

COMMUNITY SERVICES INFRASTRUCTURE GRANT PROGRAM

Section-1: SUMMARY INFORMATION *Please type all responses.*

Total Requested Grant Amount: \$ 2,100,000.00

Date Submitted: April 30, 2019

DESIGNATED LEAD GRANTEE

I. APPLICANT INFORMATION

NAME OF APPLICANT: (County) Fresno		ENTITY TYPE: (Department, Agency, etc.) Department of Behavioral Health
ADDRESS: 3133 N Millbrook Ave		CITY, STATE AND ZIP: Fresno, CA 93703
CONTACT INFORMATION		
FIRST AND LAST NAME: Dawan Utecht		TITLE: Director
ADDRESS: 3133 N Millbrook Ave		CITY, STATE AND ZIP: Fresno, CA 93703
PHONE NUMBER: 559-600-6899	FAX NUMBER: 559-600-7711	EMAIL ADDRESS: dutecht@fresnocountyca.gov

Project Title: **Re-entry Community Centers**

Project Brief Summary Description (Limited to 20 words): **Re-entry community centers serve as transitional social rehabilitation programs providing intensive case management for justice-involved individuals transitioning from jail.**

County(ies) to be served:

Fresno

Please select all Programs to be funded through the Grant, and insert number of beds and/or Program service capacity to be added by the proposed Project:

☒ Mental Health Treatment	☒ Substance Use Disorder Treatment	☐ Trauma-Centered Services
18-36 beds/service capacity	18-36 beds/service capacity	_____ beds/service capacity

Purpose of Grant: *Check all applicable boxes*

☒ Facility acquisition	☒ Renovation	☐ Program startup or expansion costs
☐ Furnishings and/or Equipment	☐ Information technology	

Section-2: ADDITIONAL APPLICANTS AND SERVICE PROVIDERS Please fill out additional Applicants and service provider(s) contact information. *Please use space as needed. Copy page if more space is needed.*

1. CO-APPLICANT INFORMATION

NAME OF APPLICANT: <i>(County)</i>	ENTITY TYPE: <i>(Department, Agency, etc.)</i>
ADDRESS:	CITY, STATE AND ZIP:

CO-APPLICANT CONTACT INFORMATION

FIRST AND LAST NAME:	TITLE:
ADDRESS:	CITY, STATE AND ZIP:
PHONE NUMBER:	FAX NUMBER
EMAIL ADDRESS:	

2. CO-APPLICANT INFORMATION

NAME OF APPLICANT: <i>(County)</i>	ENTITY TYPE: <i>(Department, Agency, etc.)</i>
ADDRESS:	CITY, STATE AND ZIP:

CO-APPLICANT CONTACT INFORMATION

FIRST AND LAST NAME:	TITLE:
ADDRESS:	CITY, STATE AND ZIP:
PHONE NUMBER:	FAX NUMBER
EMAIL ADDRESS:	

Service Providers:

1. ORGANIZATION TO DELIVER SERVICES (IF KNOWN)

NAME OF ORGANIZATION:	ENTITY TYPE:
ADDRESS:	CITY, STATE AND ZIP:

CONTACT INFORMATION

FIRST AND LAST NAME:	TITLE:
PHONE NUMBER:	FAX NUMBER
EMAIL ADDRESS:	

☐ YES ☐ NO ☐ N/A Currently licensed and/or certified by the applicable state authority and in substantial compliance.

2. ORGANIZATION TO DELIVER SERVICES (IF KNOWN)

NAME OF ORGANIZATION:	ENTITY TYPE:
ADDRESS:	CITY, STATE AND ZIP:

CONTACT INFORMATION

FIRST AND LAST NAME:	TITLE:
PHONE NUMBER:	FAX NUMBER
EMAIL ADDRESS:	

☐ YES ☐ NO ☐ N/A Currently licensed and/or certified by the applicable state authority and in substantial compliance.

Section-3: SUMMARY OF FUNDING REQUESTED

ELIGIBLE COSTS	AMOUNT
Facility Acquisition	\$ 1,500,000.00
Renovation*	\$ 600,000.00
Furnishings and/or Equipment	\$ 0.00
Information Technology**	\$ 0.00
Program Startup or Expansion Costs (up to three months)	\$ 0.00
Total Requested Grant Amount	\$ 2,100,000.00

*Hardscaping and/or landacaping costs essential to the completion of the Project may not exceed 5% of total Grant award.

**Information Technology hardware and software costs may not exceed 3% of total Grant award except when approved by the Authority and only upon submission of justification in Application narrative (evaluation criteria 4(e)(i)) that the additional information technology costs are necessary for the Project to achieve the desired goals and outcomes set forth in Section 7419(a)(3) of the regulations.

Section-4: COUNTY GRANT AMOUNTS WORKSHEET

COUNTY GRANT AMOUNTS WORKSHEET	
Complete the worksheet below for each County listed as Lead Grantee and Co-Applicant(s) on Section-1 and Section-2.	
Applicants may apply for funding as set forth in Section 7418 of the regulations. Counties Applying Jointly, may at their discretion, apply for up to the sum of their respective maximum funding amounts, as applicable.	
COUNTY NAME	FUNDING REQUESTED
Fresno	\$ 2,100,000.00
	\$ 0.00
	\$ 0.00
	\$ 0.00
	\$ 0.00
	\$ 0.00
	\$ 0.00
	\$ 0.00
TOTALS	\$ 2,100,000.00

Section-5: SOURCES AND USES

Please include sources and uses to complete the entire Project.

