

# REQUEST FOR LEGISLATIVE ACTION

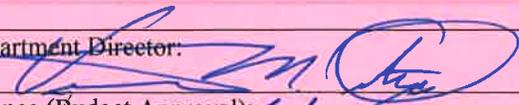
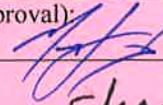
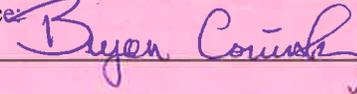
Completed by County Counselor's Office:

Res/~~Ord~~ No.: 20205

Sponsor(s): Dan Tarwater III

Date: July 29, 2019

<p>SUBJECT</p>	<p>Action Requested  <input type="checkbox"/> Resolution  <input type="checkbox"/> Ordinance</p> <p>Project/Title: A resolution authorizing the Prosecutor to execute an agreement with Truman Medical Center for Project RISE (Responsive Individualized Support and Early Intervention), funded by the County's Anti-Drug Sales Tax Fund for 2019 fiscal year, engaged in anti-drug and anti-violence activities and purposes, at an aggregate cost to the County not to exceed \$120,000.00.</p>										
<p>BUDGET INFORMATION  <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="310 615 1442 835"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$120,000.00</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>\$120,000.00</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$120,000.00</td> </tr> <tr> <td>Source of funding (name of fund) and account code number: 008-4402-56005-Community Crime Prevention</td> <td>\$120,000.00</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$2,313,607.00</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:  Department: Estimated Use:</p> <p>Prior Year Budget (if applicable): \$1,558,430.00  Prior Year Actual Amount Spent (if applicable): \$1,685,656.00</p>	Amount authorized by this legislation this fiscal year:	\$120,000.00	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$120,000.00	Amount budgeted for this item * (including transfers):	\$120,000.00	Source of funding (name of fund) and account code number: 008-4402-56005-Community Crime Prevention	\$120,000.00
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Source of funding (name of fund) and account code number: 008-4402-56005-Community Crime Prevention	\$120,000.00										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date):  Prior resolutions and (date): Res#19849, April 30, 2018</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, &amp; phone): Carol Lillis, Office Administrator, 881-1415</p>										
<p>REQUEST SUMMARY</p>	<p>A resolution authorizing the Prosecutor to execute an agreement with Truman Medical Center for Project RISE (Responsive Individualized Support and Early Intervention), funded by the County's Anti-Drug Sales Tax Fund for 2019 fiscal year, engaged in anti-drug and anti-violence activities and purposes, at an aggregate cost to the County not to exceed \$120,000.00.</p> <p><b>Background:</b> Project RISE aims to refine, implement, evaluate and coordinate a Step-Care Model of Intervention for nonfatal shooting victims of Jackson County that are presented to the Emergency Room Department of Truman Medical Center (midtown) that will provide a screening for PTSD. Once released from Truman Medical Center, victims and their families will be provided information and services regarding common trauma reactions to identify. The victims who request additional support services either with a group or on their own will be provided with Psychological First Aid, (PFA), emotional support, ongoing assessments from clinicians, social workers and survivor groups, up to three months post shooting. This program is to provide individualized support, interventions and resources for the nonfatal shooting victims and their families to heal the suffering. This was presented to the Drug Commission on July 16, 2019 and was recommended for funding.</p>										
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing &amp; Department)  <input type="checkbox"/> Business License Verified (Purchasing &amp; Department)  <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>										
<p>COMPLIANCE</p>	<p><input type="checkbox"/> MBE Goals</p>										

	<input type="checkbox"/> WBE Goals	
	<input type="checkbox"/> VBE Goals	
ATTACHMENTS		
REVIEW	Department Director: 	Date: 7-17-2019
	Finance (Budget Approval): If applicable 	Date: 7/23/19
	Division Manager: 	Date: 7/23/19
	County Counselor's Office: 	Date: 7/25/19

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:

- 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.



## 2019 Hot-Spot/AVSI Initiative



Save a life. Save a neighborhood.

