Recorder's Office Cover Sheet

Recording Requested By:

Name: Karen Beckerbauer

Department: Community Services

Type of Document: (please select one)

€ Agreement

€ Contract

Grant

€ Other

€ Change Order€ Easement

specify:

2020-943071

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03/03/2020 03:06 PM

DOUGLAS COUNTY, NV This is a no fee document

NO FEE

PARTNERSHIP DOUGLAS COUNTY NOTICE OF SUBGRANT AWARD

NO. 2020-040

2-28-2020

DATE

DOUGLAS COUNTY CLERK
STATELINE, NV

MA

FILED

Partnership Douglas County Coalition: Pa	rtnership Su	ıb-recipient Nam	e: B	<u>/ </u>	DEPUT
Douglas County		ouglas County Soc			
	K	aren Beckerbauer		()	
DUNS: 938508439	kt	eckerbauer@doug	glasnv.us	\ \	
Address:	A	ddress: 1133 Spru	ice Street, Ga	rdnerville, ì	VV 89410
PO Box 651 Minden NV 89423	Pl	n: 775-782-9825	,	\ 1	
					\
Agreement Period:	St	ıb-recipient EIN#	88-6000	0-031	\
July 1, 2019 – June 30, 2020					\
	<u>S</u> ı	ıb-recipient DUN	S#: 010984	979	\
Reason for Award: To fund MOST service	es				/ //
County(ies) to be served: Douglas			1		
			\		
Approved Budget Categories:			/ /		
1. Personnel \$	10,750	1			
2. Contractual/Consultant \$	0		/ /		
3. Travel \$	0				
4. Training \$	0				
5. Operating \$	0				
6. Other \$	0	/ (i.		
Total Cost \$	10,750		7		
Disbursement of funds will be as follows:		/ /	The same of the sa		
Payment will be made upon receipt and accept					
reimbursement for actual expenditures specif	ic to this agreement.	Total reimbursen	ent will not	exceed \$25,	000 during the
subgrant period.		\ \			
Source of Funds:	Amount:	% of Funds:	CFDA#:	Federal G	Frant #:
1. State General Fund	10,750	100%	NA	NA	
Terms and Conditions					
In accepting these grant funds, it is understoo	od that:	/ /			
1. Expenditures must comply with appropria		al regulations.			
2. This award is subject to the availability of	f appropriate funds.	/ /			
Authorized Sub-recipient Print	name, Title	202	Signature	,-	Date
Official		Z S Q \			12/2/19
Taylor Allison	U				
Executive Director	Jon Sir	\wedge			12/2/19
- Voe	10 1/XU				

15 Total Pages

Cover Sheet

PROVIDER NAME: Partnership Douglas County

CONTACT NAME AND TITLE: Taylor Allison, Executive Director

CONTACT PHONE(s): (775) 782-8611

CONTACT EMAIL: tallison@pdcnv.org

PHYSICAL ADDRESS (City, State, Zip): 1625 NV-88, Suite 104, Minden, NV 89423

MAILING ADDRESS IF DIFFERENT PO Box 651, Minden, NV 89423

EZ: 94-3188705

VENDOR #: T80978003A

DUN & BRADSTREET: 93-850-8439

Brief Description of program: The Douglas County Mobile Outreach Safety Team (MOST) provides services to all Douglas County firefighter/paramedic, a licensed clinical social worker, and case manager. residents and visitors experiencing mental illness, substance abuse disorders, or suicidal crisis. MOST is operated by a sheriff's deputy, a