Sources of Funds:

Total requested Grant amount	\$	2,100,000.00
Mental Health Services Act (MHSA) funds	\$	0.00
Realignment funds	\$	0.00
Medi-Cal, Federal Financial Participation	\$	0.00
Other sources, list (e.g., bank loan*, other grants)		
	\$	0.00
	\$	0.00
	\$	0.00
Total Sources	\$	2,100,000.00

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If obtaining a bank loan, please name the bank and describe the length and rate of the loan.

Uses of Funds:

Facility acquisition	\$	1,500,000.00
Renovation**	\$	600,000.00
Furnishings and/or equipment	\$	0.00
Information technology hardware and software	\$	0.00
Program start up or expansion costs (3 months)	\$	0.00
Other costs:		
	\$	0.00
	\$	0.00
	\$	0.00
Total Uses (must equal Total Sources)	\$	2,100,000.00

****Grantees must comply with California's prevailing wage law under Labor Code section 1720, et seq. for public works projects. The Authority recommends Applicants consult with legal counsel.**

COUNTY OF FRESNO DEPARTMENT OF BEHAVIORAL HEALTH

CALIFORNIA HEALTH FACILITIES FINANCING AUTHORITY COMMUNITY SERVICE
GRANT PROGRAM APRIL 30, 2019

APRIL 30, 2019
COUNTY OF FRESNO
3133 N Millbrook Ave Fresno, CA 93703

1.a. The County of Fresno Department of Behavioral Health (DBH) is proposing a project to acquire residential facilities that will house Transitional Social Rehabilitation Programs (TSRP) that will serve as re-entry community (REC) centers for justice-involved individuals who are seriously mentally ill (SMI) and/or have a substance use disorder. The REC centers will offer individuals involved with the justice system and in need of mental health treatment and/or substance use disorder services an opportunity to live in a therapeutic supportive environment as they transition from jail to the community. The goal of the project is to provide stability for individuals as they readjust to their community and build their own support system to aid in their long-term recovery. The REC centers will have a capacity of up to six individuals per facility with 6 facilities being proposed, in line with TSRP regulations, and be a home-like setting in which program participants can learn life skills and have their treatment needs met. While the facilities have not yet been identified, DBH will target an area that is most responsive to the needs of the program participants. DBH will concentrate its efforts in the area immediately surrounding our Heritage campus, where DBH and DSS have offices, in the 93703 zip code although additional areas will be considered. The location is also centrally located to community services and offers easy access to public transportation. The program will target high needs individuals with co-occurring disorders who are being released from jail and have accessed mental health and/or substance use disorder (SUD) services while in jail. The program will primarily serve men as they accounted for approximately 89% of the jail population in 2018¹, are seriously mentally ill and/or have a substance use disorder, have a significant legal history, and are known to be high users of the behavioral health system. The service provider will provide intensive case management services that link individuals to mental health and substance use

¹ Board of State and Community Corrections, Proposition 47 Grant Publicly Accessible Data Sets, Fresno County

disorder treatment providers. Staff will have the responsibility of determining the best fit for treatment and coordinate care among all of the treatment professionals. The facilities will also be open to host meetings and serve as hubs that support the individuals in their recovery. The service provider will not be required to deliver treatment directly, but will have the option of partnering with existing outpatient providers in an effort to leverage existing resources and ensure that individuals have the greatest number of options available to them. With the recent implementation of the Drug Medi-Cal Organized Delivery System (DMC ODS) in Fresno County on January 1, 2019, more enhanced substance use disorder services are available to individuals and allow for more comprehensive treatment. Using existing DMC ODS providers as partners will make the transition to the community smoother for participating individuals as they will be able to continue treatment once they discharge from the REC center. Mental health and substance use disorder treatment will be the primary focus, but to ensure a holistic approach to the well-being of program participants restorative justice will be offered to willing participants. The restorative justice program component will aim to combat the multi-generational criminal behavior for improved long-term outcomes. The restorative justice component will not have any effect on the individual's legal standing, but instead offer a different approach in which the individual will be able to make amends with their family and friends who have been negatively impacted by the choices the individual made. No reduction in charges or sentences will occur as a result of this program.

1b. The project is intended to serve between 18-36 individuals at any one time who are seriously mentally ill and/or have a substance use disorder as they transition from jail to the community. It will serve as an option for individuals who may be nearing or finishing their stay in jail, but have been identified as needing additional support in order to keep them from re-offending. The

Fresno County jail had an average daily populations of 3,057 individuals during 2018².

According to internal reports, during 2018 a total of 10,246 individuals received mental health services in the jail with total mental health encounters averaging 2,102 per month. Additionally, a total of 91 days were spent at our Psychiatric Health Facility by individuals who were incarcerated at the jail for the most recent calendar year. A total of 66% of the average monthly population received some type of mental health service demonstrating the need the individuals have for behavioral health services. While we have limited information regarding substance use disorder needs, we know from conversations with probation and the courts that it is a significant need of many of the incarcerated individuals, potentially larger than mental health. Substance use disorder services are expanding as a new jail health services provider , Wellpath, has recently started to revamp and enhance treatment services. Fresno county also has a demonstrated need for a greater number of substance use disorder services and providers as our Fresno County Drug Medi-Cal Waiver Implementation Plan estimated that between 35,768 and 41,155 Medi-Cal eligible individuals may need substance use disorder treatment. There is a lack of a true co-occurring residential program set up to serve justice-involved individuals in Fresno with only 5 substance use disorder residential programs currently operating. Existing substance use disorder programs are structured to primarily treat substance use disorders, not mental health. This causes existing behavioral health programs to devote an inordinate amount of resources to those individuals who present to their programs with co-occurring conditions. The program will target these high users of the behavioral health system allowing existing resources to deploy to other areas of need. This will allow existing resources to be more responsive to the community at-large thus becoming more efficient and effective.

