 months, equal time spans will be compared. When comparing the most recent year of utilization to the year prior to enrollment, clients served in 2019 show an estimated \$800,790 reduction in costly services resulting in a positive Return on Investment for the first year since the program began (for more details see Key Accomplishments). To address clients not officially

“graduating”, if we do not interact with a client for more than 60 days, they will be put into “Out of Services” status with the ability to come back into services within one year, if caseload permits. If more than a year passes, they would need to be referred again and taken on as a new client. Other outcomes that depended on graduation of a client have also been amended for 2020. Since our original proposal, we have had to remove our 911 criteria and associated outcomes as it related to law enforcement involvement as it became apparent many interactions are not logged and those that are remain difficult to access.

## **B. Barriers to Implementation**

**Barriers to meeting measured outcomes.** For 2018, most of the objectives were successfully met and we are on track to meet our 2019 objectives. However, the team was only able to serve 26 of the planned 30 clients for 2018. This was partly due a mental health position that went unfilled most of 2018. To address this unmet need, KMHS and Kitsap Connect mutually terminated the contract to provide a mental health professional and PCHS took on this role, providing us with a 0.6 FTE Licensed Mental Health Counselor who began January 1, 2019. As stated previously, a lack of long-term supports and on-going care coordination needs has increased the length of time clients require Kitsap Connect services which also decreases the rate at which we can take new clients onto caseload without more staff. Due to our nurse going on maternity leave and our HSC staff member being gone for three months of 2019, it is unlikely we will meet our target of 30 clients for this year. We hope to remedy this caseload shortage with increased FTEs in 2020 as outlined previously. A larger team would also allow us to spread the work across multiple positions when we are under-staffed.

**Lack of access to long-term funding for intensity of services.** After holding a community-wide update on Kitsap Connect in April 2019 it became apparent that multiple agencies support the work Kitsap Connect has done and continues to do. Unfortunately, none of the agencies in attendance were able to commit to additional in-kind support for 2020 at the time of this application. BHA and KCR have been integral to the access of rental assistance by prioritizing housing funds for vulnerable Kitsap Connect clients but there seems to be a lack of funding for the on-going operational costs of the staff needed to work with this vulnerable population.

## **C. Key Accomplishments**

The accomplishments we are most proud of include:

**A \$800,790 reduction in costly services for clients served in 2019.** Twenty (20) clients who qualified as high utilizers of costly services have received Kitsap Connect services through June 2019. Costly services include ED visits, inpatient hospital days, and nights in jail. The \$800,790 reduction in cost savings is more than a 210% Return on Investment in a one-year time span. When comparing utilization of these services for clients in the most recent year with Kitsap Connect utilization in the year prior to enrollment, clients show a 63% reduction in hospital inpatient days, a 34% reduction in ED visits, and a 30% reduction in ambulance/EMS services. If funded for the full proposal in 2020, reductions of this magnitude would still result in a positive Return on Investment.

**Community-wide improvements in fill gaps.** Although our caseload is smaller than other programs, the intense, in-depth work with these complex clients has shed light on gaps that many partners did not even know existed. For example, there are some people who, due to past traumas and/or mental illness, cannot or choose not to seek care in a clinic setting. To address the mental health and chemical dependency needs of these individuals we partnered with PCHS and now have either a Licensed Mental Health Counselor or a Chemical Dependency Professional on-site at TSA to provide direct counseling services four days a week for *any* PCHS clients in a community setting. Our nurses have worked closely to coordinate with the KMHS Crisis Triage Center/Pacific Hope and Recovery to take clients that they would have otherwise denied due to their medical complexities, the most recent being a client with diabetes on an insulin pump. The Center's willingness to admit this patient with our support not only allowed our client to access much-needed inpatient dual diagnosis treatment services, it also helped him meet his court-ordered treatment requirement and stay out of jail. Using our client as a test-case, the facility is now equipped to serve other people with insulin pumps. On an even larger scale, our Program Coordinator was elected to be one of two county representatives on the state-wide Balance of State Continuum of Care Steering Committee and sits on the Kitsap Housing and Homelessness Executive Committee. She is also participating in the Outside Homelessness Committee which is currently addressing the need for 24/7 bathroom facilities in downtown Bremerton and both her and our nurse sit on a Housing and Homelessness Sub-committee working to revise our county's Homeless Crisis Response and Housing Plan.

**Housing outcomes.** Despite a 5% vacancy rate in Kitsap County and an 88% gap in the availability of needed affordable housing<sup>2</sup>, 75% (n=30) of individuals who were homeless at intake into Kitsap Connect have been stably housed and 80% (n=24) of those individuals are still housed. This is a testament to the true collective impact of this program as it requires multiples partners to achieve and maintain this level success in a population that is traditionally extremely hard to house and often returns to homelessness. For example, one of our first clients became housed with another person in early 2017. His ER and EMS utilization went from multiple encounters per week to none-existent. He was stable and discharged from Kitsap Connect. Some months later, he lost his housing through no fault of his own. Over the next year, his utilization increased and he became Bremerton's highest utilizer of EMS services with 77 ER/EMS encounters in a 12 months period, usually related to breathing issues. EMS re-referred him, we took him back on caseload, and within two weeks had him stably housed again. He has now been housed three months and has not called 911 or visited the ER even once. He is trying to get back to work through Holly Ridge or Skookum who will consider his memory impairment and breathing issues into their efforts to get him matched with an appropriate employer.

**National recognition for addressing Social Determinants of Health.** The Robert Wood Johnson Foundation, in partnership with the National Academy of Medicine, has requested a site-visit to Kitsap Connect to learn about innovative ways nurses are working across sectors to address Social Determinants of Health (e.g. stress, lack of social supports, unemployment, addiction, food scarcity, transportation struggles, childhood trauma, etc). We will be one of only 8-10 site visits being conducted across

the country and may be highlighted in an update to their landmark publication, *The Future of Nursing*.

### 3. **Budget Narrative**

#### **A. Funding Request**

KPHD is requesting a grant of \$574,598 for the additional year of programming. KPHD has a federally negotiated indirect rate of 37% and as such has requested the maximum 5% indirect rate in this proposed budget. While the 2020 request is 51% higher than our award in 2019, this is in large part due to the request to increase our team by 57%. A breakdown of the costs associated with these new positions as well as details on additional managerial/administrative salaries and benefits is expanded upon below. Of note, the budget also includes \$30,000 toward our on-going need for a security guard on-site at the Salvation Army. In 2019, the City of Bremerton provided this funding, but the request has not yet been approved by City Council for 2020. Important milestones anticipated include establishing a positive Return on Investment trend, project expansion to provide services in South Kitsap, increasing our caseload to reduce the time citizens in need are on our waitlist, and working toward a team composition that is more in line with best practices and evidence-based programs.

#### **B. Past Expenditure and Budget Modifications**

**KPHD.** All expenditures for KPHD and sub-contractors are through June 2019. KPHD is on-target for personnel spending. A small provision for office supplies was added as this was not included in the 2019 budget and the team has a need for general office supplies. Client Incidentals are slightly below target because spending often increases in the winter months as needs of clients increase due to harsh weather.

Training/Travel/Transportation is currently underspent for 2019 because our Public Health Nurse had planned to attend an out-of-state conference but had to cancel last minute due to a medical emergency and all her expenses were refunded in June. An estimated \$45,000 will be provided in matching funds/in-kind support.

**PCHS.** Due to staffing shortages, the launch of their mobile medical and behavioral health vans, and opening a new clinic, PCHS was unable to provide a CDP for Kitsap Connect until the end of May 2019. This CDP is currently only available at a 0.2FTE, as compared to the planned 0.4 FTE CDP for 2019. PCHS has also not yet billed for equipment (a laptop) or office supplies, but they plan to do so by year's end. As such, PCHS has underspent their award to date. Due to invoice discrepancies that have since been resolved, Attachment F does not reflect the services billed in 2019 as the invoice has not yet been paid. The increase in the PCHS funding request for 2020 is mainly the result of the BHO not contracting with PCHS therefore preventing PCHS from being able to provide any CDP or CHW support in-kind. Additional requests are for a portion of administrative costs/benefit, mileage reimbursement and communication costs to cover a portion of the employee's cell phone. PCHS has committed to \$33,223 in matching funds/in-kind support.

**KCR/HSC.** HSC realized they will underspend their contracted amount for 2019 so, as previously mentioned, a portion of these funds (\$7,000) was approved by the CAC to be

re-allocated to an AmeriCorps Advocate which will be billed in total in Fall 2019. The slight increase in the request from KCR/HSC for 2020 comes from a request for increased wages to support raises and cost of living adjustments as well as additional funds to support the hire of another 1.0 FTE AmeriCorps Advocate again in 2020 after the first one finishes their term. Refer to Project Design for more details on this position. HSC has committed to providing \$10,500 of in-kind supervision/administrative support. Additionally, if funded through in their own 1/10<sup>th</sup> application, the KCR Housing Department has committed to providing 1.0-1.5 FTE Housing Stabilization Specialist services to aid in supporting our clients after they become housed (See Attachment I).

**Increased costs associated with increased FTEs.** Kitsap Connect is proud to have Salvation Army and AmeriCorps join as partners for 2020. As mentioned in the Program Design section, the most successful programs working with those with mental illness and/or substance use disorders employ an extensive team dedicated to working with the population Kitsap Connect serves. The only evidence-based program shown to have long-term (>5 years) success in housing dual-diagnosis individuals employed a Program of Assertive Community Treatment (PACT) team that was available 24/7 to support these clients<sup>1</sup>. In Washington State, a PACT team for 50 clients is required to have a 1.0 FTE Team Leader, 0.4 FTE psychiatric prescriber, 1.5 – 2.0 FTE RN, 1.0 Peer Specialist, 2.0 FTE Master’s level mental health professionals, 1.5 -2.5 FTEs of “other” specialists such as Chemical Dependency Professional, Vocational Specialist, home health aide, etc<sup>3</sup>. Even reducing those FTEs to more closely reflect our caseload, the Kitsap Connect team does not meet those levels of staffing. However, the aim is to work toward building up to this level, which is why the total requests for FTEs has increased from 3.8 FTEs in 2019 to 6.0 FTEs in 2020, a significant budgetary modification.

**Government Agencies Administrative Costs.** KPHD has been the backbone agency for Kitsap Connect since its inception in 2016. The original design team intended for the program to be handed over to community after the first one or two years but multiple changes in leadership positions across practically every partner agency slowed that process down. Unfortunately, as much as KPHD believes in the work and positive outcomes generated by Kitsap Connect, KPHD cannot continue to support the program as the backbone agency after 2020. Over the first six months of this year alone, KPHD has already supplemented the Kitsap Connect program with approximately \$95,000 of local funds to cover administrative costs, administrative staff benefits, and insurance premiums because of the unrealistic grant caps on indirect costs. Included in the request this year is funding to partially cover the administrative staffing and benefit costs related to supporting the Kitsap Connect program including supervision of Kitsap Connect staff; human resources assistance; accounting staff time to handle monthly billings, invoicing, and purchasing; IT support, and general administration. PCHS has requested additional funding for similar reasons.

#### **4. Sustainability**

**A. Sustainability Plan.** As previously mentioned, Kitsap Connect was intended as a pilot program that, if it proved its value, could be picked up by another local agency or entity that directly benefits from Kitsap Connect outcomes, or whose scope is more

directly related to the behavioral health, mental health, and housing services Kitsap Connect provides for our community. Furthermore, KPHD's status as a governmental agency hampers the ability of Kitsap Connect to access funding sources for these services. For these reasons, KPHD does not have plans to continue as the backbone agency after 2020. The previous Salvation Army officers were committed to pursuing the Salvation Army as the backbone organization for Kitsap Connect prior to their sudden relocation to Mesa, AZ in June of this year. The Salvation Army Advisory Board also supported this proposal. The new officers have been in Washington less than three weeks at the writing of this application, but they have already met with the Kitsap Connect team and preliminary discussions with them have been positive. They have agreed to honor the resource commitments outlined in this proposal and the Letter of Resource Commitment attached. They are also open to discussions around supporting Kitsap Connect as the backbone agency in 2021 and beyond. Working with Salvation Army to hire a Case Manager for the Kitsap Connect team would be a great start to this transition. Furthermore, Salvation Army was the fiscal-sponsor for Kitsap Connect to be able to apply for a \$20,000 Medina grant. The proposal was submitted in June, and we are awaiting a site-visit to be scheduled. Our Program Coordinator also has a phone meeting scheduled with Premera regarding their Social Impact grants in mid-August which range from \$10,000 to \$500,000 each. The Kitsap Connect team has diligently pursued other grant opportunities such as the Franciscan Foundation, Kaiser Foundation, etc. Unfortunately, Kitsap Connect is ineligible for many of these grants because KPHD is a government agency and these grants require a non-profit status. We are also pursuing direct funding from Harrison Medical Center now that we have strong outcomes to share with them.

Our Program Coordinator met with all three of the Managed Care Organizations (MCOs) that will be covering Apple Health members in Kitsap in 2020. They all expressed interest in contracting with Kitsap Connect as a "Health Home," meaning that there is the potential for some reimbursement through these insurance companies for the care coordination services Kitsap Connect provides to Medicaid and Medicaid/Medicare clients. Unfortunately, KPHD is no longer billing insurance for services so we are looking into whether any of our other partner agencies may be able to utilize this resource to reduce operating costs.

Also related to insurance reimbursement is a Medicaid Transformation demonstration project for housing case management and employment services. KCR is in active contract negotiations to provide these services. The goal is for multiple positions, including the Housing Outreach Coordinator position with Kitsap Connect, to be at least partially funded through this program in the future.

Lastly, Kitsap Connect has been donated a website (a \$9,000 value) that is set to go live by the end of August. On this site will be a link to donate to Kitsap Connect. We have also been nominated to present at a local "Power of 100" event in September. At this meeting women in the community come together, each with \$100, and vote on one of three local programs to support. If Kitsap Connect receives the majority of the votes all proceeds from the evening will go to our program. Because KPHD is not set up to process donations such as these, Kitsap Community Foundation has agreed to partner to collect community donations for a 1% admin fee.

**References**

1. "Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals with Dual Diagnosis." (April 2004).  
<https://ajph.aphapublications.org/doi/full/10.2105/AJPH.94.4.651>
2. Homelessness in Kitsap County. (April 2018).  
<https://www.kitsapgov.com/hs/HOUSINGBLOCK/Homelessness%20in%20Kitsap%20Overview%20-%20Apr%202018.pdf>
3. Washington State Program of Assertive Community Treatment (PACT) Program Standards (4-16-07). <https://www.hca.wa.gov/assets/billers-and-providers/PACTProgramStandards.pdf>

EVALUATION WORKSHEET-2020

ATTACHMENT D

PROJECT NAME: Kitsap Connect

OBJECTIVE	STRATEGY	SMART OUTCOME	TYPE OF MEASURE	TIMELINE	PERIOD	SOURCE
Improve the mental health and physical health and well-being of highly vulnerable clients	Agencies identify clients for potential services and refer to Kitsap Connect  Outreach to referred clients conducted and intake assessments completed	By December 31, 2020, serve at least 30 highly vulnerable, costly clients with established care plans	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/20</u>  Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: Ongoing	21 as of 6/30/19	Client Referral Forms  Client Intake Forms
Improve the mental health and physical health and well-being of highly vulnerable clients	Kitsap Connect team works with partners through care conferences to establish tailored care plan for client	By December 31, 2020, serve at least 70 community members in need who are not active Kitsap Connect clients to provide referrals and linkages to community resources	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long	57 as of 6/30/19	Partner Agencies  Client Referral Forms  Street Outreach  Community Members
Improve the mental health and physical health and well-being of highly vulnerable clients	Kitsap Connect Team members track progress on care plan goals and record change in behavior/practice for each participant	By December 31, 2020, the following percent of clients (those participating at least 3 months-does not have to be consecutive) will have made progress on their tailored care plan as evidenced by improved Knowledge, Behavior and Status (KBS) scores: - Knowledge: 80% - Behavior: 85% - Status: 85%	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem (status) <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/17</u>  Frequency: <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: ___	95%, 85%, and 93% respectively through 06/30/2019	KBS Data/Score*  *Problems to be collapsed

EVALUATION WORKSHEET-2020

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>Enhance linkages to comprehensive services including care coordination, access to medication, prompt access to benefits, health care</p>	<p>Help clients to become engaged or re-engaged with their primary care providers, mental health professionals, etc.</p>	<p>By December 31, 2020 there will be a 50% increase in the number of number of attended outpatient visits with PCHS (primary care, mental health, SUD, and/or dental visits) for high utilizers* as compared to baseline (equal time spans)</p> <p>Defined as clients who have at least 10 combined ED, EMS, and jail events in the 12 months prior to intake</p>	<p><input checked="" type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>if applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>1/1/17</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other:  <u>Ongoing</u></p>	<p>57% as of 12/31/2018. This may need to be adjusted if we only look at a most recent year of data</p>	<p>PCHS (Lynette Bird-Clinical Operations Director and/or CHW)</p> <p>PCHS and KMHS data</p>
<p>Increase access to stable housing for those Kitsap County residents with mental illness and/or substance use disorders</p>	<p>Work collaboratively with partner agencies, landlords, assisted living facilities and adult family homes to advocate for and prioritize housing our clients and provide housing support after move-in for up to 6 months</p>	<p>By December 31, 2020, 75% of clients (those participating at least 3 months- does not have to be consecutive) who entered the program as homeless will be in either temporary or stable housing at end of year.</p>	<p><input checked="" type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>if applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input type="checkbox"/> Medium</p> <p><input checked="" type="checkbox"/> Long</p> <p>Start date: <u>1/1/27</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other:</p>	<p>New 75% as of 6/30/19. This may need to be adjusted if we only look at the most recent year only</p>	<p>Housing data in Nightingales notes/Kitsap Connect Excel spreadsheet</p>
<p>Improve the health and well-being of Kitsap residents</p>	<p><a href="#">Click here to enter text.</a></p>	<p>By December 31, 2020, 80% of clients (those participating at least 3 months- does not have to be consecutive) report improvement in well-being as measured by an Anonymous quarterly Services Survey</p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>if applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>1/1/20</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual</p>	<p>81% as of 6/30/19</p>	<p>Anonymous Services Survey</p>

EVALUATION WORKSHEET-2020

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Reduce usage of costly health, social, and public services resulting in cost savings	Kitsap Connect Team identify usage pattern baseline for each client	By December 31, 2020, there will be a statistically significant decrease in the average emergency services used by high utilizers* enrolled in the program (those participating at least 3 months-does not have to be consecutive) compared to their baseline. Comparison period: Most recent 12 months in services as compared to the 12 months prior to engagement. If less than 12 months in services, equal time spans will be compared	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input checked="" type="checkbox"/> Other: One time at exit <input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/20 Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: + At discharge	100% as of 6/30/19	Satisfaction Survey
Reduce the number of people in Kitsap County who recycle through our criminal justice system, including jails and prisons	Kitsap Connect Team provide intensive care coordination for clients resulting in more efficient usage of system resources by client	By December 31, 2020, there will be a statistically significant decrease in the average emergency services used by high utilizers* enrolled in the program (those participating at least 3 months-does not have to be consecutive) compared to their baseline. Comparison period: Most recent 12 months in services as compared to the 12 months prior to engagement. If less than 12 months in services, equal time spans will be compared	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: 1/1/20 Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: Ongoing	65% of clients met this criteria for the previous year alone as of 6/30/19	EPIC, ESO, jail reporting done by Lt Sapp, emergencyrep@ortg.com
Reduce the number of chemically		*Defined as clients who have at least 10 combined ED, EMS, and jail events in the 12 months prior to Intake				

EVALUATION WORKSHEET-2020

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>dependent and mentally ill adults from initial or further criminal justice service involvement</p>		<p>By December 31, 2020, EMS high utilizers* enrolled in the program (those participating at least 3 months- does not have to be consecutive) reduce the number of calls by 30 % from baseline. Comparison period: Most recent 12 months in services as compared to the 12 months prior to engagement. If less than 12 months in services, equal time spans will be compared</p> <p>* Defined as clients who have had at least 6 EMS events in the 12 months prior to intake</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input checked="" type="checkbox"/> Return-on-investment or cost-benefit if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date:  <u>1/1/20</u>                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other:  <u>Ongoing</u></p>	<p>New time criteria</p>	<p>www.emergen cyreporting.co m                      and data pulled by BFD Medical Officer from new ESO system</p>
		<p>By December 31, 2020, inappropriate or high emergency department utilizers** enrolled in the program (those participating at least 3 months- does not have to be consecutive) reduce their number of ED visits by 15% Comparison period: Most recent 12 months in services as compared to the 12 months prior to engagement. If less than 12 months in services, equal time spans will be compared</p> <p>** Defined as clients who have had at least 4 ED events in the 12 months prior to intake</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date:  <u>1/1/20</u>                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other:  <u>Ongoing</u></p>	<p>New time criteria</p>	<p>Community data: EPIC</p>
		<p>By December 31<sup>st</sup>2020, the number of jail bed days for participants (at least non/consecutive three months)</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p>	<p>49% reduction as of 6/30/19.</p>	<p>Jail Reporting run by Lt Sapp</p>

EVALUATION WORKSHEET-2020

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
<p>Improve system efficiency through enhanced coordination and collaboration of social, public, and health service</p>	<p>Referring agencies will complete or renew Partner Service Agreements with KPHD outlining shared commitment to care conferences and collaboration</p>	<p>By December 31, 2020, the following seven diverse agencies will have current Partner Service Agreements to refer to the program and participate in case conferences as appropriate: Bremerton Municipal Court, EMS providers, TSA, KCR, HSC, PCHS, Harrison Medical Center</p>	<p><input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p>Start date:  <u>1/1/2017</u>                      Frequency:  <input type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other:</p>	<p>Have not run statistical analyses yet</p>	<p>Partner Service Agreements</p>
	<p>Partner agencies will attend bi-monthly High Utilizer Care Coordination Team (HUCC Team) Meetings when they have clients on active client caseload</p>	<p>By December 31, 2020, at least 20 HUCC Team meetings will be held with a variety of diverse partner agencies</p>	<p><input checked="" type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p>Start date:  <u>1/1/20</u>                      Frequency:  <input type="checkbox"/> Quarterly  <input checked="" type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input type="checkbox"/> Other:                      Once</p>		

ATTACHMENT D

EVALUATION WORKSHEET-2020

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE <small>Data and time</small>	G. SOURCE
		By December 31, 2020, 90% of agencies participating in care coordination and/or on the Advisory Committee will report improved collaboration via a Systems Assessment Survey during the 4 <sup>th</sup> Quarter of program.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/20</u>  Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other:	91% as of 9/15/2018	Systems Assessment Survey

# Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name:

Kitsap Public Health District

Project:

Improving Health

Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 1,501,549	12%	\$ 1,043,234	8%	\$ 938,911	7%
WA State Revenue	\$ 2,457,939	20%	\$ 2,455,367	19%	\$ 2,750,011	20%
Local Revenue	\$ 2,371,088	19%	\$ 4,508,281	35%	\$ 5,049,275	37%
Private Funding Revenue	\$ 44,407	0%	\$ 44,850	0%	\$ 47,093	0%
Agency Revenue	\$ 5,676,633	46%	\$ 4,553,781	35%	\$ 4,654,716	34%
Miscellaneous Revenue	\$ 242,891	2%	\$ 392,950	3%	\$ 353,655	3%
<b>Total Agency Revenue (A)</b>	<b>\$ 12,294,507</b>		<b>\$ 12,998,483</b>		<b>\$ 13,793,659</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Staff	\$ 6,831,011	56%	\$ 7,284,654	55%	\$ 7,466,770	54%
Total Benefits	\$ 2,567,580	21%	\$ 2,765,346	21%	\$ 2,986,574	22%
<b>Subtotal</b>	<b>\$ 9,398,591</b>	<b>76%</b>	<b>\$ 10,050,000</b>	<b>76%</b>	<b>\$ 10,453,344</b>	<b>76%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 139,684	1%	\$ 172,135	1%	\$ 189,349	1%
Office Supplies	\$ 261,940	2%	\$ 216,812	2%	\$ 238,493	2%
<b>Subtotal</b>	<b>\$ 401,624</b>	<b>3%</b>	<b>\$ 388,947</b>	<b>3%</b>	<b>\$ 427,842</b>	<b>3%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 5,850	0%	\$ 7,000	0%	\$ 7,700	0%
Professional Services	\$ 1,165,048	9%	\$ 1,099,577	8%	\$ 1,165,552	8%
Communication/Postage	\$ 109,736	1%	\$ 137,153	1%	\$ 150,868	1%
Insurance/Bonds	\$ 116,444	1%	\$ 157,676	1%	\$ 181,327	1%
Training/Travel/Transportation	\$ 304,813	2%	\$ 246,966	2%	\$ 271,663	2%
<b>Subtotal</b>	<b>\$ 1,701,891</b>	<b>14%</b>	<b>\$ 1,648,372</b>	<b>13%</b>	<b>\$ 1,777,110</b>	<b>13%</b>
<b>Ongoing Operations and Maintenance</b>						
Repair of Equipment and Property	\$ 445,783	4%	\$ 474,631	4%	\$ 522,094	4%
Utilities	\$ 1,300	0%	\$ 3,000	0%	\$ 3,300	0%
Rentals/Leases	\$ 39,018	0%	\$ 67,860	1%	\$ 74,646	1%
<b>Subtotal</b>	<b>\$ 486,101</b>	<b>4%</b>	<b>\$ 545,491</b>	<b>4%</b>	<b>\$ 600,040</b>	<b>4%</b>
<b>Other Costs</b>						
Debt Service	\$ 306,300	2%	\$ 301,350	2%	\$ 295,323	2%
Non-Expenditures	\$ -	0%	\$ 240,000	2%	\$ 240,000	2%
<b>Subtotal</b>	<b>\$ 306,300</b>	<b>2%</b>	<b>\$ 541,350</b>	<b>4%</b>	<b>\$ 535,323</b>	<b>4%</b>
<b>Total Direct Expenses</b>	<b>\$ 12,294,507</b>		<b>\$ 13,174,180</b>		<b>\$ 13,793,659</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: **Kitsap Public Health District** Project: **Kitsap Connect**