Agency Name	Name of Program	Amount Requesting
Truman Medical Center	Project RISE - Responsive Individualized Support and Early Intervention	\$120,000.00
Address of Agency	Address of Program Location	Agency Telephone#
2301 Holmes Street Kansas City, MO 64108	Same	816-404-1000
COMBAT Program Director's Name	COMBAT Program Director Phone	COMBAT Program Director Email
Dr. Joah Williams	(816) 235-1066	Joah.Williams@tmcmcd.org
Executive Director's Name	Executive Director Phone	Executive Director Email
Sharon Freese, Chief Operating Officer	816-404-5730	sharon.freese@tmcmcd.org

All items must be submitted in the order listed. Number the pages of your proposal and insert the page(s) where the information can be found in the boxes below.

**Jackson County required documents must be submitted with Application**

- Compliance Report Form completed and signed or existing certificate (if you have one). See <http://www.jacksongov.org/DocumentCenter/Home/View/688>
- Copy of Paid Jackson County Property tax receipt or current exemption certificate
- Copy of evidence of liability insurance coverage for at least \$1 million.
- Copy of current IRS Form 990 (within past two fiscal years) or extension letter
- Copy of Certified Financial Audit (within past two fiscal years).
- Attachment 1 – Program
- Attachment 2 - Contact Listing
- Attachment 3– Staff Qualifications
- Current list of Agency Board of Directors

*Program Description, including Services, Frequency of services, and Sites of services.*

- A. Program Summary: Project RISE (Responsive Individualized Support and Early Intervention) aims to refine, implement, and evaluate a comprehensive, coordinated Stepped-Care Model of Intervention for nonfatal shooting victims presenting to the Emergency Department (ED) at TMC. This model involves three key components. The first - Component 1 - provides nonfatal shooting victims with information, crisis intervention, and advocacy in the immediate aftermath of a shooting. As a first step, all nonfatal shooting victims will be screened for PTSD risk. Admitted patients will be screened for PTSD once the victim is alert and medically stable. Victims released from the ED will be provided with psychoeducation about common trauma reactions and information on coping, and PTSD screening will be completed within one to two days after release by the RISE project team. Those victims at high risk for PTSD who request additional support will be provided with Psychological First Aid (PFA), an evidence-informed early intervention developed by the National Center for PTSD and the National Child Traumatic Stress Network. PFA is based on research suggesting that practical, social, and emotional support can buffer against development of longer-term problems in trauma victims. This practical assistance and access to supportive resources to immediately reduce risk of re-victimization and/or retaliation, serves as a first step forward - often the hardest one - toward healing. Trauma sensitive practices are essential for victims to feel safe, develop trust, choice, collaboration and empowerment. The second - Component 2 - would provide nonfatal shooting victims with readily accessible, continuous mental health support in the weeks and months after a shooting to bolster resilience and recovery. Continuous trauma support in the weeks and months after the shooting is achieved through offering survivors who experience ongoing distress, "stepped-up" care in the form of more intensive interventions, such as Skills for Psychological Recovery (SPR). SPR is a culturally-informed, structured intervention developed by the National Child Traumatic Stress Network and the National Center for PTSD. SPR utilizes skills-building components from cognitive-behavioral treatments for trauma-related mental health problems to facilitate recovery and enhance functioning in the aftermath of a traumatic event. Skills-building activities include: building problem-solving skills; promoting positive activities; managing physical and emotional reactions to upsetting situations; promoting helpful thinking; and rebuilding healthy social connections. These activities will be offered at TMC Health Sciences District by UMKC doctoral candidates in clinical psychology. These clinicians have completed extensive training in SPR and trauma-sensitive practices. Clinicians providing SPR will also make regular, weekly phone calls to individuals enrolled in the RISE Program. Care coordination will include a project case manager to promote ongoing engagement in services and provide participants and clinicians a chance to troubleshoot any potential barriers to engagement. This second step serves to close an identified gap in care for nonfatal shooting victims. For those who would like individualized SPR but do not wish to attend in-person services, TMC can also

offer one-on-one sessions using home-based telehealth. TMC Behavioral Health currently uses home-based telehealth for PTSD at the Healing Canvas location, and this option has been well received by our community. The third - Component 3 - provides nonfatal shooting victims with impairing, unresolved symptoms access to evidence-based mental health treatments. As determined by ongoing assessment from clinicians and Social Work Services team members, survivors meeting criteria for PTSD up to three months post-shooting, will receive evidence-based treatment for PTSD. Those survivors who prefer individual treatment will be given priority scheduling for services at TMC Behavioral Health Healing Canvas, and group treatments will be offered at TMC Health Sciences District. These three components, or Stepped Care Interventions, will provide responsive, individualized supports and early interventions for nonfatal gunshot victims and their families that will go a long way in reducing unnecessary suffering.