² Board of State and Community Corrections, Proposition 47 Grant Publicly Available Data Sets, Fresno County

1.c. The proposed REC centers will add an additional 18-36 treatment slots for mental health and/or substance use disorder services. The treatment slots will help to fill the gap that exists as individuals transition between jail and the community. Beyond the mere number of treatment slots that will be added will be the relief offered to individuals who participate in treatment as they will have a single point of contact to use as they access services, alleviating the confusion that often arises from trying to enter the behavioral health system. All individuals who participate in the program will receive their treatment in the community with the anticipation of more favorable outcomes as compared to receiving the equivalent treatment in the jail. As individuals stabilize and build their own community resources, they will transition from the REC centers and move into their own independent living environments. The gradual step down from jail to the REC centers to independent living should allow individuals the opportunity to learn the skills that will help to maintain and sustain their treatment in outpatient settings with minimal ongoing support. By following this model, we will be able to leverage existing outpatient mental health and substance use disorder providers to help minimize costs and achieve better outcomes without overextending our jails.

1d. With the passage of Assembly Bill 1810, which updates diversion opportunities for criminal defendants using a mental health program, discussion has started with local justice and behavioral health agencies to ensure that we have a shared understanding of how to identify eligible individuals and move them into appropriate treatment settings. While these discussions are still in a preliminary stage, we believe that the proposed program will serve as an option for eligible individuals directly impacted by the changes stated in AB 1810 and eventually have the potential to serve as a diversion program should local justice agencies feel confident in our REC center model. Fresno County's REC center model is currently being proposed as a re-entry

program for individuals who are released from our local jail. We intend to use this program as a cost effective “proof of concept” with the ultimate goal of making this program available to our local justice agencies who wish to divert eligible individuals from jail and into community based treatment. For those individuals being released from jail, we intend the REC center staff to make contact with the individual prior to release to help establish a relationship between the program and the individual helping to make the transition easier for the individual. The REC center will help to coordinate how the individual will make their way into the program and make transportation arrangements if necessary. Additionally, the REC center staff will make contact with Wellpath staff, the health services provider in our jail, to transfer any relevant behavioral health information for the purposes of ensuring a continuous treatment plan that builds upon what was already achieved in the jail. Should local justice agencies feel as though the REC centers are suitable as a diversion program, we would develop and make available an easy to understand intake process. The intake process would consist of identifying a key contact person at the program which will help to communicate eligibility requirements and facilitate the transition of the individual from the justice agency into the REC center. The REC center staff will confirm that the individual has an SMI and/or substance use disorder by either conducting a screening/assessment, or accepting an assessment from a behavioral health provider that the individual may already be seeing. The REC center staff will speak directly with the individual to verify that they are open to treatment and explain program rules and expectations. If the individual is suitable for the REC center, program staff will be responsible for coordinating with the individual and justice agency to schedule a date on which the individual will present to the program. REC center staff will also be responsible for verifying with the justice agency that the individual entered the program and is continuing to fully participate in program activities.

2a. No gradual step down exists for high needs co-occurring individuals being released from jail. Local government agencies collaborate to the extent possible, but the options for treatment for these individuals with co-occurring disorders are limited. Often, individuals who may be stable while receiving treatment in jail have difficulty maintaining their treatment regimen or sobriety once released to the community. The intent of the REC center is to give these individuals an opportunity to re-integrate into the community slowly and on their terms. Housing has traditionally been difficult to locate and maintain for the justice involved population. This program will allow them a stable environment while they learn how to navigate their treatment by attending scheduled therapy sessions for mental health and counseling sessions for substance use disorders. It serves to remove the stress and anxiety that individuals may face as they move from jail to the community where they may not have a home to which to return. The REC center would serve as a “home base” for individuals as all elements of care including mental health, substance use disorders, and physical care are facilitated while ensuring clients adhere to all justice-mandated requirements.

The REC center’s program design will move towards eliminating potential barriers to treatment. The recent implementation of the Drug Medi-Cal Organized Delivery System (DMC ODS) in Fresno County serves as a boost that will help the REC center collaborate and coordinate mental health and substance use disorder services in the community. The rule changes that come with the DMC ODS require substance use disorder to coordinate treatment among all of the individual’s treatment providers. The TSRP will help to re-orient individuals with the community, transition individuals to more permanent living situations, and connect them to established community services that support the individuals recovery filling the gaps that exist in the current system of care.

2.b. Individuals will be identified as potential candidates for participation in this program while still in custody. DBH will work with Wellpath to ensure that individuals selected are appropriate by determining their level of need, their openness to change, and surveying their support system. Those who are determined to be a good fit for the program will be approached for participation while still in custody. Participation in this program, like all treatment, is voluntary and individuals will have the option to decline services. Wellpath staff will explain the program to the individual as well as the benefits and allow the individual to make the determination. Should the client choose to participate, an introduction will be facilitated between the individual and the REC center, either by phone or in-person, prior to the individual's release. This connection will offer the individual an opportunity to familiarize themselves with REC center program staff and begin to develop a relationship increasing the chances that the individual continues treatment.

