

I.M. SULZBACHER CENTER FOR THE HOMELESS, INC. – Mental Health Offender Program

FY 2023-2024 City Grant Proposal Term Sheet

Grant Recipient: I.M. Sulzbacher Center for the Homeless, Inc. (“Recipient”)

Program Name: Mental Health Offender Program (the “Program” or “MHOP”)

City Funding Requests: \$310,713.50

Contract/Grant Term: July 1, 2024– September 30, 2025

Any substantial change to this FY 2023-2024 City Grant Proposal Term Sheet (the “Term Sheet”) or a budget change not within 10% of the attached Program budget line-items will require City Council approval.

PROGRAM OVERVIEW:

The Mental Health Offender Program is a diversion program aimed at helping those individuals with severe mental illness who are cycling through the jail attain stability in the community through linkage to housing, healthcare and income. The purpose of MHOP is to reduce the demands on the criminal justice system by helping those with mental illness who rotate through the jail due to non-violent misdemeanor arrests, reducing recidivism and reducing community costs associated with these individuals. The Program provides pretrial release from custody, a customized plan of care to stabilize defendants, and court supervision to ensure compliance with a program developed by Sulzbacher. This request is intended to cover programmatic expenses.

PROGRAM SCOPE OF WORK AND DELIVERABLES:

The Mental Health Offender Program (MHOP) works as such:

Upon notification of a target client’s arrest (if a nonviolent, misdemeanor offense), Sulzbacher staff (Psychiatrist or other mental health professional) screens the individual and if they are willing and appropriate for the Program, attends the first court hearing with the client, advocates with the judge for MHOP enrollment, and enrolls willing clients into the Program. Program enrollees will be on supervision throughout the time they are in the Program from a treatment court. MHOP enrollees will be immediately connected to a team of robust support: a psychiatrist through Sulzbacher’s health clinics, as well as case management and peer support. MHOP provides the client with intensive mental health services including Psychiatry, Counseling, medication management, linkage to disability, peer support, medical treatment, dental treatment and substance abuse treatment on-site. Those persons entering the Program needing housing are placed in temporary housing while permanent housing is secured by the MHOP team. The Program allows those persons suffering from mental illness referred from JSO the security of housing, healthcare and income and gives them the opportunity to regain their independence. The desired outcome of the Program is a decrease in arrests among the mentally ill population by stabilizing them through mental health services and all other wrap-around services needed. This will result in an increased number of persons reentering community life, and a cost savings to the community, law enforcement, and social service agencies. The initial pilot project successfully aided 20 clients, and the Program has been expanded after the highly successful pilot term. The Goal of MHOP is to screen 100 individuals and enroll 40 participants annually.

PROGRAM COSTS/PAYMENT TERMS:

Please see the attached Program Budget Detail and Narrative for the operating costs associated with the Program.

PROGRAM IMPACT & REPORTING:

The MHOP team is experienced in collecting, analyzing, and reporting performance measures. The Program collects extensive information about participants to effectively manage operations and make Program adjustments as necessary. System-level performance and outcome data is collected routinely and analyzed to measure effectiveness and efficiency as well as to identify opportunities and barriers.

Regular staff meetings are held to address and review referrals, screening, assessments, transition plans, engagement, linkage to treatment/services, court issues and ongoing community support. Demographic information collected includes race, ethnicity, gender, age, income level, housing status (pre and post enrollment) and level of education. Criminal justice information collected includes date of arrest, criminal charges, jail bookings, history of arrests, attendance at judicial status hearings, days spent in jail before enrollment, during Program participation and after Program exit, time to referral to admission and total time in the Program. Clinical treatment information includes diagnosis, treatment history, adherence with treatment plan, risk and need level, trauma care, attendance at scheduled psychiatric and therapeutic sessions, drug urinalysis dates and results, housing, and peer support.

Performance is documented in a monthly report outlining the number of screenings, referrals, assessments, enrolled, retained, successfully completed, and unsuccessfully completed. Data is continuously monitored and evaluated to ensure goals and objectives are met. The robust data collection efforts clearly identify and maximize the impact of the proposed Program components.

Current performance measures demonstrate successful outcomes (please see the MHOP 2022 Year End Report) including significant decrease in arrests (91%), decrease in booking costs (92%) and decrease in jail bed days and costs (96%).

The MHOP will develop and update formal MOUs with grant partnering agencies outlining expectations and operational details upon receiving the grant award. Outcome performance will be shared with all stakeholders and partners to build long-term support and resources within Jacksonville and the State of Florida. The MHOP has successfully utilized performance outcomes to promote Program expansion as well as system-transformation since its implementation. All policies, statutes and regulations are in place to support and sustain excellent service delivery. The information gathered as a result of this proposal will further efforts to improve reentry for adults identified with serious mental illnesses and cooccurring substance use disorders involved in the criminal justice system. The Goal of MHOP is to screen 100 individuals and enroll 40 participants annually.

