

Approved _____ Mayor ✓
Veto _____
Override _____

Amended
Agenda Item No. 12(A)(3)
02-06-07

**OFFICIAL FILE COPY
CLERK OF THE BOARD
OF COUNTY COMMISSIONERS
MIAMI-DADE COUNTY, FLORIDA**

RESOLUTION NO. R-162-07

RESOLUTION AUTHORIZING THE ALLIANCE FOR HUMAN SERVICES TO ADMINISTER AND MANAGE MIAMI-DADE COUNTY'S COMMUNITY-BASED ORGANIZATION FUNDING PROCESS; ACCEPTING THE FUNDING PRIORITIES, FUNDING LEVELS AND FUNDING PROCESSES RECOMMENDED BY THE ALLIANCE FOR HUMAN SERVICES FOR THE FY 2007-2010 COMMUNITY BASED ORGANIZATION FUNDING PROCESS; AUTHORIZING A THREE YEAR FUNDING CYCLE FOR FY 2007-2010; AND AUTHORIZING THE COUNTY MANAGER TO EXECUTE AGREEMENTS

WHEREAS, the Board of the Alliance for Human Services approved the 2007-2010 funding priorities for Community-Based Organizations based upon the Social Services Master Plan; and

WHEREAS, this Board desires to accomplish the purposes outlined in the accompanying memorandum, a copy of which is incorporated herein by reference,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes the Alliance for Human Services to administer and manage Miami-Dade County's Community-Based Organization funding process, including the award of funding allocations in accordance with the comprehensive health and social services master plan for 2007-2010; accepts the funding priorities, funding levels and funding process recommended by the Board of Directors of the Alliance for Human Services for the FY 2007-2010 funding process; authorizes a three-year Community-Based Organization funding cycle for FY 2007-2010; authorizes the member of the Board of County Commissioners representing each District, following the review of grants by

the Alliance for Human Services, to decide which organizations will be awarded that district's District-Related grants, unless the Commissioner elects to allow the Alliance for Human Services to make such decision, and such recommended Community-Based Organizations shall be submitted in writing by each Commissioner to the Alliance for Human Services; authorizes the County Manager to execute agreements with Community-Based Organizations that are approved for funding by the Alliance for Human Services; adopts and further authorizes the County Manager to exercise amendment, renewal, termination, cancellation and modification clauses of any agreement entered into pursuant to this Resolution.

The foregoing resolution was offered by Commissioner Barbara J. Jordan, who moved its adoption. The motion was seconded by Commissioner Dorrin D. Rolle and upon being put to a vote, the vote was as follows:

| | | | |
|----------------------|------------------------------------|--------------------|-----|
| | Bruno A. Barreiro, Chairman | aye | |
| | Barbara J. Jordan, Vice-Chairwoman | aye | |
| Jose "Pepe" Diaz | aye | Audrey M. Edmonson | aye |
| Carlos A. Gimenez | aye | Sally A. Heyman | aye |
| Joe A. Martinez | absent | Dennis C. Moss | aye |
| Dorrin D. Rolle | aye | Natacha Seijas | aye |
| Katy Sorenson | aye | Rebeca Sosa | aye |
| Sen. Javier D. Souto | aye | | |

The Chairperson thereupon declared the resolution duly passed and adopted this 6th day of February, 2007. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS



HARVEY RUVIN, CLERK

KAY SULLIVAN

Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency. *[Signature]*

Brenda Kuhns Neuman



MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

DATE: February 6, 2007

FROM: Murray A. Greenberg
County Attorney

SUBJECT: Amended
Agenda Item No. 12(A)(3)

Please note any items checked.

- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

ATTACHMENT II

HUMAN SERVICES INTEGRATION/CROSS-SYSTEMS/LIVABLE COMMUNITIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--|---|---|----------------------------------|
| Neighborhood Resource Networks | Service Access and Prevention, Early Intervention | Fund an entity to provide technical assistance to the awarded NRRN's, both new and expanding, with emphasis on meeting their many varied needs. Preference given to those entities who demonstrate a capacity to link internal and external entities with the NRRN's. | |
| Expansion of Continuity of Operations Plans (COOP) and Disaster Planning | Crisis and Emergency Services | Funding the continued development of COOP's as well as further expansion and quality development of existing disaster preparedness plans. | |

