

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/~~Ord~~ No.: 18925

Sponsor(s): Dennis Waits

Date: Sept. 14, 2015

<p>SUBJECT</p>	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: <u>A resolution authorizing the County Executive to execute an agreement with Mid – America Regional Council for the Kansas City Crisis Center, a pilot program to be funded by the County's Anti-Drug Sales Tax Fund for the 2015 fiscal year which is engaged in anti-drug and anti-violence activities and purposes, at an aggregate cost to the county not to exceed \$100,000.00.</u></p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="321 646 1258 989"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$100,000.00</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$100,000.00</td> </tr> <tr> <td>Amount budgeted for this item *:</td> <td>\$100,000.00</td> </tr> <tr> <td>Source of funding (name of fund) and account code number: From: 008-Anti-Drug 4404-6789</td> <td></td> </tr> </table> <p> <input checked="" type="checkbox"/> If account includes additional funds for other expenses, total budgeted in the account is: \$100,000.00 <input type="checkbox"/> No budget impact (no fiscal note required) </p> <p> Prior Year Budget (if applicable): \$2,663,247.00 Prior Year Actual Amount Spent (if applicable): \$2,448,602.00 </p>	Amount authorized by this legislation this fiscal year:	\$100,000.00	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$100,000.00	Amount budgeted for this item *:	\$100,000.00	Source of funding (name of fund) and account code number: From: 008-Anti-Drug 4404-6789	
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<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): Prior resolutions and (date): Res #18730, February 17, 2015, #18605, September 15, 2014, #18403, February 10, 2014, #18885, July 20, 2015</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by: Carol Lillis, Office Administrator, 881-1415</p>										
<p>REQUEST SUMMARY</p>	<p>A resolution authorizing the County Executive to execute an agreement with The Mid-America Regional Council for the Kansas City Crisis Center (a pilot program), an outside agency to be funded by the County's Anti-Drug Sales Tax Fund for the 2015 fiscal year which is engaged in anti-drug and anti-violence, purposes, at an aggregate cost to the county not to exceed \$100,000.00.</p> <p>The Kansas City Crisis Center is a pilot program that will serve individuals with substance abuse problems that currently fall through the cracks of the treatment system. These individuals are often homeless and indigent, that repeat the revolving door for treatment.</p> <p>Background: The Anti-Drug Tax Fund authorizes the County to execute agreements and contracted service for the purpose of providing substance abuse treatment.</p>										
<p>CLEARANCE</p>	<p> <input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office) </p>										
<p>ATTACHMENTS</p>	<p>Quote</p>										

REVIEW	Department Director: <i>Haley Davis</i>	Date: <i>8-27-2015</i>
	Finance (Budget Approval): <i>If applicable</i> <i>[Signature]</i>	Date: <i>8/28/15</i>
	Division Manager: <i>[Signature]</i>	Date: <i>9/9/15</i>
	County Counselor's Office: <i>[Signature]</i>	Date:

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in _____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:
	Catering	

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.


Stacey Daniels-Young, Ph.D.
Director
(816) 881-3510

Vincent M. Ortega
Deputy Director
(816) 881-3886

Drug Commissioners:

Gloria Fisher
Venessa Maxwell-Lopez
Gene Morgan
Keith Querry
Anita Russell
Joseph Spalitto, DDS
James Witteman, Jr.
Marva Marguerite Moses

Fax:
(816) 881-1416

Memo to: Cathy Jolly
From: Stacey Daniels-Young 
Date: August 27, 2015
Re: Crisis Center Treatment Funding

Attached is an Executive Summary of a proposal received for a pilot Kansas City Crisis Center, which will provide emergency Sobering and Stabilization services for those in immediate need based on substance abuse and/or mental health problems. The Drug Commission discussed the proposal at its last meeting on August 11, 2015 and voted to recommend COMBAT funding in the amount of \$100,000.00 for this project.

Often, the individuals who will be served by the Crisis Center are identified by law enforcement and taken to hospital emergency rooms. They are usually found to be not in need of medical services so they return to the streets where the cycle begins anew. Or, they may take the alternate course of being arrested, whereby they unnecessarily clog up the Regional Correction Center and the Jackson County Detention Center where they detox. The current need for Sobering and Stabilization services was exacerbated by the permanent closing of the Salvation Army Detoxification Center (which had been a long time provider of COMBAT-funded Treatment services) earlier this year. The Mid-America Regional Council has agreed to serve as the fiscal agent of the Crisis Center during what is anticipated to be a two-year pilot period.