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Administration	\$ -	\$ -	#DIV/0!	\$ 52,954	\$ 52,954	#DIV/0!
Staff	\$ 163,533	\$ 80,873	49%	\$ 158,716	\$ (4,817)	-3%
Total Benefits	\$ 49,995	\$ 30,435	61%	\$ 79,578	\$ 29,583	59%
<b>SUBTOTAL</b>	<b>\$ 213,528</b>	<b>\$ 111,308</b>	<b>52%</b>	<b>\$ 291,248</b>	<b>\$ 77,720</b>	<b>36%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ 305	#DIV/0!	\$ 620	\$ 620	#DIV/0!
Other (Describe): Client Incidentals	\$ 3,600	\$ 1,403	39%	\$ 3,780	\$ 180	5%
<b>SUBTOTAL</b>	<b>\$ 3,600</b>	<b>\$ 1,708</b>	<b>47%</b>	<b>\$ 4,400</b>	<b>\$ 800</b>	<b>22%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Charting Software	\$ -	\$ -	#DIV/0!	\$ 1,500	\$ 1,500	#DIV/0!
Communication	\$ 2,780	\$ 520	19%	\$ 3,000	\$ 220	8%
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ 11,032	\$ 11,032	#DIV/0!
Dues	\$ -	\$ -	#DIV/0!	\$ 250	\$ 250	#DIV/0!
Training/Travel/Transportation	\$ 1,440	\$ 264	18%	\$ 1,500	\$ 60	4%
% Indirect (Limited to 5%)	\$ 37,283	\$ 13,024	35%	\$ 27,362	\$ (9,921)	-27%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 41,503</b>	<b>\$ 13,808</b>	<b>33%</b>	<b>\$ 44,644</b>	<b>\$ 3,141</b>	<b>8%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): Leases	\$ 4,800	\$ 1,702	35%	\$ -	\$ (4,800)	-100%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 4,800</b>	<b>\$ 1,702</b>	<b>35%</b>	<b>\$ -</b>	<b>\$ (4,800)</b>	<b>-100%</b>
<b>Sub-Contracts</b>						
Organization: KCR	\$ 47,350	\$ 14,632	31%	\$ 51,625	\$ 4,275	9%
Organization: PCHS	\$ 69,324	\$ -	0%	\$ 88,329	\$ 19,005	27%
Organization: Salvation Army	\$ -	\$ -	#DIV/0!	\$ 94,352	\$ 94,352	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 116,674</b>	<b>\$ 14,632</b>	<b>13%</b>	<b>\$ 234,306</b>	<b>\$ 117,632</b>	<b>101%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 380,105</b>	<b>\$ 143,158</b>	<b>38%</b>	<b>\$ 574,598</b>	<b>\$ 194,493</b>	<b>51%</b>

NOTE: Indirect is limited to 5%

NOTE: All 2019 Expenditures (including sub-contractors) are for paid services through 06/30/19

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: **Kitsap Community Resources** Project: **Kitsap Connect**

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 24,000.00	\$ 8,765.57	37%	\$ 31,000.00	\$ 7,000.00	29%
Total Benefits	\$ 16,000.00	\$ 4,624.04	29%	\$ 16,000.00	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 40,000.00</b>	<b>\$ 13,389.61</b>	<b>33%</b>	<b>\$ 47,000.00</b>	<b>\$ 7,000.00</b>	<b>18%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ 1,000.00	\$ 89.46	9%	\$ 1,000.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,000.00</b>	<b>\$ 89.46</b>	<b>9%</b>	<b>\$ 1,000.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 1,722.00	\$ -	0%	\$ 500.00	\$ (1,222.00)	-71%
% Indirect (Limited to 5%)	\$ 3,628.00	\$ 1,153.11	32%	\$ 2,125.00	\$ (1,503.00)	-41%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 5,350.00</b>	<b>\$ 1,153.11</b>	<b>22%</b>	<b>\$ 2,625.00</b>	<b>\$ (2,725.00)</b>	<b>-51%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): Telephone	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): Client Incidentals	\$ 1,000.00	\$ -	0%	\$ 1,000.00	\$ -	0%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 1,000.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 1,000.00</b>	<b>\$ -</b>	<b>0%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 47,350.00</b>	<b>\$ 14,632.18</b>	<b>31%</b>	<b>\$ 51,625.00</b>	<b>\$ 4,275.00</b>	<b>9%</b>

NOTE: Indirect is limited to 5%

NOTE: 2019 Expenditures through 6/30/2019

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: Peninsula Community Health Project: Kitsap Connect

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers		\$ -	#DIV/0!	\$ 6,200.00	\$ 6,200.00	#DIV/0!
Staff	\$ 45,660.75	\$ 15,758.77	35%	\$ 56,370.61	\$ 10,709.86	23%
Total Benefits	\$ 15,220.25	\$ 3,939.69	26%	\$ 15,642.64	\$ 422.39	3%
<b>SUBTOTAL</b>	<b>\$ 60,881.00</b>	<b>\$ 19,698.46</b>	<b>32%</b>	<b>\$ 78,213.25</b>	<b>\$ 17,332.25</b>	<b>28%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ 1,950.00	\$ -	0%	\$ 1,917.44	\$ (32.56)	-2%
Office Supplies	\$ 270.00	\$ -	0%	\$ 589.98	\$ 319.98	119%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 2,220.00</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ 2,507.42</b>	<b>\$ 287.42</b>	<b>13%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Data Management System		\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication		\$ -	#DIV/0!	\$ 1,737.91	\$ 1,737.91	#DIV/0!
Insurance/Bonds		\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing		\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation		\$ -	#DIV/0!	\$ 301.60	\$ 301.60	#DIV/0!
% Indirect (Limited to 5%)	\$ 6,223.00	\$ 2,666.80	43%	\$ 5,570.63	\$ (652.37)	-10%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 6,223.00</b>	<b>\$ 2,666.80</b>	<b>43%</b>	<b>\$ 7,610.14</b>	<b>\$ 1,387.14</b>	<b>22%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 69,324.00</b>	<b>\$ 22,365.26</b>	<b>32%</b>	<b>\$ 88,330.81</b>	<b>\$ 19,006.81</b>	<b>27%</b>

NOTE: Indirect is limited to 5%

NOTE: 2019 Expenditures are through June 2019

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name:

The Salvation Army

Project: Kitsap Connect

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ -	\$ -	#DIV/0!	\$ 44,138.00	\$ 44,138.00	#DIV/0!
Total Benefits	\$ -	\$ -	#DIV/0!	\$ 20,212.71	\$ 20,212.71	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 64,350.71</b>	<b>\$ 64,350.71</b>	<b>#DIV/0!</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
% Indirect (Limited to 5%)	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe): Security	\$ -	\$ -	#DIV/0!	\$ 30,000.00	\$ 30,000.00	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 30,000.00</b>	<b>\$ 30,000.00</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ 94,350.71</b>	<b>\$ 94,350.71</b>	<b>#DIV/0!</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

---

**Agency Name:** Kitsap Public Health District

**Project:** Kitsap Connect

**Description**

Number of Professional FTEs	2.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>2.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 158,716.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description: Administrative	\$ 52,954.00
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 211,670.00</b>
Total Payroll Taxes	\$ 16,192.98
Total Cost of Benefits	\$ 36,229.02
Total Cost of Retirement	\$ 27,157.00
<b>Total Payroll Costs</b>	<b>\$ 291,249.00</b>

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

---

**Agency Name:** Peninsula Community Health Services

**Project:** Kitsap Connect

**Description**

Number of Professional FTEs	0.95
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>0.95</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 62,570.61
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 62,570.61</b>
Total Payroll Taxes	\$ 4,786.65
Total Cost of Benefits	\$ 6,476.05
Total Cost of Retirement	\$ 4,379.94
<b>Total Payroll Costs</b>	<b>\$ 78,213.25</b>

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

---

**Agency Name:** Kitsap Community Resources

**Project:** Kitsap Connect

**Description**

Number of Professional FTEs	0.75
Number of Clerical FTEs	0.00
Number of All Other FTEs	1.00
<b>Total Number of FTEs</b>	<b>1.75</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 24,000.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description: Americorps	\$ 7,000.00
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 31,000.00</b>
Total Payroll Taxes	\$ 1,836.00
Total Cost of Benefits	\$ 12,964.00
Total Cost of Retirement	\$ 1,200.00
<b>Total Payroll Costs</b>	<b>\$ 47,000.00</b>

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

---

**Agency Name:** The Salvation Army

**Project:** Kitsap Connect

**Description**

Number of Professional FTEs	1.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>1.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 44,138.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 44,138.00</b>
Total Payroll Taxes	\$ 3,376.56
Total Cost of Benefits	\$ 12,532.70
Total Cost of Retirement	\$ 4,303.46
<b>Total Payroll Costs</b>	<b>\$ 64,350.71</b>



# The Salvation Army

Founded in 1865

Serving Kitsap County since 1920

832 Sixth Street • P. O. Box 886 • Bremerton, WA 98337-0204

(360) 373-5550 FAX (360) 373-2134 • [www.bremerton.salvationarmynw.org](http://www.bremerton.salvationarmynw.org)

## ADVISORY BOARD

Chair  
Eric Roberts

Vice Chair  
Ken Hegtvedt

-----  
Jim Adrian  
Jim Aho  
John Becker  
Tina Bright  
Deanna Brown  
Wayne Hammock  
Sharon Henson  
Janice Krieger  
Patty Lent  
Mike Maroney  
Lorraine Maves  
Ron Muhteman  
Carl Olsen  
Wendie Pond  
Jeff Reynolds  
Jerry Soriano  
Gena Wales  
Kurt West

Our mission: to save souls, grow saints and serve suffering humanity in Bremerton, Kitsap County and beyond as God enables

June 19, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express the support and on-going commitment of The Salvation Army for the Kitsap Connect program. This project has provided necessary support to the homeless individuals we serve through our meal and winter shelter program. The clients served through the trusting relationships with the Kitsap Connect staff face formidable challenges in their daily lives because of mental illness, addiction, disease, disability and poverty. Since the inception of Kitsap Connect, many of our participants have been housed, and we have seen a significant improvement in access to mental health, recovery, and care coordination services. We consider Kitsap Connect a critical service within our facility – with the outreach, engagement, and care coordination services of the many agencies involved in Kitsap Connect, these clients would continue to be high utilizers of expensive services and suffer from untreated substance abuse, mental health issues, and physical health challenges.

Salvation Army commits to supplying the following resources for 2020:

- In-kind office space (\$7,500 value)
- Access to our hygiene center, clothing bank, food bank, and other services outside normal community hours for clients with unique needs.
- Transportation of client belongings for move-ins/move outs
- Exploring the opportunity to host Kitsap Connect as a backbone agency in 2021

Additionally, we had applied to the Medina Foundation as a fiscal sponsor for Kitsap Connect. If awarded, Salvation Army is committing to hire a Case Manager to serve Kitsap Connect clients for the remainder of 2019, with hopes of continuing the position

WILLIAM BOOTH  
Founder

BRIAN PEDDLE  
General

KENNETH G HODDER  
Territorial Commander

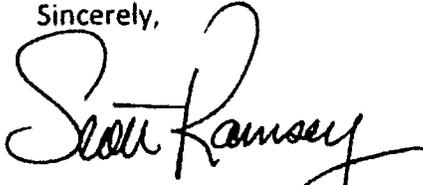
BILL DICKINSON  
Divisional Commander

MAJORS SCOTT & CHERILEE RAMSEY  
Corps Officers



into 2020 with 1/10th support. Salvation Army would provide administration and supervision support in-kind for this position.

Sincerely,

A handwritten signature in black ink that reads "Scott Ramsey". The signature is written in a cursive style with a large, looping initial "S".

Major Scott Ramsey  
COMMANDING OFFICER



## Peninsula Community Health Services

*Provides accessible, affordable, quality health and wellness services for our communities*

July 8, 2019

Kitsap County Citizen Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Dear Citizens Advisory Committee,

I am writing to express my support and commitment to Kitsap Public Health District's (KPHD) proposal to pursue continued funding for Kitsap Connect. Kitsap Connect is an intensive case management program for high needs clients to provide wrap-around services that are not otherwise available from any one agency at this intense level. The majority of patients have been diagnosed with mental illness and/or substance use disorders.

KPHD has been a community partner to Peninsula Community Health Services (PCHS) for many years. For this project, PCHS will provide a 0.25FTE Community Health Worker to aid in care coordination, a 0.4FTE Chemical Dependency Professional for assessment and treatment relating to substance use disorders and a 0.6FTE Licensed Mental Health Counselor for assessment and treatment relating to mental health diagnoses. In coordination with our on-site mobile medical services, we believe that an integrated healthcare approach will reduce unnecessary high-cost utilization of the emergency room and the emergency medical service systems.

PCHS is excited to support Kitsap Connect. PCHS commits to coordinating care of Kitsap Connect patients. We will commit a staffing match the Licensed Mental Health Counselor, as well as part of the indirect costs, as noted in the attached budget.

Thank you for giving Kitsap Connect's proposal your consideration.

Sincerely,

Jennifer Kreidler-Moss  
Chief Executive Officer

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 New Grant Proposal**

**Letter of Resource Commitment – Kitsap Connect’s work with KHOC in 2020**

**Name of Program:** Kitsap Connect **Organization Submitting:** Kitsap Public Health District

June 17, 2019

Kelsey Stedman  
Program Coordinator  
Kitsap Connect  
345 6<sup>th</sup> St, Suite 300  
Bremerton, WA 98337

Dear Mrs. Kelsey Stedman,

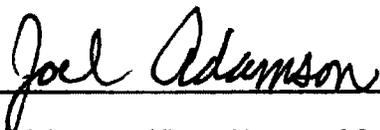
I understand Kitsap Connect is preparing a grant proposal to the Mental Health, Chemical Dependency and Therapeutic Court Program – 2020, and KHOC plans to open an additional 108 private bedrooms of supportive housing for those with mental illness and chemical dependency issues in the year 2020.

Kitsap Homes of Compassion (KHOC) considers our current Kitsap Connect partnership to be a valued asset to our program. We will continue to consider your clients for KHOC housing opportunities and work closely with your team to collectively support housing some of the most difficult to serve in the community. For those household members that are not overseen by the KCR Housing Case Manager you already partner with for some clients, we commit to human resource support through our volunteer house managers who are available by phone and lead weekly house meetings.

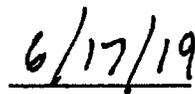
We are pleased to provide this letter of support and resource commitment for 2020.

We look forward to continuing our collaborative relationship as we work together to meet the needs of our community.

Regards,



Joel Adamson, Kitsap Homes of Compassion



Date



*Our best care. Your best health.™*

**Harrison Medical Center**  
2520 Cherry Avenue  
Bremerton, WA 98310

P 360.377.3911  
harrisonmedical.org

July 15, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap Connect grant proposal to continue to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Kitsap Public Health District (KPHD) serves as the backbone agency for the evolving collective impact project – Kitsap Connect, which currently serves the Bremerton and Central Kitsap areas. Kitsap Connect is a collective impact approach to helping the most vulnerable residents in our community who experience chronic mental illness and/or chemical dependency often comorbid with physical illnesses and housing instability/homelessness. Using multi-disciplinary and team-based interventions, the project aims to reduce the use of costly health, public, and social services by improving the well-being and stability of at-risk members in our community through the provision of intensive care coordination services.

Harrison Hospital (part of CHI Franciscan Health) will commit the following resources to the proposal submitted by Kitsap Connect:

- Staff participation in high utilizer team meeting
- Collaboration on shared patients
- Referrals to Kitsap Connect as a resource for identified hospital patients

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,

Elizabeth Tomer, LICSW, CCM  
Complex Case Manager Specialist  
Peninsula Region-Harrison Medical Center & St. Anthony Hospital

July 3, 2019



Kitsap Community Resources  
1201 Park Avenue  
Bremerton, WA 98337  
(360) 473-2035

7/3/2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap Connect grant proposal to continue to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Kitsap Community Resources (KCR) is pleased to serve on the leadership committee of Kitsap Connect, a collective impact project for which Kitsap Public Health District (KPHD) serves as the backbone agency. Kitsap Connect is a collaborative approach to helping the most vulnerable residents in our community who experience chronic mental illness and/or substance use disorders, often comorbid with physical illnesses and housing. Using multi-disciplinary and team-based interventions, the project reduces the use of costly health, public, and social services by improving the well-being and stability of at-risk members in our community through the provision of intensive care coordination services.

Through our Housing Solutions Center, our grant-funded Housing Outreach Coordinator has worked with partner agencies to help find housing for 76% (30 individuals/families) of Kitsap Connect clients who are homeless upon intake—a formidable challenge given the barriers Kitsap Connect clients face in maintaining stable lives due to behavioral health issues, chronic disease, and ramification of chronic homelessness and poverty. At the time of this letter, 80% (24 individuals/families) of these clients are still housed to this day, in large part due to the support and collaboration between Kitsap Connect and our Kitsap Community Housing Case Management team.

Kitsap Community Resources will commit the following resources to the proposal submitted by Kitsap Connect:

- In-kind supervision for the grant-requested 0.75 FTE Housing Outreach Coordinator employed by Housing Solutions Center to help clients address barriers to housing and pursue housing opportunities
- In-kind supervision for the grant-requested AmeriCorps worker to be overseen by Housing Solutions center dedicated to supporting Kitsap Connect to help get needed identification, documentation, access to resources, applications, etc.
- 1.0-1.5 FTE Housing Case Management support for housed Kitsap Connect to maximize potential for long-term housing sustainability
- Staff participation in bi-weekly High-Utilizer Care Coordination Team meetings to collaborate on mutual clients
- Staff participation in daily morning huddles as needed and bi-weekly Kitsap Connect staffing meetings, as appropriate, to collaborate on mutual clients
- Dedication of the KCR Housing Manager and HSC Manager to collaborate closely with the Kitsap Connect Program Coordinator to maintain a cohesive, collective impact approach
- Data sharing as permissible to obtain needed outcomes for grant reporting

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the County and we look forward to working with you on this exciting endeavor.

Sincerely,



John Koch  
Housing Community Support Services Director  
(360) 473 – 2150  
Jkoch@kcr.org



OFFICE OF  
GARY SIMPSON

# KITSAP COUNTY SHERIFF

614 DIVISION ST. MS-37 • PORT ORCHARD, WASHINGTON 98366 • (360) 337-7101 • FAX (360) 337-4923

July 23, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap Connect grant proposal to continue to provide Mental Health and Chemical Dependency Programs.

Kitsap Connect is a collaborative approach to helping the most vulnerable residents in our community who experience chronic mental illness and/or substance use disorders, often comorbid with physical illnesses and homelessness. Using multi-disciplinary and team-based interventions, the project reduces the use of costly health and social services such as the jail by improving the well-being and stability of at-risk members in our community through the provision of intensive care coordination services.

To date, Kitsap Connect clients have had a 49% reduction in jail bed nights and a 50% reduction in their arrest rates. Our office appreciates the team helping their clients avoid jail time by supporting clients to get to court dates, quash warrants, complete community service, and stay compliant in court-ordered treatment. Most importantly, many of these clients were homeless and now housed, which has greatly reduced charges related to homelessness and increases their ability to deal with other pending legal matters and avoid future charges.

The Kitsap County Sheriff Office will commit the following resources to the proposal submitted by Kitsap Connect:

- Data sharing as permissible to obtain needed outcomes for grant reporting, specifically jail bed nights and arrests
- Jail staff time, especially the Re-entry Coordinator, to coordinator and collaborate on ways to overcome barriers for mutual clients to avoid recidivism to the extent our budgetary resources continue to support these critical tasks.

Sincerely,

Gary Simpson  
Sheriff





**Doug Baier**

Mental Health, Chemical Dependency Department

2 July 2019

Kitsap County Citizens Advisory Board  
 C/O Kitsap County Human Services  
 614 Division Street MS-23  
 Port Orchard, WA 98366

**Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs**

Citizens Advisory Committee:

I'd like to express my ongoing support and commitment for the Kitsap Connect grant proposal to continue to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs. We have regularly enlisted this vital program to help in our efforts to reduce inappropriate use of the 9-1-1 public safety communication system for non-emergent health and social needs.

Kitsap Public Health District (KPHD) serves as the principal agency for the evolving collective impact project – Kitsap Connect, which currently serves the Bremerton and Central Kitsap areas. Kitsap Connect is a collective impact approach to helping the most vulnerable residents in our community who experience chronic mental illness and/or chemical dependency often coexisting with physical illnesses and housing instability/homelessness. Using multi-disciplinary and team-based interventions, the project aims to reduce the use of costly health, public safety, and social services by improving the well-being and stability of at-risk members in our community through the provision of intensive care coordination services.

The Bremerton Fire Department will commit the following resources to the proposal submitted by Kitsap Connect:

- Use of facilities or services;
- Staff time devoted to project;
- Access to data as permissible for utilization outcomes.

We believe our support and commitment will significantly improve the availability of Mental Health, Chemical Dependency and/or Therapeutic Court Program services in the City of Bremerton and Kitsap County and we look forward to working with you on this necessary endeavor.

Sincerely,

*Doug Baier*



600 Park Avenue  
Bremerton WA 98337  
(p) 360-479-3694  
(f) 360-616-2927  
www.bremertonhousing.org

July 19, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs

Dear Citizens Advisory Committee:

I am writing to express my support and commitment for the Kitsap Connect grant proposal to continue to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

Bremerton Housing Authority (BHA) is pleased to serve on the leadership committee of Kitsap Connect, a collective impact project for which Kitsap Public Health District (KPHD) serves as the backbone agency. Kitsap Connect is a collaborative approach to helping the most vulnerable residents in our community (who experience or are at risk of chronic mental illness, chemical dependency, comorbid physical illnesses and housing instability/homelessness) effectively access the care they need. Using multi-disciplinary and team-based interventions, the project reduces the use of costly health, public, and social services by improving the well-being and stability of at-risk members in our community through the provision of intensive care coordination services.

We have worked diligently with the Kitsap Connect staff and partner agencies (Kitsap Public Health District, Kitsap Community Resources, and Peninsula Community Health Services) to help reduce barriers to housing stability for persons with significant behavioral health challenges. Most recently and moving into the next program year, our focus will be on reducing barriers to accessing rental assistance monies for Kitsap Connect clients. We commit to continuing to provide low-barrier supportive housing rental assistance for these clients.



Bremerton Housing Authority does not discriminate on the basis of race, color, creed, national origin, religion, disability, sex, sexual orientation, gender identity, age (over 40), military/veteran status, familial status, or any other basis protected under federal, state, or local law in admission or access to its program.

Equal Opportunity Employer.

If you need to request a reasonable accommodation, contact the BHA Section 504 Coordinator at (360) 616-7111. (TRS) 7-1-1.



July 19, 2019  
Page 2 of 2

**BHA supports the concept of Housing First, which embraces the notion that vulnerable clients are more successful in recovery services and more engaged in clinical mental health services once the chaos of living on the streets has been eliminated from their lives. Addressing this debilitating chaos is achieved when chronically homeless individuals are provided a safe and permanent home of their own, with supports in place to help them stay engaged in needed services. Without safe, decent and affordable shelter made possible in part through rental assistance, it is unlikely that any progress will be made towards ending the cycle of homelessness and improving behavioral health service access. We believe our agency's continued financial commitment and leadership support will meaningfully improve the wellness of our community. Please give the Kitsap Connect application your utmost consideration for continued funding.**

Sincerely,

A handwritten signature in black ink that reads "Sarah Van Cleve". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

**Sarah Van Cleve  
Housing Director**



Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
614 Division Street MS-23  
Port Orchard, WA 98366

Tel 360-473-2334  
Fax 360-473-2303  
346 6th Street, Suite 100  
Bremerton, WA 98337

Re: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs

Dear Citizens Advisory Committee:

We are writing to express our support and endorsement of the Kitsap Connect grant proposal to continue to provide Mental Health, Chemical Dependency and/or Therapeutic Court Programs.

The Bremerton Prosecutor's Office and Municipal Court have worked with Kitsap Connect and Kitsap Connect clients throughout the past three years. Their clients represent some of the most difficult to serve in our community, many of whom have been well-known to our offices and local law enforcement for years. We have appreciated the Kitsap Connect team's insight, updates, and court presence in their efforts to support their clients. Through their services, multiple clients have been able to reduce jail time as a sanction by getting into and staying in compliance with court ordered obligations. This is a direct result of the Kitsap Connect team helping their clients quash warrants, locate placement for community service hours, stay in compliance with court-ordered treatment, and be present for their court dates. Overall, Kitsap Connect clients who are engaged in services have a lower recidivism rate than similarly situated individuals who do not have the same support services.

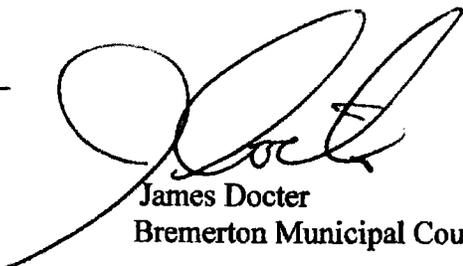
The City of Bremerton and Municipal Court will commit the following resources to the Kitsap Connect program for mutual clients who have signed Releases of Information:

- Data sharing as permissible to obtain needed outcomes for grant reporting;
- Attorney time to help answer questions about legal processes and inform Kitsap Connect of any new charges, summons, arrests, etc. for mutual clients as permissible;
- Participation by a Prosecutor or Probation officer to attend bi-weekly high-utilizer care coordination (HUCC) Team meetings to update team on upcoming court dates, warrants, etc.; and
- Coordination with the Bremerton Municipal Court Probation department as needed to provide support for client compliance or to address other treatment or procedure questions, as needed.