Additional Grant Requirements and Restrictions:

Recipient expenditure of City funds for the Program and the provision of services shall be subject to Chapter 118, Parts 1 – 5 of the *Jacksonville Ordinance Code*, and the terms and conditions of any contract entered between the City and Recipient. Recipient shall use the City funds for the Program in accordance with the City Council approved Term Sheet and Program budget. The City's Grant Administrator may amend this Term Sheet and the approved Program budget consistent with the Program needs, provided that any substantial change to this Term Sheet or a budget change not within 10% of the attached Program budget line-items will require City Council approval.

FY 2024 City Grant - Complete Program Budget Detail

Lead Agency: IM Sulzbacher Center for the Homeless, Inc.

Program Name: Mental Health Offenders Program

Agency Fiscal Year: 23-24

BUDGET

Categories and Line Items	Amend 4		Amend 5		Total Est. Cost of Program FY 2023-2024	Funding Partners			
	Prior Year Prg Funding FY 2022-2023	Current Year Prg Budget FY 2023-2024				Agency Provided Funding	All Other Program Revenues	City of Jacksonville (City Grant)	Federal/ State & Other Funding
I. Employee Compensation									
Personnel - 01201 (list Job Title or Positions no names)									
President/Psychiatrist .18 FTE	\$105,000.00	\$98,872.82	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Psychiatrist .5 FTE	\$149,008.00	\$159,752.75	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Counselor .2 FTE	\$15,730.00	\$12,519.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Family Practice Provider .2 FTE	\$0.00	\$0.00	\$23,000.00	\$0.00	\$23,000.00	\$0.00	\$23,000.00	\$0.00	\$0.00
Medical Assistant .2 FTE	\$0.00	\$0.00	\$8,112.00	\$0.00	\$8,112.00	\$0.00	\$8,112.00	\$0.00	\$0.00
Dentist .2 FTE	\$0.00	\$0.00	\$28,392.00	\$0.00	\$28,392.00	\$0.00	\$28,392.00	\$0.00	\$0.00
Dental Assistant .2 FTE	\$0.00	\$0.00	\$10,221.00	\$0.00	\$10,221.00	\$0.00	\$10,221.00	\$0.00	\$0.00
Peer Support Specialist 1 FTE	\$0.00	\$0.00	\$40,000.00	\$0.00	\$40,000.00	\$0.00	\$40,000.00	\$0.00	\$0.00
Case Manager 1 FTE	\$0.00	\$0.00	\$43,000.00	\$0.00	\$43,000.00	\$0.00	\$43,000.00	\$0.00	\$0.00
10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Subtotal Employee Compensation	\$269,738.00	\$271,145.30	\$152,725.00	\$0.00	\$152,725.00	\$0.00	\$152,725.00	\$0.00	\$0.00
Fringe Benefits									
Payroll Taxes - FICA & Med Tax - 02101	\$9,236.00	\$8,521.53	\$11,683.46	\$0.00	\$0.00	\$11,683.46	\$0.00	\$0.00	\$0.00
Health Insurance - 02304	\$12,894.00	\$17,043.06	\$26,329.79	\$0.00	\$0.00	\$26,329.79	\$0.00	\$0.00	\$0.00
Retirement - 02201	\$4,443.00	\$2,450.64	\$3,359.95	\$0.00	\$0.00	\$3,359.95	\$0.00	\$0.00	\$0.00
Dental - 02301	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Life Insurance - 02303	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Workers Compensation - 02401	\$930.00	\$334.18	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Unemployment Taxes - 02501	\$109.00	\$1,336.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Benefits - (Please describe)	\$157.00	\$222.79	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Subtotal Taxes and Benefits	\$27,769.00	\$29,908.91	\$41,373.20	\$0.00	\$41,373.20	\$0.00	\$41,373.20	\$0.00	\$0.00
Total Employee Compensation	\$297,507.00	\$301,054.21	\$194,098.20	\$0.00	\$194,098.20	\$0.00	\$194,098.20	\$0.00	\$0.00
II. Operating Expenses									
Occupancy Expenses									
Rent - Occupancy -04408	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Telephone - 04181	\$2,573.00	\$4,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Utilities - 04301	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Maintenance and Repairs - 04603	\$2,457.00	\$9,012.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Insurance Property & General Liability - 04502	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other - (Storage)	\$1,188.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Office Expenses									
Office and Other Supplies - 05101	\$3,900.00	\$3,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Postage - 04101	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Printing and Advertising - 04801	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Publications - 05216	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Staff Training - 05401	\$4,295.00	\$1,300.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Directors & Officers - Insurance - 04501	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Professional Fees & Services (not audit) - 03410	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Drug & Background Screening - 04938	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other - Equipment under \$1,000 - 06403	\$0.00	\$900.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other - (Janitorial Supplies)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel Expenses									
Local Mileage - 04021	\$7,704.00	\$6,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Parking & Tools - 04028	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Equipment Expenses									
Rental & Leases - Equipment - 04402	\$0.00	\$7,138.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vehicle Fuel and Maintenance - 04216	\$0.00	\$1,350.00	\$1,411.50	\$0.00	\$0.00	\$1,411.50	\$0.00	\$0.00	\$0.00
Vehicle Insurance -04502	\$10,857.00	\$8,932.19	\$6,638.10	\$0.00	\$0.00	\$6,638.10	\$0.00	\$0.00	\$0.00
Other - Equipment under \$1,000	\$0.00	\$0.00	\$3,500.00	\$0.00	\$0.00	\$3,500.00	\$0.00	\$0.00	\$0.00
Direct Client Expenses - 08301									
Client Rent	\$45,462.00	\$40,000.00	\$46,253.00	\$0.00	\$0.00	\$46,253.00	\$0.00	\$0.00	\$0.00
Client Transportation	\$9,612.00	\$4,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Client Food	\$54,511.00	\$30,000.00	\$5,812.70	\$0.00	\$0.00	\$5,812.70	\$0.00	\$0.00	\$0.00
Client Medical	\$2,451.00	\$2,213.36	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Client Educational	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Client Personal	\$0.00	\$25,000.00	\$1,000.00	\$0.00	\$0.00	\$1,000.00	\$0.00	\$0.00	\$0.00
Client Other (Client Shelter Bed)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Client Other (Community Integration)	\$4,983.00	\$3,600.00	\$2,000.00	\$0.00	\$0.00	\$2,000.00	\$0.00	\$0.00	\$0.00
Total Operating Expenses	\$149,993.00	\$146,445.79	\$66,615.30	\$0.00	\$66,615.30	\$0.00	\$66,615.30	\$0.00	\$0.00
III. Operating Capital Outlay (OVER \$1,000)									
Machinery & Equipment - 06402	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Computers & Software - 06427	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other - (Van for transportation of clients)	\$0.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$0.00
Total Capital Outlay	\$0.00	\$0.00	\$50,000.00	\$0.00	\$50,000.00	\$0.00	\$50,000.00	\$0.00	\$0.00
Direct Expenses Total	\$447,500.00	\$447,500.00	\$310,713.50	\$0.00	\$310,713.50	\$0.00	\$310,713.50	\$0.00	\$0.00
Percent of Budget	-	-	100.0%	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%

