

Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: Continuity Of Care Model: Girl Matters
2. Date of Submission: 12/10/2015
3. House Member Sponsor(s): Charles McBurney

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No
If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d
- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget (Will equal non-vetoed amounts provided in Column A)	INCREASED or NEW Recurring Requested	TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year)	Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:					375,000	0	375,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs

5. Requester:

- a. Name: Lawanda Ravoira
- b. Organization: Delores Barr Weaver Policy Center
- c. Email: lravoira@seethegirl.org
- d. Phone #: (904)598-0901

6. Organization or Name of Entity Receiving Funds:

- a. Name: Delores Barr Weaver Policy Center
- b. County (County where funds are to be expended) Duval
- c. Service Area (Counties being served by the service(s) provided with funding) Baker, Clay, Duval, Nassau, Saint Johns

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

Intended Purpose and Need

The purpose of this request is to sustain and expand the Continuity of Care: Girl Matters successful demonstration project developed and implemented by the Delores Barr Weaver Policy Center. We have proven that we can serve girls better in the local community and save the State of Florida significant funding by preventing girls who do not pose a public safety risk from being committed to costly residential programs. For every 20 girls prevented from being committed to a residential commitment facility, the State avoids costs totaling \$554,180. This calculation is based on the latest DJJ budget report (submitted 9/15/15) which shows non-secure residential per diem at \$153.94 per day, or \$27,709 per six months (average stay for girls is 6-9 months).

Community Support

The successes of the Demonstration pilot were recently featured on a national broadcast of PBS NewsHour Weekend on September 12, 2015. The project has garnered widespread support. Letters of support are included from the following community leaders:

- ? Honorable Mark H. Mahon, Chief Judge, Circuit Court, Fourth Judicial Circuit of Florida
- ? Honorable David M. Gooding, Circuit Court, Fourth Judicial Circuit of Florida
- ? Honorable Henry Davis, Circuit Court, Fourth Judicial Circuit of Florida
- ? Honorable Suzanne Bass, Fourth Judicial Circuit of Florida
- ? Angela B. Corey, State Attorney, Fourth Judicial Circuit of Florida
- ? Robert W. Mason, Director of the Juvenile Division, Law Offices of the Public Defender
- ? Dr. Vicky Waytowich, Executive Director, Jacksonville System of Care Initiative, Partnership for Child Health

? Denise Marzullo, MBA, LMHC, President & CEO, Mental Health America of Northeast Florida, Inc.

? Dr. Christine Cauffield, President, Executive Director LSF, Health Systems (Managing entity)

Launched in 2014 on the First Coast (Duval, Clay, Nassau, Baker, St. Johns Counties), this pilot project was funded by philanthropic and locally matched system of care dollars. These funds will end July, 2016. The overarching goal of the Continuity of Care Model is to slow down the conveyor belt of girls going deeper into the justice system and to shut the revolving door of girls who cycle in and out due to unaddressed mental health needs.

Based on a data analysis of the FL DJJ Positive Achievement Change Tool, Assessment (PACT), girls on the First Coast region reported greater risk factors than girls statewide in every category-physical and sexual abuse, mental health needs, self-mutilation, suicidal ideation and attempts, and family risk factors.

Unfortunately, girls from the First Coast with mental illness or those who experience trauma are placed in moderate and high risk level DJJ commitment programs at higher rates than the statewide average. Duval County in particular continues to have the highest incarceration rate of girls compared to other counties in Florida. There is an urgent need for mental health interventions to keep girls from the First Coast out of the justice system. The life histories of the girls served in the project include grief and loss, sexual and/or physical abuse and other trauma-laden experiences. Most of the girls have histories of cycling in and out of detention, court and probation, are being recommended for residential commitment (locked facility) or have not been successful upon reentry from a lockup facility. Without appropriate treatment, these girls are not only at higher risk for deeper involvement in the justice system but are also more likely to experience early pregnancy, substance abuse, continued interpersonal violence and subsequent involvement in adult corrections.

What makes this project effective is that it is a true continuity of care model designed to provide the most intensive mental health and care management services to girls and families who need it the most ? and who have been underserved by the mental health system. First, the model provides intensive services to girls from homes where incarceration is intergenerational. These girls have fallen through the cracks and without intensive intervention are on a fast track to adult prison. Second, this model provides critically needed intervention services to girls at every point in the system to prevent them from deeper involvement. The goal is to keep girls from becoming entrenched in the justice system. Intervention services are provided for those referred for diversion from the State Attorney's Office, in detention, in court, on probation and throughout re-entry into the community.