were referred to community partner for additional services. individuals were referred to the MOST program. MOST in Douglas County offers services every Thursday. Almost 90 of those individuals connect folks to mental health treatment that may not seek out treatment otherwise or will end up in the Douglas County jail. In 2018, 220 29.9 per 100,000 population while the lowest rate was in 2012, with 16.6 per 100,000 population. The MOST program is an opportunity to has remained steady from 2011-2017. Between 2009 and 2017, Northern Nevada had its highest age-adjusted suicide rate in 2014, which was depression and anxiety. While mental health utilization has decreased from state-funded facilities state wide, in Northern Nevada utilization Counties), hospital visits to both emergency department and inpatient admissions have increased significantly since 2009, especially for Problem Statement: According to the 2018 Epidemiologic Profile Northern Region (Carson City, Douglas, Lyon, Mineral, and Storey

about MOST and to encourage collaboration between MOST and the partners Goal 2: To provide community outreach activities to inform potential partner referral agencies, behavioral health providers, and social service providers

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of MOST and will be encouraged to collaborate with MOST, as evidenced by MOST members providing community outreach activities at a minimum of three community events Outcome Objective 2a: Referral agencies, behavioral health providers and social service providers will gain a better understanding Percent Funding: 5%

Activi	activit
es including Evidence-based Programs	activities at a minimum of three community events.
Date due by	
Documentation	
	Activities including Evidence-based Programs Date due by Documentation

MOST will provide information to 20 community partners for information. 6/30/2020 Estimated number of information and marketing materials provided Data entered into identified electronic data collection Number of follow up contacts with partners

system.

2.

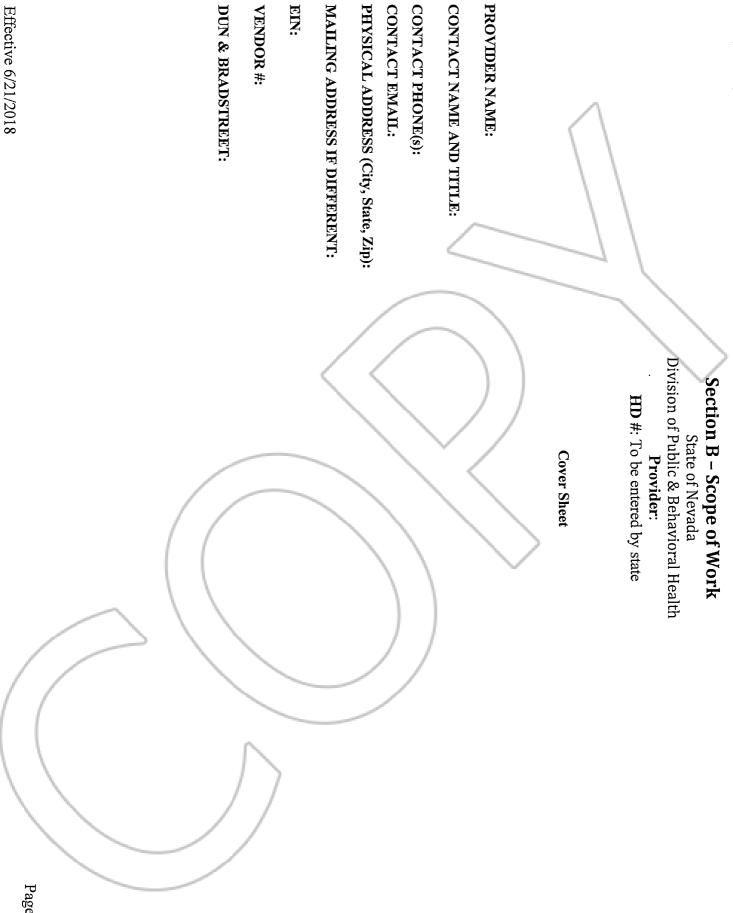
Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit.