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Memorandum



Date: February 6, 2007

To: Honorable Chairman Bruno A. Barreiro
and Members Board of County Commissioners

From: George M. Burgess
County Manager

Subject: RESOLUTION APPROVING THE ALLIANCE FOR HUMAN SERVICES' FY 2007-2010 RECOMMENDATIONS IN THE APPROXIMATE AMOUNT OF \$23,912,000 PER YEAR, FOR THE COMMUNITY-BASED ORGANIZATION (CBO) FUNDING PRIORITIES

Amended
Agenda Item No. 12(A)(3)

R-162-07

RECOMMENDATION

It is recommended that the Board adopt the accompanying resolution approving the Alliance for Human Services' recommendations for FY 2007-2010 funding priorities, the funding levels for three years, and the funding process consistent with the Comprehensive Health and Social Services Master Plan for Miami-Dade County at a level of \$23,912,000 per year. The funding priority recommendations reflect those approved by the Alliance for Human Services Board at its December 13, 2006 meeting.

BACKGROUND

The Alliance for Human Services has completed the second Comprehensive Health and Social Services Master Plan for Miami-Dade County in accordance with R-235-99, passed by the Miami-Dade County Board of County Commissioners in March 1999. The Social Services Master Plan (SSMP) is the result of extensive research and a multi-faceted community planning process initiated by the Alliance for Human Services beginning in November 2004 and completed in October 2005 and further updated in 2006. During this time, the Alliance engaged over 500 individuals and organizations as stakeholders in a variety of planning activities and forums designed to solicit their input and expertise in shaping the SSMP priorities for the Board of the Alliance for Human Services' approval. The public participation process is viewed as essential to ensuring that the SSMP effectively represents the community's vision of the social services needs of Miami-Dade County residents. The 2007-2010 CBO funding recommendations presented here for the Miami-Dade County Board of County Commissioners' approval are based on the priorities identified during the 2004-2007 planning process.

The CBO funding priorities are organized into "service clusters", or impact areas, that reflect the organization of the SSMP, as follows:

- Basic Needs
- Children and Adults with Disabilities
- Children, Youth and Families
- Criminal Justice
- Elders
- Health
- Immigrants and New Entrants
- Special Needs Populations (Mental Health, Substance Abuse, Homelessness, and Victims of Domestic Violence or Sexual Assault)
- Workforce Development

In addition, the SSMP discussed extensively Human Services Integration and Cross-Systems Integration/Livable Communities as essential strategies to achieve the human services goals in Miami-Dade County.

The theme of the 2005-2007 Comprehensive Social Services Master Plan is "Building a Livable Community for ALL." The Alliance for Human Services strongly believes in looking at the needs of individuals and families in a "holistic" manner – that is, addressing the social services challenge as a whole, rather than in isolated parts – in order to provide the means to truly raise people's quality of life. The SSMP goals and CBO funding recommendations for 2007-2010 are consistent with the policy framework of the Alliance for Human Services: to increase the level of awareness throughout the community (including providers and clients) of available services; expand the availability of those services; improve clients' ability to access those services; and increase the available funding to provide for increased awareness, expanded services, and improved access. Each of the human services cluster sections in the SSMP identifies what our goals should be, suggested steps for strategic action, results and outcomes to be reached and report-card indicators that will help us both benchmark along the way and gauge progress made toward those goals. In addition, there is much discussion on human services integration and cross-systems connections.

Wherever possible, the SSMP identifies areas in which funders can maximize or leverage available resources to support the service needs of Miami-Dade County residents. An updated funding inventory will be completed by January 2007 and will be available from the Alliance for Human Services shortly thereafter. The inventory provides an overview of all funding streams utilized to contract for services related to the SSMP. This inventory is utilized to assist the Alliance for Human Services and the human services funder community to identify the community's human services funding areas, to assess the feasibility of leveraging opportunities, and to identify needs and gaps across systems to address the priorities identified in the SSMP.

In 2006, the Alliance for Human Services completed an implementation strategies report that looked at various ways of implementing the goals and achieving the outcomes set forth in the SSMP. A similar collaborative process that was used to develop the SSMP was employed engaging providers, advocates, funders, and neighborhood residents. The implementation strategies set forth were divided into funding, policy, and strategic development, and it is the hope of the Alliance for Human Services that these strategies will be utilized in decision-making and in the advancement of raising the quality of life for all in a "livable" Miami-Dade County.