The REC center will use evidence based practices, including motivational interviewing to engage the individual in treatment and begin developing an individualized treatment plan. The treatment plan will focus on goals that will help the individual in transitioning from the TSRP to the community. In connection with mental health and/or substance use disorder services received, the individual will share in the responsibility of maintaining the facility and basic upkeep. Individuals will also be encouraged to be the drivers of any structured activities offered as a means to meet the individual needs of each participant. The increased role in the operation of the facility and program will lead to a sense of ownership and community for participants resulting in greater program engagement and retention.

2.c. DBH works closely with all local public agencies who have an interest in jail health services. Agencies meet regularly to discuss progress on current projects, identify barriers to treatment, and workshop ideas for greater effectiveness and efficiencies in the delivery of behavioral health

services. DBH has established a utilization review specialist that is co-located at the jail to provide a more direct connection with the jail health service provider to offer a greater degree of support. Additionally, local agencies such as DBH, Probation, District Attorney, Public Defenders Office, Public Health, Superior Court and the Sheriff are actively working together to identify and implement strategies that will help to alleviate the number of offenders with mental health and/or substance use disorders being treated in the jail and re-offending.

2d. Letters of support from local justice agencies and community providers are included in this proposal as Attachment A.

3a. The evaluation plan is preliminary until a request for proposals process and contracting process is completed to identify a service provider for the REC center. The primary goals and outcomes are numbered below with the objectives for each following. Both qualitative and quantitative methods are used:

1. Determine if the REC center model reduces the number of individuals with mental health disorders, individuals with substance use disorder, and victims of trauma in jails and/or prisons; and reduced need for mental health treatment, substance use disorder treatment, and/or trauma-centered services in jails and/or prisons.
 - a. Conduct a quantitative process evaluation on implementation on an annual basis to inform scaling up or increasing the number of REC centers in the community. Conduct semi-structured interviews and focus groups with partners, those impacted, and clients to identify successes, opportunities, barriers, and unintended consequences. DBH and its contracted service provider will partner to host the activities and compile results.

- b. Compare the criminal recidivism of REC center participants to criminal recidivism of the jail population who accessed mental health and/or substance use disorder services and did not participate in a REC center program annually.
 - c. Compare the number of mental health and/or substance use disorder contacts made by individuals in jail annually. The contracted service provider in partnership with Wellpath and DBH will participate in this process.
- 2. Report the number and demographics of individuals within the target population who utilize mental health treatment, substance use disorder treatment, and/or trauma-centered services.
 - a. The contracted service provider will be required to record all demographic information from program participants in DBH's electronic health record which will allow for tracking in greater detail as individuals move through our system of care. The information will be collected by the contracted service provider from the program participant at intake and will compile results annually to be reported to DBH.
- 3. Report the number and demographics of individuals who complete treatment and/or services.
 - a. The contracted service provider will be required to collect the data on the total number of individuals who completed the program annually.
- 4. Number and demographics of individuals who did not complete treatment and/or services and were returned to jail/or prison.
 - a. The contracted service provider will be responsible for tracking the number of unsuccessful program participants. The provider will be required to attempt to

contact unsuccessful program participants for up to 12 months after discharge through phone calls to determine if the participant has been re-arrested and/or convicted.

5. Cost savings of the program compared to the cost of providing mental health treatment, substance use disorder treatment, and/or trauma-centered services in jails and/or prisons.

- a. The contracted service provider would be required to report the cost per client annually to DBH as part of regularly scheduled outcomes gathering activities.

6. Determine if a restorative justice model supports client recovery and children's perception of adult behavior.

- a. Determine perceptions by client, children/family, and treatment providers of the recovery process through semi-structured interviews and focus groups.

- b. Determine recidivism of those participating in the restorative justice portion of the programming.

4.a.i. DBH will undergo a comprehensive process to ensure that the most appropriate sites are selected for this project. Input will be gathered from our local justice agencies, mental health and substance use disorder providers. Given the target population of this project providers who have extensive expertise in serving justice involved individuals, such as our local AB 109 service providers, will be consulted. We will also reach out to key members in our community who are actively working with justice-involved individuals to solicit their input and determine the most appropriate sites for this project. Transportation is often cited as a barrier to treatment and as such DBH would focus on facilities ideally near major public transportation hubs to encourage individuals to prepare for independent living. To facilitate a smooth transition from the REC centers to community mental health and/or substance use disorder treatment, we would target a

location that is near our current behavioral health providers. Facilities will ideally be at least 3 bedrooms and 2 bathrooms in order to house between 3-6 individuals per facility. As a way to ensure that we implement this project quickly, we will attempt to identify buildings that are not in need of any major structural work.

4.a.ii. DBH does not yet have renderings of the site as it has not yet been selected. However, DBH has recently designed, constructed, and opened a crisis residential treatment facility which has provided us a learning opportunity as we move forward with this project. The experience has helped us to prepare in renovating and preparing a residential facility with a home-like setting.

4.a.iii. The Board of Supervisors will be made aware of this project at their April 23, 2019 meeting. DBH will inform the Board of the scope of the project and seek permission to submit the grant proposal on behalf of the County. DBH will be responsible for the coordination of the project including necessary approvals and processes to complete the project. DBH will work closely with the County of Fresno Internal Services Division (ISD), which is responsible for the acquisition, renovation, and development of county facilities. Bryan Burton will serve as the main ISD contact as we collaborate to develop this project. DBH will be responsible for identifying facilities and will work with ISD to negotiate the acquisition process. Once the building has been acquired, ISD will take the request for the acquisition of the facility to the Board of Supervisors for final approval. ISD will be responsible for issuing all requests for proposals to secure architectural and construction contracts with DBH providing guidance as to the final vision for this project. ISD and the selected contractors will be responsible for navigating the permitting process and handle any requirements that may arise.