Sincerely,

  
Gina M. Buskirk  
Bremerton City Prosecutor

  
Kent Bratt  
Attorney at Law

  
James Docter  
Bremerton Municipal Court



## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Checklist Form

Name of Program: Improving the Health and Resiliency of Mothers Organization Submitting: Kitsap Public Health District

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	✓			YF
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	✓			YF
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	✓			YF
Organization did receive funding for this project in 2019	✓			YF
Attachment A – Continuation Grant Proposal Summary Page	✓			YF
Attachment B – Continuation Grant Proposal Checklist Form	✓			YF
Organization checked, initialed and signed Continuation Grant Proposal Checklist	✓			YF
Attachment C – Continuation Grant Proposal Narrative Template	✓			YF
Proposal Narrative is limited to 10 pages	✓			YF
Attachment D – Continuation Grant Proposal Evaluation Worksheet	✓			YF
Attachment E – Total Agency Budget Form	✓			YF
Attachment F – Continuation Grant Proposal Special Project Budget Form	✓			YF
Indirect is limited to 5%	✓			YF
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form			✓	YF
Organization submitted Attachment G for each Sub-Contractor			✓	YF
Sub-Contractor indirect limited to 5%			✓	YF
Attachment H – Continuation Grant Proposal Project Salary Summary	✓			YF
Attachment I – Letter of Resource Commitment (optional)	✓			YF
No other attachments are included	✓			YF
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	✓			YF
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	✓			YF

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

Ysabella Forey  
Signature of Individual Preparing Proposal

7/18/19  
Date

[Signature]  
Signature of Organization's Chief Executive

7/19/19  
Date

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Narrative Template

All Continuation Grant Proposals will be screened and rated based on the following Narrative information using the template below. The Narrative is limited up to 10 pages.

### 1. Project Description (20 points)

*Project Design-* The Improving Health and Resiliency of High-Risk Mothers and Their Children project (hereafter referred to as “Improving Health project”) includes providing an evidence-based nurse home visiting service to families and strengthening prevention and early intervention infrastructure in Kitsap County. With the use of a best practice evidenced based program and a collective impact approach, this project will improve the health status and wellbeing of Kitsap residents.

The project has two components: 1. providing evidence-based Nurse Family Partnership (NFP) services to at least 12 low-income, high-risk first-time mothers and their babies (note total number of clients served by NFP annually is 50-60). 2. improving access to services by utilizing a community health worker (CHW) for outreach and community infrastructure support.

The NFP program is a parental and infancy home visitation service that aims to improve the health, well-being, and self-sufficiency of first time parents and their children. Program activities are designed to link families to needed services, promote good decision making, assist families in making healthy choices, and help women build supportive relationships with families and friends. NFP nurses assess for signs and symptoms of Substance Use Disorders (SUDs), mental illness, and Adverse Childhood Experiences (ACEs) with every client. The nurses provide education to promote health and, because of their trusting relationships with their clients, they are often able to support a parent’s readiness to seek needed treatment services.

The CHW is an established liaison between health/social services and the community and has facilitated access to services with culturally appropriate strategies. The CHW for this project is bilingual in English and Spanish and has been able to provide targeted outreach to Kitsap’s Spanish speaking population. In addition to outreach, the CHW has been integral in the development of new relationships with community partners. These partners all contribute to prevention and early intervention infrastructure in Kitsap. An additional activity for the proposal this year includes the development of a centralized referral system for early childhood intervention programs to increase access and services for pregnant and childbearing age women that need mental health and substance abuse treatment. Families are often confused about what services they can access and providers also have challenges keeping up to date on program requirements for appropriate referrals. Creating a centralized process intends to reduce community confusion and increase the likelihood that residents can obtain the appropriate needed services in a timely manner.

The Policy Goals from the 2014 Kitsap County Behavioral Health Strategic Plan that our project addresses include:

- Reduce the number of people in Kitsap County who use costly interventions including hospitals, emergency rooms, and crisis services.
- Reduce the incidence and severity of chemical dependency and/or mental health disorders in adults and youth.
- Improve the health status and wellbeing of Kitsap County residents.

*Outreach-* Project outreach will involve traditional and innovative approaches to reach our target population and improve access to our services. Our programs have eligibility requirements including income, trimester of pregnancy, and other risk factors. Outreach efforts will be focused on community members who would qualify for our program and partners who serve similar populations. We will utilize written and verbal forms of communication such as flyers, presentations, updates at community meetings and Facebook. We will continue to explore new strategies such as texting, apps and geofencing. We will work with community partners and members to test our materials and ensure we are delivering culturally competent services and messaging.

Some specific outreach activities we will continue include:

- Collaborate with the NFP Community Advisory Board (CAB) to develop new outreach strategies.
- Work with community partners to strengthen infrastructure for a perinatal support group for Spanish speaking pregnant or parenting women. Share behavioral health and substance abuse prevention information and resources at group meetings as appropriate.
- Continue to connect with birthing centers and local doulas, family planning clinics, Peninsula Community Health Services, Harrison Family Residency program and Planned Parenthood to reach potential clients.
- Connect with alternative high schools, afterschool programs, and the YMCA teen late night.
- Conduct outreach to churches and other faith-based centers to share about perinatal support programs.

## **2. Accomplishments to Date (40 Points)**

*Evaluation-* Kitsap Public Health District (KPHD) is committed to implementing quality evaluation processes and with this project will continue to work on internal systems to support the Citizens Advisory Committee's priority to improve measurable outcomes and common performance measures. Our proposed project has two major goals; 1. prevention of mental illness, behavioral problems and future addiction in young children and 2. maintaining high fidelity to the Nurse Family Partnership evidence-based model. NFP nurses use a standardized nursing documentation language called Omaha. This documentation language uses a rating scale that gauges a person's knowledge, behavior and status related to an identified problem.

Through our interventions we strive to see a positive change in three program areas (mental health, substance use and caretaking/parenting) for our high-risk mothers. At

least 80% of our graduated NFP clients with a potential or identified mental health problem will show improvement in either knowledge, behavior or status. For process measures we will be able to demonstrate the number of screening and referrals our families receive during their time in our programs. These are important touchpoints for education with families but also to ensure early identification of mental health and substance use concerns and quick linkages to community services to address client needs. In our program, we utilize nationally recognized screening tools such as the Patient Health Questionnaire (PHQ-9), Generalized Anxiety Disorder (GAD-7) and the Nurse Family Partnership Health Habits questionnaire. The PHQ-9 is a nine item depression scale and is one of the most validated tools in mental health. The GAD-7 is a subscale of the PHQ and is used to identify patients with anxiety and monitor treatment response. The NFP Health Habits questionnaire includes the topic areas of tobacco, alcohol and use of other substances such as marijuana, cocaine, amphetamines and opiates.

The evidence for NFP is based on positive outcomes from multiple randomized control trials and longitudinal studies. Data collection and analysis of NFP began in the 1970's and continues today. Our project's adherence to the national model fidelity requirements assures that our program implementation and expected beneficial outcomes are comparable to those from the randomized control trials. Therefore, our project's evaluation plan includes maintaining high fidelity so that we can confidently state that our program outcomes are similar to the national outcomes for improving pregnancy, child health and development and increased economic self-sufficiency. An advantage to utilizing a nationally recognized model is the resources that researchers and other NFP programs have and continue to contribute to continually assess efficacy of the program. For example, in a 15 year follow up study, results showed positive effects for NFP families more than 12 years after visits ended, including a 67% reduction in behavioral and intellectual problems by age 6 and a 59% reduction in child arrests at age 15. Included in the fidelity requirements is the ability to maintain a client load which is incorporated in our evaluation plan. This requires a steady stream of referrals and outreach efforts maintained by our Community Health Worker (CHW). The CHW will complete at least 250 unduplicated outreach and case management encounters a year.

In 2018 we conducted a survey of graduated clients to obtain local program data. There was a 54% response rate with the following results:

- 47% have a home with a mortgage
- 47% have some college
- 67% are accessing mental health services
- 80% state they are not using substances
- 93% felt that their child is on track for school entry/progress
- 100% have custody of their children

*Evaluation progress-* The Improving Health program is in a period of growth. As of January 2019, we were able to increase our total program FTE from 2.0 to 2.5 expanding services to 12-13 more families. At the time of this application, we are currently at 47 participants and are continuously adding more. We continue to successfully meet all 19 NFP fidelity measures. On January 11, 2019 we received our

program fidelity letter from the Nurse Family Partnership National Service Office. The letter described that through their process of data review and consultation with WA State, Kitsap NFP meets expectations for fidelity with the NFP model. A few examples of fidelity measures include: maintain a retention rate of 85%, which is notable given the challenges our clients face with day to day living; nurse home visitors maintain an adequate caseload; enhancement of program quality using data. For this current year we have had 6 graduates from the program, raising to our total number to 47 graduates since inception.

We continuously monitor changes in our client's knowledge, behavior and status (KBS) related to key problems identified by the nurse. Some of the most common problem areas include mental health issues, caretaking/parenting and substance use. NFP is designed to intentionally address challenges with mental health around the perinatal period. The structure and frequency of postpartum visits, for instance, is designed to encourage the new mom through consistent, weekly support by a trained nurse, with self-assessment and skills-building activities focused on mental wellness. For growth in the mental health problem area, we track development and use of the mental/emotional abilities to adjust to life situations, interact with others and engage in activities. Improvement is indicated by several factors, some of which include: accessing mental health services, reduction of mental health symptoms (such as sadness, hopelessness, depression), increased interest and skills building in self-care, reduction in suicidal ideation, and improved stress management. Improvements in knowledge, behavior and status related to mental health wellness are vital for preventing and mitigating adverse childhood experiences, which allows children the optimal opportunity to thrive into adulthood. We reviewed data from 27 clients who graduated from our NFP program since 2016. These graduates completed the entire 2-year program with their NFP nurse. Below are graphs depicting knowledge, behavior and status rating changes for mental health, substance use and caretaking/parenting problem areas.

For NFP clients with an identified mental health problem (27), 67% (18 of 27 clients) had an improvement in either their knowledge, behavior, or status rating; knowledge and behavior improvements were statistically significant.

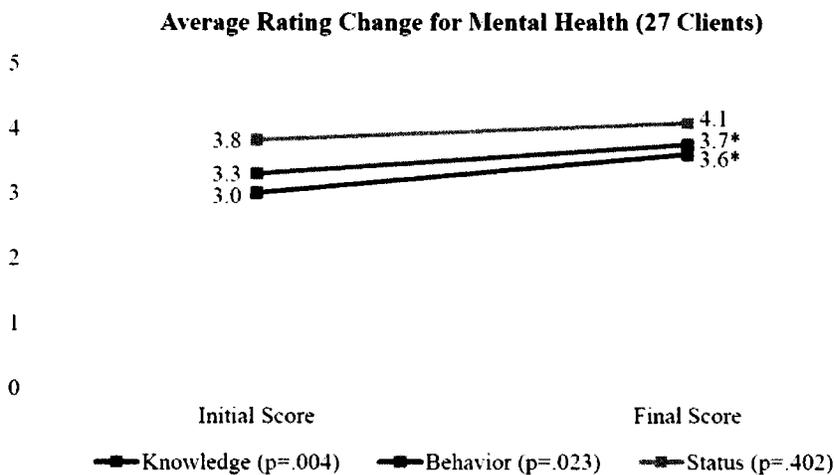


Figure 1

Six months into the 2019 grant cycle we have not hit the annual targeted objective of 80% for mental health. This may be due to multiple factors including a higher than usual client acuity caseload, transitioning of nurses which may impact assessment data and timing of data collection. We will be monitoring this data trend closely and have plans to ensure the quality of the data by incorporating more formal inter-rater-reliability activities with the nurses.

In regard to clients with an identified substance use problem, we track improvement in several ways, including a reduction in abuse of over-the counter or recreational drugs (including alcohol and smoking), improvement in performing normal routines, increased understanding of connection between substance consumption and safe breastfeeding and care-taking, establishing safe care plans if parent is using substances, and protecting infants/young children from second-hand smoke. Whenever possible, nurses target education and skills-building to any adult in the home, particularly the father. As seen with mental health, improvements in knowledge, behavior and status are vital for preventing and mitigating adverse childhood experiences, which changes the trajectory for children in a positive direction. For NFP clients with an identified substance use problem, 81% had an improvement in either their knowledge, behavior or status rating, knowledge and status improvements were statistically significant. This data point currently meets our annual targeted objective of 80%.

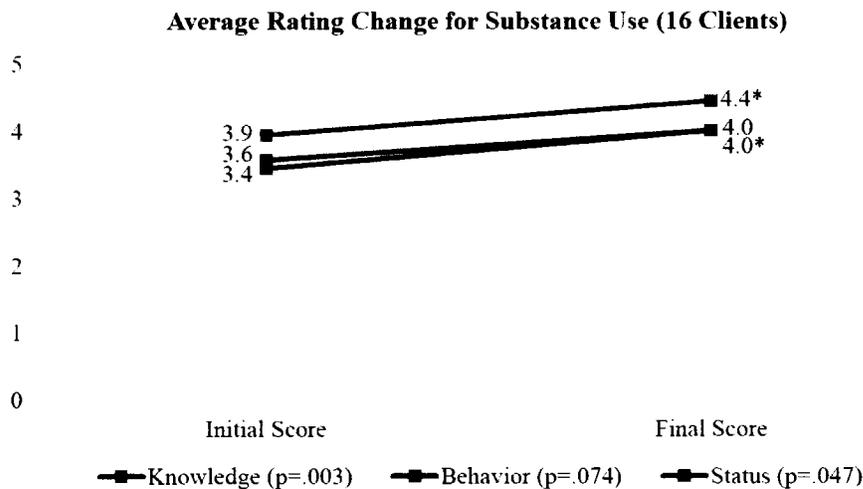


Figure 2

Caretaking and parenting refer to providing support, nurturance, stimulation and physical care for the child. NFP nurses work with mothers to help develop skills to understand the cues of their babies and children and strengthen their empathy for their children. Nurses empower clients to provide optimal physical and emotional care of their child and engage age-appropriate, positive discipline techniques. Improvements in this area set the foundation for the health of the parent-child attachment and positive development across the life course. For NFP clients with an identified caretaking/parenting problem, 86% had an improvement in either their knowledge, behavior or status rating, improvements in all three areas were statistically significant.

Average Rating Change for Caretaking/Parenting (22 Clients)

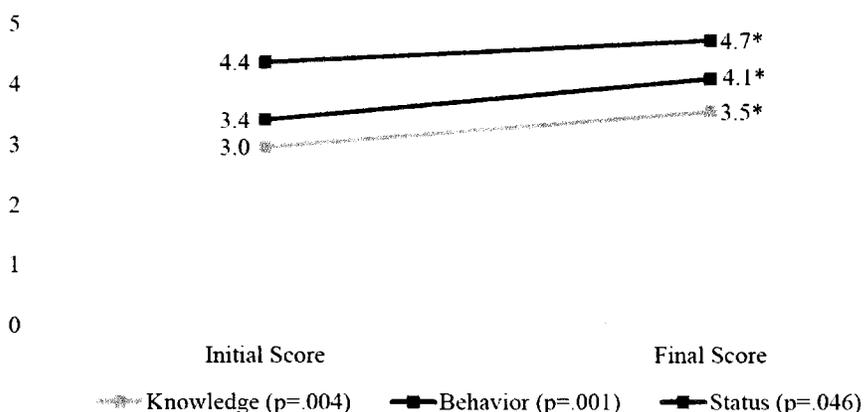


Figure 3

p < .05 = statistically significant

**Barriers to Implementation-** Since 2012, a high number of our referrals to the program have come from our internal First Steps Program, a Washington State program for pregnant women receiving Medicaid. This year we have slowly discontinued this program as two new private organizations have begun to offer First Steps in Kitsap County. We are meeting regularly with these two new partners to ensure continued services for all First Steps eligible moms and have coordinated with these providers for referrals to NFP if a pregnant woman is found to be eligible for our program. We have continued to outreach to new referral sources through the efforts of our community health worker. Her work includes outreach to medical providers, schools, other birth providers, social services, pregnancy services, the hospital, mental health providers, and law enforcement.

We began work last year to engage and collaborate with local providers of early childhood services to develop a centralized intake system in Kitsap. Our hope is to join forces to provide outreach and to have a central location for families and providers to go to when needing services. We plan one location for easy, accessible information and an easy connection to the best service to meet the needs of each individual family.

**Key accomplishments-** Expanding the program to increase overall enrollment was a key accomplishment this year. We received additional funding from the Department of Children, Youth and Families and are already on the way to filling our additional .5 FTE caseload. Established relationships with community partners highly contributed to this accomplishment and led to continuous enrollment through referrals. Our community health worker continues to reach out to new community partners to explain the NFP program, its benefits, and assist with referrals.

Outreach and marketing of NFP have been successful. We connected with a larger audience at the recent "Baby Brunch", a joint project of Harrison Hospital and our NFP Community Advisory Board to celebrate our accomplishments benefitting local children. The featured speaker at the event was State Senator Christine Rolfes, who recently shadowed one of our nurses on a home visit and was able to observe some of the program benefits in person. Attendees included a few legislators and representatives

(Katy Crabtree from the office of Derek Kilmer and Richard Huddy from the City of Bremerton), representatives of local resources (Kitsap Community Resources, Harrison Hospital Administration, Olympic Educational Services District, Kitsap County), and local medical providers (Peninsula Community Health Services, Northwest Family Residency, Kitsap Children's Clinic, The Doctor's Clinic, Salmonberry Midwives).

During preparation of a video presentation for the event featuring past and present NFP moms sharing their experiences and the benefits they continue to see as their children grow, we could see how the NFP experience has strongly impacted the lives of these mothers. One of the moms in the video mentioned how her nurse is "always with me" and influences the way she talks not only to herself but the way she talks to her children. Another focused on her relationship with her nurse and the support she felt.

"The thing I appreciate the most was just the support, the support of another person. She will really be with me forever. I'm so proud of the things I've accomplished. She was my person; she was definitely my person."

We have also been able to use clips from the video on our social media site.

During the last year the NFP team has met monthly for Team Reflective Consultation with a professional qualified to provide infant mental health training. They have now completed training and are preparing final applications for Infant Mental Health Endorsement as Infant Family Specialists through the Washington Association for Infant Mental Health. This practice helps parents to increase their reflective capacity and their ability to tune into and respond in a kind and sensitive way to their child's needs. One nurse described the training as giving her more tools to help parents realize how their own mental health issues can affect their baby and, if not addressed, can impact their baby in negative ways. These tools can also help parents identify the things that are important to address to help baby be more confident, resilient, and to flourish.

Our continued work with community partners to develop a centralized intake system for parenting families in our county is growing. The most recent partner in this work includes the Kitsap Community Services Office/WA State Department of Social and Health Services who is working on an expedited method of referrals to our program and other programs serving Kitsap families. Our partners in this work include the Olympic Educational Service District, Kitsap Community Resources, SPIPA (South Puget Intertribal Agency), Suquamish Tribe, Navy Fleet and Family Services, Holly Ridge Early Intervention Services, Answers Counseling Services, and the Parent Child Assistance Program. One member suggested that we might work under the umbrella of the Family and Interagency Coordinating Council of Kitsap County (FICC). The FICC includes many of these same partners under an existing, signed interagency agreement; plans have been made to attend the next FICC meeting to explain the centralized intake concept.

### **Budget Narrative (30 Points)**

*Funding Request-* We request funds in the amount of \$153,712 for a 12-month continuation grant of the Improving Health program. The majority of our funding request

will cover staff salaries and benefits to implement the project. This request would fund a 0.5 FTE NFP nurse and 0.7 FTE community health worker. NFP nurses are baccalaureate prepared public health nurses with training in public health and nursing science with a focus on outcomes at the population level. The CHW is a paraprofessional who works under the direction of the public health nurses to assist with case management that links clients to needed health and community resources. In order to maintain fidelity to the model, NFP requires one to one clinical supervision along with other required administrative duties. Included in our request this year is funding to cover staffing responsible for supporting these activities. The remaining funds will cover home visiting associated costs including travel and communication.

*Past Expenditures-* For the 2018 budget year we were able to expend all funds granted to our project. For the current 2019 budget year we are on track to spend down all funds by the end of the contract period (currently with 46% of funds remaining after 6 months of the grant).

### **3. Sustainability (10 Points)**

*Leveraged Funds-* The funding for this project is a portion of a larger effort. As mentioned previously, this funding covers 0.5 FTE of a nurse and 0.7 FTE of a CHW in a 3.7 FTE total program. Additional funding sources include Maternal Child Health Block Grant (MCHBG), Washington State Department of Children, Youth and Families (DCYF) home visiting funding, local public health dollars and Healthy Start Kitsap.

In September 2018, we attended a state meeting to discuss with state representatives and other home visiting services strategies to utilize Medicaid funding to support home visiting in the future. Last fall we met with State Senator Christine Rolfes to discuss the benefits of Nurse Family Partnership for moms, our local community and the state; she was encouraged to shadow an NFP nurse on a home visit to see, in person, the benefits of the program; she was able to do so in May 2019. In March 2019, one of our nurses attended the Washington 20th Anniversary of NFP services in the state held in Olympia. NFP nurses were able to share stories about their experiences and the benefits they have observed in the program and to thank legislators for any available funding.

We utilize the Washington State Department of Children, Youth and Families (DCYF) funding for one full time FTE nurse and recently increased this funding to 1.5 FTE. We worked in collaboration with our team members in Jefferson County and with First Step in Clallam County to submit a proposal to DCYF for an expansion grant to expand our NFP program along with Clallam County. We received this funding, we have our new nurse trained and she is focused on filling this additional .5 FTE caseload.

The NFP National Service Organization has a government affairs manager located in the state; a large focus of his role is to build new sources of support and partner with state agencies as they explore funding for home visiting through Medicaid and in partnership with Managed Care Organizations. The WA State Health Care Authority and the Department of Children, Youth and Families produced a report at the beginning of the year on how to improve Medicaid funding for home visiting. The final Washington

State budget adopted by the legislature includes new funds for 420 home visiting services slots in 2020. Part of this funding will come from the federal Family First Prevention Services ACT which supports prevention services for those who are candidates for foster care. At this time, we are unsure who will be eligible to apply for this funding.

## EVALUATION WORKSHEET

### INSTRUCTIONS:

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

New and continuing grant proposals must fill out the Evaluation Worksheet.