Type and Amount of Services

The following summarizes the type and amount of serves to be provided to system-involved girls aged 11-18 and their family members:

? Diversion Groups (approximately 24 groups per year/100 girls served annually): Psychoeducational group for girls who are court ordered by the State Attorney's Office to attend diversion for first time misdemeanor offenses. Groups are designed utilizing the latest research and professional expertise with group process in our two signature programs: SAVVY Sisters and Girl Matters?. In addition, girls and families are offered the opportunity to continue attending therapy groups and individual therapy sessions when needed.

? SAVVY Sister enrichment groups in detention (facilitated twice weekly 104 groups per year /150 girls annually): The SAVVY Sister (Safety, Action, Values, Victory, Yes I Can) groups are conducted twice weekly in 2-hour sessions with girls in detention. Two separate groups are held at the detention center based on the ages of girls (11-14 and 15-17). Here, girls are identified for additional services based on their individual needs assessment. The curriculum is intended to build girls' coping skills in order to prevent girls' pathways deeper into the juvenile justice system. Each topic addresses safety with self, with others in the program and safety in the community. Girls explore both their personal and societal values while they learn and practice important skills including effective communication, how to build relationships, how to advocate for oneself, team building, etc.

? Individual/Family Therapy and Care Management/Crisis Intervention Services (on as needed basis/50 served annually): Evidence based therapeutic

models including Trauma-Focused-Cognitive Behavioral Therapy are utilized with girls and their families to increase each girl's sense of connectedness to her community and to build strong therapeutic alliances. Due to the typically extensive psychosocial needs of each girl and her family, the numbers of sessions is individualized but services are typically provided for a minimum of 6 months. Staff is on call 24/7 to provide comprehensive care management and crisis intervention services aligned with clinical services.

? Tele-mental Health Counseling for girls in residential commitment (2 sessions monthly for 6 months/10 served annually): If a girl is committed to a residential juvenile justice facility, we continue a relationship with her via a HIPPA compliant video web portal to deliver telebehavioral health sessions bi-weekly which are arranged in partnership with private residential providers to prepare them for successful re-entry to the community upon release. Sessions focus on strengthening the girls' relationships with her family members and the community. Our mental health professionals work with residential facility staff to build on successes and specific service goals. The average length of residential commitment is 6-9 months. Girls who received tele-mental health services are now receiving individual counseling in their home community with the same mental health professional they started with following their release from their commitment program. For girls who are awaiting sentencing or placement, mental health services can be provided to her in her community to ensure continuity of services.

Areas are served

Baker, Clay, Duval, St. Johns and Nassau counties

Expected Results:

? Services provided to 360 girls and their caregivers who are underserved and at risk of deeper involvement in the justice system

? Increase in access and quality of mental health services (e.g. satisfaction with groups, knowledge of resources and confidence to access services, useful information/lessons).

? Girls reporting increase in quality of life indicators (e.g., safety, social supports, relationship to therapist, self-reported positive changes).

? Reduced symptomology after six months for girls receiving individual therapy with consistent group attendance.

? Reduced involvement in the Juvenile Justice System

Detailed Budget of expenses (See Supporting Documentations for Details)

Personnel

President & CEO, .10FTE (Doctoral level)

Vice President of Model Programs, Clinician .30FTE (Masters level)

Psychologist, .10FTE (Doctoral level)

Therapist, 1.0 FTE (Masters Level)

Therapist 1,0 FTE (Masters Level)

Care Manager (1.0FTE) (Bachelors level)

Evaluator .30FTE (Masters level)

Support staff (.20 FTE) \$254,180

Employee Benefits 76,254

Total Personnel/Benefits \$330,434

Operational Expenses

Liability Insurance \$ 2,000
Occupancy/Phone/Technology 8,800
Printing 2,500
Travel & Mileage (12 months x \$1,666 per month) 20,000
Supplies & Equipment 6,266
Special Needs 5,000
Total Expenses \$44,566

Total Direct Costs \$375,000

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

Federal: 0

State: 0 (Excluding the requested Total Amount in #4d, Column G)

Local: 0

Other: 50,000

9. Is this a multi-year project requiring funding from the state for more than one year?

Yes