



CORRECTIONS STANDARDS AUTHORITY

2008-09 REAPPLICATION PACKET

Mentally Ill Offender Crime Reduction Grant Program

February 2008

Mentally Ill Offender Crime Reduction Grant Program 2008-09 Grant Reapplication

Background

AB 1811 established the Mentally Ill Offender Crime Reduction (MIOCR) grant program and directed the Corrections Standards Authority (CSA) to award grants for projects designed to reduce recidivism among adult and juvenile mentally ill offenders (Chapter 48, Statutes of 2006). The 2006 State Budget Act, as amended by AB 1811, appropriated \$22,295,500 for grants targeting adult mentally ill offenders and \$22,295,500 for grants targeting juvenile mentally ill offenders. AB 1811 required that these funds be awarded on a competitive basis using criteria developed by the CSA. To fulfill these statutory mandates, the CSA issued a Request for Proposals (RFP) in 2006 and, as a result of the RFP process, awarded 44 MIOCR grants that began on January 1, 2007.

As indicated in the 2006 RFP, there is no guarantee of continued funding beyond the initial 18-month grant period, which ends June 30, 2008. However, the RFP also stipulated that the projects awarded grants through the competitive process may obtain funding for up to four additional years **if** the Legislature appropriates funds for the program and the grantee is making progress toward stated goals and is in compliance with contractual requirements.

Although nothing is certain until the Governor signs the 2008-09 budget, the CSA is initiating the 2008-09 grant reapplication and contract development processes for the existing 44 MIOCR grantees. Assuming funds are appropriated, the grants would be for a 12-month period that begins July 1, 2008. As indicated in the 2006 RFP, grantees will be eligible to request up to their original grant amount. However, the amount requested by grantees must be justified in the reapplication and the amount awarded will be contingent upon approval of the reapplication by CSA staff and the availability of funds. While CSA staff hopes that sufficient funds are available in the final 2008-09 budget to fully fund all grants at their requested amount, it is possible that this may not be the case. In the event that less funding is available, staff will need to adjust the grant amounts for the 2008-09 contracts. While we have not yet determined the specifics of any adjustments that might be needed, our goal would be to undertake this task in a manner that is fair and equitable for grantees.

Grant Reapplication Requirements

Eligible Applicants: Only the 44 existing MIOCR grantees are eligible to apply for these funds. The Sheriff's Department or Department of Correction/s, whichever agency manages the jail system, will continue to serve as the lead agency for grants targeting adult mentally ill offenders – and the Sheriff or Director of the Department of Correction/s (or the designated Project Director) must submit the reapplication on behalf of the county. Likewise, the Probation Department is the lead agency for grants targeting juvenile mentally ill offenders – and the Chief Probation Officer (or designated Project Director) must submit the reapplication.

Required Local Match: Counties must provide a local match of 25 percent of the grant funds requested. This obligation may be met through hard (cash) or soft (in-kind) matching funds, or

a combination of both. The local match may not include State General Fund dollars but could include federal dollars dedicated to the project.

Board of Supervisors' Resolution: Pursuant to state law, applicants must submit a resolution from their county Board of Supervisors in order to enter into a contract for 2008-09 funding. Please see **Attachment A** for a Sample Resolution containing language that **must** be included in the board's resolution. The CSA recognizes that it may not be possible for applicants to secure a resolution by the time the reapplication is due. In these situations, a resolution must be submitted before the CSA will enter into a grant agreement with the applicant.

Basic Grant Requirements: The CSA will continue to require grantees to submit monthly data reports, quarterly financial invoices, and semi-annual progress reports. Please refer to the current contract for additional information on these and other grant requirements.

Grant Reapplication Submission

CSA staff hopes to receive completed grant reapplications by **March 31, 2008** in order to complete the contract development process as quickly as possible once the Governor signs the new state budget. Please keep in mind that submitting a grant reapplication does not bind the county or the CSA to any contractual obligations, so there is no reason to delay this important step in the process. Reapplications must be **emailed** to the CSA staff person assigned to the county (Lynda.Frost@cdcr.ca.gov or Helene.Zentner@cdcr.ca.gov).

Attachment A
Sample Board of Supervisors' Resolution

Counties must submit a resolution from the Board of Supervisors that includes, at a minimum, the authorization and assurances outlined in the following sample. Although it may not be possible to secure the resolution in time to submit it with the grant reapplication, the CSA must have a resolution on file before executing a grant agreement.