### DEFINITIONS:

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has a one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Improving the Health and Resiliency of High-Risk Mothers and Their Children

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Prevent mental illness, behavioral problems, and future addiction in young children by intervening with families who either have or are at risk for substance abuse and/or mental health problems.	Provide continuing NFP home visits to 12 low-income, first-time mothers and infants (at any given time – total served will be greater)	Funded case load of at least 12 mothers and infants (0.5 FTE Nurse) will be maintained through December 31, 2020.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/20</u>  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	12 as of 1/1/20	Nightingale Notes Electronic Health Record (NN) and NFP Efforts to Outcomes (ETO) database
	Provide bilingual CHW targeted outreach and community referral systems support	Maintain an average retention rate of 85% for NFP clients over the course of the program year (January-December 2020)	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/20</u>  Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: _____	85% as of 1/1/20	Nightingale Notes Electronic Health Record (NN) and NFP Efforts to Outcomes (ETO) database
	Click here to enter text.	By December 31, 2020 CHW has at least 250 unduplicated outreach and case management encounters	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long  Start date: <u>1/1/20</u>  Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	0 as of 1/1/19	NN Electronic Health Record  *All enrollees eligible for evaluation

## EVALUATION WORKSHEET

ATTACHMENT D

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE		
Prevent mental illness, behavioral problems, and future addiction in young children by intervening with families who either have or are at risk for substance abuse and/or mental health problems.	Screen all NFP clients for anxiety and depression and refer those showing risk factors	Since January 2014, at least 80% of NFP clients with a potential or identified mental health problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior (status) <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: ongoing; baseline starts at client intake Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: ____	January 2016- June 2019, 67%	NN Electronic Health Record *All enrollees eligible for evaluation		
	Provide all NFP clients education on perinatal mood disorders and when to seek help			By December 31, 2020, at least 50 current clients will have a PHQ-9 and GAD 7 screen completed.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem (status) <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: ongoing; baseline starts at client intake Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: ____	January 2016- June 2019, 81%	NN Electronic Health Record *All enrollees eligible for evaluation
	Screen all NFP clients for those screening positive for appropriate diagnostic and treatment services  Provide all NFP clients education on the harmful effects of substance use during pregnancy			Since January 2014, at least 80% of NFP clients with a potential or identified substance use problem will show improvement in knowledge, behavior, or status as measured by the Omaha System Problem Rating Scale at graduation from services  By December 31, 2020 at least 50 current clients will have a NFP Health Habits (substance abuse topics) questionnaire completed.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem (status) <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: ongoing; baseline starts at client intake Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: ____	January 2016- June 2019, 80%	NN Electronic Health Record *All enrollees eligible for evaluation
	Provide all NFP clients with education on parenting, child growth and development, and parental emotional well-being and stress management	Since January 2014 at least 80% or more of NFP clients with a parenting/caretaking problem will show improvement in knowledge, behavior, or status as measured by the Omaha System	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior	<input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long	January 2016- June 2019, 80%	NN Electronic Health Record *All enrollees eligible for evaluation		

EVALUATION WORKSHEET

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
NFP program maintains high fidelity to the NFP evidence-based model	Link NFP clients to community resources	Problem Rating Scale at graduation from services	<input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	Start date: ongoing; baseline starts at client intake Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: _____ <input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>1/1/20</u>	7/1/19, 100%	Nightingale Notes Electronic Health Record (NN) and NFP Efforts to Outcomes (ETO) database
NFP program meets 18 model fidelity elements according to NFP requirements such that KPHD maintains its permissions to operate an NFP program	Click here to enter text.	By December 31, 2020, KPHD will maintain required high fidelity to the NFP model, as required by the National Service Office.	<input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>1/1/20</u>	0 as of 1/1/20	NFP CAB Outreach Plan and Meeting Minutes

## EVALUATION WORKSHEET

ATTACHMENT D

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
NFP program maintains high fidelity to the NFP evidence-based model	Collect and analyze data from past clients to inform program effectiveness and areas for improvement	Survey 30 past and current clients about their ability to seek and utilize resources related to mental health and substance abuse concerns.	<input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem (status) <input type="checkbox"/> Return-on-investment or cost-benefit If applicable: <input type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: 1/1/20 Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Other: _____	0 as of 7/1/19	Survey results

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name:

Kitsap Public Health District

Project:

Improving Health

Accrual

Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 1,501,549	12%	\$ 1,043,234	8%	\$ 938,911	7%
WA State Revenue	\$ 2,457,939	20%	\$ 2,455,367	19%	\$ 2,750,011	20%
Local Revenue	\$ 2,371,088	19%	\$ 4,508,281	35%	\$ 5,049,275	37%
Private Funding Revenue	\$ 44,407	0%	\$ 44,850	0%	\$ 47,093	0%
Agency Revenue	\$ 5,676,633	46%	\$ 4,553,781	35%	\$ 4,654,716	34%
Miscellaneous Revenue	\$ 242,891	2%	\$ 392,950	3%	\$ 353,655	3%
<b>Total Agency Revenue (A)</b>	<b>\$ 12,294,507</b>		<b>\$ 12,998,463</b>		<b>\$ 13,793,659</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Staff	\$ 6,831,011	56%	\$ 7,284,654	55%	\$ 7,466,770	54%
Total Benefits	\$ 2,567,580	21%	\$ 2,765,346	21%	\$ 2,986,574	22%
<b>Subtotal</b>	<b>\$ 9,398,591</b>	<b>76%</b>	<b>\$ 10,050,000</b>	<b>76%</b>	<b>\$ 10,453,344</b>	<b>76%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 139,684	1%	\$ 172,135	1%	\$ 189,349	1%
Office Supplies	\$ 261,940	2%	\$ 216,812	2%	\$ 238,493	2%
<b>Subtotal</b>	<b>\$ 401,624</b>	<b>3%</b>	<b>\$ 388,947</b>	<b>3%</b>	<b>\$ 427,842</b>	<b>3%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 5,850	0%	\$ 7,000	0%	\$ 7,700	0%
Professional Services	\$ 1,165,048	9%	\$ 1,099,577	8%	\$ 1,165,552	8%
Communication/Postage	\$ 109,736	1%	\$ 137,153	1%	\$ 150,868	1%
Insurance/Bonds	\$ 116,444	1%	\$ 157,676	1%	\$ 181,327	1%
Training/Travel/Transportation	\$ 304,813	2%	\$ 246,966	2%	\$ 271,663	2%
<b>Subtotal</b>	<b>\$ 1,701,891</b>	<b>14%</b>	<b>\$ 1,648,372</b>	<b>13%</b>	<b>\$ 1,777,110</b>	<b>13%</b>
<b>Ongoing Operations and Maintenance</b>						
Repair of Equipment and Property	\$ 445,783	4%	\$ 474,631	4%	\$ 522,094	4%
Utilities	\$ 1,300	0%	\$ 3,000	0%	\$ 3,300	0%
Rentals/Leases	\$ 39,018	0%	\$ 67,860	1%	\$ 74,646	1%
<b>Subtotal</b>	<b>\$ 486,101</b>	<b>4%</b>	<b>\$ 545,491</b>	<b>4%</b>	<b>\$ 600,040</b>	<b>4%</b>
<b>Other Costs</b>						
Debt Service	\$ 306,300	2%	\$ 301,350	2%	\$ 295,323	2%
Non-Expenditures	\$ -	0%	\$ 240,000	2%	\$ 240,000	2%
<b>Subtotal</b>	<b>\$ 306,300</b>	<b>2%</b>	<b>\$ 541,350</b>	<b>4%</b>	<b>\$ 535,323</b>	<b>4%</b>
<b>Total Direct Expenses</b>	<b>\$ 12,294,507</b>		<b>\$ 13,174,160</b>		<b>\$ 13,793,659</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Kitsap Public Health District

Project: Improving Health

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>		To 6/30/19				
Managers	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Staff	\$ 80,069.00	\$ 43,213.15	54%	\$ 87,320.00	\$ 7,251.00	9%
Administrative	\$ -	\$ -	#DIV/0!	\$ 14,880.00	\$ 14,880.00	#DIV/0!
Total Benefits	\$ 34,292.00	\$ 18,316.67	53%	\$ 41,673.00	\$ 7,381.00	22%
<b>SUBTOTAL</b>	<b>\$ 114,361.00</b>	<b>\$ 61,529.82</b>	<b>54%</b>	<b>\$ 143,873.00</b>	<b>\$ 29,512.00</b>	<b>26%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Office Supplies	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Audit/Accounting	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Communication	\$ 347.00	\$ 204.35	59%	\$ 720.00	\$ 373.00	107%
Insurance/Bonds	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Postage/Printing	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Training/Travel/Transportation	\$ 1,500.00	\$ 880.66	59%	\$ 1,800.00	\$ 300.00	20%
% Indirect (Limited to 5%)	\$ 11,620.00	\$ 6,257.59	54%	\$ 7,319.65	\$ (4,300.35)	-37%
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ 13,467.00</b>	<b>\$ 7,342.60</b>	<b>55%</b>	<b>\$ 9,839.65</b>	<b>\$ (3,627.35)</b>	<b>-27%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance Contracts	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Maintenance of Existing Landscaping	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Repair of Equipment and Property	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Utilities	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Organization:	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Other</b>						
Debt Service	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
Other (Describe):	\$ -	\$ -	#DIV/0!	\$ -	\$ -	#DIV/0!
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>	<b>\$ -</b>	<b>\$ -</b>	<b>#DIV/0!</b>
<b>Total Project Budget</b>	<b>\$ 127,828.00</b>	<b>\$ 68,872.42</b>	<b>54%</b>	<b>\$ 153,712.65</b>	<b>\$ 25,884.65</b>	<b>20%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name:** Kitsap Public Health District

**Project:** Improving Health

**Description**

Number of Professional FTEs	1.25
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.05
<b>Total Number of FTEs</b>	<b>1.30</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salaries of Professional Staff	\$ 87,320.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description: Administrative	\$ 14,880.00
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 102,200.00</b>
Total Payroll Taxes	\$ 7,818.30
Total Cost of Benefits	\$ 20,742.44
Total Cost of Retirement	\$ 13,112.26
<b>Total Payroll Costs</b>	<b>\$ 143,873.00</b>

Matthew Richardson  
Government Affairs Manager, Northwest  
360-764-0991  
[matthew.richardson@nursefamilypartnership.org](mailto:matthew.richardson@nursefamilypartnership.org)

9 July 2019

Mental Health, Chemical Dependency and Therapeutic Drug Court Citizens Advisory Committee  
Kitsap WorkSource Center  
1300 Sylvan Way  
Bremerton, WA 98310

**Re: Letter of Commitment to the Citizens Advisory Board of the Kitsap County Mental Health, Chemical Dependency & Therapeutic Court Programs in support of the *Improving the Health and Resiliency of High-Risk Mothers and Their Children* program**

Dear Committee Members:

As a government affairs manager working for the National Service Office (NSO) for Nurse-Family Partnership (NFP), I support the efforts of the NFP program serving families in Kitsap County as part of the *Improving the Health and Resiliency of High-Risk Mothers and Their Children* program.

The NSO is committed to providing a supportive environment to assist the Kitsap Public Health District in its efforts to deliver services to families through the NFP model. The NSO partners with the Kitsap Public Health District by providing services that include the following support:

- Planning assistance with program expansion
- Ongoing education for NFP nurse home visitors, supervisors, and administrators
- Webinars, conference calls, a resource library, and supporting materials
- Access to a web-based data collection system
- Customizable reports on activity, implementation quality, and key NFP outcomes,
- Public policy and advocacy assistance on the federal, state, and local levels
- Marketing communications consultation, marketing and community outreach materials, NFP national branding guidelines and templates
- Program sustainability consultation
- Nurse recruiting assistance

While NFP's National Service Office is based in Denver, Colorado, I am based in Olympia, WA, in my efforts to support home visiting in the state. In my role, I assist partners with the Kitsap Public Health District with securing the public funds they need to build, sustain, and expand their programs. I also provide building advocacy networks, participating in coalitions, and cultivating champions.

I work with state agencies and state legislators to defend existing funding for home visiting in Washington and to seek for additional funding to serve more families. These efforts include identifying new sources of support, such as through partnering with state agencies as they explore funding options.



funding of home visiting through the Medicaid program and in partnership with Managed Care Organizations. Greater NFP integration into the health care system is a priority of the NSO as we seek to further our ability to serve families and strengthen families.

I share these details on my role and the role of the NSO to demonstrate the comprehensive team that is committed to helping the Kitsap Public Health Department find success in their efforts to improve the lives of vulnerable mothers and families. I am proud to be a partner with the members of the NFP team in Kitsap County and will continue to provide whatever assistance I can.

Please do not hesitate to contact me should there be further information I can provide.

Sincerely,



Matthew Richardson



June 17, 2019

Re: Letter of Commitment to the Citizens Advisory Board of the Kitsap County Mental Health, Chemical Dependency & Therapeutic Court Programs in support of the Improving the Health and Resiliency of High-Risk Mothers and Their Children Program

Dear Citizens Advisory Board:

The Bridge Regional Nurse-Family Partnership Community Advisory Board (CAB) is once again pleased to submit a letter of commitment to the Citizens Advisory Board in support of the “Improving the Health and Resiliency of High-Risk Mothers and Their Children” program (*Improving Health*). The CAB is comprised of a diverse group of community partners representing private citizens, local health care providers, and government officials. We have been working together for almost seven years to ensure the evidence-based Nurse-Family Partnership (NFP) intervention is supported and sustained throughout our region.

The CAB continues to provide input on decisions affecting NFP program implementation, program growth, and program sustainability in our region which includes the NFP program implemented by the Kitsap Public Health District (KPHD). CAB members provide ongoing leadership in promoting program referrals, increasing community engagement in support of NFP, both philosophically and financially, and political advocacy.

We are pleased to commit the following in support of the “*Improving Health*” program during the next funding period.

- Providing guidance on maintaining the successful outreach work of the Community Health Worker to maintain the full caseloads of the NFP nurses.
- Providing marketing and public relations assistance to the Community Health Worker and NFP nurses.
- Providing legislative advocacy with elected officials in support of funding NFP locally, statewide, and nationally.
- Promoting financial support of NFP through partnering with Healthy Start Kitsap to promote contributions to Kitsap’s 2020 Great Give charitable event.

Having a strong NFP program in Kitsap County is essential to the future health of our community. NFP is a proven prevention program that interrupts the cycle of poverty, prevents adverse childhood experiences (ACEs), reduces mental illness and substance use disorders, reduces juvenile and adult criminal activity, and supports low-income families to parent successfully and become economically self-sufficient. Every dollar invested in NFP yields \$6.40 in return to society, and \$2.90 in savings to state and federal governments. Funding the “*Improving Health*” program is truly a sound investment in prevention.

Sincerely,

Suzanne Plemmons, MN, RN, APHN-BC

Co-Chair

Bridge Regional Nurse-Family Partnership Community Advisory Board

Serving the NFP programs of Kitsap Public Health District and Jefferson County Health Department

July 4, 2019

RE: LETTER OF COMMITMENT to the Citizens Advisory Board of the Kitsap County Mental Health Chemical Dependency and Therapeutic Court Programs in support of the

Better Worlds start with Great Mothers.

Dear Citizens Advisory Board:

Healthy Start Kitsap, now a part of the Kitsap Community Foundation was founded to prevent child abuse and neglect in Kitsap County. Our main effort for the last 16 years has been to start, encourage community support and financially support the Nurse Family Partnership (NFP) here in Kitsap County. The Nurse Family Partnership in Kitsap has grown to support 50 enrolled mothers and their infants. As the most objectively studied program to date in the US, this program decreases child abuse and neglect by 48%, decreases behavioral and intellectual problems in children at age 6 by 67%, and increases months of employment by 82%. NFP improves both the social and economic futures for these families. The benefits of this program are myriad and can easily be reviewed at [NurseFamilyPartnership.org](http://NurseFamilyPartnership.org).

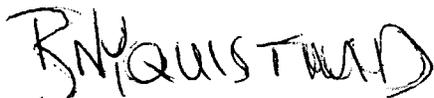
Healthy Start Kitsap (HSK) supports the continuing growth of the Kitsap Nurse Family Partnership (NFP) Program. This past year donations from HSK provided funds for a scholarship and material support.

These programs are expensive, however a recent RAND study proved a \$6 benefit to society for every \$1 spent on our NFP!! You CAN buy benefits like that by supporting NFP! This study can also be reviewed in detail on the website mentioned above.

Your support is essential to transform the lives of these 50 families and our community by providing a guided path to healthy pregnancies and independent living. Thank you for helping us build NFP.

Please give this important proposal your utmost consideration for funding. We are building a better Kitsap for the future for all!

Sincerely,



Brian O. Nyquist, M.D.

President of Healthy Start Kitsap

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name: Olympic Educational Service District 114 (OESD 114)

Primary Contact: Kristin Schutte                      schuttek@oesd114.org                      360-405-5833  
Name    Email    Phone

Organization Address: 105 National Ave. North                      Bremerton                      WA                      98312  
Street    City    State                      Zip

Federal Tax ID Number: 91-0919927                      Legal Status of Organization: political sub-division

Individual Authorized to Sign Contracts: Gregory J. Lynch                      Superintendent  
Name    Title

**Continuation Grant Proposal Information**

Proposal Title: Behavior Health Counseling Enhancement Project

Number of Individuals Screened: 450                      Number of Individuals Served: 450

Requested Amount of Funding: \$733,695                      Matching Funds: \$89,470

**Please check which area(s) of the Continuum this project addresses:**

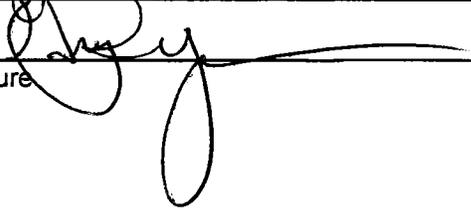
<input checked="" type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input checked="" type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input checked="" type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Recovery Support Services
<input type="checkbox"/> Outpatient treatment	

**Please check which area(s) of the County this project is focused:**

<input type="checkbox"/> South Kitsap	<input type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

The OESD 114 Behavior Health Counseling Enhancement Project is designed to provide school-based behavior health services for mental health and substance use/abuse issues. The services fall under Behavior Health Prevention and Early Intervention; and Crisis Intervention components of the Kitsap County Behavior Health Strategic Plan. Behavior Health services will be provided to 8 elementary schools, 9 middle schools and 7 high schools in Kitsap County.

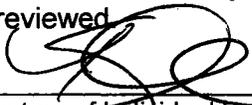
Signature:                       Superintendent 22 July 2019                      Title                      Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Checklist Form**

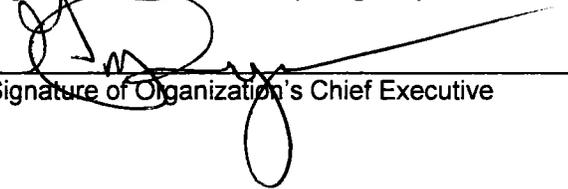
Name of Program: Behavior Health Counseling Enhancement Project      Organization Submitting: OESD 114

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	✓			JS GC
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	✓			JS GC
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	✓			JS GC
Organization did receive funding for this project in 2019	✓			JS GC
Attachment A – Continuation Grant Proposal Summary Page	✓			JS GC
Attachment B – Continuation Grant Proposal Checklist Form	✓			JS GC
Organization checked, initialed and signed Continuation Grant Proposal Checklist	✓			JS GC
Attachment C – Continuation Grant Proposal Narrative Template	✓			JS GC
Proposal Narrative is limited to 10 pages	✓			JS GC
Attachment D – Continuation Grant Proposal Evaluation Worksheet	✓			JS GC
Attachment E – Total Agency Budget Form	✓			JS GC
Attachment F – Continuation Grant Proposal Special Project Budget Form	✓			JS GC
Indirect is limited to 5%	✓			JS GC
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form	✓			JS GC
Organization submitted Attachment G for each Sub-Contractor	✓			JS GC
Sub-Contractor indirect limited to 5%	✓			JS GC
Attachment H – Continuation Grant Proposal Project Salary Summary	✓			JS GC
Attachment I – Letter of Resource Commitment (optional)	✓			JS GC
No other attachments are included	✓			JS GC
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	✓			JS GC
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	✓			JS GC

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
\_\_\_\_\_  
Signature of Individual Preparing Proposal

July 17, 2019  
Date

  
\_\_\_\_\_  
Signature of Organization's Chief Executive

22 July 2019  
Date

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Narrative Template

### 1. Project Description (20 points)

#### A. Project Design

The Olympic Educational Service District (OESD) Behavioral Health Counseling Enhancement Project (BHCEP) is geographically diverse providing equitable services within Kitsap County to the highest need schools in all 5 school districts. Schools were identified based on mental health and substance use indicators from the Washington State Healthy Youth Survey. The BHCEP currently serves 8 elementary schools and 7 high schools. The services are aligned with the Kitsap County Behavioral Health Strategic Plan, specifically Prevention, Early Intervention and Training by providing school-based prevention and early intervention behavioral health services for mental health and substance use issues; and Crisis Intervention and Triage – with staff assisting in school-based crisis intervention for suicide by diffusing and assessing students in need and linking students and families to outside resources. The program helps alleviate multiple barriers in accessing service (i.e. transportation, cost, time out of school, parents missing work, and/or the potential stigma to the student/family) by providing the services at the school site.

This proposal adds from the original proposal by addressing the key priorities identified in the 2017 Kitsap County Behavior Health Strategic Plan Review as follows:

1. Implementation of Dialectical Behavior Therapy (DBT) skills to be taught in small groups or individual counseling sessions. Dialectical behavioral therapy (DBT) is an effective intervention that enhances emotion regulation skills to reduce problem behaviors among adolescent populations. Staff were trained this past June in the DBT model and will use DBT Skills in Schools - Skills for Emotional Problems Solving for Adolescents (DBT STEPS A) next school year. DBT STEPS A “is an adaptation for students in middle and high schools of the skills training components of DBT...Adolescence in general can be an emotionally difficulty time for many youth and the onset of most mental health disorders occurs during this time...”(p. xi)<sup>1</sup> The DBT STEPS A curriculum focuses on the acquisition and practice of skills for emotion management and decision making. “...More traditional models of mental health follow what is sometimes called “waiting to fail” approach – in other words, waiting until symptoms become unmanageable and are interfering with school, social relationships, and or emotional control. Most schools do not offer courses on coping with stress or decision making, and yet the need for such skills and abilities continues to grow with the young adult population (Rathus & Miller, 2002)” (p.xii)<sup>2</sup>.
2. Request additional funding for two Student Assistance Professionals to provide services to all 9 middle schools. The current staffing is not adequate to meet the increased demand for screening, referrals and linking to services. In the 2018-19

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<sup>1</sup> J. Mazzam E. Dexter-Mazza, A. Miller, J. Rathus, & H.Murphy. DBT Skills in School Skills for Emotional problem solving for Adolescents (2018). The Guilford Press, New York, NY.

<sup>2</sup> Ibid

school year, each middle school experienced an average of 26 discipline violations for substance use on campus; As a program we were only able to screen approximately 10% of those students and it was impossible to provide any follow up support. According to the 2018 Healthy Youth Survey Kitsap County data showed, 8% percent of 8<sup>th</sup> grade students reported use of alcohol and marijuana; 5% use of other illegal drugs and 3% use of pain killers. In addition, the use of vaping products has significantly increased from 2016 to 2018: 6<sup>th</sup> grade was 1% in 2016 jumped to 3% in 2018; and 8<sup>th</sup> grade was 3% in 2016 and jumped to 5% in 2018. By adding two additional staff behavior health screenings, referrals and linkages to both school and community resources but provide follow up services which may include parent education, individual and counseling support groups (as appropriate, and based on capacity) can be provided. School administrators will identify and prioritize the students of highest need, to include students who are found using alcohol or other drugs on school grounds. Middle school outcomes will be tracked separately to assist us in identifying outcome success particularly related to follow through and linkages once a referral is made, in addition to the outcomes tracked for high school students.

#### B. Outreach

Multiple outreach strategies are used to inform all students and parents of school-based program services. The outreach plan is customized to the needs of each school and could include: letter mailed to all parents introducing program services; school staff present information on signs and symptoms of mental health and substance use issues to help identify and refer eligible students; and staff may participate in weekly administrator/school counselor meetings where eligible students in need of program services are identified. In addition, staff may outreach families through home visits when the need arises. Specifically, for the high school program, staff conduct classroom presentations describing program services; and services are included as a component of school's alcohol and drug discipline policy where students who violate the drug and alcohol policy are offered a reduction in number of suspension days by receiving a behavior health screening. It is important to recognize part of our success is due to the history and reputation of our program- students, families, and community providers are familiar with the service and seek it out as needed for themselves or students they believe would benefit.

To stay relevant and culturally competent in behavioral health services, staff are trained annually. Training includes racial equity, culture of poverty, and LGBTQ+. The primary focus of each training is for staff to develop an understanding of race equity/culture /poverty/LGBTQ+ to foster empathy and to effectively communicate and interact with their students and families, while being aware of their own world view/implicit biases to assist their clients. In addition to training staff, staff have utilized translators and special population consultants when needed to assist students and parents when language may be a barrier to services.

## **2. Accomplishments to Date (40 Points)**

### A. Evaluation

***Goal 1) Increase the overall health and wellbeing of program participants.*** Overall - by

December 31, 2020 450 students will receive services:

- **Objective (Obj) a.** 75% of those served who have 8 or more sessions in the elementary program will report improvement in health and wellbeing, which will be statistically significant, with at least +2 point change each year. At least 10% will show a greater than +5 point change this year. This change to evaluating only improvement in the current school year will better help us distinguish current improvement from previous years' improvement;
- **Obj. b/c.** 50% of students served for 8+ sessions will show improvement in the Hope Scale compared to baseline, which will be statistically significant;
- **Obj. d.** 50% of HS and middle school students will improve in academics, which will be statistically significant;
- **Obj e./f.** 50% of all students served will show improvement in class attendance, which will be statistically significant;
- **Obj g.** 80% of HS and middle school students served who say they did not attend school regularly will report they are more likely to attend regularly because of this program.
- **Obj. h** there will be a 33% reduction in major and minor office referrals for elementary students completing 8 or more sessions;
- **Obj I.** 90% of the secondary students will indicate the program was important.

**Goal 2) Decrease youth substance use.**

- **Obj. a** 50% of secondary youth served will show a reduction in substance use.

**Goal 3) increase the schools capacity to respond to student behavioral health needs.**

- **Obj: a./b.** 75% of school staff in both elementary and secondary at school-year-end will report that services have improved students' academic success
- **Obj c./d.** at school-year-end, 75% of school staff in both elementary and secondary at school-year-end will report services positively influenced the classroom climate.

**Progress to date:** Highlights specific to qualitative data include the percent of students who improved in attendance, academic failure, reduction in substance use and hope scale.

1. Fifty eight percent of high school students served through this program improved academically (failed fewer classes) and 84% of students who report they do not attend school regularly say that they are more likely to attend regularly because of this program. The demonstration of positive outcomes of increased attendance and decrease in academic failure shows promising results for student's potential to graduate and ultimately lead to positive county long-term health.<sup>3</sup>
2. This year the program shows a substantial reduction in substance use between 36% and 49% depending on the substance. Students who were identified as frequent substance users (10 or more occasions per month) at the beginning of services improved the most, with 86% of frequent alcohol users, 62% of frequent e-cigarette users and 70% of frequent tobacco users decreasing their substance

<sup>3</sup> <http://impact.all4ed.org/#potential/income/washington/all-students/>

use by an average of more than 50%. All frequent binge drinkers decreased their binge drinking by an average of more than 75%. Research has shown “Early drug use increases a person’s chances of becoming addicted... Because the brain is still developing, using drugs at this age has more potential to disrupt brain function in areas critical to motivation, memory, learning, judgment, and behavior control.”<sup>4</sup>

3. The program has shown improvement in hope for 57% of elementary students and 64% of high school students with the Children’s Hope Scale (CHS). More than 20% had a full point or greater improvement this school year. Specifically, for high school students, the average Hope Score at the beginning of services was 3.7 (on a scale of 1 to 6), below the average scores for 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grade Kitsap students on the 2018 Healthy Youth Survey (HYS, 4.0, 4.0 and 4.1 respectively). In addition, only 1/3 of participating High School students scored in the “highly hopeful” category. By the end of the school year, participating students’ Hope Scores had increased to an average of 4.2 and more than half (59%) scored in the “highly hopeful” category, better than the average student on the HYS. A major benefit of the CHS “... is that hope has such a strong positive correlation with health and wellbeing and a negative correlation with health risk behaviors, substance use, and academic/behavioral concerns.” (Hellman, et. al., 2017).

The table below provides more details on each data point and the progress overtime.