Last Modified: 02/16/2024

All City Grant items listed must be included in the narrative section of the budget.

**Budget Narrative for Selected Items of Cost
 FY 2024 City Grant Application
 Program Budget Narrative (Max. 2 Pages)
 Proposed Funding Period: FY 2023-2024
 COJ Funding Only**

Agency: I.M. Sulzbacher Center for the Homeless, Inc.

Program Name: MHOP

EXPENSES: Please provide narrative description for all categories listed below for which you are seeking **City Funding Only**.

We have included those required elements in the spaces below. See instructions when listing personnel expenses.

Please feel free to add additional lines as necessary to provide explanations using the line insert feature.

I. Employee Compensation - (not related to costs of the office of the governor of a state or the chief executive of a political subdivision)

Salary & Wages

President/Psychiatrist .18 FTE	
Psychiatrist .5 FTE	
Mental Health Counselor .2 FTE	
Family Practice Provider .2 FTE	23,000.00
Medical Assistant .2 FTE	8,112.00
Dentist .2 FTE	28,392.00
Dental Assistant .2 FTE	10,221.00
Peer Support Specialist 1 FTE	40,000.00
Case Manager 1 FTE	43,000.00

Payroll Taxes & Benefits

Payroll Taxes - FICA & Med Tax (7.65%)	11,683.46
Health Insurance (17.24%)	26,329.79
Retirement (2.20%)	3,359.95

II. Operating Expenses

Occupancy Expenses

Office Expenses

- Office and Other Supplies
- Staff Training
- Janitorial Supplies
- Drug & Background Screening

Travel Expenses - not related to entertainment expenses

- Staff Mileage

Equipment Expenses

Rental & Leases - Equipment	
Vehicle Fuel and Maintenance	1,411.50
Vehicle Insurance	6,638.10
Other - Equipment under \$1,000	3,500.00

Direct Client Expenses

Client Housing	46,253.00
Client Shelter Bed	
Client Food	5,812.70
Client Medical	-
Client Educational	
Client Personal	1,000.00
Client Other Guest Transportation	-
Client Other - Community Integration	2,000.00

III. Operating Capital Outlay:

Other - (Van for transportation of clients)	50,000.00
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