- B. Needs Statement: All Jackson County residents should have the opportunity to make choices that allow them to live a long, healthy life, regardless of their income, education, or ethnic background. The epidemic of violence that has plagued our community has made those choices difficult for some in Jackson County. Truman Medical Center (TMC) - located in the Health Sciences District - is acutely aware of the impact of the level of violence - our Level One Trauma Center is the busiest in Kansas City, with 1,395 cases in 2018. Despite efforts to reduce gun violence, nonfatal firearm-related crime remains a significant problem both locally and nationally. An opportunity exists for a new model to provide adequate mental health care for nonfatal shooting victims in the aftermath of a violent crime. Nonfatal shooting victims are at risk for a wide range of crime-related mental health problems, including PTSD, that in and of themselves, may increase risk for revictimization and violent behavior. Thus, providing nonfatal shooting victims with more opportunistic, responsive mental health services is a critical element in reducing the "cycle of violence." With additional resources provided through COMBAT Anti-Violence Special Initiative (AVSI) funding, we propose a pilot project to test this concept by implementing a Stepped-Care Model of Intervention for PTSD with nonfatal shooting victims. Pending the success of this pilot proof of concept Project RISE, long-term objectives include dissemination of this model to other Emergency Departments in Jackson County.
- C. Include any partners and what they will do. The Jackson County Prosecutor's Office would be a key partner in this pilot project. Their "Bullet-To-Skin Intervention" or BTSI project team would offer support to the victims and their families, including assistance with very practical problems like home or vehicle repairs and crime scene cleanup.
- D. Area of Interest to be served. This pilot - Project RISE - addresses the COMBAT Anti-Violence Special Initiative (AVSI) community violence prevention and restorative justice, conflict and resolution areas of interest.

**Please provide responses to the following questions:**

1. Discuss specific risk factors, and describe the incidence and prevalence of violence and their effects on the target population. Gun violence is a serious problem both locally and nationally, affecting thousands of men, women, and children throughout the United States each year. At Truman Medical Center (TMC) – located in the Health Sciences District – our team is witness to the damage caused by senseless acts of violence nearly every day. TMC internal Trauma Registry data for calendar year 2018 indicated 210 shooting victims were discharged living from TMC (81% male; 54% African American, 33% White; 79% below age 40). Specific risk factors for nonfatal shooting victims include numerous crime-related mental health problems, including posttraumatic stress disorder, or PTSD, which may increase their risk for re-victimization and/or violent behavior. Risk factors for the development and maintenance of PTSD include lack of social support, concerns for safety, lack of resources (including food, shelter, or financial resources), legal and/or occupational concerns, and other disruptions in interpersonal functioning. Note that these risk factors can also be important risk factors for criminal revictimization and/or perpetration of violence.
2. Discuss specific protective factors that will be utilized in buffering the risk factors that are present. Which, if addressed, can be expected to reduce violence. The interventions included in the first two components of the RISE Program - Psychological First Aid (PFA) and Skills for Psychological Recovery (SPR) are strategically designed to address the risk factors described above. Component One: Psychological First Aid includes eight core components that can be used in a flexible manner depending on patient needs. These components include: 1) engagement in a social contact that is compassionate and respectful; 2) stabilizing emotionally overwhelmed individuals using grounding techniques; 3) gathering information about immediate needs; 4) enhancing immediate and ongoing safety; 5) providing practical assistance to ensure that basic needs are met; 6) establishing contact with primary support persons; 7) providing information on coping strategies; and 8) linking survivors with collaborative services as needed. Component 2: Skills for Psychological Recovery provides survivors with skills that can be utilized in buffering the risk factors described above. These skills include: 1) effective problem solving; 2) managing reactions; 3) promoting positive activities; 4) promoting helpful thinking; and 5) rebuilding healthy social connections. These skills can further help reduce the risk of subsequent violence.
3. What Intermediate Outcomes would you say your project will achieve? Intermediate outcomes expected: 1) By the end of the pilot period (6 months), 75% of nonfatal gunshot victims presenting for emergency services at TMC will be screened for PTSD risk within two days of arrival in the Emergency Department (ED); 2) 90% of nonfatal gunshot victims screening for high risk for PTSD will receive Component 1- Psychological First Aid; 3) 50% of nonfatal gunshot victims who receive Psychological First Aid will receive at least one session of Component 2 - Skills for Psychological Recovery.
4. What evidence do you have of these Intermediate Outcomes (e.g., what data have you/will you collect; what measures of success are available)? Documentation of PTSD risk screening and Psychological First Aid and Skills for Psychological Recovery sessions will be tracked through TMC's electronic medical records system. Additional data will be collected and analyzed by the