<b>Goal 1 - To increase the overall health and well-being of program participants.</b>			
<i>Objective 1. Access – By June 30, 2018, at least 372 students will receive services at targeted elementary &amp; high schools.</i>	<b>Previous Years</b>	<b>2018-19</b>	<b>Progress Description</b>
	2014-15: 398 2015-16: 427 2016-17: 428 2017-18: 395	469	In all yrs. this obj. was met. More than 372 students received services each year.
<i>Objective 1a. 75% of students completing 8 or more sessions with the Mental Health Therapist (elementary program) will have improvement in overall health and wellbeing by the end of the school year (6/30/18), which will be statistically significant. The average change will be at least +4 points change and at least 25% of students will show a greater than +5 point change.</i>	2014-15: 77%, n=148 2015-16: 81%, n=176 2016-17: 85%, n=172, average change +6 2017-18: 66%, n=131, average change +4	73%, statistically significant, average change = +2 this year, >5+ point change = 15% this year, n=154	In 2016-17 and the 2 previous yrs., this obj. was met. In 2017-18, the goal was partially met. In 2018-19, the program fell just short of the goal and had lower average point change due to the one-year evaluation timeframe. This will better help us evaluate current progress rather than summing improvement for all years.
<i>Objective 1b. Hope - 50% of elementary students completing 8 or more sessions will show improvement in Hope Scale</i>	2017-18: 30% statistically significant, average change +0.2, 1+ point change=15%, n=122	57%, statistically significant, 8% no change, average change = +0.2, 1+ point change =	The goal was met in 2018-19, but not in 2017-18. Both years were statistically significant improvement, with an

<sup>4</sup> <https://www.drugabuse.gov/publications/drugs-brains-behavior-science-addiction/preventing-drug-misuse-addiction-best-strategy>

ATTACHMENT C

compared to baseline, which will be statistically significant.		22%, n=134	average change of +0.2.
<i>Objective 1c.</i> Hope - 50% of secondary students completing 8 or more sessions will show improvement in Hope Scale compared to baseline, which is statistically significant.	2017-18: 75% statistically significant, average change +0.8, 1+ point change=46%, n=48	64%, statistically significant, 9% no change, average change = +0.5, 1+ point change = 31%, n=78	This obj. was exceeded in both years and was statistically significant.
<i>Objective 1d.</i> Academics – At least 33% of high school students served who failed at least one class will demonstrate improvement in academics (failing fewer classes) based on comparison of 1st semester grades from year served to year after.	2014-15: 28% 2015-16: 47%, n=32 2016-17: 52%, n=46 2017-18: 58%, n=43	<i>Results pending (available 7/2020)</i>	In 2015-16, 2016-17 and 2017-18, this obj. was exceeded.  2018-19 data will be available July 2020.
<i>Objective 1e.</i> Attendance – At least 50% of elementary students served will demonstrate improvement in class attendance (30 days at intake compared to last 30 days of school).	2017-18: 51%, n=51	54%, n=110	This obj. was met in both years.
<i>Objective 1f.</i> Attendance – At least 50% of secondary students served will demonstrate improvement in class attendance (30 days at intake compared to last 30 days of school).	2017-18: 44%, n=104	52%, n=150	This obj. was met in 2018-19, but not in 2017-18.
<i>Objective 1g.</i> Attendance – At least 80% of secondary students served who say they do not attend school regularly will report they are more likely to attend regularly because of this program, based on end of services survey.	2016-17: 88% 2017-18: 84%	84%	This obj. was met in all 3 years.
<i>Objective 1h.</i> Discipline – There will be a reduction in office referrals and suspensions for elementary students completing 8 or more sessions.	2017-18: 26%	45% reduction in major referrals, n=33, 42% reduction in minor referrals, n=19	This obj. was met in both years.
<i>Objective 1i.</i> At least 90% of secondary students served will report that this program is somewhat or very important to them (end of services survey).	2016-17: 92% 2017-18: 93%	93%	This obj. was met in all 3 years.

Goal 2 - Decrease substance use among program participants (high school program).																																
Objective 2a. At end of program service, 50% reduction in substance use (cigarettes, alcohol, binge alcohol, marijuana) for secondary with an identified substance use reduction goal for services compared to baseline as measured by the RMC pre/post self-report tool.	Previous Years	2018-19	Progress Description																													
	<p>■ 2014-15 ■ 2015-16 ■ 2016-17 ■ 2017-18 ■ 2018-19</p> <table border="1"> <caption>Substance Use Reduction Data (Objective 2a)</caption> <thead> <tr> <th>Substance</th> <th>2014-15</th> <th>2015-16</th> <th>2016-17</th> <th>2017-18</th> <th>2018-19</th> </tr> </thead> <tbody> <tr> <td>Cigs</td> <td>50, 60%</td> <td>25, 49%</td> <td>44, 23%</td> <td>24, 54%</td> <td>47, 49%</td> </tr> <tr> <td>Alc</td> <td>50, 64%</td> <td>46, 63%</td> <td>76, 49%</td> <td>42, 67%</td> <td>67, 36%</td> </tr> <tr> <td>Binge</td> <td>38, 74%</td> <td>32, 78%</td> <td>54, 54%</td> <td>28, 82%</td> <td>40, 45%</td> </tr> <tr> <td>MJ</td> <td>71, 62%</td> <td>70, 60%</td> <td>84, 54%</td> <td>48, 60%</td> <td>86, 48%</td> </tr> </tbody> </table>		Substance	2014-15	2015-16	2016-17	2017-18	2018-19	Cigs	50, 60%	25, 49%	44, 23%	24, 54%	47, 49%	Alc	50, 64%	46, 63%	76, 49%	42, 67%	67, 36%	Binge	38, 74%	32, 78%	54, 54%	28, 82%	40, 45%	MJ	71, 62%	70, 60%	84, 54%	48, 60%	86, 48%
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Goal 3 - Increase schools' capacity to effectively respond to students' behavioral health needs.																																
Objective 3a. At end of school year, 75% of elementary school staff will report that services have improved students' academic success.	Previous Years	2018-19	Progress Description																													
	2014-15: 60%, n=119 2015-16: 86%, n=100 2016-17: 72%, n=73 2017-18: 74%, n=63	83%, n=67	This objective was met in 2015-16 and 2018-19 but fell just short of it in 2016-17 and 2017-18.																													
Objective 3b. At end of school year, 75% of secondary staff will report that services have improved students' academic success.	Previous Years	2018-19	Progress Description																													
	2014-15: 92%, n=71 2015-16: 87%, n=53 2016-17: 93%, n=50 2017-18: 86%, n=48	84%, n=50	This obj. has been met in all years. Overwhelmingly, high school staff agree that services have improved students' academic success.																													
Objective 3c. At end of school year, 75% of elementary school staff will report that services have positively influenced the classroom climate.	Previous Years	2018-19	Progress Description																													
	2014-15: 76%, n=119 2015-16: 78%, n=100 2016-17: 79%, n=73 2017-18: 86%, n=63	84%, n=67	This obj. has been met in all years.																													
Objective 3d. At end of school year, 75% of high school staff will report that services have positively influenced the classroom climate.	Previous Years	2018-19	Progress Description																													
	2014-15: 97%, n=71 2015-16: 95%, n=53 2016-17: 93%, n=50 2017-18: 84%, n=48	89%, n=46	This obj. has been met in all years. Overwhelmingly, high school staff agree that services have positively influenced the classroom climate.																													

**B. Barriers to Implementation**

In general, the project has not encountered any difficulties/problems in achieving planned goals and objectives. This is because, the design of the program eliminates most of the barriers child and families encounter to access services and provides a flexible model that can meet their needs or connect them to the appropriate services. The primary challenge. The only challenges with the program is the fiscal year and the availability of data does not coincided since the program is school-based. Therefore, the outcome data becomes available at the end of the school year (generally mid-July).

**C. Key Accomplishments**

1. According to OSPI, one in five youth struggles with a mental health disorder and most do not receive the services they need<sup>5</sup>. National research found 98% of students who were referred to mental health services within a school received services, compared to less than 20% of students referred to a community based mental health center<sup>6</sup>. An outcome and accomplishment has been the successful implementation of behavior health services within the school setting to address the above concerns. School-based services reduce the barriers to accessing services (i.e. transportation, cost, time out of school, parents missing work, and/or the potential stigma to the student/family). In the half of this funding cycle (Jan-Jun), 432 students (258 high school and 174 elementary school) have been served intensively. In addition, a total of 940 (300 elementary and 640 high school) drop in visits occurred.

2. Having staff embedded in the school system for critical interventions on children and youth with suicide ideation and linking them to services, as well as increasing staff awareness of signs and symptoms for early identification of students at risk for suicide. This is a major accomplishment! During the 2017-18 school year, there was a 57% increase in elementary and a 22% increase in high school drop in visits for suicide ideation over the previous year (2016-17). In 2018-19, there was an additional 6% increase in high school students and double the number of elementary students identified as having suicide ideation. Suicide is the second leading cause of death for Washington teens 15-19 years old. According the HYS (2018) 23% of 8th graders and 28% of 10th graders in Kitsap County had considered suicide, and 9% of 10th graders and 10% of 8th graders have attempted suicide in the past year.

3. Continued utilization of evidence-based programs. All staff are trained and use motivational interviewing skills; and are trained and plan to implement DBT Skills in Schools this fall. In addition, the Mental Health Therapist (MHT) are certified to provide cognitive behavior therapy for depression, anxiety and behavior management and trauma. All SAP's provide Teen Intervene, for students who are misusing substances; and Teen Marijuana Checkup, a brief motivational enhancement intervention used with students who use marijuana heavily/regularly. To add to the menu of evidence practices for 2020, the SAP's and MHT's will receive training in the Cognitive Behavioral Therapy in Schools (CBITS) model to provide counseling support for students impacted by trauma.

4. Achieving the goal of overall positive impact on school and classroom environment as evident by school staff feedback "This has helped me as a teacher to deal with behaviors in my class. It has also given my students who receive services tools to use that impacts learning, behavior and attitude towards school." "Our students WANT it for themselves and recognize at such a young age, they need the support to process their situations."

### **3. Budget Narrative (30 Points)**

#### **A. Funding Request**

<sup>5</sup> <http://www.k12.wa.us/OSSI/K12Supports/AWARE/FAQ.aspx>

<sup>6</sup> J. Mazzam E. Dexter-Mazza, A. Miller, J. Rathus, & H. Murphy. DBT Skills in School Skills for Emotional problem solving for Adolescents (2018). The Guilford Press, New York, NY.

The requested funds from CDMHTC is \$733,695. This will be combined with cash match of \$89,470 for a total project cost of \$823,165. OESD also receives additional grant dollars that support two and half SAP positions in two high schools (Bremerton and Kingston) as in-kind match for a total of \$119,734. The OESD will spend all cash received prior to billing the grant for expenses. **The cash match is distributed throughout the budget based on an expense percentage for each object/budget category therefore, the budget narrative only reflects the actual dollar amount the OESD is requesting from CDMHTC.**

**\$365,705 for Personnel:** Staff salaries budgeted at \$258,702; and Fringe Benefits: \$107,004. Staffing: Project Director (0.025 FTE) for program oversight, networking with both schools and community partners, collective impact collaboration and sustainability planning; Supervisor (.50 FTE) supervises SAP's, coordinates mental health services with KMHS, Administrative Assistant (.15 FTE); and SAP's - 3 staff @190-8-hour-days; 1 staff @190-4-hour-days; 2 staff @114-8-hour-days (3 days/wk).

**\$4,278 for Supplies & Equipment:** \$3,000 for supplies this includes general office supplies (file folders, printer toner, etc.), supplies for facilitating groups (snacks, art supplies, journals etc.) and resource books on evidence/research-based programming. \$1,800 is for purchasing of 2 lap tops for the additional two middle school staff.

**\$20,123 for Administration:** Postage, printing and copy cost for flyers, newsletters, announcements and handouts budgeted at \$1,500. Staff travel budgeted at \$1,000 for local travel to and from schools, meetings, and locally sponsored events (staff travel based on federal reimbursement rate and OESD policy of .58/mile). \$20,123 Indirect is for human resources, insurance, bonding and legal fees and debt service budgeted at 2.5% of the grant.

**\$5,805 for Operations & Maintenance:** Staff located at the OESD with a designated FTE is prorated for network services, space and occupancy, and phone service charges, and includes storage space for case file record keeping. The OESD does not receive other funds to cover these costs.

**\$337,783 for Other - Purchased Services:** Subcontract with KMHS is \$363,528 to support 4 mental health therapists to serve the elementary schools @190- 8 hour days and .50 FTE Clinical Supervisor; and subcontract with KPHD for \$15,446 for staff time in conducting the project evaluation.

**B. Past Expenditures and Budget Modifications**

***Past Expenditures:*** Thirty-four percent of the grant award budget has been expended within the first quarter. A total of sixty-five percent is encumbered in salary (\$100,138 and benefits \$45,846 (\$119,664). An additional \$269,884 is in subcontracts with KMHS and KPH. KMHS averages \$30,000/mo. and is on target to bill the full amount by project year end December 31, 2019; KPH is a little under budget at an average of \$330 per month. However, staff time is spent more on analyzing the data during the summer months which will increase the amount OESD is charged for the services and move us towards spending the allocated amount for evaluation.

Budget Categories	Grant Budget (allocation)	Actual Expenditures (1/1/2019-5/31/2019)	Remaining balance
Personnel	\$159,617	\$117,096	\$73,213

	(Salaries: \$91,445 Benefits: \$68,172)	(Salaries \$81,290 with \$21,308 as match) Benefits: \$35,806 with \$9,386 as match)	(Salaries \$31,463) (Benefits \$41,751)
Supplies	\$2100	\$657 (\$172 applied as match)	\$1,615
Administration	\$32,693	\$12,865 (with \$3,373 as match)	\$23,198
Operations & Maintenance	\$13,640	\$3,689 with \$967 as match)	\$10,918
Other/ Sub Contract	\$372,251	\$138,732 (with \$36,365 as match)	\$269,884
Total	\$580,301	See note below	\$378,832

\$273,039 is the actual expense from January 1 thru May 31, 2019 (\$201,040 to the grant and \$71,571 in match (\$69,555 in SD cash match and \$2015 in Medicaid match). Note Central Kitsap pays for an additional .40 FTE, so each high school receives a .50 FTE. This was not in the original match calculation for the 2019 grant award. Therefore, we are receiving more cash match than originally anticipated.

*Budget modifications:* In the original budget proposal, the match was specifically listed under salary and benefits. However, because the match must be spent first the OESD has had to recalculate and distribute match funds based on the categories where expenses occurred. Therefore, the grant will be charged more in salaries and benefits, by the end of project Dec 2019 because of the match being redistributed throughout the budget.

**4. Sustainability (10 Points)**

**A. Sustainability Plan**

*Leveraged Funds:* The project was able to leverage \$67,837 in cash match. Breakdown to date, OESD received \$2,015 in Medicaid Administrative Match (MAM); and \$65,822 in school district cash match. Charges for the project were made to these dollars before billing the County for the remaining grant activities. This is reflected in the invoices submitted to Kitsap County. An additional in-kind match of \$36,683 to date for salary and benefits from other grant revenue supporting FTE for SAP’s at Bremerton and Kingston High Schools not funded under this grant.

For the 2020 funding cycle, the OESD estimates an additional cash match revenue of \$89,470 between MAM and school district match; and in-kind match totaling \$121,092 for two additional SAPs in two high schools (Bremerton and Kingston). These two positions are funded by both federal and state substance use prevention block grant funds. The leveraged amount is based on staff salaries and benefits. These funds were not applied towards staff time specific to the 1/10<sup>th</sup> of 1% MHCDTCP grant, however, they are leveraged as an effort to augment services and to offer services aligned with the MHCDTCP strategic plan.

*Sustainability Plan:* Multiple efforts continued to be explored as options to sustain services without 1/10<sup>th</sup> of 1% MHCDCP contributions. As mentioned above, the OESD has been able to secure MAM and cash match from school districts to help off-set costs, but this does not sustain 100% of the services proposed.

Additional efforts underway to secure funding include the following:

- OESD grant award from Kaiser Permanente to hire a consultant(s) to analyze and assist with securing a behavioral health license with the State of Washington to provide both school-based mental health and substance use treatment services in Kitsap County. This would include assisting with securing insurance billing with local managed care providers for low income families. This project will start this summer or fall of 2019.
- The School District cash match contributions for 2020 funding cycle is estimated at \$87,470 and MAM is estimated at \$2,000 for a total estimated match of \$89,470. About a 29% increase from 2019's \$67,600 cash match. This demonstrates the school districts commitment to increase match contributions in increments over the next several years.
- The State Auditor's Office is conducting a performance audit on the state's prevention and early intervention efforts in behavioral health. The Office of Superintendent of Public Instruction provides each ESD in the state with funding to provide Student Assistance (substance use and mental health) Professionals at designated school sites (we do not choose the site, it is based on greatest needs within a school community across the state). The two sites we refer to in this grant as an in-kind match for the salary and benefits are Bremerton and Kingston High schools. The Auditors will be examining this program focusing on the following preliminary objectives as discovery:
  - Are there opportunities to expand behavioral health prevention and early intervention services and programs in Washington?
  - Are there opportunities to improve coordination of behavioral health prevention and early intervention efforts between state agencies, schools, and counties?

Depending on the State Auditors recommendation, there could be some movement towards funding more school-based services.

- KMHS will transition January 1, 2020 to Medicaid Managed Care (MCOs), contracting with each of four MCOs for services reimbursement, rather than under the previous contract with the SBHO. The services described in this grant request (observations, staff meetings, consultation, outreach to non-engaged families) are not currently eligible to encounter for billing within existing SBHO/KMHS contract, and more than likely do not qualify for MCO billable services. There may be a few exceptions when therapy is indicated, the student is willing, but does not require the level of therapeutic intervention provided in the community behavioral health setting. In this circumstance, KMHS may be able to bill. However, there is a limited possibility of billing specifically for therapy services, which requires both parental notification and parental agreement to pay any copays required by their insurance.

## EVALUATION WORKSHEET

**INSTRUCTIONS:**

Evaluation is the collection of information about a program in a systematic and defined manner to demonstrate success, identify areas for improvement and lessons learned. Every program has at least one end goal and might have several – one or more activities are required to make progress toward meeting the goal. Progress is measured with one or more objectives that might cover an output (number of something) or outcome (change over time) due to the program. The type of outcome (column D) and expected timeframe for change (column E) should be defined. Objectives must follow the “SMART” guideline: specific, measurable, attainable, realistic, and time-bound (column C). Each objective should include an expected target result and completion date (“time-bound” part of column C).

New and continuing grant proposals must fill out the Evaluation Worksheet.

**DEFINITIONS:**

<b>Goal:</b>	A broad statement or a desired, longer-term, outcome of a program. A program can have one or multiple goals. Each goal has one or more related specific objectives that, if met, will collectively achieve the stated goal.
<b>Activity:</b>	Actions taken or work performed to produce specific outputs and outcomes.
<b>Objective:</b>	A statement of a desired program result that meets the criteria of being SMART (specific, measurable, achievable, realistic, and time-bound).
<b>Output:</b>	Results of program activities; the direct products or deliverables of program activities; such as number of: sessions completed, people served, materials distributed.
<b>Outcome:</b>	Effect of a program (change) - can be in: participant satisfaction; knowledge, attitude, skill; practice or behavior; overall problem; or a measure of return-on-investment or cost-benefit. Identify any measures that are “fidelity” measures for an evidence based practice.
<b>Timeline:</b>	Is the outcome expected to measure short-term, medium-term or a longer-term change? When will measurement begin? How often will measurement be done (frequency: quarterly, semi-annual, annual, other)?
<b>Baseline:</b>	The status of services or outcome-related measures before an intervention against which progress can be assessed or comparisons made. Should include data and time frame.
<b>Source:</b>	How and from where will data be collected?

EVALUATION WORKSHEET

PROJECT NAME: Behavioral Health Counseling Enhancement Project

<p><b>Goal 1.</b> Increase the overall health and well-being of program participants</p>	<p>Refer and serve students with behavioral health needs in supportive group and individual services</p>	<p>By December 31, 2020, at least 450 students will receive services at targeted elementary, middle and high schools measured by project data.  Note: 2020 grant period covers students served in two different school years: 2019-20 and 2020-21.</p>	<p><input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  if applicable: <input type="checkbox"/> Fidelity measure</p>	<p>2014-15: 398 2015-16: 427 2016-17: 428 2017-18: 395 2018-19: 469</p>	<p>Program data</p>
		<p>a. DLA - 75% of elementary students completing 8 or more sessions with the Mental Health Therapist will have improvement in overall health and wellbeing by the end of the school year (6/30/20). The average change will be at least +2 points change each year and at least 10% of students will show a greater than +5 point change this year. The improvement seen in the cohort of elementary students receiving 8 or more sessions with the MHT will be statistically significant.</p>	<p><input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  if applicable: <input type="checkbox"/> Fidelity measure</p>	<p>2014-15: 77% 2015-16: 81% 2016-17: 85% 2017-18: 66% 2018-19: 73%</p>	<p>Program data (statistical comparison of first to most recent DLA)</p>
		<p>b. Hope - 50% of elementary students completing 8 or more sessions will show improvement in Hope Score, compared to baseline. The improvement seen in the cohort of elementary students receiving 8 or more sessions with the MHT will be statistically significant.</p>	<p><input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  if applicable: <input type="checkbox"/> Fidelity measure</p>	<p>2017-18: 30%, statistically significant 2018-19: 57%, statistically significant</p>	<p>Program data</p>

EVALUATION WORKSHEET

	<p>c. Hope – 50% of secondary students completing 8 or more sessions will show improvement in Hope Score, compared to baseline. The improvement seen in the cohort of secondary students receiving 8 or more sessions will be statistically significant.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                  If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                  Start date: <u>Sep 2019</u>                  Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p>	<p>2017-18: 75%, statistically significant                  2018-19: 64%, statistically significant</p>	<p>Program data</p>
	<p>d. Academics – At least 50% of secondary students served who failed at least one class in either time period will demonstrate improvement in academics (failing fewer classes) based on comparison of 1<sup>st</sup> semester grades from year served to year after.                   Note: results for students served in 2018-19 school year will be available in Sep 2020.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                  If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                  Start date: <u>Sep 2019</u>                  Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other                  * Data available in summer of 2020.</p>	<p>Students served:                  2014-15: 28%                  Improved;                  2015-16: 47%                  2016-17: 52%                  2017-18: 58%                  2018-19: available                  2020</p>	<p>Program data - RMC database.</p>

EVALUATION WORKSHEET

	<p><b>e. Behavior</b> - At end of school year, there will be a 33% reduction in the following measures for elementary student participants completing 8 or more sessions who have available discipline data:</p> <p>a. Major Office referrals b. Minor Office referrals</p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>SEP 2019</u></p> <p>Frequency: <input type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input type="checkbox"/> Annual</p> <p><input checked="" type="checkbox"/> Other: mid-year, July 2020</p>	<p>2017-18: 26% reduction in combined major and minor</p> <p>2018-19: 45% reduction in major, 42% reduction in minor</p> <p>Program data</p>
	<p><b>f. Attendance</b> - At least 50% of secondary students served who have any absences will demonstrate improvement in class attendance (30 days at intake compared to 30 days prior to exit). The improvement seen in the cohort of secondary students served will be statistically significant.</p> <p>Note: Results will be for students served during the current school year, not calendar year.</p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:</p> <p><input checked="" type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>SEP 2019</u></p> <p>Frequency: <input type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Semi-annual</p> <p><input checked="" type="checkbox"/> Annual*</p> <p><input type="checkbox"/> Other</p> <p>* Data available in summer of 2020.</p>	<p>2017-18: 44%</p> <p>2018-19: 52%</p> <p>Program data - RMC database</p>
	<p><b>g. Attendance</b> - At end of school year, there will be a reduction in the number of elementary student participant absences (excused and unexcused) compared to baseline (30 days at intake compared to 30 days prior to exit). The improvement seen in the cohort of</p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p>	<p><input type="checkbox"/> Short</p> <p><input checked="" type="checkbox"/> Medium</p> <p><input type="checkbox"/> Long</p> <p>Start date: <u>SEP 2019</u></p> <p>Frequency: <input type="checkbox"/> Quarterly</p>	<p>2017-18: 51%</p> <p>2018-19: 54%</p> <p>Program data</p>

EVALUATION WORKSHEET

	<p>elementary students served will be statistically significant.</p>	<p>if applicable:  <input type="checkbox"/> Fidelity measure</p> <p><input type="checkbox"/> Output</p> <p><input checked="" type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Semi-annual  <input checked="" type="checkbox"/> Annual  <input type="checkbox"/> Other: mid-year, July 2020</p> <p><input type="checkbox"/> Short  <input type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>Sep 2019</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p>	<p>2016-17: 88%</p> <p>2017-18: 84%</p> <p>2018-19: 84%</p> <p>Program data - RMC database.</p>
	<p>h. Attendance – Of those who say they do not (or did not) attend school regularly, at least 80% of secondary students served will report they are more likely to attend regularly because of this program, based on end of services survey.</p>	<p><input type="checkbox"/> Output</p> <p><input checked="" type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input type="checkbox"/> Outcome: Practice or behavior</p> <p><input type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>Sep 2019</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p>	<p>2016-17: 92%</p> <p>2017-18: 93%</p> <p>2018-19: 93%</p> <p>Program data - RMC database</p>
<p><b>Goal 2. Decrease substance use among program participants.</b></p>	<p>Screen all students for substance use</p> <p>Refer students to specific intervention services</p> <p>Assess overall impact of program services on student's substance use</p>	<p>a. At end of program service, 50% of middle and high school students with an identified substance use reduction goal for services will show a 50% <i>reduction* in substance use</i> (cigarettes, alcohol, binge alcohol, marijuana, vape) compared to baseline as measured by the RMC pre/post self-report tool.</p> <p>**50% reduction* is defined as at least a 1 category decrease in use</p>	<p><input type="checkbox"/> Output</p> <p><input type="checkbox"/> Outcome: Participant satisfaction</p> <p><input type="checkbox"/> Outcome: Knowledge, attitude, skill</p> <p><input checked="" type="checkbox"/> Outcome: Practice or behavior</p> <p><input checked="" type="checkbox"/> Outcome: Impact on overall problem</p> <p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long</p> <p>Start date: <u>Sep 2019</u></p> <p>Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual</p> <p>2014-15: Cigs: 60%          Alc: 64%          Binge: 74%</p> <p>2015-16: Mj: 62%</p> <p>2015-16: Cigs: 49%          Alc: 63%          Binge: 78%</p> <p>2016-17: Mj: 60%          Cigs: 25%</p> <p>Program data - RMC database.</p>