4.a.iv. Key milestones for the project will commence with the final allocation of funds should we be selected for award. We anticipate facilities to be identified approximately 1 month after final allocation with ISD initiating the negotiation, acquisition, and Board approval within 3 months of identifying properties. Once the properties are approved for acquisition by the Board, DBH would work with ISD to prepare any necessary requests for proposals to identify the contractors who will be completing the renovations. One of the advantages of acquiring and renovating smaller facilities is that the work should require less time to complete compared to building a larger facility from the ground up. We anticipate that once contractors are selected for the renovations, completion of the work will occur within 9 months. DBH would work concurrently on issuing a request for proposals to select a service provider with the goal of program implementation within 12 months of final allocation.

4.a.v. The REC centers are designed to facilitate and coordinate care through intensive case management. To staff this service, we will specify that the program director meet all requirements stated in TSRP regulations, have a clinical background, be experienced working with the justice-involved population, as well as have an extensive knowledge of the local behavioral health community. The program director will oversee all aspects of the program and be responsible for program outcomes. Each REC center will have one assigned case manager who will be responsible for coordinating care for all individuals living at each REC center and report directly to the program director. The case managers will be knowledgeable about mental health and substance use disorders and be at a minimum either alcohol and other drug (AOD) counselors or community mental health specialists. Staffing ratios will be consistent with TSRP regulations. Each REC center will also have assigned monitors that will help program participants manage their day to day living activities. The REC centers will be designed to focus

on case management and not direct treatment in order to control costs to make the program more sustainable and potentially more likely to be replicated across our community.

4.a.vi. Projects that involve the acquisition and renovation of facilities have a high likelihood of coming across challenges that may delay the completion date. This project has the potential to be delayed for any number of reasons, however, our department has experience with solving challenging problems that require a timely response. The following have been identified as potential challenges that may arise during the course of this project along with a plan for addressing them.

- Board of Supervisor's approval
 - The Board of Supervisors is the only entity that can accept any grant funding award for the County of Fresno. To ensure that the Board can make an appropriate decision, DBH will communicate with them to provide as much information as possible so that they understand that this project will be beneficial to both our beneficiaries and to the community as a whole.
- Site identification and acquisition
 - Finding suitable properties quickly could be challenging as we would be subject to market forces that are out of our control and there will always be the possibility that we may not be able to identify suitable properties for acquisition. We believe that the housing market in Fresno is stable and strong enough that there will be enough supply to meet our needs. We will work with ISD to ensure that we find the right space for the purposes of this project.
- Renovations, Building Codes and Permits

- Projects that include any type of construction or renovations have the potential to be delayed due to unforeseen circumstances. In order to minimize delays due to renovation, building codes and permitting issues, we would target acquiring residential facilities that were built more recently and were not in need of major structural work. Inspections would be conducted on the properties prior to purchase in order to minimize the risk of major issues. We would aim to avoid facilities that may require conditional use permits.
- Licensing/certification
 - The contracted service provider would be responsible for ensuring that the facility is licensed and certified by both the California Department of Social Services (CDSS) and the California Department of Health Care Services (DHCS). We would help to mitigate any potential issues with licensing/certification by considering the requirements of licensing/certification as we move through the identification, acquisition, and renovation of the project site and making decisions aligned with those requirements. We would also require that the contracted service provider have experience successfully attaining licenses/certifications for existing programs.
- Selection of a service provider
 - Identifying a contracted service provider to deliver services can be challenging for a variety of reasons including: not being able to find a suitable provider, delays in the procurement processes, appeals processes, delays in negotiating and establishing a contract. However, DBH has navigated this process before and can troubleshoot issues as they arise. The requests for proposals process will be

initiated prior to the completion of construction allowing us time to work through any unexpected delays.

- Community opposition issues
 - DBH will communicate with all stakeholders who may be affected by this process to help ease any concerns that may arise from the development of this project. We will work to inform stakeholders of the overall benefits that this program will bring to the community and how we will help to mitigate any unintended impacts.
- Increased project costs
 - DBH will work closely with ISD from the beginning of the project to identify suitable properties that are reasonably priced and could be renovated quickly. All decisions regarding renovations will be made to ensure that the project is cost effective and stays within budgeted amounts.

4.b.i. The limited amount of time for the completion of this grant application limited outreach opportunities for our department. This proposal is informed from past outreach and community gatherings that were related to peripheral projects. For example, the “Sequential Intercept Model Mapping Report for Fresno County” meetings which took place in October 25-26, 2016 identified several gaps in our system for individuals being released from jail/prison being linked to behavioral health services. An overview of the results of that gathering are included as Attachment B. This project would serve to help close that gap and provide an additional support for those targeted individuals. Should this project be successful for individuals being released from jail, we would approach the justice agencies to determine if this could be developed into a jail diversion program. As we move forward with this project, should we be selected for award,

we would continue to reach out to our justice partners as well as community organizations to refine the program and ensure that we meet the needs of the community.