Project RISE team, including the Project Director and UMKC Psychology doctoral students, TMC Behavioral Health Crossroads Counseling, and TMC Trauma Services Registry.

5. Is your program evidence based?  Yes or  No If yes, please list the evidence based program your program models?

Stepped care models for PTSD treatment among injured trauma survivors have been successfully implemented and evaluated in other medical centers around the nation (e.g., Zatzick et al., 2013) and have been shown to be associated with statistically significant reductions in PTSD symptoms compared to treatment-as-usual. The specific interventions embedded in our first two components, Psychological First Aid and Skills for Psychological Recovery, have both been recognized as evidence-informed interventions with emerging evidence (e.g., Watson, 2019), including evidence for the effectiveness of Skills for Psychological Recovery collected as part of an open trial for traumatically bereaved families at UMKC's Psychology Department (PI: Williams).

6. What types of collaborations do you envision that will enhance your program? The Project RISE initiative is a collaborative, interdisciplinary PTSD workgroup comprised of several departments within TMC, including the Emergency Department, Trauma Services, ICU Nurses, Social Work Services, Chaplains and Behavioral Health. It began in response to the question, "What if we led with a healthier response for nonfatal shooting victims?" This led to development of processes and procedures to identify victims at risk for PTSD and to provide meaningful interventions for them and their families. The pilot program funding request through COMBAT AVSI funding will enhance our success by ensuring that providers working together across departments are coordinating and staffing cases and providing services for nonfatal shooting victims and their families at different "touch points" throughout the program. How would they assist your efforts? Providers across departments will work to assist each other's efforts to ensure that nonfatal gunshot victims are provided with timely, responsive mental health supports. For example, nurses will provide nonfatal gunshot victims with timely PTSD risk screenings and place consults in the electronic medical record (EMR) for Social Workers to then provide timely and responsive Component 1 (PFA) early interventions. Social Workers will then help link victims to Behavioral Health team members for Component 2 (SPR) early interventions, thus ensuring that victims and their families are able to access continuous mental health services as needed.
7. How many clients do you anticipate you will reach? TMC typically treats and discharges between 20-30 nonfatal gunshot victims each month, and can conservatively estimate serving approximately 125 victims through this pilot project between August and December 2019. Assuming that we achieve our goals outlined in Question 3, approximately 94 victims (75%) will be screened for PTSD risk, and, if all of these victims were to screen positive for PTSD risk, 85 of these victims (90%) will receive Component 1 - Psychological First Aid (PFA). We further anticipate that at least 50% of those receiving PFA, or approximately 43 victims, will receive Component 2 - Skills for Psychological Recovery (SPR).
8. If applicable, please list and describe your referral sources. All pilot project participants will be referred through the TMC Health Sciences District Emergency Department.