Goal 3: To ensure MOST members receive relevant and appropriate training in order to effectively provide services for the target population. Percent Funding: 10%

informed responses; motivational interviewing; de-escalation techniques; coping skills; psychotropic medications to treat mental health disorders; pharmacotherapeutic agents to treat substance use disorders; short-term interventions for individuals with mental to crisis intervention. Training topics may include any of the following: crisis intervention strategies and techniques, trauma-Outcome Objective 2a: 100% of the MOST members will receive training on evidence-based practices or best practices related

health disorders; short-term interventions for individuals with substance-related disorders, and related clinical intervention techniques.	orders, and relate	d clinical intervention
Activities including Evidence-based Programs	Date due by	Documentation
1. MOST members will be trained by in-service or professional trainers. The 6/30/2020	6/30/2020	 Total number and percentage of individuals trained
trainings will be in-person or by webinar or other on-line sources and may		will be tracked in the standardized database.
be in-state or out-of-state.		Training attendance logs.
Evaluation: 1. Quarterly reports submitted to DPBH by deadline, 2. At a minimum, DBPH will	a, DBPH will co	conduct an annual provider site visit. Click here to enter

evaluation.



Section B – Scope of Work

State of Nevada

Division of Public & Behavioral Health HD #: To be entered by state Provider:

Brief Description of program

Problem Statement: Click here to enter the problem that is to be addressed.

Goal 1: To increase public safety by reducing recidivism.

		Evaluation: 1. Quarterly reports submitted to DPBH by deadline.
ns and attendance logs.	12/2/2019 Meeting and training invitations and attendance logs	FASTT staff will participate in trainings and technical assistance activities as provided by DPBH staff, as requested.
	Date due by Documentation	Activities including Evidence-based Programs
	rate to high-risk individuals with moderate to	model to ensure 95% of the SAPTA-funded FASTT services are prioritized for moderate to high-risk individuals with moderate to high behavioral health needs.
Percent Funding: %.	health needs framework and criminogenic-	Outcome Objective 1a: RISK/NEED - To use the criminogenic risk and behavioral health needs framework and criminogenic-

Section B – Scope of Work
State of Nevada
Division of Public & Behavioral Health
Provider:
HD #: To be entered by state

Follow up with national	nduct an annual provider site visit. 3.	DBPH will cor	Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow up with national outcomes measures, TBD.
The CSST is used, the results are documented, in the individual FASTT case notes, and a copy is maintained in the individual FASTT case file. Screening results are entered into the standardized FASTT database.	 The CSST is used, the results are documented, in a individual FASTT case notes, and a copy is maint in the individual FASTT case file. Screening results are entered into the standardized FASTT database. 		will not begin this activity until after they have received technical assistance from DBPH staff and have developed the staffing capacity to provide the CSST screenings. Projected start date is 12/16/19.
Total number and percentage of individuals screened for criminogenic risk-level each month. Including: Total number and percentage of individuals scoring in	 Total number and percentage of individuals screened for criminogenic risk-level each month. Including: Total number and percentage of individuals scoring in the control of the	10/14/2019	 Using the CSST, FASTT staff will screen individuals who have been referred to the program. Screenings will take place within seven business days after the FASTT staff receive the referral. EXCEPTION – Nive County is in the process of days loning their team and
	Documentation	Date due	Activities including Evidence-based Programs
Percent Funding: %.	ogenic risk-level, using the	or their crimino	Outcome Objective 1b: Screen at least 95% of the individuals referred to FASTT for their criminogenic risk-level, using the evidence-based Community Supervision Screening Tool (CSST).