4.c. A service provider has not been identified at the time of submission. DBH will issue a request for proposals concurrent to construction to identify an appropriate service provider. DBH will work with our County's Purchasing department to ensure that the procurement process runs as smoothly as possible. DBH's Contracted Services division will be responsible for drafting the request for proposals and coordinating the process with the help of our Purchasing department. The request for proposals will be issued electronically with all registered vendors being notified of the opportunity to submit proposals. After all proposals are received, DBH will convene an evaluation panel that consists of individuals from different areas of expertise that will review, evaluate, and score proposals. The criteria will include the vendors experience providing this service in other counties, experience working with the target population, staffing qualifications, anticipated implementation date, evaluation plan, and cost. The received proposals will be ranked with the highest ranked vendor being recommended for award. Once a vendor has been selected DBH's Contracted Service division will engage the vendor in negotiations and establish an agreement for the provision of services. The agreement will be taken to the Board of Supervisors for approval and services will begin shortly thereafter.

4.d. DBH will work to ensure that facilities that are identified for acquisition are selected and renovated according to TSRP licensing requirements. DBH will communicate with the California Department of Social Services to make sure that the selected site will not cause any major delays when applying for licensure or certification. The service provider, once selected, will also be consulted to draw from their experience and ensure that all licensing and certification requirements are met.

4.e.i. DBH is requesting funds in the amount of \$2,100,000 for the acquisition and renovation of facilities. The funds would support the acquisition of 6 facilities that each consisting of 3 bedrooms and 2 bathrooms and house up to 6 individuals per facility. According to the Fresno Council of Governments (Fresno COG) housing report, in 2014 Fresno County had a median home price of \$209,000. DBH anticipates that acquisition costs of each property will be closer to \$250,000 once all closing costs, inspections, and other expenditures are taken into account. DBH also expects to budget up to \$100,000 per home that would serve to support renovation costs. It is nearly impossible to determine the exact costs of renovations as each facility that is acquired will have different needs based on the condition and layout in place. The \$100,000 estimated renovation costs will help us to alleviate any potential construction issues that may present themselves. It would also help us design facilities that will be specifically tailored to meet the therapeutic and recovery needs of the individuals who enter the program. Detailed budgets and costs will be supplied to CHFFA once the properties are identified and acquired.

4.e.ii. DBH is proposing a project that does not require additional funding to complete beyond those requested from CHFFA. The design of the project focuses on ensuring that the proposal is able to be implemented quickly in a cost controlled manner that stays within the amounts allocated through the CHFFA CSI Grant Program. This allows us the flexibility to handle any issues that may arise while at the same time giving us an opportunity to leverage existing programs without being limited by funding allocations.

4.e.iii. DBH will work with ISD to monitor the use of funds as we acquire and renovate facilities. ISD regularly handles projects that require the use of grant funds and has sufficient processes and procedures to ensure that the expenses are used only as intended. Depending on the level of construction work required, ISD will utilize one of two project management software tools to

manage progress completed. Additionally, DBH has internal protocols to determine if funds were being used properly and are tracked accordingly. As an example, DBH and ISD recently completed construction of the Crisis Residential Treatment (CRT) Facility which was funded in part by CHFFA funds. A similar process as was used at the CRT to monitor and track expenses will be used in the development of this project.

4.f.i. Fresno County currently contracts with social rehabilitation programs, but those programs are reimbursed at daily rates. To provide an estimate of an annual operating budget that details operating costs, we assumed that this program would be similar to existing substance use disorder residential programs. We believe that costs should be similar based on the idea that staffing patterns should be similar, they both provide similar clinical services, and both have fixed and variable room and board costs. An estimated annual budget has been included as Attachment C to this document. We believe each facility will cost an estimated \$255,750 per year. We would like to clarify that exact operating costs are specific to one facility and we anticipate that we would establish up to 6 facilities. All costs are subject to change based on the service provider who is awarded the agreement, the specific needs of the individuals that are referred to the program, and additional unforeseen changes in the structure of the service delivery.

4.f.ii. DBH is committed to supporting the resulting program for the estimated useful life of the project. The funding will be a mix of Mental Health Services Act, Substance Abuse and Prevention Treatment, Realignment, and other funds that are eligible to reimburse these services. Funding sources and amounts will vary over time as the project and the target population evolves and DBH adjusts to meet the needs. We do not anticipate significant cash flows to be generated

through Medi-Cal as we will leverage our existing provider network to coordinate and deliver mental health and Drug Medi-Cal services.

4.f.iii. The Board of Supervisors will be notified of our grant proposal and submittal at their April 23, 2019 Board date. Should Fresno County be selected for award, additional approvals will be sought from the Board for the following: acceptance of the grant award, approval of the purchase of the properties, approval of the construction agreements, approval of the agreement between DBH and the service provider, and other ancillary agreements that may be necessary in the development of this process. Minutes from the April 23, 2019 meeting are included as Attachment D. Should CHFFA require additional documentation regarding other matters related to this project, DBH will provide it as necessary.

Attachment A – Letters of Support



Fresno County Probation Department

Kirk Haynes, Chief Probation Officer



March 22, 2019

California Health Facilities Financing Authority
Community Services Infrastructure Grant Program
915 Capitol Mall C-15
Sacramento, CA 95814

Dear California Health Facilities Financing Authority,

I write in support of the County of Fresno's Department of Behavioral Health's application for funding through the California Health Facilities Financing Authority's (CHFFA) Community Services Infrastructure (CSI) Grant Program.

Creating and expanding community gradual transitions from jail and alternatives to incarceration is important to our community as we continue to explore strategies to reduce crime in our local community.

The program will include intensive case management, a transitional social rehabilitation program, coordination of care for mental health and substance use disorders, and the implementation of restorative justice principles that will help the individual come to terms with the offenses that have been committed.