**Attachment 1: 12-Month AGENCY/PROGRAM BUDGET INFORMATION**

*July 1, 2019– Dec 31, 2019)*

Budget Categories	Proposed COMBAT Budget	Other Funding Amount	Name of other Funding Sources	Total Program Cost
Personnel – Salaries	\$62,000.00			\$62,000.00
Fringe Benefits (no more than 10% of Salaries)	\$6,200.00			\$6,200.00
Program Operating Expenses	\$9,450.00			\$9,450.00
Auditing/Accounting Services				\$0.00
Insurance				\$0.00
Postage				\$0.00
Meeting Expense				\$0.00
Mileage (Local Travel)				\$0.00
Travel (Out of Town)				\$0.00
Training				\$0.00
Memberships				\$0.00
Supplies	\$4,500.00			\$4,500.00
Other: Administrative Support @ 7%	\$7,850.00			\$7,850.00
UMKC Student Stipends	\$30,000.00			\$30,000.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
<b>Total Proposed Budget</b>	<b>\$120,350.00</b>	<b>0</b>		<b>\$120,350.00</b>

1. Funds may not be used to provide capital improvements (Article 6, Section 23 of the Mo. Constitution).
2. Funds may not be used to pay salaries for functions that have traditionally been performed by volunteers.
3. Funds may not be used to pay for rent, utilities, or equipment.

**Truman Medical Center – Project RISE**

**Budget Justification for 6 month Pilot**

**Personnel - \$62,000 and Stipends - \$30,000:**

1. Project Director – Joah Williams, PhD @ .30 FTE
2. Case manager – TBD @ 1 FTE
3. UMKC Clinical Psychology Doctoral students – 4 @ \$7,500

**Employee Benefits - \$6,200**

Calculated at 10% of personnel costs (excludes student stipends)

**Outreach/engagement tools - \$9,450:**

1. Prepaid phones (5) for project clinicians/director to contact potential participants; provide regular communication connection for participants to connect participant with program - **\$1,450** (\$50 phone, service plans \$35/mo for 6 months)
2. Mileage reimbursement (\$.37/mile) for clinicians' home visits; Circulation Platform (Ride KC, Uber, etc) rides for participants to attend meetings and appointments - **\$5,000**
3. Family support costs for victims, such as hotel vouchers, bus passes and \$25 VISA gift cards - **\$3,000** (60 people @ \$50 each)

**Program materials and supplies - \$4,500:**

1. Printing of informational/resource cards; skill building materials for SPR interventions; program brochures; contact cards for clinicians; general office supplies - **\$3,500**
2. Translation of materials to/from Spanish - **\$1,000**  
Note: TMC provides Interpreting Services free of charge; Spanish, Somali, Sign Language

**Administrative Support - \$7,850**

Calculated at 7% of direct program costs of \$112,150

**Total Request for 6 month Pilot - \$120,000**

Attachment-2 AGENCY CONTACT INFORMATION

(Jan 1, 2019- Dec 31, 2019)

July 1, 2019

Enter Agency Name: Truman Medical Center

<b>Agency/Corp Location</b>	Truman Medical Center
<b>Address</b>	2301 Holmes Street
<b>City, State, Zip Code</b>	Kansas City, MO 64108
<b>Main Phone</b>	816-404-1000
<b>Main Fax</b>	
<b>Agency Web Address</b>	<a href="http://www.trumed.org">www.trumed.org</a>

<b>Executive Director</b>	Sharon Freese, Chief Operating Officer, Behavioral Health
<b>Address</b>	300 West 19 <sup>th</sup> Terrace
<b>City, State, Zip Code</b>	Kansas City, MO 64108
<b>Phone</b>	816-404-5730
<b>Fax</b>	
<b>Email</b>	<a href="mailto:sharon.freese@tmcmcd.org">sharon.freese@tmcmcd.org</a>

<b>COMBAT Program Contact</b>	Dr. Joah Williams
<b>Program Address</b>	2301 Holmes Street
<b>City, State, Zip Code</b>	Kansas City, MO 64108
<b>Phone</b>	(816) 235-1066
<b>Fax</b>	
<b>Email</b>	<a href="mailto:joah.williams@tmcmcd.org">joah.williams@tmcmcd.org</a>