WHEREAS the (***name of county***) is seeking state funds available through the Mentally Ill Offender Crime Reduction (MIOCR) grant program administered by the Corrections Standards Authority (hereafter referred to as CSA), be it resolved that the Board of Supervisors:

Authorizes (***title of designated official****) to submit the MIOCR reapplication on behalf of the county and to sign the Grant Agreement with the CSA, including any amendments thereof, on behalf of the county;

Assures that the county will provide all matching funds required for the MIOCR grant;

Assures that the county will not use grant funds to supplant expenditures controlled by this body; and

Assures that the county will abide by the statutes governing the MIOCR grant program as well as the terms and conditions of the Grant Agreement as set forth by the CSA.

***IMPORTANT NOTE:** For projects targeting adult mentally ill offenders, the title of the designated official must be the Sheriff, Director of the Department of Correction/s, or Chair of the Board of Supervisors. For projects targeting juvenile mentally ill offenders, the title of the designated official must be the Chief Probation Officer or Chair of the Board of Supervisors.



DEPARTMENT OF CORRECTIONS AND REHABILITATION
CORRECTIONS STANDARDS AUTHORITY

MENTALLY ILL OFFENDER CRIME REDUCTION GRANT PROGRAM

SECTION I: APPLICANT INFORMATION

A. APPLICANT (LEAD AGENCY)			
AGENCY NAME (COUNTY AND DEPARTMENT)		TELEPHONE NUMBER	
El Dorado County Sheriff's Department		(530) 621-5655	
STREET ADDRESS	CITY	STATE	ZIP CODE
300 Fair Lane	Placerville	CA	95667
MAILING ADDRESS	CITY	STATE	ZIP CODE
300 Fair Lane	Placerville	CA	95667
B. PROJECT TITLE (NAME OF GRANT PROGRAM)	C. AMOUNT OF FUNDS REQUESTED		
El Dorado County Behavioral Health Court Expansion Program	\$700,000		
D. IMPLEMENTING AGENCY (DESIGNATED BY LEAD AGENCY)			
AGENCY NAME			
El Dorado County Mental Health			
CONTACT PERSON		TELEPHONE NUMBER	
John Bachman, PhD		(530) 621-6370	
STREET ADDRESS		FAX NUMBER	
670 Placerville Drive, Suite 1B		(530) 295-2639	
CITY	STATE	ZIP CODE	E-MAIL ADDRESS
Placerville	CA	95667	john.bachman@edcgov.us
E. PROJECT DIRECTOR			
NAME AND TITLE		TELEPHONE NUMBER	
Lt. Randy Peshon		(530) 573-3040	
STREET ADDRESS		FAX NUMBER	
1051 Al Tahoe Blvd.		(530) 541-6721	
CITY	STATE	ZIP CODE	E-MAIL ADDRESS
South Lake Tahoe	CA	96150	peshonr@edso.org
F. PROJECT FINANCIAL OFFICER			
NAME AND TITLE		TELEPHONE NUMBER	
Mary Pierce		(530) 621-5679	
STREET ADDRESS		FAX NUMBER	
300 Fair Lane		(530) 626-8091	
CITY	STATE	ZIP CODE	E-MAIL ADDRESS
Placerville	CA	95667	piercem@edso.org
G. APPLICANT'S AGREEMENT			
By submitting this reapplication, the applicant assures that the grantee will abide by the laws, policies and procedures governing this funding.			
NAME AND TITLE OF PERSON AUTHORIZED TO SIGN AGREEMENT (SHERIFF, DIRECTOR OF CORRECTION/S, CHIEF PROBATION OFFICER, OR BOARD OF SUPERVISORS' CHAIR)			
Sheriff Jeff Neves			
APPLICANT'S E-MAIL ADDRESS			DATE
nevesj@edso.org			03/28/08

SECTION II: PROJECT INFORMATION

A. DESCRIPTION

Provide a brief description of your current project, including the evidence-based treatment model in which it is anchored and the services provided to program participants.

El Dorado County (EDC) encompasses a large geographical area (1,711 square miles) with a population of approximately 175,000 people. Placerville, the County seat, is located in a region known as the Western Slope (WS) and is surrounded by small, rural communities and unincorporated areas. South Lake Tahoe (SLT) is the most densely populated area of the County. A 60-mile stretch of mountainous road, difficult to navigate during the winter, connects these regions. Our current project expanded the SLT Behavioral Health Court (BHC) program, established a BHC program in Placerville. The Behavioral Health courts provide enhanced Forensic Assertive Community Treatment (FACT) for mentally ill offenders in both regions of the County. The Sheriff's Department serves as the Lead Agency and the Mental Health Department serves as the Implementing Agency in this collaborative expansion effort.