EVALUATION WORKSHEET

		<p>with the following categories: 0 occasions, 1-2, 3-5, 6-9, 10-19, 20-39 and 40 or more.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input checked="" type="checkbox"/> Other: mid-year, July 2020                      Alc: 49%                      Binge: 54%                      Mj: 54%                      2018-19: 2018-19:                      Cigs: 44%                      Alc: 37%                      Binge: 47%                      Mj: 52%                      E-cigs: 55%</p> <p>2014-15: 60%                      2015-16: 86%                      2016-17: 72%                      2017-18: 74%                      2018-19: 83%</p> <p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>Sep</u> 2019                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p> <p>Program survey</p>
	<p>a. At end of school year, 75% of elementary school staff will report that services have improved students' academic success.                      Note: Results will be for school staff surveyed at end of school year, not calendar year.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>Sep</u> 2019                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p> <p>Program survey</p>	
	<p>b. At end of school year, 75% of middle and high school staff will report that services have improved students' academic success.                      Note: Results will be for school staff surveyed at end of school year, not calendar year.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem  <input type="checkbox"/> Return-on-investment or cost-benefit                      if applicable:  <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>Sep</u> 2019                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p> <p>Program survey</p>	
	<p>c. At end of school year, 75% of elementary school staff will report that services have positively influenced the classroom climate.</p>	<p><input type="checkbox"/> Output  <input type="checkbox"/> Outcome: Participant satisfaction  <input type="checkbox"/> Outcome: Knowledge, attitude, skill  <input checked="" type="checkbox"/> Outcome: Practice or behavior  <input checked="" type="checkbox"/> Outcome: Impact on overall problem</p>	<p><input type="checkbox"/> Short  <input checked="" type="checkbox"/> Medium  <input type="checkbox"/> Long                      Start date: <u>Sep</u> 2019                      Frequency:  <input type="checkbox"/> Quarterly  <input type="checkbox"/> Semi-annual  <input type="checkbox"/> Annual  <input checked="" type="checkbox"/> Other: mid-year, July 2020</p> <p>Program survey</p>	

EVALUATION WORKSHEET

	<p>Note: Results will be for school staff surveyed at end of school year, not calendar year.</p>	<p><input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable: <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: mid-year, July 2020</p>	<p>2017-18: 86% 2018-19: 84%</p>
	<p>d. At end of school year, 75% of middle and high school staff will report that services have positively influenced the classroom climate.</p> <p>Note: Results will be for school staff surveyed at end of school year, not calendar year.</p>	<p><input type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit</p> <p>If applicable: <input type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>Sep</u> <u>2019</u> Frequency: <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Other: mid-year, July 2020</p>	<p>2014-15: 97% 2015-16: 95% 2016-17: 93% 2017-18: 84% 2018-19: 89%</p> <p>Program survey</p>

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: Olympic ESD 114

Project:



Accrual



Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue	\$ 6,796,658.00	36%	\$ 7,542,084.00	35%	\$ 8,590,319.00	37%
WA State Revenue	\$ 3,803,916.00	20%	\$ 4,517,392.00	21%	\$ 4,584,112.00	20%
Local Revenue	\$ 8,062,999.00	43%	\$ 9,193,384.00	43%	\$ 9,914,755.00	43%
Private Funding Revenue	\$ 7,664.00	0%	\$ 25,421.00	0%	\$ -	0%
Agency Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Miscellaneous Revenue	\$ -	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 18,671,237.00</b>		<b>\$ 21,278,281.00</b>		<b>\$ 23,089,186.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 1,831,671.00	9%	\$ 1,722,433.00	8%	\$ 2,320,568.00	9%
Staff	\$ 7,187,160.00	37%	\$ 7,796,617.94	34%	\$ 7,442,874.00	30%
Total Benefits	\$ 3,486,268.00	18%	\$ 4,279,655.73	19%	\$ 4,609,495.00	19%
<b>Subtotal</b>	<b>\$ 12,505,099.00</b>	<b>64%</b>	<b>\$ 13,798,706.67</b>	<b>61%</b>	<b>\$ 14,372,937.00</b>	<b>58%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 155,734.06	1%	\$ 49,387.00	0%	\$ 45,000.00	0%
Office Supplies	\$ 187,785.53	1%	\$ 369,021.00	2%	\$ 392,918.00	2%
Other Supplies	\$ 580,673.00	3%	\$ 362,963.00	2%	\$ 311,893.00	1%
<b>Subtotal</b>	<b>\$ 924,192.59</b>	<b>5%</b>	<b>\$ 781,371.00</b>	<b>3%</b>	<b>\$ 749,811.00</b>	<b>3%</b>
<b>Administration</b>						
Advertising/Marketing	\$ 3,830.00	0%	\$ 28,600.00	0%	\$ 29,600.00	0%
Audit/Accounting	\$ 31,629.00	0%	\$ 32,000.00	0%	\$ 42,000.00	0%
Communication	\$ 54,979.00	0%	\$ 54,542.00	0%	\$ 62,928.00	0%
Insurance/Bonds	\$ 43,922.00	0%	\$ 53,351.00	0%	\$ 49,351.00	0%
Postage/Printing	\$ 57,772.00	0%	\$ 66,509.00	0%	\$ 74,080.00	0%
Training/Travel/Transportation	\$ 594,061.00	3%	\$ 816,240.00	4%	\$ 839,199.00	3%
% Indirect	\$ 1,924,542.05	10%	\$ 1,380,042.23	6%	\$ 1,652,292.00	7%
Fees & Subscriptions	\$ 980,266.00	5%	\$ 1,355,533.00	6%	\$ 1,404,731.00	6%
<b>Subtotal</b>	<b>\$ 3,691,001.05</b>	<b>19%</b>	<b>\$ 3,786,817.23</b>	<b>17%</b>	<b>\$ 4,154,181.00</b>	<b>17%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ 64,950.48	0%	\$ 113,413.33	1%	\$ 171,020.00	1%
Maintenance Contracts	\$ 94,658.61	0%	\$ 126,223.00	1%	\$ 129,500.00	1%
Maintenance of Existing Landscaping	\$ 6,863.00	0%	\$ 11,000.00	0%	\$ 11,000.00	0%
Repair of Equipment and Property	\$ 100,685.95	1%	\$ 12,000.00	0%	\$ 12,000.00	0%
Utilities	\$ 65,951.63	0%	\$ 78,200.00	0%	\$ 77,500.00	0%
Equipment Rental	\$ 2,239.00	0%	\$ 2,500.00	0%	\$ 2,500.00	0%
Facilities Rental	\$ 75,480.57	0%	\$ 113,721.00	1%	\$ 75,970.00	0%
Other (Describe)		0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 410,829.24</b>	<b>2%</b>	<b>\$ 457,057.33</b>	<b>2%</b>	<b>\$ 479,490.00</b>	<b>2%</b>
<b>Other Costs</b>						
Debt Service	\$ 54,870.00	0%	\$ -	0%	\$ 35,000.00	0%
Contracted Services	\$ 1,943,391.46	10%	\$ 3,780,480.00	17%	\$ 5,014,133.00	20%
<b>Subtotal</b>	<b>\$ 1,998,261.46</b>	<b>10%</b>	<b>\$ 3,780,480.00</b>	<b>17%</b>	<b>\$ 5,049,133.00</b>	<b>20%</b>
<b>Total Direct Expenses</b>	<b>\$ 19,529,383.34</b>		<b>\$ 22,604,432.23</b>		<b>\$ 24,805,552.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: Olympic Educational Service District 114

Project: Behavior Health Counseling Enhancement  
Project

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 4,573.00	\$ 2,500.00	55%	\$ 35,862.00	\$ 31,289.00	684%
Staff	\$ 86,882.00	\$ 47,823.00	55%	\$ 222,840.00	\$ 135,958.00	156%
Total Benefits	\$ 68,172.00	\$ 26,420.00	39%	\$ 107,004.00	\$ 38,832.00	57%
<b>SUBTOTAL</b>	<b>\$ 159,627.00</b>	<b>\$ 76,743.00</b>	<b>48%</b>	<b>\$ 365,706.00</b>	<b>\$ 206,079.00</b>	<b>129%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -		\$ -	\$ -	
Office Supplies	\$ 2,100.00	\$ 485.00	23%	\$ 4,278.00	\$ 2,178.00	104%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 2,100.00</b>	<b>\$ 485.00</b>	<b>23%</b>	<b>\$ 4,278.00</b>	<b>\$ 2,178.00</b>	<b>104%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -		\$ -	\$ -	
Audit/Accounting	\$ -	\$ -		\$ -	\$ -	
Communication	\$ -	\$ -		\$ -	\$ -	
Insurance/Bonds	\$ -	\$ -		\$ -	\$ -	
Postage/Printing	\$ 1,500.00	\$ 70.00	5%	\$ 1,337.00	\$ (163.00)	-11%
Training/Travel/Transportation	\$ 2,875.00	\$ 728.00	25%	\$ 891.00	\$ (1,984.00)	-69%
% Indirect (Limited to 5%)	\$ 28,318.00	\$ 8,694.00	31%	\$ 17,895.00	\$ (10,423.00)	-37%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 32,693.00</b>	<b>\$ 9,492.00</b>	<b>29%</b>	<b>\$ 20,123.00</b>	<b>\$ (12,570.00)</b>	<b>-38%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -		\$ -	\$ -	
Maintenance Contracts	\$ -	\$ -		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$ -		\$ -	\$ -	
Repair of Equipment and Property	\$ -	\$ -		\$ -	\$ -	
Utilities	\$ -	\$ -		\$ -	\$ -	
Other (Describe): space& occ, NW services	\$ 13,640.00	\$ 2,733.00	20%	\$ 5,805.00	\$ (7,835.00)	-57%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 13,640.00</b>	<b>\$ 2,733.00</b>	<b>20%</b>	<b>\$ 5,805.00</b>	<b>\$ (7,835.00)</b>	<b>-57%</b>
<b>Sub-Contracts</b>						
Organization: KMHS	\$ 361,263.00	\$ 137,359.00	38%	\$ 323,985.00	\$ (37,278.00)	-10%
Organization: KPH	\$ 10,988.00	\$ 2,851.00	26%	\$ 13,798.00	\$ 2,810.00	26%
Organization:	\$ -	\$ -		\$ -	\$ -	
Organization:	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 372,251.00</b>	<b>\$ 140,210.00</b>	<b>38%</b>	<b>\$ 337,783.00</b>	<b>\$ (34,468.00)</b>	<b>-9%</b>
<b>Other</b>						
Debt Service	\$ -	\$ -		\$ -	\$ -	
Other (Describe):						
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0%</b>
<b>Total Project Budget</b>	<b>\$ 580,311.00</b>	<b>\$ 229,663.00</b>	<b>40%</b>	<b>\$ 733,695.00</b>	<b>\$ 153,384</b>	<b>26%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: **Kitsap Mental Health Services** Project: **OESD 114**

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	36,530	19,276	1	38,911	2,381	7%
Staff	207,203	91,078	0	223,535	16,332	8%
Total Benefits	66,758	21,446	0	65,698	(1,060)	-2%
<b>SUBTOTAL</b>	<b>310,491</b>	<b>131,799</b>	<b>0</b>	<b>328,144</b>	<b>17,653</b>	<b>6%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	-	-		-	-	
Office Supplies	2,014	1,342	1	2,300	286	14%
Other (Describe):	-	-		-	-	
<b>SUBTOTAL</b>	<b>2,014</b>	<b>1,342</b>	<b>1</b>	<b>2,300</b>	<b>286</b>	<b>14%</b>
<b>Administration</b>						
Advertising/Marketing	-	-		-	-	
Audit/Accounting	-	-		-	-	
Communication	3,240	1,261	0	4,329	1,089	34%
Insurance/Bonds	2,430	1,130	0	3,355	925	38%
Postage/Printing	1,890	583	0	120	(1,770)	-94%
Training/Travel/Transportation	4,036	751	0	1,334	(2,702)	-67%
% Indirect (Limited to 5%)	32,842	-	-	17,311	(15,531)	-47%
Other (Describe): Software	4,320	493	0	4,600	280	6%
<b>SUBTOTAL</b>	<b>48,758</b>	<b>4,218</b>	<b>0</b>	<b>31,049</b>	<b>(17,709)</b>	<b>-36%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$0.00		\$ -	\$ -	
Maintenance Contracts	\$ -	\$0.00		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$0.00		\$ -	\$ -	
Repair of Equipment and Property	\$ -	\$0.00		\$ -	\$ -	
Utilities	\$ -	\$0.00		\$ -	\$ -	
Other (Describe): Supervisor Space & Occupancy	\$ -	\$0.00		\$ 2,035	\$ 2,035	
Other (Describe):	\$ -	\$0.00		\$ -	\$ -	
Other (Describe):	\$ -	\$0.00		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ 2,035</b>	<b>\$ 2,035</b>	
<b>Other</b>						
Debt Service	\$ -	\$0.00		\$ -	\$ -	
Other (Describe):	\$ -	\$0.00		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Total Project Budget</b>	<b>\$ 361,263</b>	<b>\$ 137,359</b>	<b>38%</b>	<b>\$ 363,528</b>	<b>\$ 2,265</b>	<b>1%</b>

NOTE: Indirect is limited to 5%

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Sub-Contractor Special Project Budget Form

Sub-Contractor Agency Name: **Kitsap Public Health** Project: **OESD**

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers		\$ -		\$ -	\$ -	
Staff	\$ 5,928	\$ 1,536	26%	\$ 8,324	\$ 2,396	40%
Administrative (Supervision, HR/Acct & Clerical)	\$ 2,085	\$ 543	26%	\$ 2,664	\$ 579	28%
Total Benefits	\$ 1,976	\$ 512	26%	\$ 3,662	\$ 1,686	85%
<b>SUBTOTAL</b>	<b>\$ 9,989</b>	<b>\$ 2,591</b>	<b>26%</b>	<b>\$ 14,649</b>	<b>\$ 4,660</b>	<b>47%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ -	\$ -		\$ -	\$ -	
Office Supplies	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -		\$ -	\$ -	
Audit/Accounting	\$ -	\$ -		\$ -	\$ -	
Communication	\$ -	\$ -		\$ -	\$ -	
Insurance/Bonds	\$ -	\$ -	0%	\$ 568	\$ 568	100%
Postage/Printing	\$ -	\$ -		\$ -	\$ -	
Training/Travel/Transportation	\$ -	\$ -		\$ -	\$ -	
% Indirect (1.5%)	\$ 999	\$ 260	26%	\$ 228	\$ (771)	-77%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 999</b>	<b>\$ 260</b>	<b>26%</b>	<b>\$ 796</b>	<b>\$ (203)</b>	<b>-20%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -		\$ -	\$ -	
Maintenance Contracts	\$ -	\$ -		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$ -		\$ -	\$ -	
Repair of Equipment and Property	\$ -	\$ -		\$ -	\$ -	
Utilities	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Other</b>						
Debt Service	\$ -	\$ -		\$ -	\$ -	
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Total Project Budget</b>	<b>\$ 10,988</b>	<b>\$ 2,851</b>	<b>26%</b>	<b>\$ 15,446</b>	<b>\$ 4,458</b>	<b>41%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: Olympic Educational Service District 114**

**Project: Behavioral Health Counseling Enhancement Project**

**Description**

Number of Professional FTEs	7.21
Number of Clerical FTEs	0.15
Number of All Other FTEs	0.585
<b>Total Number of FTEs</b>	<b>7.95</b>

**Salary Information**

Salary of Executive Director or CEO (.025)	\$ 1,142.00
Salaries of Professional Staff	\$ 244,895.00
Salaries of Clerical Staff	\$ 5,118.00
Other Salaries (Describe Below)	\$ -
Description: Supervisor/project mgr (.50)	\$ 36,921.00
Description: Project evaluation (.15)	\$ 10,987.00
Description:	\$ -
Description:	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 299,063.00</b>
Total Payroll Taxes	\$ 73,802.00
Total Cost of Benefits	\$ 72,190.00
Total Cost of Retirement	\$ 165,425.00
<b>Total Payroll Costs</b>	<b>\$ 610,480.00</b>



June 8, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
Port Orchard, WA 98366

RE: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs: The Olympic Educational Service District 114 Behavioral Health Counseling Enhancement Project.

The Bremerton School District is writing to express support and commitment for the Olympic Educational Service District 114's grant application to provide mental health, chemical dependency and/or therapeutic court programs. The Behavioral Health Counseling Enhancement Project (BHCEP) will provide school-based mental health and substance use prevention and early intervention services to students in Kitsap County. In addition, the BHCEP will provide information and awareness training to school staff, parents and community members about behavioral health issues, including suicide risk.

**Bremerton School District will commit the following resources to the proposal submitted by Olympic Educational Service District 114:**

**Total cash match \$10,675** for the grant period January 1, 2020 – Dec. 31, 2020

**Total in kind match \$43,404.90**

Office space at each school (total square footage 280) – in kind match \$4,860.80

Staff time at View Ridge Elementary School:

- Administrator time (40 hours per year) – in kind match \$2,376.
- Counselor/Intervention Specialist time (108 hours per year) – in kind match \$4,561.92
- Weekly student study/guidance team meetings (7 staff x 1 hour per week, 252 hours per year) – in kind match \$10,644.58

Staff time at Armin Jahr Elementary School:

- Administrator time (40 hours per year) – in kind match \$2,376.
- Individual meetings with teachers (5 hours per week, 180 hours) – in kind match \$7,603.20
- Weekly student study/guidance team meetings (13 staff x 2 hours per month, 260 hours per year) – in kind match \$10,982.40

The school leadership has agreed to support this project to achieve a collective impact focusing on Behavioral Health Prevention, Early Intervention and Training and Recovery supports as part of the Kitsap County Mental Health, Chemical Dependency, and Therapeutic Courts strategic plan continuum of care. **Through the partnership with OESD, KMHS, Bremerton School District and the schools, the collective impact to increase the health and well-being of children and youth in our community will be achieved through the following efforts:**

- Mental Health Therapists will be housed at View Ridge and Armin Jahr Elementary Schools.
- To effectively serve students staff will have access to student class schedules, discipline, and attendance data.
- The Principals at targeted schools will ensure the referral process is operating. This includes allowing time for the BHCEP staff to present at faculty meetings to discuss the program, provide information on the signs and symptoms of suicide, depression, and other behavioral health issues including substance abuse.
- Students will be released from the classroom for the purpose of screenings and referrals, individual counseling support, and support group participation.
- School-based services will be coordinated through building level meetings with administration and counseling staff.
- Work with OESD Program Manager to support evaluation activities (i.e. interviews, surveys and student specific data).
- Schools will release student data for the purpose of program evaluation as per grant requirements.

**Specific collective impact outcomes achieved will be:**

- Early identification of students with behavioral health symptoms
- Immediate access to counseling services for students in need
- Elimination of barriers including time, money, transportation and stigma
- Coordination of care services between school and community resources, eliminating isolated services
- Through early intervention, the long term impact of complex trauma and or Adverse Childhood Experiences (ACES) is mitigated

Sincerely,



Aaron Leavell, Superintendent  
Bremerton School District

June 18, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
Port Orchard, WA 98366

RE: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs: The Olympic Educational Service District 114 Behavioral Health Counseling Enhancement Project

The Bainbridge Island School District is writing to express support and commitment for the Olympic Educational Service District 114's grant application to provide mental health, chemical dependency and/or therapeutic court programs. The Behavioral Health Counseling Enhancement Project (BHCEP) will provide school-based mental health and substance use prevention and early intervention services to students in Kitsap County. In addition, the BHCEP will provide information and awareness training to school staff, parents and community members about behavioral health issues, including suicide risk.

**Bainbridge Island School District will commit the following resources to the proposal submitted by Olympic Educational Service District 114:**

**Total cash match \$7,450** for the grant period of January 1, 2020 – Dec.31, 2020

**Total in kind estimated match \$23,277.76**

Office space at each school (total square footage 566) – in kind match \$9,825.76

Staff time at Bainbridge High School

- Administrator time (45 min. per week, 30 weeks) – in kind match \$1,708
- Weekly student study/guidance team meetings (1 psychologist, 4 counselors for 45 min. per week, 30 weeks) – in kind match \$7,104

Staff time at Eagle Harbor High School

- Administrator time (20 min. per week, 30 weeks) – in kind match \$700
- Counselor time (30 min. per week, 30 weeks) – in kind match \$947
- Weekly student study/guidance team meetings (1 administrator, 1 counselor for 45 min. per week, 30 weeks) – in kind match \$2,993

The school leadership has agreed to support this project to achieve a collective impact focusing on Behavioral Health Prevention, Early Intervention and Training and Recovery supports as part of the Kitsap County Mental Health, Chemical Dependency, and Therapeutic Courts strategic plan continuum of care. **Through the partnership with OESD, KMHS, Bainbridge Island School District and the schools, the collective impact to increase the health and well-being of children and youth in our community will be achieved through the following efforts:**

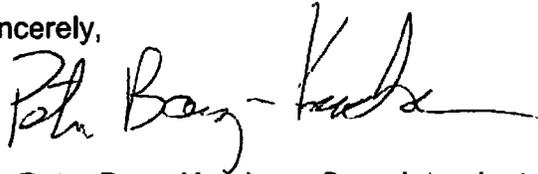
- The Student Assistance Professional will be housed at Bainbridge High School, serving students from both Bainbridge and Eagle Harbor High Schools.

- To effectively serve students staff will have with access to student class schedules, discipline, and attendance data.
- The Principals at targeted schools will ensure the referral process is operating. This includes allowing time for the BHCEP staff to present at faculty meetings to discuss the program, provide information on the signs and symptoms of suicide, depression, and other behavioral health issues including substance abuse.
- Students will be released from the classroom for the purpose of screenings and referrals, individual counseling support, and support group participation.
- School-based services will be coordinated through building level meetings with administration and counseling staff.
- Work with OESD Program Manager to support evaluation activities (i.e. interviews, surveys and student specific data).
- Schools will release student data for the purpose of program evaluation as per grant requirements.

**Specific collective impact outcomes achieved will be:**

- Early identification of students with behavioral health symptoms
- Immediate access to counseling services for students in need
- Elimination of barriers including time, money, transportation and stigma
- Coordination of care services between school and community resources, eliminating isolated services
- Through early intervention, the long term impact of complex trauma and or Adverse Childhood Experiences (ACES) is mitigated

Sincerely,



Dr. Peter Bang-Knudsen, Superintendent  
Bainbridge Island School District

**– Board of Directors –**

ERIC K. GREENE      JEANIE SCHULZE  
 ROBERT C. MACDERMID      SCOTT R. WOEHRMAN  
 BRUCE J. RICHARDS


**Central Kitsap School District**

ERIN PRINCE, PHD  
 SUPERINTENDENT

9210 SILVERDALE WAY NW  
 MAILING ADDRESS: PO BOX 8  
 SILVERDALE, WASHINGTON 98383  
 (360) 662-1610 • Fax: (360) 662-1611  
[www.ckschools.org](http://www.ckschools.org)

July 8, 2019

Kitsap County Citizens Advisory Board  
 C/O Kitsap County Human Services  
 Port Orchard, WA 98366

RE: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs: The Olympic Educational Service District 114 Behavioral Health Counseling Enhancement Project.

The Central Kitsap School District is writing to express support and commitment for the Olympic Educational Service District 114's grant application to provide mental health, chemical dependency and/or therapeutic court programs. The Behavioral Health Counseling Enhancement Project (BHCEP) will provide school-based mental health and substance use prevention and early intervention services to students in Kitsap County. In addition, the BHCEP will provide information and awareness training to school staff, parents and community members about behavioral health issues, including suicide risk.

**Central Kitsap School District will commit the following resources to the proposal submitted by Olympic Educational Service District 114:**

**Total cash match \$28,200** for the grant period of January 1, 2020 – Dec. 31, 2020

**Total in kind match \$51,505.76**

- Office space at each school (total square footage 955) – in kind match \$16,578.80
- Staff time:
  - ✓ Administrator time (20 hours per year x 4 schools) – in kind match \$6,294
  - ✓ Counselor/Intervention Specialist time (36 hours per year x 4 schools) – in kind match \$7,693.92
  - ✓ Weekly student study/guidance team meetings (4 staff x 45 min. week, 108 hours per year x 4 schools) – in kind match \$20,939.04

The school leadership has agreed to support this project to achieve a collective impact focusing on Behavioral Health Prevention, Early Intervention and Training and Recovery supports as part of the Kitsap County Mental Health, Chemical Dependency, and Therapeutic Courts strategic plan continuum of care. **Through the partnership with OESD, KMHS, Central Kitsap School District and the schools, the collective impact to increase the health and well-being of children and youth in our community will be achieved through the following efforts:**

- A Mental Health Therapist will be housed at Woodlands Elementary School and a Student Assistance Professional will be housed at Central Kitsap High School, Olympic High School, and Klahowya Secondary School.
- To effectively serve students staff will have access to student class schedules, discipline, and attendance data.
  - The Principals at targeted schools will ensure the referral process is operating. This includes allowing time for the BHCEP staff to present at faculty meetings to discuss the program, provide information on the signs and symptoms of suicide, depression, and other behavioral health issues including substance abuse.
- Students will be released from the classroom for the purpose of screenings and referrals, individual counseling support, and support group participation.
- School-based services will be coordinated through building level meetings with administration and counseling staff.
- Work with OESD Program Manager to support evaluation activities (i.e. interviews, surveys and student specific data).
- Schools will release student data for the purpose of program evaluation as per grant requirements.