The community participation and engagement component of the Alliance's work involves soliciting feedback from consumers, caregivers, service providers, neighborhood residents, civic and faith-based organizations, teachers, researchers, service planners, and grassroots community advocates in a wide variety of arenas. The purpose of utilizing a wide diversity of civic engagement strategies is to ensure that the SSMP reflects a solid community consensus on community needs. All participants have had an opportunity to provide input into the SSMP goals and outcomes, to assist in the identification of best practices and barriers to care, as well as service gaps and barriers that we need to overcome to improve the accessibility and quality of services provided in our community, and improve the quality of life in Miami-Dade County.

In this latest planning cycle, the Alliance for Human Services and its partners have conducted over 70 public meetings during 2005 and 2006; conducted 25 cluster-specific provider surveys to identify priorities for the SSMP; held a community update workshop on May 9, 2005; and held our third and fourth community-wide annual institutes (November 14, 2005 and October 27, 2006), which brought together a total of over 500 individuals and service providers involved in every cluster of the SSMP.

Recommendations for core services were arrived at by criteria that included numbers of individuals affected; availability of interventions proven to be effective; direct economic impact and cost effectiveness; emerging issues and trends over the past five years; whether or not the intervention or service will reduce the need for more costly interventions in the future, and opportunities to promote cross system collaboration.

In 2007-2010, there will be three set asides: (1) one for the 13 Miami-Dade County districts in the form of District-Related grants; (2) one for technical assistance to and programmatic evaluation of CBOs; and (3) one for summer youth employment. The first set aside in the amount of \$3,900,000 takes the place of the one-year District Responsive Grants. It recognizes the human services needs in each district by allocating \$300,000 to each district for district-related projects. \$100,000 of each district's set aside of \$300,000, will be for small CBOs that have annual budgets under \$500,000 and that are located in that district or that provide documented services to residents in that district. The Alliance will work with each commissioner to select human services funding priorities for his or her district based on the goals as set forth in the SSMP. The decision for awarding District-Related grants, following the review of grants by the Alliance for Human Services, shall be reserved to the member of the Board of County Commissioners who represents the District, unless the Commissioner elects to allow the Alliance for Human Services to make such decision. The recommended Community-Based Organizations shall be submitted in writing by each Commissioner to the Alliance for Human Services. The second set aside in the amount of \$1,000,000 will be for a separate Request for Qualifications (RFQ) for technical assistance to CBOs and programmatic evaluation of the CBO grants. The third set aside in the amount of \$1,000,000 will be for summer youth employment programs pursuant to Resolution No. 1395-06.

The Alliance for Human Services will continue the Haitian Initiative from the last NOFA funding cycle and will assure that at least \$1,000,000 in funding allocations will be for organizations that provide services to the Haitian Community. Also, the Alliance for Human Services reaffirms its goal of increasing support to small CBOs with agency budgets of no more than \$500,000. At least five per cent (5%) of the funding will go to small CBOs. Technical assistance activities are planned to accompany release of the Notice of Funding Availability.

Pending Board of County Commissioner approval, the Alliance for Human Services has provided the following timetable for CBO Notice of Funding Availability for FY 2007-2010.

| | |
|----------------------------|--|
| May 2006 - January 2007 | Development of NOFA |
| February 2007 | Release of NOFA (Date to be determined) |
| February 2007 – March 2007 | Technical Assistance Workshops and Bidders Conferences |
| April 2007 (middle) | CBO Proposals Due |
| June 2007 | Preliminary Notifications |

| | |
|--------------------------|-----------------------|
| June-July, 2007 | Appeals Process |
| July 2007 | Grant Awards |
| July-mid-September, 2007 | Contract Negotiations |
| October 2007 | Contract Start-Up |

The CBO funding recommendations and the associated Service Cluster Priorities for 2007-2010 are included as Attachment I. The Notice of Funding Availability (NOFA) Recommendations and their related Continuum Category and Social Services Master Plan Goal is included as Attachment II.