Our specialty behavioral health courts function as therapeutic conduits through which incarcerated individuals with mental illness and other co-occurring disorders access treatment and social services. Our BHC MIOCR funded project has allowed us to expand the array of mental health and community services necessary to significantly reduce recidivism among mentally ill offenders while assisting them lead productive lives in both the Placerville and South Lake Tahoe locations.

We follow the "best practices" associated with positive outcomes for mental health courts as outlined in Peters and Osher's (2004) "Co-Occurring Disorders and Specialty Courts" published by the National Gains Center and the TAPA Center for Diversion. These practices address the underlying mental illness that brings offenders to court, engage the entire criminal justice system in diverting the target population to appropriate treatment alternatives, and suggest incentives and sanctions as appropriate to encourage adherence to treatment plans.

Specifically, we use an integrated service delivery model that consists of intensive collaboration and cooperation between County Superior Court Judges, the County offices of the District Attorney, Public Defender and Sheriff, the Departments of Mental Health, Probation and Human Services, as well as local advocacy and community support agencies such as homeless service providers, mental health consumer groups, vocational service organizations, NAMI and private mental health and substance abuse providers. This dedicated "multi-disciplinary" group functions much like an inpatient triage team, led by a Superior Court Judge. The team orchestrates in-custody interventions (e.g., assessment, outreach, engagement, transition planning for release) and improved linkage to post-custody treatment resources and social services by using a Forensic Assertive Community Treatment approach. With MIOCR funds, we have in the last 18 months built the county-wide resources necessary to fill the historical in-custody and post-release service gaps.

In-custody assessments, outreach and engagement are conducted in several ways. Mental health staff (including bilingual staff in SLT) routinely screen the jail population to identify those with serious mental illness who meet the BHC eligibility criteria. Prior to an inmate's acceptance into the BHC program, a mental health professional meets with the potential participant while in custody to assess all mental health and ancillary service needs, to review program expectations,

including court appearances, treatment requirements, drug testing locations and schedules and to emphasize the associated rewards and sanctions. The BHC team reviews the assessment data and in collaboration with the offender, creates an individual treatment plan for each eligible participant. The plan becomes synonymous with the formal court orders and probation plan.

The treatment plan addresses the post-custody services and interventions most relevant to the individual's needs and situation. It is rooted in the forensic assertive community treatment model (FACT, adapted locally from SAMHSA's "Assertive Community Treatment Implementation Resource Kit," 2003) and typically includes intensive case management to provide assistance procuring social security disability entitlements, vocational training, employment, transportation and transitional housing. Additional services can include medications, day rehabilitation, individual and group treatment, educational opportunities, self-management and relapse prevention planning. The South Lake Tahoe MIOCR clients may participate in any of our three dual diagnosis groups: dual diagnosis education, dual diagnosis relapse prevention, and harm reduction. They also may participate in our in house volunteer program, our Co-Op with the Dept. of Rehabilitation, Employment Services Group. Cooking Skills Group. Coffee House, Taco Night, Day Rehabilitation, the Walking Group, and Saturday night movie and dinner social program. The WS-BHC program is offered at Prospect Place, Monday-Friday from 9AM -3PM in a large suite area that provides a client lounge, group rooms, computer lab, individual interview rooms, a kitchen, outdoor area and shower facilities. Crisis support is available 24/7 through the county's psychiatric emergency service. Clients gather informally over a cup of coffee before going into group or individual sessions. The group topics include Motivation/Stages of Change; Medication Management; Job Readiness, Artistic Expression, Public Health News and Notes; Women's/Men's Support Group; Life Skills Training; and Dual Diagnosis Treatment Group. In addition, the participants conduct a weekly Community Meeting.

Participation in the BHC program consists of overlapping phases that include judicial oversight, probation supervision, individual treatment, drug testing, rewards and sanctions. Phases overlap to build upon already acquired skills and to adjust for relapses and, occasionally, violations of probation. As a person moves through the phases of the program, s/he is evaluated and promoted based on successful completion of each phase. Because treatment plans are individualized, the requirements for success vary and are determined by the mental health case manager, treatment team members and BHC Judge.