This amount of recommended funding remained available for 2015 COMBAT Treatment purposes as we continued to work to discover an adequate service replacement for Salvation Army. Specifically, COMBAT's \$100,000.00 will be applied toward the \$390,000.00 budget for transitional services once clients have been stabilized.

The total Crisis Center budget for the Year I start-up is \$6,058,500.00. Other committed funding partners include the Missouri Department of Mental Health, the Kansas City Metropolitan Healthcare Council and at least five (5) participating hospitals. Foundations that fund health programs are currently considering funding proposals. The City of Kansas City is also expected to contribute capital resources and other funding support.

600 Broadway, Suite 200
Kansas City, Missouri 64105-1659

816-474-4240
816-421-7758 FAX
www.marc.org



August 24, 2015

Ms. Stacey Daniels Young
Director
Jackson County COMBAT
415 East 12 Street
Kansas City, Missouri 64106

Dear Stacey,

The Mid-America Regional Council (MARC) has offered to serve as the fiscal agent for the Kansas City Crisis Center pilot project. MARC is the association of city and county governments and Metropolitan Planning Organization for the bi-state Kansas City region. MARC is organized as a public not-for-profit organization under Missouri law and recognized by the Internal Revenue Service as a charitable organization for purposes of contributions. MARC's mission is to build a stronger regional community, and the organization provides support to a broad array of programs and services. MARC's funding base includes federal, state and local government funds; private foundation and business contributions; and earned income from services. MARC prepares an A-133 audit each year, and accounts for funds from each program/project separately.

MARC is governed by a board of directors composed of 32 local elected officials from the region's nine counties. MARC manages funds for various groups, and while the board of directors ensures fiscal responsibility in the use of all funds, it relies on various committees and boards to recommend and/or authorize the use of certain funds for specified purposes.

MARC would establish a project account for the Kansas City Crisis Center project with direction from the Governing Board being established to oversee the project. MARC would work with that board to determine the procedures for authorizing the receipt of revenues and the expenditure of funds.

MARC also has established a 501c3 organization, the Mid-America Regional Council Community Services Corporation. It was formed in 2004 to allow MARC to receive grants from certain corporations and private foundations that only donate to agencies with nonprofit status. The corporation's board of directors includes the members of the MARC Budget and Personnel Committee. The first vice-chair of the MARC board serves as the chairman of the 501c3 corporation.

Please let me know if you have questions or need more information.

Sincerely,

Marlene Nagel
Community Development Director

Chair Curt Skoog Councilmember Overland Park, Kansas	1st Vice Chair Carol Suter Councilmember Gladstone, Missouri	2nd Vice Chair Ed Eilert Commission Chairman Johnson County, Kansas	Treasurer Beverlee Roper Commissioner Platte County, Missouri	Secretary Randy Rhoads Mayor Lee's Summit, Missouri	Executive Director David A. Warm
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Executive Summary:
Establishment of the Kansas City Crisis Center

August 2015

This concept paper is to propose the development of a two-year Crisis Center pilot project to provide the Jackson County community with an alternative, safe resource for triage, stabilization, and referral for persons presenting a psychiatric or substance abuse-induced crisis. Emphasis will be placed on utilizing existing community resources to the greatest extent possible and avoiding the unnecessary duplication of services.

The Problem: Why is a Crisis Center Necessary?

When emergency responders encounter individuals with mental health or substance abuse problems, they currently have no choice but to deliver them to hospital emergency rooms or jail. As professionals who work with this population agree, this approach is both wasteful and useless. This project seeks to divert these individuals arrested for petty offenses away from the jail and hospital and into treatment services. Absent such diversion, these individuals -- often homeless and indigent -- repeatedly recycle through the "revolving door" between hospitals, police, courts, ambulance and other social services. Those with multiple problems (e.g., substance abuse, mental illness, chronic or serious health problems, and homelessness) are often shuttled back-and-forth from one service organization to another.

The continual use of services by these "frequent flyers" requires heavy investments of time and attention from overworked police officers, paramedics, emergency room personnel, mental health professionals, social service providers, and others. Moreover, it results in a tremendous drain on each participating organization's limited resources. It's an ineffective process that wastes literally millions of dollars each year while putting an enormous strain on our existing systems. What's more, it provides few if any long-term benefits for the troubled individuals who require these services.

The Solution: How We Will Meet the Need

The Crisis Center -- which is strongly recommended after more than 19 months of study by a broadly representative Steering Committee -- has enormous potential for providing lasting benefits to the individuals being served and major cost savings to our community.