Attachments



Mae D. Bryant
Assistant County Manager

CBO FUNDING RECOMMENDATIONS FOR 2007-2010

As charged by the Board of County Commissioners, the Alliance for Human Services is submitting the following CBO funding priorities and levels of funding, consistent with the SSMP for the Board of County Commissioners for approval.

- A. **Basic Needs - Poverty and Hunger to be funded at \$1,502,200 for:** food recovery and distribution; nutritional education and referral to services; neighborhood-based natural helpers for service access, education, and public benefit enrollment; development and/or expansion of one-stop comprehensive services/activities to address hunger and poverty needs; legal services (representation and education) for indigent, immigrant, and special needs populations; and homeownership preparation and stabilization.
- B. **Children and Adults with Disabilities to be funded at \$1,055,600 for:** services, supports—and therapies in and out of the home for children and adults with physical, sensory or developmental disabilities; respite care for disabled children, and adults and their caregivers; after-school care for disabled children and adults; programs that will provide assistance in accessing services and outreach/education about services and adaptive equipment; services to facilitate the transition from school to a work environment; and cultural enhancement activities to improve quality of life.
- C. **Children Youth & Families to be funded at \$3,743,400 for:** early intervention services to children identified as being at risk of child neglect; services to young adults transitioning from relative care/foster care; promoting life skills and healthy choices; positive youth development; school advocacy and mentoring; and stabilization step-down programs for youth discharging from mental health facilities; the development of a universal comprehensive assessment test; training in early childcare for workers; and, the overall identification of safe environmental activities for children youth and families.
- D. **Criminal Justice to be funded at \$2,873,600 for:** crime prevention/ intervention activities for juvenile offenders through family empowerment, community enhancement, multisystemic therapy, and youth gang intervention programs; and supporting successful reentry to the community for adult offenders by providing comprehensive assessments, services and supports, with particular emphasis on literacy proficiency and job readiness skills and specialized services for female offenders.
- E. **Elder Services to be funded at \$3,342,200 for:** center-based socialization and nutrition services; home-based services for frail elderly; respite care for caregivers and elders; linkage to services after discharge from a medical facility; early intervention services to maintain a safe and stable environment; and, cross-systems training to educate the community on the impact of crisis events on the elderly.
- F. **Health to be funded at \$620,900 for:** community health workers to educate consumers on health literacy and how to access services; health navigators to coordinate health and other human service providers to increase referrals to public-funded health programs; disease management; increase health services to the homebound; expanding worksite wellness initiatives; a healthy community model; provider training in cultural competency, health literacy and cross training; and, HIV/AIDS education and prevention to special populations (to honor the memory of Luis Penelas, Jr.).

G. Immigrant and New Entrants to be funded at \$426,500 for: community-based adaptation and socialization services (including access to social services); academic and vocational training (for individuals who are not eligible to receive federally-funded services currently) to maximize economic self sufficiency; capacity building and/or training on immigration issues; public policy education; and outreach.

H. Special Needs

1. Homelessness to be funded at \$605,400 for: matching funds for homeless supportive services providers; homeless prevention case management including case management, one-time rental subsidies; expansion of homeless outreach services; and assistance to homeless in the obtaining of vital identification and personal documents.

2. Mental Health to be funded at \$795,800 for: comprehensive services to mentally ill adults with co-occurring disorders; mental health treatment and post treatment services to children and adults; transitional services to 14-22 year olds aging out of children's mental health services; supportive services in transitional housing; and, assistance through the Baker Act Guardian Advocate Program.

3. Substance Abuse to be funded at \$582,700 for: prevention and educational services to children and young adults in culturally competent/evidence-based programs; early identification and treatment of family (friends) affected by substance abuser; services to substance abusers as primary diagnosis with co-occurring mental disorders; services in step-down facilities that work towards re-integration in the family and the community, including assisting with employability and educational skills.

4. Victims of Domestic Violence or Sexual Assault to be funded at \$336,700 for: the expansion of a one-stop center in North Miami-Dade County; services to male victims; training of first responders to address children; emergency housing/shelter for victims with male adolescent children; and community education and training in all aspects of domestic violence including the elderly, persons with disabilities and immigrants and new entrants.

I. Workforce Development to be funded at \$1,177,000 for: support services (specifically personal crisis and community emergencies) for hard-to-serve job seekers in order to obtain and maintain employment; vocational mentoring for at-risk youth; coaching for all hard-to-serve job seekers; demonstration employment programs and job readiness programs (general and neighborhood specific); and, education and training the community on the employment and vocational needs of hard-to-serve job seekers.