For the first full year of operation our BHC MIOCR expansion programs were had significant success in the achievement of the primary goal of the project: reducing recidivism. Since the inception of the El Dorado County Behavioral Health Courts every single participant has avoided re-offending. Not one of the BHC clients has been charged with any new crime while participating in the program during this time period. The desired outcome of fewer repeat offenders, fewer days in custody, follow an increase in days spent in mental health treatment, work and school. This has been accomplished by leadership from our participating Superior Court Judges, the Sheriff's Dept., Mental Health, and strong commitment of individuals who serve on the multi-disciplinary teams of both Courts. The success is also attributed to the use of evidence based practices, forensic assertive community treatment, strong dual diagnoses programs and adherence to the principle of client-centered treatment that allows for the full participation of the client in their own recovery process. The program has been given credit by the So. Lake Tahoe Jail Commander for helping to reduce the SLT jail population during this period by approximately 30%. The SLT BHC MIOCR program has graduated 3 clients to date successfully completing all probation and court requirements. The WS-BHC predict that they will graduate 2 clients in the summer.

The project has met and exceeded the participation enrollment for the first 12 months. A total of 43 individuals have been served in the two locations of El Dorado County. The Multi-Disciplinary Team members of both BHC's have participated in several trainings to strengthen their skills and are using strategies of evidence-based practices such as integrated dual diagnosis treatment, motivational interviewing, cognitive behavioral skills training and forensic assertive community treatment.

B. PROJECT MODIFICATIONS

Using the original grant proposal as the yardstick for assessing change, briefly describe any project modifications made during the initial 18-month grant period and explain why they were needed.

Budget and minor project modifications were requested during our initial 18-month grant period due to staffing vacancies, under-budgeted housing and support for MIOCR clients who had also been enrolled in the AB2034 Program in SLT, and under-budgeted housing in Placerville. In SLT this resulted in the welcome addition to the BHC team of our former AB2034 staff, who were already trained and skilled in ACT and working with difficulty to engage, severely mentally ill clients who often have substance abuse problems and legal difficulties. The former AB2034 staff include two bilingual, bicultural staff, and a substance abuse counselor.

The SLT BHC program experienced challenges in the form of the flooding of the office in January 2007, the move of all So. Lake Tahoe staff to a new location in April, and the Angora Fire of June 2007. However, the BHC program continued to develop and provide services to clients in accordance with the timeline specified in our original grant proposal.

The WS-BHC experienced challenges following the tragic death in October 2007 of a Prospect Place client (from an inadvertant drug overdose). In November, the WS-BHC convened a special meeting of top-level County administrators and staff serving on the BHC team. The presiding Judge, together with the Sheriff, the District Attorney, the Director of the Probation Department and the Director of the Mental Health Department reaffirmed their mutual commitment to public safety, client security and wellness recovery. There was agreement to continue work to improve the communication and collaboration of the stakeholders on the BHC team through deepening the understanding of differences in each other's roles while not losing site of the common goal. In addition, the Team would develop more diverse housing options that could better meet the client's needs, provide additional client support through the "patients rights advocate", and reach out to family members through partnering with NAMI on new classes and support groups. Plans are in place develop a spectrum of housing options that span more intense group residential dual-diagnosis treatment settings to less intense individual and independent living situations. The Department is in the planning stages of contracting with a community partner for "Independent Living Services" that will be used to support clients as they make these transitions.

C. PROPOSED MODIFICATIONS

Based on your experience to date, briefly describe any modifications you are proposing to make to the project in 2008-09 and explain why the modifications are needed.

The MIOCR-funded BHC project facilitated the expansion of an array of mental health and community services necessary to significantly reduce recidivism among mentally ill offenders while assisting the participants to lead productive lives in both the Placerville and SLT locations. With this reapplication, we are proposing some minor modifications designed to improve

outcomes and continue expanding services. The SLT-BHC has been successful in offering its participants a sufficient variety of housing options. The WS-BHC team intends to create a similar array of housing and support services in the 2008-2009 project year. A single housing option for the WS-BHC clients proved to be too limiting and did not adequately address their diverse and often complex needs.