	.2	Activi	Outcome (individual includes: j data entry
	Using the busines EXCEP will not capacity	ties inclu	me Objeduals where where the control of the control
E valuatio ıp with na	he CST, s days of TION – N begin this to provid	ding Evid	ctive 1c: Use o score h
n: 1. Quar tional outo	receiving ye County activity u e the CST	ence-base	Jsing the igh-risk tessment,
terly repor	Using the CST, FASTT staff will asses business days of receiving the referrals. EXCEPTION – Nyc County is in the proce will not begin this activity until after they I capacity to provide the CST assessments. F	Activities including Evidence-based Programs	evidence- o reoffence case plan
Evaluation: 1. Quarterly reports submitted up with national outcomes measures, TBD	ssess part rals. process of ney have d nts. Project	ns	based Co on the C ning, forr
ed to DPBI	Using the CST, FASTT staff will assess participants within 21 business days of receiving the referrals. EXCEPTION – Nyc County is in the process of developing their tea will not begin this activity until after they have developed the staffin capacity to provide the CST assessments. Projected start date is 12/1		mmunity SST. Eac nal writte
H by deadl	Using the CST, FASTT staff will assess participants within 21 business days of receiving the referrals. EXCEPTION – Nyc County is in the process of developing their team and will not begin this activity until after they have developed the staffing capacity to provide the CST assessments. Projected start date is 12/16/19.		Supervi h assessm n referrals
ine. 2. A			sion To lent app s, case c
Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow up with national outcomes measures, TBD.	10/14/2019	Date due by	Outcome Objective Ic: Using the evidence-based Community Supervision Tool (CST), assess at least 25% of the individuals who score high-risk to reoffend on the CSST. Each assessment appointment is approximately 2 hours and includes: jail access, assessment, case planning, formal written referrals, case coordination, facilitated hand-off, and data entry.
m, DBPH	• • 0 0 •		assess at s approxi n, facilita
will cond	/ /	Documentation	least 25% mately 2 ated hand
uct an anr	Total number and percentage of individuals assessed each month. Including: Total number and percentage of individuals s at each risk-level. Total number and percentage of individuals s moderate to high-risk in each criminogenic-n domain. The CST is used, the results are documented individual FASTT case notes, and a copy is maintained in the individual FASTT case file Assessment results are entered into the standards.	n	of the hours an off, and
iual prov	d percent onth. Inc of percent of		
ider site v	age of including: age of including: age of including age of including age of including age age of including age		ercent Fu
isit. 3. Fo	Total number and percentage of individuals assessed each month. Including: Total number and percentage of individuals scoring at each risk-level. Total number and percentage of individuals scoring moderate to high-risk in each criminogenic-need domain. The CST is used, the results are documented in the individual FASTT case notes, and a copy is maintained in the individual FASTT case file. Assessment results are entered into the standardized FASTT database.		Percent Funding: %.
low	coring coring sed in the rdized		

ovider site visit. 3. Follow	, DBPH will conduct an annual pr	At a minimum,	up with national outcomes measures, TBD.
	i mor i case pians.	\	
cluded in the individual	 Case management is included in the individual FACTT case plans 		capacity to provide the CST assessments. Projected start date is 12/16/19.
	FASTT database.		will not begin this activity until after they have developed the staffing
Case management is documented in the standardized	 Case management is do 	\	2. EACEPTION – Nye County is in the process of developing their team and
ment.	receiving case management.	\	Seven business days after the CS1 assessment,
entage of individuals	 Total number and percentage of individuals 	10/14/2019	1. The FASTT staff will provide participants with case management within
	Documentation	Date due by	Activities including Evidence-based Programs
	P		scores on the criminogenic need domains and any responsivity indicators.
Q		ral health need	who score moderate to high risk to reoffend, and who have moderate to high behavioral health needs; as evidenced by the person's
Percent Funding: %.	completed a CST assessment,	als who have co	Outcome Objective 1d: Provide case management for at least 95% of the individuals who have

rovider site visit. 3. Follow	DBPH will conduct an annual p	At a minimum,	Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow up with national outcomes measures, TBD.
Each individual has a case plan in their FASTT case file.	• Each individual has a c file.		capacity to provide the CS1 assessments. Projected start date is 12/16/19.
Verification of a case plan is documented in the standardized FASTT database.	 Verification of a case plan is do standardized FASTT database 		will not begin this activity until after they have developed the staffing
0	FASTT case plan.		business days of the CST assessment.
Total number and percentage of individuals with a	 Total number and perc 	10/14/19	1. The FASTT staff will develop case plans with the participants within 14
	Documentation	Date due by	Activities including Evidence-based Programs
	, and will be designed to	ninogenic needs,	case plans will be initiated in the jail, will specify the individual's risk level and criminogenic needs, and will be designed to transition the individual into the community.
a	ehavioral health need. The	derate to high b	the individuals who score moderate to very high-risk to reoffend and who have a moderate to high behavioral health need. The
Percent Funding: %.	ase plan for at least 75% of	omprehensive c	Outcome Objective le: Based on the CST assessment, develop an individualized, comprehensive case plan for at least 75% of