The program, if successful, may help to reduce the likelihood of reoffending, allowing our department to distribute resources to other areas in need. It is for these reasons that we respectfully ask for your full and fair consideration of the Department of Behavioral Health's CSI Grant Program application.

Sincerely,

A blue ink signature of Kirk Haynes, written in a cursive style.

Kirk Haynes
Chief Probation Officer
Fresno County Probation Department

OFFICE OF THE CHIEF PROBATION OFFICER

3333 E. American Ave. / Building 701 / Suite B / Fresno, California 93725

Phone (559) 600-1294 / FAX (559) 455-2488

The County of Fresno is an Equal Employment Opportunity Employer



COUNTY OF FRESNO

Elizabeth Diaz
Public Defender

March 22, 2019

California Health Facilities Financing Authority
Community Services Infrastructure Grant Program
915 Capitol Mall C-15
Sacramento, CA 95814

Dear California Health Facilities Financing Authority,

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Creating and expanding community gradual transitions from jail and alternatives to incarceration is important to our community as we continue to explore and implement strategies to reduce crime in our local community.

The program will include intensive case management, a transitional social rehabilitation program, coordination of care for mental health and substance use disorders, and the implementation of restorative justice principles that will help the individual come to terms with the offenses that have been committed.

It is for these reasons that we respectfully ask for your full and fair consideration of the Department of Behavioral Health's CSI Grant Program application.

Sincerely,

Elizabeth Diaz
Public Defender
Fresno County Public Defender's Office



2220 Tulare Street, Suite 300/Fresno, California 93721
Telephone (559) 600-3546 / Fax (559) 600-1570
Equal Opportunity Employer



Margaret Mims
Sheriff
Fresno County Sheriff's Office

March 22, 2019

California Health Facilities Financing Authority
Community Services Infrastructure Grant Program
915 Capitol Mall C-15
Sacramento, CA 95814

Gentlemen:

As Sheriff of Fresno County, I support the County of Fresno's Department of Behavioral Health's application for funding through the California Health Facilities Financing Authority's (CHFFA) Community Services Infrastructure (CSI) Grant Program.

Creating and expanding community alternatives to incarceration is important to our community, as we continue to explore strategies to reduce crime in our local community. Offering new programs designed to serve justice-involved individuals who may be seriously mentally ill and/or have a substance use disorder will be of great benefit to the residents of our community and our department.

The program will include intensive case management, a transitional social rehabilitation program, coordination of care for mental health and substance use disorders, and the implementation of restorative justice principles that will help the individual come to terms with the offenses that have been committed.

I believe that funding for this project is critical to the long-term impact of behavioral health programs for justice-involved individuals. It is for these reasons that I respectfully ask for your full and fair consideration of the Department of Behavioral Health's CSI Grant Program application.

Sincerely,

Margaret Mims
Sheriff-Coroner-Public Administrator

Dedicated to Protect & Serve

Law Enforcement Administration Building / 2200 Fresno Street / P.O. Box 1788 / Fresno, California 93717 / (559) 600-8800
Equal Employment Opportunity Employer



CHAMBERS OF
ALAN M. SIMPSON
Presiding Judge

1130 O STREET
FRESNO, CALIFORNIA 93721-2220
(559) 457-6308
FAX (559) 457-1624

Superior Court of California County of Fresno

March 22, 2019

California Health Facilities Financing Authority
Community Services Infrastructure Grant Program
915 Capitol Mall C-15
Sacramento, CA 95814

Dear California Health Facilities Financing Authority:

I write in support of the County of Fresno's Department of Behavioral Health's application for funding through the California Health Facilities Financing Authority's (CHFFA) Community Services Infrastructure (CSI) Grant Program.

Creating and expanding community gradual transitions from jail and alternatives to incarceration is important to our community as we continue to explore strategies to reduce crime in our local community.

The program will include intensive case management, a transitional social rehabilitation program, coordination of care for mental health and substance use disorders, and the implementation of restorative justice principles that will help the individual come to terms with the offenses that have been committed.

It is for these reasons that we respectfully ask for your full and fair consideration of the Department of Behavioral Health's CSI Grant Program application.