Developing New Housing Options:

While continuing to contract with the "Crestwood Manor" in Sacramento for the intense residential treatment services required by the most seriously ill WS-BHC clients, we plan to establish a new service contract with Placerville's "Progress House Treatment Services" which provides residential, transition house and outpatient drug and alcohol treatment. Progress House staff will team with the WS-BHC mental health clinicians to design treatment plans for clients with co-occurring disorders. We plan to establish a "Rental Assistance" program for clients ready to live independently, but who do not have adequate income to pay the monthly rent. In these cases, clients will pay 1/3 of their income (if available) toward the rent of an apartment or motel room and the project will pay the remainder. We will expand an existing contract with "Choices Transitional Services" to help assist BHC clients obtain independent housing and provide support services to allow them to maintain it. Assertive community treatment services include identifying available housing, assistance with rental agreements and payments, individual budget planning and management, cooking instruction, laundry instruction, nutrition and shopping assistance, medication management and participation in educational and social activities with other participants and the BHC team members.

Court Incentives:

The judicial use of both positive reinforcements and punitive admonishments that are rendered by the Superior Court Judges (Susan Kingsbury in SLT and James Wagoner on the WS) are critical to the success of the BHC program. BHC is called the "clapping court" because it is not unusual to hear a round of applause and cheering coming from the courtroom after the Judge presents a small gift certificate (e.g., to Starbucks) or special commendation to a participant for having "stayed the course" in the past two-week period.

The positive incentives are an effective tool used by the Judges to reward clients' progress in the program. We will continue using these small incentives and propose adding the use of MIOCR grant funds to allow the Court to offset restitution fees for the successful completion of the program. In some cases these amounts can be quite high and overwhelming for clients who have no or very little savings or income. This added incentive to "do treatment rather than time" could serve to motivate initially ambivalent clients to enter and complete the program.

The Judges can (and do) impose sanctions when clients violate probation. Sanctions are discussed in advance by the entire BHC team and range from the participant writing an essay for the Court, to performing community service, to being remanded to jail for a 2-7 day period.

Expand the Consumer Work Force:

SLT and WS-BHC intend to expand the number of salaried positions from two to four part-time, extra-help mental health aids who have graduated from the BHC program to serve as mentors to current participants. These individuals would be eligible to become permanent employees of El Dorado County's Mental Health Department and earn a modest wage (\$10 to \$15 per hour) while assisting staff with a variety of tasks including co-facilitating groups, assisting with supervision of outings, helping to prepare meals and providing support to new participants as they enter into the program.

Assessment, Data Collection and Analysis:

The Mental Health Department and the Pacific Graduate School of Psychology (PGSP) in Palo Alto, California are working collaboratively to establish an evaluation center for the Department which measures various client characteristics pre- and post-treatment. A great deal of the initial work completed to date for this evaluation center has involved BHC clients. We propose supporting half of the cost of this ongoing work with MIOCR grant funds. Specifically, PGSP graduate students conduct the initial client assessments by administering the psychological tests that comprise the evaluation center's multidimensional battery. These assessments include measures of motivation to change, recidivism risk, personality disorders, clinical symptoms, role functioning and treatment outcomes.

Continued Evidence-Based Training:

Both BHC teams plan to participate in additional training with the Forensic Assertive Community Treatment (FACT) model previously incorporated in the AB2034 program and used in the first year of MIOCR funding. The training will be provided by the CiMH in the spring and summer of 2008 with ongoing consultation afterward. Additionally, the teams will send staff to the Village in Long Beach, CA for "Immersion Training" and will continue to train under Dr. David Mee Lee in motivational enhancement techniques. Dr. Mee Lee consults regularly, by phone, to both BHC teams on difficult BHC cases. A portion of these training costs are to be offset with MIOCR grant funds.

Program Improvements:

On the Western Slope, Prospect Place functions as the "home base" for the WS-BHC. Plans are in place to develop a new outdoor area and a "Clubhouse" community space. The new space will allow for the addition of many daily recreational activities including ping-pong, basketball, gardening, board games and a movie center. The space will also house a new community room where more clients can informally meet to socialize.

The SLT team has taken an active lead in promoting "community intensive training" (CIT) for the local police and sheriff's deputies to better prepare them to identify and intervene with mentally ill people whom they encounter "on the beat." We're interested in the extent to which CIT diverts the mentally ill offender from the criminal justice system to the behavioral health system.

SECTION III: PROJECT BUDGET

A. BUDGET LINE ITEM TOTALS: Please fill out the following table for the proposed budget. Amounts must be whole dollars only. Applicants must provide a 25 percent match of the grant funds requested.