Section B – Scope of Work

State of Nevada

Division of Public & Behavioral Health

Provider:

HD #: To be entered by state

entation A copy of the evidence-based curricula manuals. Staff training logs. Participant group attendance is documented in each individual's FASTT case file. Participant group attendance data is entered into the standardized FASTT database. ill conduct an annual provider site visit. 3. Follow	Family and Social Support; Education, or Employment and Financial Situation. Activities including Evidence-based Programs 1. SAPTA staff will provide evidence-based, public-domain, curricula targeting at least three of the criminogenic domains. 2. FASTT staff will be trained on standardized, evidence-based curricula using the peer training model. 3. The FASTT staff will facilitate standardized, evidence-based, curricula-based, intervention groups starting on the second month after training is received. 4. Group facilitators will follow the curricula with fidelity. 5. EXCEPTION — Nye County is in the process of developing their team and will not begin this activity until after they have developed the staffing capacity to facilitate the groups and after staff have been trained on the curricula. Projected start date is 12/16/19. Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow the curricula manuals. Date due by Documentation 1/6/20 • A copy of the evidence-based curricula manuals. 1/6/20 • A copy of the evidence-based curricula manuals. Participant group attendance is documented in ea individual's FASTT case file. Participant group attendance data is entered into the standardized FASTT database. Participant group attendance data is entered into the standardized FASTT database. Examination: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow
rercent Funding: %.	intervention groups each week that target the majority of the participants' criminogenic needs, as determined by the CST
Damont Funding, 0/	Culcome Objective II: FASTI staff will provide two 1.5 hour standardized, evidence-based, public-domain curricula-based

Section B – Scope of Work

State of Nevada

Division of Public & Behavioral Health

Provider:

HD #: To be entered by state

rovider site visit. 3. Fo	, DBPH Will conduct an annual pi	At a minimum,	up with national outcomes measures, TBD.
	7777	A	Explication 1 Occupate compare submitted to DDDITE. Jackling 2
,	referral source.	/	
s reports to crimina	 Monthly FASTT status reports to criminal justice 	\	
	FASTT case file.	\	
umented in each ind	 Communication is documented in each individual's 		
	sources.		capacity to provide the CST assessments. Projected start date is 12/16/19.
n to criminal-justice	 Release of information to criminal-justice referral 		will not begin this activity until after they have developed the staffing
	referral source.	\	2. EXCEPTION – Nye County is in the process of developing their team and
s reports to criminal	monthly FASTT status reports to criminal justice		sources, as applicable.
entage of individuals	 Total number and percentage of individuals with 	10/14/2019	1. The FASTT staff will provide status reports to criminal justice referral
	Documentation	Date due by	Activities including Evidence-based Programs
	presentative, or a parole or	e court, a jail re	probation officer.
Percent Funding: %.	; agencies for at least 95% of	ith the referring	Outcome Objective 1g: Using status reports, this is a state will coordinate cases with the referring agencies for at least 95% of

Section B – Scope of Work

State of Nevada
Division of Public & Behavioral Health **Provider:**

HD #: To be entered by state

up with national outcomes measures, TBD. Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow

Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum up with national outcomes measures, TBD.	 FASTT staff will refer participants to mutual or self-help support groups within one business day after providing the CAGE-AID screening. EXCEPTION – Nye County is in the process of developing their team and will not begin this activity until after they have developed the staffing capacity to provide the CSST screenings. Projected start date is 12/16/19. 	\	Outcome Objective 2c: At least 95% of the individuals who screen positive on the CAGE-AID wiself-help support group, such as Alcoholics Anonymous or Narcotics Anonymous.
t a minimum	10//4/19	Date due by	AGE-AID wi
, DBPH will conduct an annual provider site visit. 3. Follow	 Total number and percentage of individuals referred to a mutual or self-help support g during the month. Referral information is included in the indivi FASTT case plans. Referral data is entered into the standardized FASTT database. 	Documentation	ll be referred to a mutual or
provider site visit. 3. Follow	Total number and percentage of individuals referred to a mutual or self-help support group during the month. Referral information is included in the individual FASTT case plans. Referral data is entered into the standardized FASTT database.		Percent Funding: %.

Section B – Scope of Work

State of Nevada
Division of Public & Behavioral Health **Provider:**

	FASTT database.		
Referral information is included in the individual FASTT case plans. Referral information is entered into the standardized	 Referral information is FASTT case plans. Referral information is 		
A copy of the referral document is maintained in the FASTT case file.	• A copy of the referral of FASTT case file.	cupucity to provide the Coot screenings, rrojected start date is (2/16/19.	cubicuty
referred for a follow up appointment with a mental health clinician during the month.	referred for a follow up appoints health clinician during the month.	will not begin this activity until after they have developed the staffing	will not l
entage of individuals	 Total number and percentage of individuals 	EXCEPTION – Not County is in the process of developing their team and	2. EXCEPT
	Documentation	Activities including Evidence-based Programs Date due by	Activities includ
Percent Funding: %.	will be formally referred to a	ent. Score positive on the BJMH Screen	mental health cli
		3b. At 1,00t 0607 - 541 - 11 - 11 - 1	Outcome Obico
provider site visit. 3. Follow	DBPH will conduct an annual p	Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow up with national outcomes measures. TBD	u .
Screening results are entered into the standardized FASTT database.	 Screening results are e FASTT database. 		
	FASTT case plans.		
Screening information is included in the individual	 Screening information 		
	the FASTT case file.		
A copy of the individual's BIMH is maintained in	A copy of the individu	capacity to provide the CSST screenings. Projected start date is 12/16/19.	capacity
The BJMH is used, and the results are documented in the individual FASTT case files	in the individual FASTT case files	will not begin this activity until after they have developed the staffing	
	month.	EXCEPTION – Nye County is in the process of developing their team and	2. EXCEP
screened for mental health indicators during the	screened for mental h	after receiving the referral.	after rec
centage of individuals	 Total number and percentage of individuals 	staff will conduct BIMU conceins within 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	l FASTT
	Documentation	Activities including Evidence-based Programs Date due by	Activities inclu
Percent Funding: %.	indicators using the Brief Jail	STT referrals will be screened for mental health	Mental Health S
needs are prioritized for	neulun to nigh mental health	services and are connected to community-based services.	services and ar
	modium to 1: -111	ure individuals who are at moderate to high-risk to recidivate and who have n	Goal 3: To ens