<b>Financial Contact</b>	Linda Sharp, Government Grant/Contract Administrator
<b>Address</b>	2301 Holmes Street
<b>City, State, Zip Code</b>	Kansas City, MO 64108
<b>Phone</b>	816-404-2350
<b>Fax</b>	
<b>Email</b>	<a href="mailto:linda.sharp@tmcmcd.org">linda.sharp@tmcmcd.org</a>

<b>Board Chair/President</b>	Philip J. Sanders
<b>Address</b>	6300 Lamar Avenue
<b>City, State, Zip Code</b>	Overland Park, KS 66202
<b>Phone</b>	913-236-2203
<b>Fax</b>	
<b>Email</b>	<a href="mailto:psanders@waddell.com">psanders@waddell.com</a>

### Attachment-3 STAFF EXPERIENCE, QUALIFICATIONS & CERTIFICATIONS

(Jan 1, 2019– Dec 31, 2019)

**Name:** Complete for all employees providing direct services in the program (not administrative staff).

**Title:** Title in COMBAT program

**Degrees, Certifications & Licenses held:** List all post-secondary degrees completed with area of emphasis (i.e., BS/Social Work) professional designations (i.e., LCSW, LPC, CSAC II, etc.), and Licenses.

**Trauma Informed Care:** Has staff completed training in Trauma Informed Care? This is required by COMBAT. If no, describe how staff will get this training for within three (3) months of funding.

**Required Training:** Identify annual training requirements for the staff member in order to continue certification, accreditation, or qualifications. Include any plans for training for this person.

Name:	Joah Williams, Ph.D.
Title in COMBAT program	Program Director
Degrees, Certifications, Licenses:	Doctorate in Clinical Psychology; MO License #2015027929
Trauma Informed Care?	Yes
Required Training/Plan	Continue to attend national and international trainings on trauma-related intervention research
Gender, Race/Ethnicity	Male, White
Name:	TBD
Title in COMBAT program	Clinician
Degrees, Certifications, Licenses:	Minimum bachelors degree required; Clinical psychology doctoral candidate
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	
Name:	TBD
Title in COMBAT program	Clinician
Degrees, Certifications, Licenses:	Minimum bachelors degree required; Clinical psychology doctoral candidate
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	
Name:	TBD
Title in COMBAT program	Clinician
Degrees, Certifications, Licenses:	Minimum bachelors degree required; Clinical psychology doctoral candidate
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	
Name:	TBD
Title in COMBAT program	Behavioral Health Case Manager
Degrees, Certifications, Licenses:	Minimum bachelors degree required
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	

**Add pages if necessary** Number pages #a, #b, #c, etc. Include Job Descriptions, and an Organizational Chart.

### Attachment-3 STAFF EXPERIENCE, QUALIFICATIONS & CERTIFICATIONS

(Jan 1, 2019– Dec 31, 2019)

**Name:** Complete for all employees providing direct services in the program (not administrative staff).

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**Required Training:** Identify annual training requirements for the staff member in order to continue certification, accreditation, or qualifications. Include any plans for training for this person.

Name:	Joah Williams, Ph.D.
Title in COMBAT program	Program Director
Degrees, Certifications, Licenses:	Doctorate in Clinical Psychology; MO License #2015027929
Trauma Informed Care?	Yes
Required Training/Plan	Continue to attend national and international trainings on trauma-related intervention research
Gender, Race/Ethnicity	Male, White
Name:	TBD
Title in COMBAT program	Clinician
Degrees, Certifications, Licenses:	Minimum bachelors degree required; Clinical psychology doctoral candidate
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	
Name:	TBD
Title in COMBAT program	Clinician
Degrees, Certifications, Licenses:	Minimum bachelors degree required; Clinical psychology doctoral candidate
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	
Name:	TBD
Title in COMBAT program	Clinician
Degrees, Certifications, Licenses:	Minimum bachelors degree required; Clinical psychology doctoral candidate
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	
Name:	TBD
Title in COMBAT program	Behavioral Health Case Manager
Degrees, Certifications, Licenses:	Minimum bachelors degree required
Trauma Informed Care?	Yes
Required Training/Plan	Trauma-informed care training required
Gender, Race/Ethnicity	

**Add pages if necessary** Number pages #a, #b, #c, etc. Include Job Descriptions, and an Organizational Chart.