LINE ITEM	GRANT FUNDS	CASH MATCH	IN-KIND MATCH	TOTAL
1. Salaries and Benefits	267,972	0	212,807	480,779
2. Services and Supplies	9,174	0	0	9,174
3. Professional Services	48,464	0	0	48,464
4. CBO Contracts	260,500	0	0	260,500
5. Indirect Costs	63,464	0	21,280	84,744

6. Fixed Assets/Equipment	11,100	0	0	11,100
7. Other	39,326	0	0	39,326
TOTAL	700,000	0	234,087	934.087

B. LINE ITEM DETAILS: In the space below each line item, provide details on how the grant and local match funds entered in Section A (budget line item totals) would be used in the 12-month grant period that begins July 1, 2008.

1. SALARIES AND BENEFITS:

On the Western Slope, grant funds will be used to employ a total of a 0.8 FTE mental health clinician who will provide in-custody assessment and treatment planning services, a 0.5 FTE mental health worker who will provide in-custody jail outreach and post-release forensic assertive community treatment (ACT) and a 1.0 FTE mental health aide to provide peer counseling and a 1.0 FTE Deputy Probation Officer who will provide post-release treatment planning and probationary supervision. The County will make an in-kind contribution to the grant program of a 0.3 FTE mental health clinician, 0.5 FTE psychiatrist, 0.2 FTE program manager and a 0.25 FTE program coordinator. These staff members provide clinical services to the MHPA Prospect Place and Behavioral Court clients and will provide administrative oversight for the program.

In SLT, grant funds will be used to employ a total of a 0.8 FTE mental health clinician to provide in-custody services and post-release FACT treatment, 0.5 FTE mental health worker to assist with meeting the employment needs of this population and a 1.0 FTE mental health aide to provide peer counseling. The County will make an in-kind contribution to the grant program of a 0.1 FTE psychiatrist and 0.2 FTE program manager who will provide clinical services to the MHPA Prospect Place and Behavioral Court clients and will provide administrative oversight for the program.

In most cases the FTE is comprised of two or more staff members.

2. SERVICES AND SUPPLIES:

Grant funds will be used on both slopes to provide drug testing, including baseline hair testing upon a client's entrance into the program as well as for random testing. These funds will also be used for incentives to clients in the form of gift cards or food.

3. PROFESSIONAL SERVICES:

Grant funds will be used on the Western Slope to support the development of clinical informatics system that integrates the assessment results of currently disparate measures, evaluates treatment outcomes in the service of managing care more effectively and provides client's a "voice" in developing their treatment plan and in assessing their own progress and improvement. This system enhances treatment and service outcomes by supporting the treatment team in identifying clients at risk of unfavorable outcomes by prompting consideration of alternative strategies. The County currently has a contract with the Pacific Graduate School of Psychiatry to provide this system.

4. COMMUNITY-BASED ORGANIZATIONS:

The County has identified that housing on both slopes is a key ingredient in stabilizing the Prospect Place and Behavioral Health Court clients. Grant funds will be used to provide for independent living services for those who can live on their own. For others, grant funds will be used for beds contracted through community-based organizations. In addition, on the Western

Slope, the grant will fund a 1.0 FTE job specialist contracted through Crossroads, a community-based organization.

5. INDIRECT COSTS: The amount in the Grant Funds column for this line item may not exceed 10% of the grant funds requested.

Indirect costs incurred by the Sheriff's Department, equaling 10% of the grant amount, will be funded by the grant. Indirect costs incurred by the Department of Mental Health, equaling 10% of the County's in-kind match, will serve as in-kind match.

6. FIXED ASSETS/EQUIPMENT:

Grant funding will be used to furnish the Western Slope's community room that will play a large role in the treatment of the clients.

7. OTHER

Grant funding will be used to provide restitution costs, Immersion and Motivational Interviewing training, forensic psychiatric or medication training, rental assistance, emergency housing, transportation including van use and bus vouchers and for small stipends for volunteers.

C. FUNDING REQUEST

In the space below, explain why the amount of funds requested for 2008-09 is reasonable and appropriate given the anticipated status of the project on July 1, 2008, the amount of grant and match fund expenditures claimed to date, and any modifications proposed for the 12-month grant period.

The County had a slow start-up due to not being able to hire the necessary staff and also because of the instability of the grant funding. Several positions were not staffed until late November. The Western Slope's key psychiatrist vacated the position in October and we are now interviewing candidates and hopeful that we will be able to make an offer within the next month.

In addition, the County upgraded their billing system to Avatar which has been a frustrating process. The system had not been correctly set up and we were unable to obtain reports until December 2007. To make matters worse, many of these reports were not being generated correctly. We are working hard to remedy these system's failures.

We are confident that upon final hirings and system correction and we will be able to fully use the currently approved grant funding.