When operational, the Crisis Center will not only reduce the burden on hospitals and social service agencies (in terms of time, personnel, and resources), but also will help troubled individuals who are brought or referred to the Center by addressing the root causes of their despair. While the exact model for the Crisis Center will be determined by a Lead Agency that is

selected by an expert Advisory Board to manage operations, the Steering Committee believes certain features are essential:

- Location: The Crisis Center must be situated a single location within the urban core -- with easy highway access – so that it’s convenient for police officers and ambulance personnel to deliver a client and return quickly to service.
- Access: The Crisis Center must provide 24/7 access to services. During the pilot period, only persons who have been admitted by police or ambulance personnel will be admitted (i.e., no walk-ins).
- Service Units: The Center must consist of two service units: a sobering unit (with 25 cots) and a stabilization unit (with 10-12 beds). Each will provide short-term service: up to twenty-three hours in the sobering unit and less than 48 hours in the psychiatric stabilization unit. (The Steering Committee strongly believes that the Crisis Center will only be successful if *both* units are included.)
- Coordination and Linkages: Following triage and stabilization, the Crisis Center must provide referrals to appropriate community-based treatment as well as follow-up/wrap-around services in coordination with other agencies. This also requires the provision of transportation to the next level of care.
- Housing: The Crisis Center must provide transitional housing to those without a residence until those persons are linked to permanent housing. The Center will incorporate the use of the VI-SPDAT (Vulnerability Index – Service Prioritization Decision Assistance Tool) in order to prioritize housing and services.
- Timely Follow-Up Services: Stabilization of a person will be ineffective unless immediate follow-up care is provided. The Department of Mental Health has assured that patients discharged from the Crisis Center will be given timely follow-up care.
- Peer Support: Research has shown that individuals who suffer from mental health and substance use disorders respond to others who have been in their position and who express a genuine concern for their well-being. Peers will be employed to work at the Crisis Center to help guide patients into treatment.
- Motivational Interviewing: All personnel employed by the Crisis Center will utilize motivational interviewing to encourage the patient to enter treatment services.

This two year pilot will demonstrate the economic advantage of diverting people who commit petty offenses and who possess a mental health and/or substance use disorder from the hospital and jails and into treatment services. Hospital diversion workers in the Missouri Department of Mental Health will work closely with the Crisis Center to keep these patients in housing, on medication, and in treatment services thereby reducing re-arrest.

Crisis Center Budget

Staffing	Year 1	Year 2	Year 3
Director (1)	\$91,000	\$91,000	\$91,000
Registered Nurse (5)x \$78,000	\$390,000	\$390,000	\$390,000
Mental Health Tech (10)x \$39,000	\$390,000	\$390,000	\$390,000
Community Support (5)x \$45,000	\$227,500	\$227,500	\$227,500
Qualified Mental Health Professional (5)x \$58,000	\$292,500	\$292,500	\$292,500
Peer Support (5) \$27,500	\$137,500	\$137,500	\$137,500
Total Staffing	\$1,528,500	\$1,528,500	\$1,528,500

In-Direct Costs			
Security \$30hrX 24 hour X 365	\$275,000	\$275,000	\$275,000
Tele-Psychiatry	\$100,000	\$100,000	\$100,000
Food	\$250,000	\$250,000	\$250,000
Medications	\$100,000	\$100,000	\$100,000
Transportation	\$100,000	\$100,000	\$100,000
Follow up Services/Treatment	\$250,000	\$250,000	\$250,000
Transitional Housing 50 people/year (min 6 mo \$150/week)	\$390,000	\$390,000	\$390,000
Incidentals for access to permanent housing	\$250,000	\$250,000	\$250,000
Tracking/Evaluations	\$50,000	\$50,000	\$50,000
Total In-Direct	\$1,765,000	\$1,765,000	\$1,765,000

Start-up Costs	\$250,000		
Operational Costs (rent, computers, electricity, cleaning, etc)	\$250,000	\$250,000	\$250,000

Capital Improvements (depends on property)	\$	500,000	
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Total Costs	\$6,058,500	\$5,308,500	\$5,308,500
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Additional Considerations

Permanent Supportive Housing for one year for 50 people			
Most Intensive \$43.51 per day (housing and wrap around) X35	\$555,840		
Less Intensive \$28.86 per day (housing and wrap around) X15	\$158,008		
Total Cost for One Year	\$713,848		