**Specific collective impact outcomes achieved will be:**

- Early identification of students with behavioral health symptoms
- Immediate access to counseling services for students in need
- Elimination of barriers including time, money, transportation and stigma
- Coordination of care services between school and community resources, eliminating isolated services
- Through early intervention, the long term impact of complex trauma and or Adverse Childhood Experiences (ACES) is mitigated

Sincerely,



Dr. Erin Prince, Superintendent  
Central Kitsap School District



Superintendent's Office  
 Dr. Lauryann Evans  
 18360 Caldart Ave NE  
 Poulsbo, WA 98370  
 Phone (360) 396-3004

June 8, 2019

Kitsap County Citizens Advisory Board  
 C/O Kitsap County Human Services  
 Port Orchard, WA 98366

RE: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs: The Olympic Educational Service District 114 Behavioral Health Counseling Enhancement Project.

North Kitsap School District is writing to express support and commitment for the Olympic Educational Service District 114's grant application to provide mental health, chemical dependency and/or therapeutic court programs. The Behavioral Health Counseling Enhancement Project (BHCEP) will provide school-based mental health and substance use prevention and early intervention services to students in Kitsap County. In addition, the BHCEP will provide information and awareness training to school staff, parents and community members about behavioral health issues, including suicide risk.

**North Kitsap School District will commit the following resources to the proposal submitted by Olympic Educational Service District 114:**

**Total cash match \$15,785** for the grant period January 1, 2020 – Dec. 31, 2020

**Total in kind match \$32,054.56**

Office space at each school (total square footage 200) – in kind match \$3,472

Staff time at North Kitsap High School:

- Administrator time (20 hours per year) – in kind match \$1,545.40
- Counselor/Intervention Specialist time (36 hours per year) – in kind match \$1,968.84
- Weekly student study/guidance team meetings (4 staff x 2 hours per week, 288 hours per year) – in kind match \$15,675.84

Staff time at Suquamish Elementary School:

- Administrator time (20 hours per year) – in kind match \$1,545.20
- Counselor/Intervention Specialist time (36 hours per year) – in kind match \$1,968.84
- Weekly student study/guidance team meetings (4 staff x 45 min. week, 108 hours per year) – in kind match \$5,878.44

The school leadership has agreed to support this project to achieve a collective impact focusing on Behavioral Health Prevention, Early Intervention and Training and Recovery supports as part of the Kitsap County Mental Health, Chemical Dependency, and Therapeutic Courts strategic plan continuum of care. **Through the partnership with OESD, KMHS, North Kitsap School District and the schools, the collective impact to increase the health and well-being of children and youth in our community will be achieved through the following efforts:**

- A Mental Health Therapist will be housed at Suquamish Elementary School and a Student Assistance Professional will be housed at North Kitsap High School.
- To effectively serve students staff will have access to student class schedules, discipline, and attendance data.
- The Principals at targeted schools will ensure the referral process is operating. This includes allowing time for the BHCEP staff to present at faculty meetings to discuss the program, provide information on the signs and symptoms of suicide, depression, and other behavioral health issues including substance abuse. Students will be released from the classroom for the purpose of screenings and referrals, individual counseling support, and support group participation.
- School-based services will be coordinated through building level meetings with administration and counseling staff.
- Work with OESD Program Manager to support evaluation activities (i.e. interviews, surveys and student specific data).
- Schools will release student data for the purpose of program evaluation as per grant requirements.

**Specific collective impact outcomes achieved will be:**

- Early identification of students with behavioral health symptoms
- Immediate access to counseling services for students in need
- Elimination of barriers including time, money, transportation and stigma
- Coordination of care services between school and community resources, eliminating isolated services
- Through early intervention, the long-term impact of complex trauma and or Adverse Childhood Experiences (ACES) is mitigated

Sincerely,



Dr. Laurynn Evans, Superintendent  
North Kitsap School District

# SOUTH KITSAP SCHOOL DISTRICT

ATTACHMENT I

Nurturing Growth • Inspiring Achievement • Building Community

June 8, 2019

Kitsap County Citizens Advisory Board  
C/O Kitsap County Human Services  
Port Orchard, WA 98366

RE: Letter of Commitment to provide Mental Health, Chemical Dependency and Therapeutic Court Programs: The Olympic Educational Service District 114 Behavioral Health Counseling Enhancement Project.

The South Kitsap School District is writing to express support and commitment for the Olympic Educational Service District 114's grant application to provide mental health, chemical dependency and/or therapeutic court programs. The Behavioral Health Counseling Enhancement Project (BHCEP) will provide school-based mental health and substance abuse prevention and early intervention services to students in Kitsap County. In addition, the BHCEP will provide information and awareness training to school staff, parents and community members about behavioral health issues, including suicide risk.

**South Kitsap School District will commit the following resources to the proposal submitted by Olympic Educational Service District 114:**

**Total cash match \$25,360** for the grant period of January 1, 2020 – Dec. 31, 2020

**Total in kind match: \$58,787.12**

Office space at each school (total square footage 497) – in kind match \$8,627.92

Staff time at East Port Orchard, Sidney Glen and Burley Glenwood:

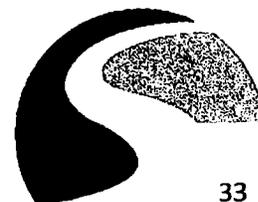
- Administrator time (20 hours per year x 3 schools) – in kind match \$4,104.60
- Counselor/Intervention Specialist time (36 hours per year x 3 schools) – in kind match \$5,983.20
- Weekly student study/guidance team meetings (4 staff x 45 min. week, 108 hours per year per school) – in kind match \$17,172.

Staff time at Olalla Elementary:

- Administrator time (20 hours per year) – in kind match \$1,368.20

South Kitsap School District  
2689 Hoover Ave SE  
Port Orchard, WA 98366

(360) 874-7000 Office  
(360) 874-7068 Fax  
[www.skschools.org](http://www.skschools.org)



# SOUTH KITSAP SCHOOL DISTRICT

ATTACHMENT I

Nurturing Growth • Inspiring Achievement • Building Community

- Counselor/Intervention Specialist time (36 hours per year) – in kind match \$1,994.40
- Weekly student study/guidance team meetings (8 staff x 45 min. week, 216 hours per year) – in kind match \$11,448.

## Staff time at South Kitsap High School:

- Administrator time (20 hours per year) – in kind match \$1,597.20
- School Counselor time (60 hours per year) – in kind match \$3,324
- Coordination and consultation with Assistant Principals and Deans (50 hours per year) – in kind match \$3,167.60

The school leadership has agreed to support this project to achieve a collective impact focusing on Behavioral Health Prevention, Early Intervention and Training and Recovery supports as part of the Kitsap County Mental Health, Chemical Dependency, and Therapeutic Courts strategic plan continuum of care. **Through the partnership with OESD, KMHS, South Kitsap School District and the schools, the collective impact to increase the health and well-being of children and youth in our community will be achieved through the following efforts:**

- Mental Health Therapists will be housed at East Port Orchard, Olalla, Sidney Glen and Burley Glenwood Elementary Schools; a Student Assistance Professional will be housed at South Kitsap High School.
- To effectively serve students staff will have access to student class schedules, discipline, and attendance data.
- The Principals at targeted schools will ensure the referral process is operating. This includes allowing time for the BHCEP staff to present at faculty meetings to discuss the program, provide information on the signs and symptoms of suicide, depression, and other behavioral health issues including substance abuse.
- Students will be released from the classroom for the purpose of screenings and referrals, individual counseling support, and support group participation.
- School-based services will be coordinated through building level meetings with administration and counseling staff.
- Work with OESD Program Manager to support evaluation activities (i.e. interviews, surveys and student specific data).

South Kitsap School District  
2689 Hoover Ave SE  
Port Orchard, WA 98366

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# SOUTH KITSAP SCHOOL DISTRICT

ATTACHMENT I

Nurturing Growth • Inspiring Achievement • Building Community

- Schools will release student data for the purpose of program evaluation as per grant requirements.

**Specific collective impact outcomes achieved will be:**

- Early identification of students with behavioral health symptoms
- Immediate access to counseling services for students in need
- Elimination of barriers including time, money, transportation and stigma
- Coordination of care services between school and community resources, eliminating isolated services
- Through early intervention, the long term impact of complex trauma and or Adverse Childhood Experiences (ACES) is mitigated

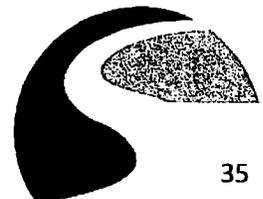
Sincerely,



Tim Winter, Superintendent  
South Kitsap School District

South Kitsap School District  
2689 Hoover Ave SE  
Port Orchard, WA 98366

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**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Summary Page**

Continuation Grant Proposals should be submitted by current grantees whose projects were funded during the 2019 Grant Cycle to request one additional budget period of funding for a project period that would otherwise expire. Continuation Grant Proposals will only be accepted from organizations who attended the **MANDATORY** Continuation Grant Proposer Conference and submitted a **MANDATORY** Continuation Grant Proposal Letter of Intent.

**Organizational Information**

Organization Name: West Sound Treatment Center

Primary Contact: Ken Wilson                      Ken.wilson@wstcs.org                      360-876-9430  
Name    Email    Phone

Organization Address: 1415 Lumsden RD      Port Orchard                      WA                      98367  
Street    City    State    Zip

Federal Tax ID Number: 91-1184237                      Legal Status of Organization: Non-Profit

Individual Authorized to Sign Contracts: Ken Wilson                      Executive Director  
Name    Title

**Continuation Grant Proposal Information**

Proposal Title: New Start Program

Number of Individuals Screened: 300                      Number of Individuals Served: 280

Requested Amount of Funding: \$374,000                      Matching Funds: \$50,100

**Please check which area(s) of the Continuum this project addresses:**

<input checked="" type="checkbox"/> Prevention	<input type="checkbox"/> Medical and Sub-Acute Detoxification
<input type="checkbox"/> Early Intervention	<input type="checkbox"/> Acute Inpatient Care
<input type="checkbox"/> Crisis Intervention	<input checked="" type="checkbox"/> Recovery Support Services
<input checked="" type="checkbox"/> Outpatient treatment	

**Please check which area(s) of the County this project is focused:**

<input type="checkbox"/> South Kitsap	<input type="checkbox"/> City of Bremerton
<input type="checkbox"/> Central Kitsap	<input type="checkbox"/> Other City: _____
<input type="checkbox"/> North Kitsap	<input checked="" type="checkbox"/> County-Wide

**Proposal Summary**

The proposed grant funds in the amount of 374,000 will support two FTE Counselors, .5 Administration, 1.0 Assessor, 1.0 Success Coach, .5 Program Case Manager, .5 Transport Coordinator and two .5 Housing Case Managers. The New Start Program will provide SUD and Court Mandated Assessments, Level 1.0 Relapse Prevention in-jail service, re-entry services and continuing care at WSTC including Chemical Dependency Treatment and wrap-around services (case management and skill building supports). These funds will also provide 2 supportive transitional houses (one male, one female) with case management and support for chronically homeless and chemically dependent inmates exiting the jail

Ken Wilson                      Executive Director                      7/22/19  
Signature    Title    Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Checklist Form**

Name of Program: New Start Program

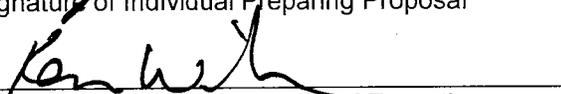
Organization Submitting: West Sound Treatment Center

Item or Attachment	Yes	No	N/A	Initial
Project funds are used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services	✓			Jw
Organization had a representative at the Mandatory Continuation Grant Proposer Conference	✓			Jw
Organization submitted a Mandatory Letter of Intent online for Continuation Grant Proposals by <b>May 31, 2019 by 3:00 p.m.</b>	✓			Jw
Organization did receive funding for this project in 2019	✓			Jw
Attachment A – Continuation Grant Proposal Summary Page	✓			Jw
Attachment B – Continuation Grant Proposal Checklist Form	✓			Jw
Organization checked, initialed and signed Continuation Grant Proposal Checklist	✓			Jw
Attachment C – Continuation Grant Proposal Narrative Template	✓			Jw
Proposal Narrative is limited to 10 pages	✓			Jw
Attachment D – Continuation Grant Proposal Evaluation Worksheet	✓			Jw
Attachment E – Total Agency Budget Form	✓			Jw
Attachment F – Continuation Grant Proposal Special Project Budget Form	✓			Jw
Indirect is limited to 5%	✓			Jw
Attachment G – Continuation Grant Proposal Sub-Contractor Special Project Budget Form			✓	Jw
Organization submitted Attachment G for each Sub-Contractor			✓	Jw
Sub-Contractor indirect limited to 5%			✓	Jw
Attachment H – Continuation Grant Proposal Project Salary Summary	✓			Jw
Attachment I – Letter of Resource Commitment (optional)			✓	Jw
No other attachments are included	✓			Jw
The original (1) proposal and fifteen (15) additional copies, including all supporting material are included	✓			Jw
Organization will make staff available for their scheduled question and answer session the week of September 10 – 13, 2019	✓			Jw

I certify that I have completed each item and included each attachment, checked and initialed above and submitted with my final grant proposal. I understand that if my application is incomplete it will not be reviewed.

  
Signature of Individual Preparing Proposal

7/22/19  
Date

  
Signature of Organization's Chief Executive

7/22/19  
Date

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Narrative Template**

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**1. Project Description (20 points)**

A. Project Design

The West Sound Treatment Center (WSTC) New Start Program is currently providing comprehensive chemical dependency treatment and re-entry services at the Kitsap County Jail. The primary focus of New Start is to reduce the psychological and social impairment of inmates with substance use disorders, and to connect them with community resources that will assist in the maintenance of long-term abstinence and successful re-entry into the community. New Start creates a cross-system partnership which enables individuals in the jail with substance use disorders to become engaged in chemical dependency treatment. In addition, New Start provides connective services to community resources that address barriers inmates experience when re-entering the community. The New Start Program provides in jail assessment, in jail chemical dependency classes, community re-entry, supportive case management and housing services. The primary focus of the program is on the substance use problems of the individuals, as well as the cognitive, social, and vocational skills necessary for successful re-entry into the community. The continuation of this program seeks to achieve the following goals; increase the number of stable housing options for chemically dependent residents of Kitsap County, Reduce the number of people in Kitsap County who recycle through the criminal justice systems, reduce the number of chemically dependent adults from further criminal justice system involvement, reduce the incidence and severity of chemical dependency disorders in adults, and improve the health status and well-being of Kitsap County residents. This proposal adds to the original proposal with the addition of a full time Success Coach to provide case management services to inmates being released from jail to assist with the transition to the community and assistance with engaging in services.

The following is a description of each applicable position pertaining to the New Start Program. All West Sound Treatment Center staff must go through a rigorous screening process.

**Operations Director (.5 PTE)**

Provides financial and contractual oversight as well as staff supervision including development and implementation of policy and procedures, and development of community partnerships. Routine involvement in monthly community provider meetings. 19+ years' experience in case management/residential housing/direct client services including 7+ years in administration and programs coordination.

**(CDP/T) Chemical Dependency Professional/Chemical Dependency Professional Training (2.0 FTE)**

Provides screening, comprehensive assessments, and outpatient treatment based on the MRT model, in the Kitsap County Jail. Establishes individual service plans, provides

individual and group counseling. Must maintain current CDP/T credentials. Clinicians *must* be MRT certified.

**(CDP/T) Chemical Dependency Professional/Assessor (1.0 FTE)**

Provides continuing care outpatient treatment at WSTC based on MRT model in the Kitsap County Jail. Provides Substance Use Disorder (SUD) Assessments, and Court Mandated Assessments (including Behavioral Health Court Assessments) as needed, for incarcerated clients. Establishes individual service plans and provides individual and group counseling only in the absence of CDP. Must maintain current CDP/T credentials. Clinicians *must* be MRT certified.

**Success Coach (1.0 FTE)**

The New Start Success Coach provides case management services to the participants being released from Kitsap County Jail. They will work closely with the Port Gamble S'Klallam Tribe pre-release Success Coaches in the jail, the Re-entry officers in the jail, as well as the Bremerton LEAD Program. This case management position is responsible for a variety of record keeping and interpersonal tasks as well as the coordination and provision of services to New Start participants who are transitioning from jail to the community. This position will also facilitate transportation to important appointments and to referrals to outside agencies to ensure a continuum of care. The Success Coach will create Individual Service Plans which include goal setting and will facilitate supervised drug and alcohol tests and keep records to report on progress. The Success Coach will be trained in Motivational Interviewing, Trauma Informed Care, ACES/Resiliency, and Mental Health First Aid.

**Lead Housing Case Manager (.5 FTE)**

Oversees the housing case managers as well as their own house(s). Confirms the collection and submission of client information for reporting purposes, conducts the supervision and training of the housing case management team, and continues to facilitate strong and viable community partnerships. Also accountable for the daily upkeep, maintenance, and repair of the facilities and conducting monthly inspections of the houses, as well as ensuring there are no contraband items inside the facilities. Responsible for the intake, evaluation, coordination and provision of services to housing participants. This includes helping to transport clients to essential appointments when other transportation options are not available. The Lead housing case manager will be trained in Motivational Interviewing, Trauma Informed Care, ACES/Resiliency, and Mental Health First Aid.

**Housing Case Manager (.5 FTE)**

Responsible for the day-to-day oversight of the housing daily upkeep of the house and conducting monthly inspections as well as ensuring there are no contraband items inside the premises. This case management position is responsible for a variety of record keeping and interpersonal tasks such as intake, evaluation, coordination and provision of services to housing participants. Collects and submits client information for reporting purposes while adhering to the Washington Administrative Codes (WAC) and laws pertaining to confidentiality and continue to facilitate strong and viable community partnerships. This includes helping to transport clients to essential appointments when other transportation options are not available. The housing case manager will be trained

in Motivational Interviewing, Trauma Informed Care, ACES/Resiliency, and Mental Health First Aid.

**Program Case Manager (.5 FTE)**

Responsible for continued follow-up with program participants after client has been referred to community resources. Conducts 30/60/90-day review of clients who are not in the care of our housing case managers or in the care of WSTC therapy. This position is responsible for a variety of record keeping collecting appropriate data and submit client information for reporting purposes while adhering to the Washington Administrative Codes (WAC) and laws pertaining to confidentiality. Provides case management services that include direct linkages to community partner agencies as needed. Must have extensive experience in relapse prevention and working knowledge of community resources.

**Transport Coordinator (.5 FTE)**

Responsible for transporting clients to essential appointments, other treatment agencies including inpatient/detox facilities and any other transportation needs that pertains to the clients' recovery and care. This position ensures that the client will be transported into locations that are safe and sober.

B. Outreach

New Start counselors participate in jail staffing once per month with jail staff and other Program Leads to provide information and to answer questions from the inmates incarcerated in the Kitsap County Jail. The New Start Program/Operations Director attends monthly Program Lead meetings at the Kitsap County Jail to discuss program progress. These meetings are a crucial aspect of expanding services for participants. West Sound also has a partnership with Port Gamble S'Klallam Tribe with providing post-release Success Coaches. Housing case managers attend routine monthly providers meetings including the Re-entry task force meeting as well as the Bremerton LEAD Program meetings. West Sound shares agency information and community resources to ensure service providers continue to evolve and become the safety net for our community and clients. These services will promote and support the offenders' successful re-entry into the community.

WSTC board and its staff represent the diversity of the communities on the Kitsap Peninsula. At least 20 percent of the staff represent various races, including Hispanic, native American and Asian/ Pacific Islander and WSTC has representation of the LGBTQ community. The remaining staff members are Caucasian. The board members consist mostly of Caucasian, but recently have been able to diversify with the addition of a member of the LGBTQ community and Persian decent. The diversity of the staff serves to heighten the sensitivity of the staff to the substance abuse challenges faced by those population groups and enables staff to tailor each client's treatment based on cultural factors and others, including age and income. The current and past racial, gender, and age diversity within WSTC enabled West Sound to reflect the overall demographics of the communities we serve. Equally important is the fact that many staff and past and current board members have experienced substance use disorder and

serve as a peer support network. This drives their passion to alleviate the suffering and create broad community impact that supports our mission.

Through this outreach, WSTC plans to screen 300 individuals and provide services to 280 participants.

## **2. Accomplishments to Date (40 Points)**

### A. Evaluation

**Goals:** To provide Chemical Dependency treatment, and re-entry preparation services to offenders for successful re-entry into the community; reduce recidivism by providing comprehensive support and basic need services once the offender is released into the community; provide clean and sober supportive housing and mend the community gap for chronically homeless inmates with substance abuse disorder; ensure that the program services meet participant needs and support improvements in health, wellbeing and stability.

**Outcomes:** We have the following participant objectives: 80% of inmates deemed New Start program eligible by assessment will enter program (begin services) within one month from January 1<sup>st</sup>, 2020- December 31<sup>st</sup>, 2020, 60% of housed program clients will remain sober, 60% of re-entry program participants will successfully complete (graduate) program, 70% of participants referred to Peninsula Community Health Services will engage in services (attend appointment), 55% of participants will not have a new arrest pre-charge, 70% of participants will not have a new charge, 85% of participants will not have a new conviction, 60% will be in compliance with Department of Corrections, and total number of bed dates for each new start participant who reoffends will not exceed 6 per quarter. New Start supportive housing will maintain 88% of housing capacity each quarter. Following goals for improved health based on client self-reports: 75% in physical health, 60% in mental/emotional health, 75% report knowledge and skills gained to prevent relapse. 60% participants employed/in school, to have obtained/regained their license, and be able to obtain stable housing by the time of discharge.

### **Progress to Date:**

Our progress from Jan. 1, 2019-March 31, 2019:

**Goal #1:** Provide Chemical Dependency treatment and re-entry preparation services to offenders for successful re-entry into the community.

**Objective 1:** 80% of inmates deemed New Start Program eligible by assessment will enter the program (begin services) within 1 month from January 1<sup>st</sup>, 2019 to March 31<sup>st</sup>, 2019.

**Progress:** 75% of inmates deemed New Start Program eligible by assessment entered the program (begin services) within 1 month from January 1<sup>st</sup>, 2019 to March 31<sup>st</sup>, 2019.

**Objective 2:** 80% of program clients will remain sober while incarcerated. 54% of program clients will remain sober while housed.

**Progress:** Unable to track sobriety while incarcerated due to in-jail limitations. 54% of program clients remained sober while housed.

**Objective 3:** 60% of re-entry program participants successfully complete (graduate) program.

**Progress:** 0% as of first quarter of 2019.

**Goal #2:** Reduce recidivism by providing comprehensive support and basic need services once the offender is released into the community.

**Objective 4:** 70% of participants referred to Peninsula Community Health Services will engage in services (attend appointment)

**Progress:** 100% of participants referred to Peninsula Community Health Services have engaged in services (attended appointment)

**Objective 5:** 55% of participants will not re-offend since enrollment with a new arrest pre-charge. 70% of participants will not re-offend since enrollment with a new charge. 85% of participants will not re-offend since enrollment with a new conviction. 60% of participants will not re-offend since enrollment with non-compliance (Department of Corrections)

**Progress:** 91% of participants have not re-offended since enrollment with a new arrest pre-charge. We are currently working with our epidemiologist to reevaluate our objective metrics and replace this metric with one that is obtainable with data provided in the jail.

**Goal #3:** Provide clean and sober supportive housing and fill the community gap for chronically homeless inmates with substance use disorder.

**Objective 6:** New Start supportive housing will maintain 88% of housing capacity each quarter.

**PROGRESS:** New Start supportive housing maintained 63% of housing capacity first quarter.

**Goal #4:** Program services meet participant needs and support improvements in health and wellbeing and stability.

**Objective 7:** 75% of participants agree their physical health has improved.

**PROGRESS:** 75% of participants agree their physical health has improved.

**Objective 8:** 60% of participants agree that their mental/emotional health has improved.

**PROGRESS:** 75% of participants agree their mental health has improved.

**Objective 9:** 75% of participants agree they can utilize the knowledge gained through the program to prevent a future relapse.

**PROGRESS:** 100% of participants agree they can utilize the knowledge gained through the program to prevent a future relapse.

**Objective 10:** 60% of participants are employed/in school when they complete services.

**PROGRESS:** 14% of participants are employed/in school for first quarter.

**Objective 11:** 60% of participants obtain or regain/regain their license when they complete services.

**PROGRESS:** 14% of participants obtained of regained their license for first quarter.

**Objective 12:** 60% of participants transfer to stable housing when discharged from services.

**PROGRESS:** 58.3% of participants have transferred to stable housing when discharged from services.

## B. Barriers to Implementation

There were four (4) significant and persistent barriers encountered this past year which we have been able to partially resolve with our plan of action moving forward.

- **Barrier #1: Housing**

The greatest need for our participants is housing. According to the 2019 Kitsap Count PIT Count, the number of unsheltered individuals rose from 2018 by 17%, indicating an increased need for housing options. Upon release, individuals returning to homelessness typically failed to fully engage in treatment and follow-up care with no contact. To address this barrier, WSTC has 16 transitional beds for New Start clients.

The housing crisis makes it difficult for participants to remain sober and focus on recovery. New Start Housing Case Managers are supportive and continue to be proactive by assessing inmates for success potential and streamlining the process for housing and referrals. New Start Participants are released from jail directly to our staff where they can be provided transportation and support securing Continuing Care Treatment, as well as assistance quickly locating and obtaining community resources for basic necessities, including health insurance and food assistance. New Start strives to provide clients with individualized case management services to aid in the reduction of recidivism. The New Start clients and the community would continue to benefit from having additional housing, transportation and supportive case management services to assist participants in their recovery.

Evidence exists to support this assertion. Between January 1<sup>st</sup> and March 31<sup>st</sup>, 2019, our New Start housing has maintained filled units at 63%. These numbers continue to rise for our second quarter as we now provide housing interviews in the jail to incarcerated inmates when need for housing is known instead of waiting until they have a release date as well as approaching each active housing participant's issues/relapses as a treatment team to help ensure compliance with treatment and housing. Our working relationship with the Re-entry officers in the jail also involves referrals which further expands housing opportunities to inmates. As we head into third quarter, this need is reinforced by maintaining full capacity and a housing wait-list.