HD #: To be entered by state

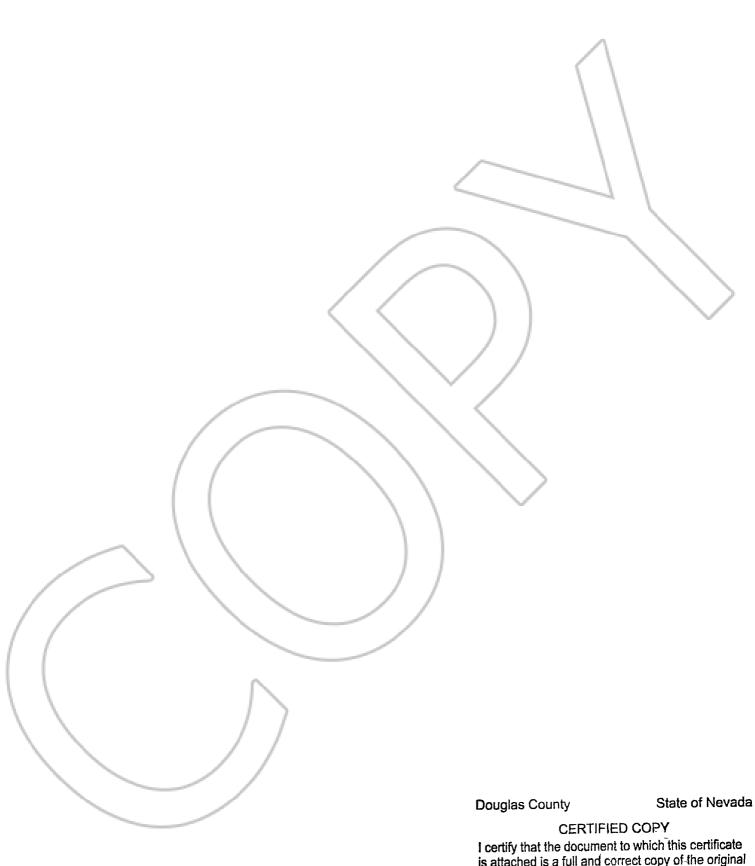
up with national outcomes measures, TBD. Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow



HD #: To be entered by state

Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow up with national outcomes measures, TBD.		will not begin this activity until after they have developed the staffing capacity to provide the CST assessments. Projected start date is 12/16/19.	 FASTT staff will make mental health referrals to community-based behavioral health programs within one day of the follow up appointment. EXCEPTION – Nye County is in the process of developing their team and 	Activities including Evidence-based Programs	Outcome Objective 3d: At least 75% of the individuals who score moderate to high-risk and have mental health services will be formally referred to community-based behavioral health programs.	Evaluation: 1. Quarterly reports submitted to DPBH by deadline. 2. At a minimum, DBPH will conduct an annual provider site visit. 3. Follow up with national outcomes measures, TBD.		capacity to provide the CST assessments. Projected start date is 12/16/19.	2. EXCEPTION – Nye County is in the process of developing their team and	 A mental health clinician will provide a follow up appointment, per jail nolicy 	Activities including Evidence-based Programs	Outcome Objective 3c: At least 75% of the individuals who score positive on the BJMH Screen will receive a follow-up appointment with a mental health clinician. The follow-up will be conducted in-person or through telehealth.
At a minimum,			10/14/19	Date due by		At a minimum				10/14/2019	Date due by	3JMH Screen w rson or through
DBPH will conduct an annual p	 Referral information is included in the indivious FASTT case plans. Referral data is entered into the standardized FASTT database. 	• A copy of the referral of FASTT case file.	 Total number and percentage of individuals referred to behavioral health programs duri month. 	Documentation	been screened as needing	, DBPH will conduct an annual p	 Follow-up data is entered fastr database. 	 Follow-up information FASTT case plans. 	receiving a follow-up appointme health problems during the month	 Total number and percentage of individuals 	Documentation	ill receive a follow-up telehealth.
provider site visit, 3. Follow	Referral information is included in the individual FASTT case plans. Referral data is entered into the standardized FASTT database.	A copy of the referral document is maintained in the FASTT case file.	Total number and percentage of individuals referred to behavioral health programs during the month.		Percent Funding: %.	provider site visit. 3. Follow	Follow-up data is entered into the standardized FASTT database.	Follow-up information is included in the individual FASTT case plans.	receiving a follow-up appointment for mental health problems during the month.	centage of individuals		Percent Funding: %.

Effective 6/21/2018



I certify that the document to which this certificate is attached is a full and correct copy of the original record on file in the Clerk-Treasurer's Office on this

day of February, 2020 Deputy