Sincerely,

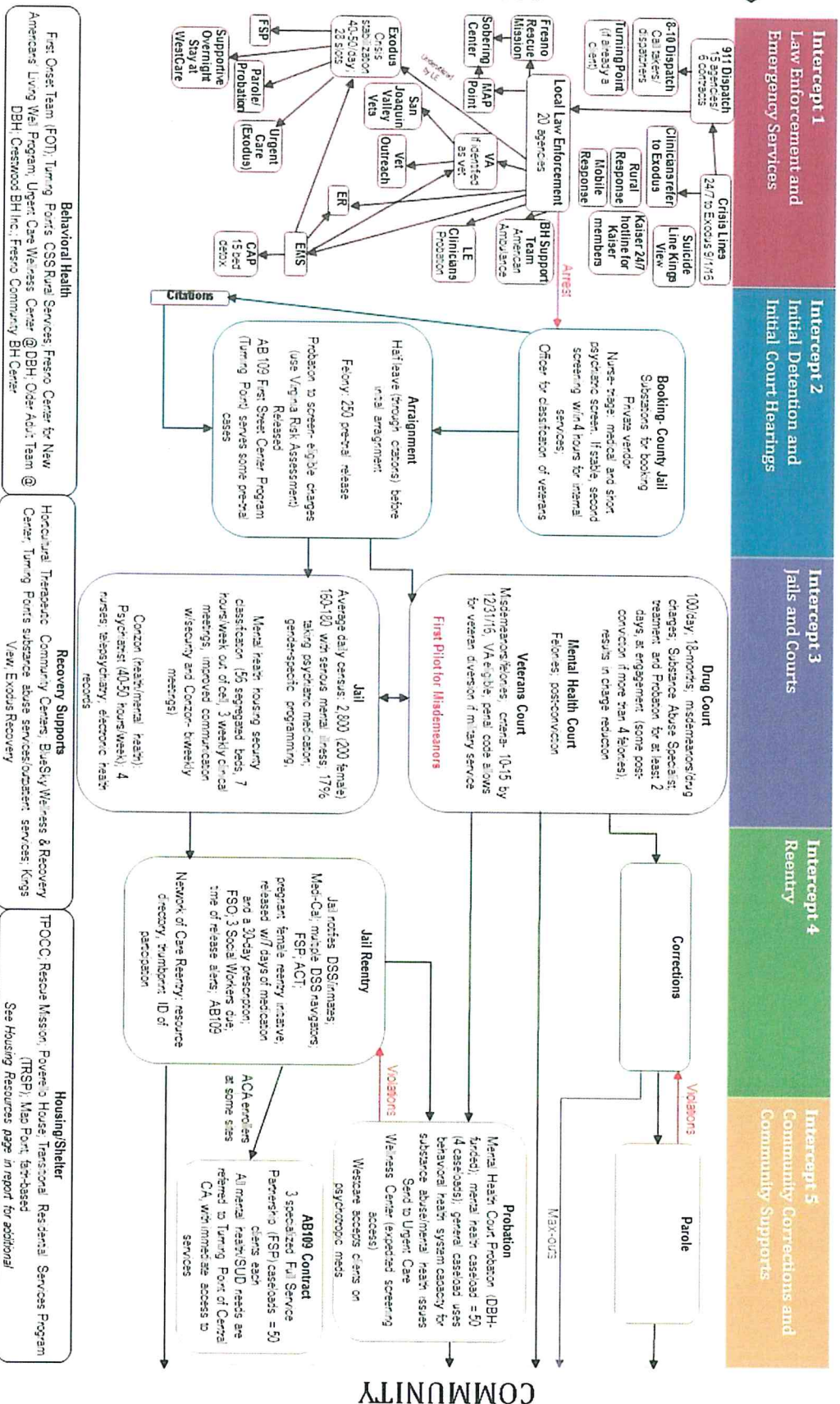
A handwritten signature in blue ink, which appears to read "Alan M. Simpson".

Alan M. Simpson

AMS:rmf

Attachment B – Sequential Intercept Mapping Report

SEQUENTIAL INTERCEPT MODEL MAP FOR FRESNO COUNTY, CA



Attachment C – Program Budget

CHFFA CSI Grant Program
Annual Estimated Operating Program Costs

Line Item Category	Expenses
Salary, Payroll Tax, and Benefits	\$155,000.00
Liability Insurance	\$700.00
Insurance Other - Specify	\$600.00
Telecommunications/data lines	\$2,800.00
Answering Machine	\$0.00
Office Supplies	\$2,200.00
Soc. Rec., Workbooks	\$0.00
Printing/Reproductions	\$0.00
Publications	\$200.00
Legal Notices/Advertising	\$0.00
Purchase of Equipment	\$3,700.00
Equipment Rent/Lease	\$1,000.00
Equipment Maintenance	\$1,000.00
Rent/Lease Building	\$0.00
Facilities Maintenance	\$3,000.00
Utilities	\$15,000.00
Staff Mileage	\$1,100.00
Staff Travel (Out of County)	\$0.00
Staff Training/Registration	\$500.00
Transportation	\$2,500.00
Program Supplies-Client Incentives	\$450.00
Program Supplies-Curriculum	\$0.00
Program Supplies-RT/OT	\$0.00
Program Supplies-Food	\$4,100.00
Program Supplies-Household/Hygiene	\$3,900.00
Program Supplies-Laundry	\$0.00
Program Supplies-U/A, Physical Screening	\$17,000.00
Consultant Services	\$0.00
Contracted Services	\$50.00
Accounting/Bookkeeping	\$100.00
External Audit	\$150.00
Indirect Costs	\$40,000.00
License/Taxes	\$600.00
County Administrative Fee	\$0.00
Other Business Services	\$0.00
Food	\$0.00
Program Expenses	\$0.00
Parenting Training	\$0.00
Child Care Activities	\$0.00
Education Supports	\$100.00
Furniture and Equipment	\$0.00
	\$0.00
TOTAL ANNUAL COST	\$255,750.00

Attachment D – Application Certification



County of Fresno

DEPARTMENT OF BEHAVIORAL HEALTH
DAWAN UTECHT
DIRECTOR

Application Certification

I, Nathan Magsig, Chairman of the Board of Supervisors, an authorized officer of the County of Fresno, certify that, to the best of my knowledge, the information contained in this application is true and correct to the best of my knowledge and belief, and I understand that any misrepresentations or material omissions may result in the cancellation of the Grant and other actions permitted by law and the Grant Agreement.

The County of Fresno will cooperate in providing information and/or documentation, including at the time of site visits, to assist the Authority in consideration of the Application.

Nathan Magsig

By

Signature

Chairman of the Board of Supervisors of the
County of Fresno

Title

April 23, 2019

Date

ATTEST:
BERNICE E. SEIDEL
Clerk of the Board of Supervisors
County of Fresno, State of California

By Susan Bishop
Deputy