- **Barrier #2: Transport Vehicles**

Housing supportive case managers provide transportation and support to New Start participants. This includes taking participants to court dates, mental health appointments, inpatient treatment, jail pickup and transport. New Start also transports participants to Continuing Care treatment services, medical care appointments, Apple Health Benefits appointments, DOL for picture ID, DSHS to

apply for food benefits, emergency basic need items, etc. The New Start program would continue to benefit from the maintenance and upkeep of two (2) transport vans to better assist housing participants in making their appointments.

- ***Barrier #3: Increased Demand for Court Mandated and Referral Assessments***

The amount of assessment referrals and court mandated assessments exceeds current staff capabilities. The New Start Program is the main contact for (in-jail) assessments in Kitsap County. We accept referrals from Kitsap Municipal Court, Bremerton Municipal Court, Behavioral Health Court, Poulsbo Municipal Court, Suquamish Municipal Court, Kitsap County Public Defender's Office, Private attorneys, Coffee Oasis, Kitsap Connect, Port Gamble and Kitsap Mental Health. The New Start Program and the community would benefit to have a full time Court Mandated and Referral Assessment Counselor to focus on completing these assessments and getting the clients the services, they need.

- ***Barrier #4: Client Transitioning from Jail to Community.***

The New Start Program is proud to provide a WRAP around care within the WSTC programs; we also partner with organizations in the community. New Start Program CDP/T's continue to refer out offenders directly to other agencies to ensure exiting/ exited offenders can get the best care possible. With the addition of a full time Success Coach, each New Start participant would get 1:1 case management immediately following their release from Jail. This position would facilitate much needed transportation, coordination, and provision to important appointments and to referrals to outside agencies to ensure a continuum of care. The Success Coach will also create Individual Support Plans with each participant which will include goal setting. The biggest intent of this new position is to further assist New Start participants with obtaining the needed resources they will need in order to become self-sufficient and be successful in their transition to the community. There is also a need for this position based on the needs of other agencies. The Success Coach would also be working closely with the Port Gamble S'Klallam Tribe as well as the Bremerton L.E.A.D. Program to facilitate much needed 1:1 case management for those transitioning from the jail to community.

### C. Key Accomplishments

The evaluation outcomes that we are most proud of includes the positive impact on our community as we have assisted with the reduction of recidivism in our county jail, assisted many participants with eliminating barriers in their life and helped to reduce the rate of relapses.

West Sound Treatment Center continues to cultivate and maintain multiple community relationships in an effort to expand its collective impact in the community. These relationships include; Lieutenant Sapp and the Kitsap County Jail staff, Bremerton Municipal Court, Behavioral Health Court, Drug Court/Vet Court, Kitsap Connect,

Kitsap Community Resources, Kitsap Recovery Center, Kitsap Mental Health, Peninsula Community Health Services, Suquamish Tribe, Express Employment Professionals, Worksource, Bremerton Housing Authority, and Kitsap Mental Health Services.

In addition to these continued relationships with outside agencies, West Sound has also gained many new community partners. This includes partnerships with Kitsap County's Lead Program, the Port Gamble S'Klallam Tribe with our implementation of Success Coaches to help facilitate the transition of our participants from incarceration to the community, NaphCare MAT program in the jail, and routine participation at several monthly provider meetings in our county.

West Sound Treatment Center understands the importance for local behavioral health service providers and partners working together and plans to continue its mission of community outreach to ensure its participants are benefited with a coordinated system that works towards improving the overall health of the community.

A large part of the New Start Programs' success can be attributed directly to the compassion and hard work of New Start staff and their commitment to service. New Start takes pride in our evidence-based models of therapy and treatment. The New Start Program continues to provide 16 bed transitional housing programs paired with supportive case management services. New Start has been able to develop a streamlined process for transferring participants from Continuing Care to Inpatient and Intensive Outpatient treatment. The New Start team has formulated collaborative relationships with community agencies to transfer participants when continuing care treatment is no longer appropriate. To further each participant's success every New Start Program participant is given the opportunity to enroll in our Community Outreach Recovery Education (CORE) Program to further assist with overcoming barriers on their journey to self-sufficiency. New Start continues to provide a critical and far reaching impact on those needing assessments, treatment and supportive re-entry services to those who would otherwise have not received these services at all.

### **3. Budget Narrative (30 Points)**

#### A. Funding Request

1. Total salaries (Two FTE New Start Counselors, One FTE Assessor, One FTE Success Coach, One PTE Program Case Manager, Two PTE Housing Case Managers, One PTE Transport Coordinator, One PTE Program Director): \$266,000
  - Fringe Benefits: \$39,900
  - Equipment: \$3,000 (IT equipment)
  - Office Supplies (MRT books, ink, ect.): \$2000
  - Audit/Accounting: \$1,500
  - Insurance/Bonds: \$1,500
  - Training/Travel/Transportation: \$1,500
  - Operations and Maintenance: \$15,000
  - Transportation (Gas, Insurance, tolls): \$8,000
  - Repairs of Equipment and Property (for houses and vehicles): \$4,000

- Utilities (for two houses): \$15,000
- Rental fees: \$61,200
- Lab Fees: \$500
- Basic Needs (Bus passes and basic needs to assist clients): \$3,000
- Total requested Funding for 12 months New Start Program: \$374,000
- Total WSTC committed in-kind: \$50,100

#### B. Past Expenditures and Budget Modifications

##### Past Expenditures.

1. Budget line expenditures to date include; (Jan 1, 2019- May 31<sup>st</sup>, 2019).
  - Total Salaries: \$69,937.54
  - Fringe benefits: \$10,000
  - Equipment: \$504.58
  - Office Supplies: \$541.30
  - Audit/Accounting: \$400
  - Insurance/Bonds: \$400
  - Training/Travel/Transportation: \$0
  - %Indirect (Operations and Maintenance): \$5,104.83
  - Transportation: \$2,956.67
  - Repair of Equipment and Property: \$1246.96
  - Utilities: \$3,414.08
  - Rentals: \$20,080
  - Quick Dip UAs \$40.44
  - Basic Needs: \$655.46
  - Total expenditures = \$115,281.86. We anticipate expending the remaining contract funds in full (\$223,718.14) by December 31, 2019.

##### **Funding Modifications.**

Due to the community need and the lack of resources available to chronically homeless inmates in Kitsap County jail, the New Start Program would like to add the following resources.

##### **Success Coach (1.0 FTE)**

Due to the high demand and lack of New Start resources, New Start is proposing to acquire a full-time Success Coach to facilitate case management services for inmates transitioning out of jail into the community for post release. This Success Coach would work closely with the Port Gamble S'Klallam Tribe Success Coaches and Re-entry officers in the jail, as well as the Bremerton LEAD Program. The Success Coach would transport participants in the New Start Program to essential appointments, complete a variety of record keeping and interpersonal tasks such as intake, evaluation, coordination and provision of services to participants. Total anticipated salary would be \$35,000

**(CDP/T) Chemical Dependency Professional/Assessor (1.0 FTE)**

Due to the high demand and lack of New Start resources, New Start is proposing to acquire a full time CDP(T) to focus primarily on court mandated chemical dependency and referral assessments. New Start is currently the primary source of chemical dependency assessments at the Kitsap County Jail and has been unable to meet the high demand of referrals and court mandated assessments. Per the first quarter, there were a total of 133 requests made from inmates for enrollment/assessment in the New Start Program. A total of 28 assessments were completed. This shows a high need for a full-time assessor in the jail. Total anticipated salary would be \$35,000

In addition to these modified positions, WSTC has increased the amount requested for Fringe Benefits and rental fees to reflect the needed amount it will cost to run this program for one year.

**4. Sustainability (10 Points)****A. Sustainability Plan**

WSTC have been very successful in leveraging Federal Medicaid Funds through the Affordable Care Act. Currently of the 24 participants engaged in Outpatient or Continuing Care treatment services at WSTC, 100% are eligible for Medicaid funding. This funding covers the majority of the cost for treatment services. WSTC has developed a sustainability plan based on the following formula; Quality Leadership (plus) Adaptability (plus) Program Capacity (equals) Sustainability. WSTC has maintained financial adaptability by seeking a diverse funding base and taking decisive action when faced with challenges. Federal Medicaid funding is a large part of WSTC's sustainability plan.

Each participant is charged a rent amount each month which helps to offset extra costs involved in maintaining two New Start houses.

Financial sustainability for this program starts with the board and the efforts made to improve private donor donations, fund raising events, and oversight. These donations can, at least, help sustain this program and fill in gaps. West Sound continues to assess all programs to determine feasibility and cost efficiency. With the leadership of the Executive Director spending has been normalized making the overhead lower. Staffing was restructured to maximize each position keeping payroll at minimum allowing for a higher cash flow. Hiring a Financial Director and contracting with a local CPA firm has given us the needed oversight keeping our program operating within the means of the agency. This had to happen in order for us, as an agency, to become sustainable across the board. With the new financial direction West Sound will be able to seek new grants and other funding sources to offset costs and fill in gaps of this program and any other program we have deemed viable for the company.

**PROJECT NAME:** New Start Program

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
<p>Provide Chemical Dependency treatment, and re-entry preparation services to offenders to successfully re-enter the community.</p>	<p>*Screening *Chemical Dependency Assessment *Intensive outpatient treatment *Re-entry services *Individual Therapy *Group Therapy</p>	<p><b>Objective 1:</b> 80% of inmates deemed New Start program eligible by assessment will enter program (begin services) within 1 month from January 1<sup>st</sup>, 2019 to December 31<sup>st</sup>, 2019. *WSTC is responsible for above measure, but will track the following:</p> <ul style="list-style-type: none"> <li>• % eligible inmates enrolled</li> <li>• % eligible inmates who refuse services</li> <li>• % eligible inmates for whom transportation makes service unfeasible</li> <li>• % eligible inmates who additionally have a MH need that requires service elsewhere</li> </ul> <p><b>Objective 2:</b> The following percentages of program clients will remain sober while Housed: 60%</p> <p><b>Objective 3:</b> 60% of re-entry program participants successfully complete (graduate) program (do not drop out or are not removed because of disciplinary reasons).</p>	<p><input checked="" type="checkbox"/> Output <input type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input checked="" type="checkbox"/> Return-on-investment or cost-benefit</p> <p>if applicable: <input checked="" type="checkbox"/> Fidelity measure</p>	<p><input type="checkbox"/> Short <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Long Start date: <u>January 1, 2020</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____</p>	<p>Behavioral Health Strategic Plan, Kitsap County Jail Survey ongoing. New Start Participant Survey. Monthly Housing Reports</p>	<p>New Start Participant Survey. Quarterly reporting tools. Participant self-report. Monthly Housing Reports Program database</p>

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Reduce recidivism by providing comprehensive support and basic need services once the offender is released into the community	<ul style="list-style-type: none"> <li>* Continuing Care treatment</li> <li>* Vocational Skill-building</li> <li>* Supportive housing</li> <li>* Moral Recognition Therapy</li> <li>* Supportive Case Management</li> <li>* Transportation</li> <li>* Resources</li> </ul>	<p><b>Objective 4:</b> 70% of participants referred to Peninsula Community Health Services will engage in services (attend appointment).</p> <p><b>Objective 5:</b> The following percentages of participants will not re-offend since enrollment in services at West Sound Treatment Center:</p> <ul style="list-style-type: none"> <li>- New Arrest Pre-Charge: 55%</li> <li>- Non-Compliance (DOC): 60%</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Output</li> <li><input checked="" type="checkbox"/> Outcome: Participant satisfaction</li> <li><input checked="" type="checkbox"/> Outcome: Knowledge, attitude, skill</li> <li><input checked="" type="checkbox"/> Outcome: Practice or behavior</li> <li><input checked="" type="checkbox"/> Outcome: Impact on overall problem</li> <li><input checked="" type="checkbox"/> Return-on-investment or cost-benefit</li> </ul> <p>If applicable:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Fidelity measure</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Short</li> <li><input type="checkbox"/> Medium</li> <li><input checked="" type="checkbox"/> Long</li> </ul> <p>Start date: <u>January 1, 2020</u></p> <p>Frequency:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Quarterly</li> <li><input type="checkbox"/> Semi-annual</li> <li><input type="checkbox"/> Annual</li> <li><input type="checkbox"/> Other: _____</li> </ul>	Behavioral Health Strategic Plan, Kitsap County Jail Survey ongoing. New Start Participant Survey.	New Start Participant Survey. * Quarterly reporting tools. Participant self-report. * Administered Quarterly
Provide clean and sober supportive housing and fill the community gap for chronically homeless inmates with substance use disorder.	<ul style="list-style-type: none"> <li>* 2 houses</li> <li>* 8 Female Long-term beds</li> <li>* 8 Male long-term beds</li> <li>* Supportive Case management</li> <li>* Transportation</li> <li>* Treatment Services</li> <li>* Basic needs</li> </ul>	<p><b>Objective 6:</b> New Start supportive housing will maintain 88% of housing capacity each quarter.</p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Output</li> <li><input type="checkbox"/> Outcome: Participant satisfaction</li> <li><input type="checkbox"/> Outcome: Knowledge, attitude, skill</li> <li><input type="checkbox"/> Outcome: Practice or behavior</li> <li><input checked="" type="checkbox"/> Outcome: Impact on overall problem</li> <li><input checked="" type="checkbox"/> Return-on-investment or cost-benefit</li> </ul> <p>If applicable:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Fidelity measure</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Short</li> <li><input type="checkbox"/> Medium</li> <li><input checked="" type="checkbox"/> Long</li> </ul> <p>Start date: <u>January 1, 2020</u></p> <p>Frequency:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Quarterly</li> <li><input type="checkbox"/> Semi-annual</li> <li><input type="checkbox"/> Annual</li> <li><input type="checkbox"/> Other: _____</li> </ul>	Behavioral Health Strategic Plan, Kitsap County Jail Survey ongoing	Quarterly reporting tools Program database Monthly Housing Reports

A. GOAL	B. ACTIVITY	C. SMART OBJECTIVE	D. TYPE OF MEASURE	E. TIMELINE	F. BASELINE Data and time	G. SOURCE
Program services meet participant needs and support improvements in health and wellbeing and stability.	Assess participant improvement in health status	<p><b>Objective 7:</b> 75% of participants agree that their physical health has improved.</p> <p><b>Objective 8:</b> 60% of participants agree that their mental/emotional health has improved.</p> <p><b>Objective 9:</b> 75% of participants agree that they can utilize the knowledge gained through the program to prevent a future relapse.</p> <p><b>Objective 10:</b> 60% of participants are employed/in school when they complete services.</p> <p><b>Objective 11:</b> 60% of participants obtain or regain/regain their license when they complete services.</p> <p><b>Objective 12:</b> 60% of participants transfer to stable housing when discharged from services.</p>	<input type="checkbox"/> Output <input checked="" type="checkbox"/> Outcome: Participant satisfaction <input type="checkbox"/> Outcome: Knowledge, attitude, skill <input checked="" type="checkbox"/> Outcome: Practice or behavior <input checked="" type="checkbox"/> Outcome: Impact on overall problem <input type="checkbox"/> Return-on-investment or cost-benefit  If applicable: <input checked="" type="checkbox"/> Fidelity measure	<input type="checkbox"/> Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long Start date: <u>January 1, 2020</u> Frequency: <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: _____	Behavioral Health Strategic Plan, Kitsap County Jail Survey ongoing	New Start Participant Survey.*  *Administered Quarterly

## Total Agency or Departmental Budget Form

ATTACHMENT E

Agency Name: West Sound Treatment Center

Project: New Start

Accrual       Cash

AGENCY REVENUE AND EXPENSES	2018		2019		2020	
	Actual	Percent	Budget	Percent	Budget	Percent
<b>AGENCY REVENUE</b>						
Federal Revenue		0%		0%	\$ -	0%
WA State Revenue		0%	\$ -	0%	\$ -	0%
Local Revenue	\$ 275,838.13	98%	\$ 339,000.00	97%	\$ 374,000.00	97%
Private Funding Revenue	\$ -	0%	\$ -	0%	\$ -	0%
Agency Revenue	\$ 6,540.00	2%	\$ 9,600.00	3%	\$ 10,000.00	3%
Miscellaneous Revenue	\$ -	0%	\$ -	0%	\$ -	0%
<b>Total Agency Revenue (A)</b>	<b>\$ 282,378.13</b>		<b>\$ 348,600.00</b>		<b>\$ 384,000.00</b>	
<b>AGENCY EXPENSES</b>						
<b>Personnel</b>						
Managers	\$ 85,323.24	28%	\$ 30,879.96	8%	\$ 35,000.00	8%
Staff	\$ 99,026.99	32%	\$ 200,620.04	54%	\$ 231,000.00	54%
Total Benefits	\$ 15,386.98	5%	\$ 34,725.00	9%	\$ 39,900.00	9%
<b>Subtotal</b>	<b>\$ 199,737.21</b>	<b>65%</b>	<b>\$ 266,225.00</b>	<b>71%</b>	<b>\$ 305,900.00</b>	<b>72%</b>
<b>Supplies/Equipment</b>						
Equipment	\$ 674.14	0%	\$ 1,000.00	0%	\$ 3,000.00	1%
Office Supplies	\$ 1,083.01	0%	\$ 2,500.00	1%	\$ 2,000.00	0%
Other (Describe)	\$ -	0%	\$ -	0%	\$ -	0%
<b>Subtotal</b>	<b>\$ 1,757.15</b>	<b>1%</b>	<b>\$ 3,500.00</b>	<b>1%</b>	<b>\$ 5,000.00</b>	<b>1%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	0%	\$ -	0%	\$ -	0%
Audit/Accounting	\$ 3,052.68	1%	\$ 1,000.00	0%	\$ 1,500.00	0%
Communication	\$ -	0%	\$ -	0%	\$ -	0%
Insurance/Bonds	\$ 2,485.28	1%	\$ 2,500.00	1%	\$ 1,500.00	0%
Postage/Printing	\$ -	0%	\$ -	0%	\$ -	0%
Training/Travel/Transportation	\$ 1,900.48	1%	\$ 1,000.00	0%	\$ 1,500.00	0%
% Indirect	\$ 26,209.02	9%	\$ -	0%	\$ -	0%
Other (Describe) _Op & Maintenance			\$ 15,000.00	4%	\$ 15,000.00	4%
Other (Describe) _Transportation	\$ 9,178.60	3%	\$ 10,000.00	3%	\$ 8,000.00	2%
<b>Subtotal</b>	<b>\$ 42,826.06</b>	<b>14%</b>	<b>\$ 29,500.00</b>	<b>8%</b>	<b>\$ 27,500.00</b>	<b>6%</b>
<b>Ongoing Operations and Maintenance</b>						
Janitorial Service	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance Contracts	\$ -	0%	\$ -	0%	\$ -	0%
Maintenance of Existing Landscaping	\$ 1,800.00	1%	\$ -	0%	\$ 2,000.00	0%
Repair of Equipment and Property	\$ -	0%	\$ 2,000.00	1%	\$ 4,000.00	1%
Utilities	\$ 13,328.29	4%	\$ 20,000.00	5%	\$ 15,000.00	4%
Other (Describe)		0%	\$ -	0%	\$ -	0%
Other (Describe) _Rentals	\$ 43,150.00	14%	\$ 49,200.00	13%	\$ 61,200.00	14%
Other (Describe) _Quick Dip UAs	\$ 300.00	0%	\$ 500.00	0%	\$ 500.00	0%
<b>Subtotal</b>	<b>\$ 58,578.29</b>	<b>19%</b>	<b>\$ 71,700.00</b>	<b>19%</b>	<b>\$ 82,700.00</b>	<b>20%</b>
<b>Other Costs</b>						
Debt Service	\$ -	0%	\$ -	0%	\$ -	0%
Other (Describe) _Basic Needs	\$ 4,303.08	1%	\$ 1,500.00	0%	\$ 3,000.00	1%
<b>Subtotal</b>	<b>\$ 4,303.08</b>	<b>1%</b>	<b>\$ 1,500.00</b>	<b>0%</b>	<b>\$ 3,000.00</b>	<b>1%</b>
<b>Total Direct Expenses</b>	<b>\$ 307,201.80</b>		<b>\$ 372,425.00</b>		<b>\$ 424,100.00</b>	

## Mental Health, Chemical Dependency and Therapeutic Court Program 2020 Continuation Grant Proposal Special Project Budget Form

Agency Name: West Sound Treatment Center

Project: New Start

Enter the estimated costs associated with your project/program	2019			2020		
	Award	Expenditures	%	Request	Modifications	%
<b>Personnel</b>						
Managers	\$ 30,000.00	\$ -	0%	\$ 35,000.00	\$ 5,000.00	17%
Staff	\$ 201,500.00	\$ 69,937.54	35%	\$ 231,000.00	\$ 29,500.00	15%
Total Benefits	\$ 10,000.00	\$ 10,000.00	100%	\$ 39,900.00	\$ 29,900.00	299%
<b>SUBTOTAL</b>	<b>\$ 241,500.00</b>	<b>\$ 79,937.54</b>	<b>33%</b>	<b>\$ 305,900.00</b>	<b>\$ 64,400.00</b>	<b>27%</b>
<b>Supplies &amp; Equipment</b>						
Equipment	\$ 1,000.00	\$ 504.58	50%	\$ 3,000.00	\$ 2,000.00	200%
Office Supplies	\$ 2,500.00	\$ 541.30	22%	\$ 2,000.00	\$ (500.00)	-20%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 3,500.00</b>	<b>\$ 1,045.88</b>	<b>30%</b>	<b>\$ 5,000.00</b>	<b>\$ 1,500.00</b>	<b>43%</b>
<b>Administration</b>						
Advertising/Marketing	\$ -	\$ -		\$ -	\$ -	
Audit/Accounting	\$ 1,000.00	\$ 400.00	40%	\$ 1,500.00	\$ 500.00	50%
Communication	\$ -	\$ -		\$ -	\$ -	
Insurance/Bonds	\$ 1,000.00	\$ 400.00	40%	\$ 1,500.00	\$ 500.00	50%
Postage/Printing	\$ -	\$ -		\$ -	\$ -	
Training/Travel/Transportation	\$ 1,000.00	\$ -	0%	\$ 1,500.00	\$ 500.00	50%
% Indirect (Limited to 5%)	\$ -	\$ -		\$ -	\$ -	
Other (Describe) _Op & Maintenance	\$ 15,000.00	\$ 5,104.83	34%	\$ 15,000.00	\$ -	0%
Other (Describe) _Transportation	\$ 10,000.00	\$ 2,956.67	30%	\$ 8,000.00	\$ (2,000.00)	-20%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ 28,000.00</b>	<b>\$ 8,861.50</b>	<b>32%</b>	<b>\$ 27,500.00</b>	<b>\$ (500.00)</b>	<b>-2%</b>
<b>Ongoing Operations &amp; Maintenance</b>						
Janitorial Service	\$ -	\$ -		\$ -	\$ -	
Maintenance Contracts	\$ -	\$ -		\$ -	\$ -	
Maintenance of Existing Landscaping	\$ -	\$ -		\$ 2,000.00	\$ 2,000.00	
Repair of Equipment and Property	\$ 2,000.00	\$ 1,246.96	62%	\$ 4,000.00	\$ 2,000.00	100%
Utilities	\$ 20,000.00	\$ 3,414.08	17%	\$ 15,000.00	\$ (5,000.00)	-25%
Other (Describe):	\$ -	\$ -		\$ -	\$ -	
Other (Describe): Rental Fees	\$ 42,000.00	\$ 20,080.00	48%	\$ 61,200.00	\$ 19,200.00	46%
Other (Describe): Quick Dip UAs	\$ 500.00	\$ 40.44	8%	\$ 500.00	\$ -	0%
<b>SUBTOTAL</b>	<b>\$ 64,500.00</b>	<b>\$ 24,781.48</b>	<b>38%</b>	<b>\$ 82,700.00</b>	<b>\$ 18,200.00</b>	<b>28%</b>
<b>Sub-Contracts</b>						
Organization:	\$ -	\$ -		\$ -	\$ -	
Organization:	\$ -	\$ -		\$ -	\$ -	
Organization:	\$ -	\$ -		\$ -	\$ -	
Organization:	\$ -	\$ -		\$ -	\$ -	
<b>SUBTOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	
<b>Other</b>						
Debt Service	\$ -	\$ -		\$ -	\$ -	
Other (Describe): Basic Needs	\$ 1,500.00	\$ 655.46	44%	\$ 3,000.00	\$ 1,500.00	100%
<b>SUBTOTAL</b>	<b>\$ 1,500.00</b>	<b>\$ 655.46</b>	<b>44%</b>	<b>\$ 3,000.00</b>	<b>\$ 1,500.00</b>	<b>100%</b>
<b>Total Project Budget</b>	<b>\$ 339,000.00</b>	<b>\$ 115,281.86</b>	<b>34%</b>	<b>\$ 424,100.00</b>	<b>\$ 85,100.00</b>	<b>25%</b>

NOTE: Indirect is limited to 5%

**Mental Health, Chemical Dependency and Therapeutic Court Program  
2020 Continuation Grant Proposal Project Salary Summary**

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**Agency Name: West Sound Treatment Center**

**Project: New Start**

**Description**

Number of Professional FTEs	4.00
Number of Professional PTEs	5.00
Number of Clerical FTEs	0.00
Number of All Other FTEs	0.00
<b>Total Number of FTEs</b>	<b>9.00</b>

**Salary Information**

Salary of Executive Director or CEO	\$ -
Salary of Operations Director	\$ 35,000.00
Salaries of Professional Staff	\$ 231,000.00
Salaries of Clerical Staff	\$ -
Other Salaries (Describe Below)	\$ -
Description:	\$ -
<b>Total Salaries</b>	<b>\$ 266,000.00</b>
Total Payroll Taxes	\$ -
Total Cost of Benefits	\$ 39,900.00
Total Cost of Retirement	\$ -
<b>Total Payroll Costs</b>	<b>\$ 305,900.00</b>