J. Human Services Integration/Cross Systems Integration/Livable Communities to be funded at \$950,000 for: the development and expansion of neighborhood resource networks; comprehensive training in cross-system human services; disaster preparedness planning; and technical assistance to the neighborhood resource networks.

SERVICE CLUSTER PRIORITIES

| | |
|--|--------------------|
| Basic Needs | \$1,502,200 |
| <ul style="list-style-type: none">◆ Development and Expansion of One-Stop Comprehensive Services◆ Nutrition Education and Referral◆ Natural Helpers for Access to Services and Benefits◆ Legal Services for Low-Income/Indigent Populations◆ Legal Services for Immigrant Populations◆ Legal Services for Elderly and/or Disabled Populations◆ Legal Education to Service Providers and Community◆ Food Distribution and Recovery◆ Homeownership Preparation and Stabilization | |
| Children and Adults with Disabilities | \$1,055,600 |
| <ul style="list-style-type: none">◆ Resource Specialist to Access Services in Location of Choice◆ Resource Specialist for Children Aging out of Children Services◆ Outreach and Education about Adaptive/Special Equipment◆ Outreach and Education about Disaster Preparedness◆ In-home Supports for Developmentally Disabled Adults◆ Out-of Home Services and Therapies for Developmentally Disabled Adults◆ In-home Supports for Adults with Physical or Sensory Disabilities◆ Out-of Home Services and Therapies for Adults with Physical or Sensory Disabilities◆ Services to Facilitate Transitioning from School to a Work Environment◆ Support for Caregivers and Physically, Sensory or Developmentally Disabled Adults◆ Supervised Out-of-School Care or After-Work Care for Disabled Children and Adults◆ Cultural Enhancement Activities | |
| Children, Youth and Families | \$3,743,400 |
| <ul style="list-style-type: none">◆ Early Intervention for Child Neglect◆ Final Phase: Transition from Relative Care/Independent Living◆ School Advocacy and Mentoring Services Crime Prevention Services◆ Life Skills and Healthy Choices◆ Health Education to Children◆ Relative Care – Supportive Services for a Relative◆ Positive Youth Development◆ Stabilization Step-Down Care Program◆ Universal Comprehensive Test◆ Training in Early Childhood | |
| Criminal Justice | \$2,873,600 |
| <ul style="list-style-type: none">◆ Family Empowerment◆ Community Enhancement Programs (formerly Neighborhood Empowerment)◆ Gang Prevention/Intervention Program◆ Multisystemic Therapy◆ Literacy Proficiency and Job Readiness◆ Ex-offender Re-entry Council Assessment and Provision of Services to Inmates During and After Incarceration◆ Female Offenders – Special Needs | |

| | |
|--|--------------------|
| Elder Services | \$3,342,200 |
| ◆ Access to services after discharge from medical facilities | |
| ◆ Early Intervention/Prevention | |
| ◆ Center Based Care | |
| ◆ In-Home Services for Frail Elder, including Home Delivered Meals | |
| ◆ Respite care for caregivers and elders | |
| ◆ Cross-System Training | |
| Health | \$620,900 |
| ◆ Community Health Workers | |
| ◆ Health Navigators | |
| ◆ HIV/AIDS Education and Prevention | |
| ◆ Mobile services to the homebound | |
| ◆ Chronic Disease Management | |
| ◆ Healthy Community Model | |
| Immigrants and New Entrants | \$426,500 |
| ◆ Community Based Adaptation and Socialization | |
| ◆ Academic/Vocational Training | |
| ◆ Public Policy Outreach and Education | |
| Special Needs Populations | |
| Homelessness | \$605,400 |
| ◆ Match Funding | |
| ◆ Prevention Case Management | |
| ◆ Expand outreach services | |
| ◆ Obtaining of Vital Identification/Personal Documents | |
| Mental Health | \$795,800 |
| ◆ Baker Act Guardian advocate program | |
| ◆ Services for adults with co-occurring disorders | |
| ◆ Treatment and post treatment services | |
| ◆ Transitional services for 14-22 year olds | |
| ◆ Supportive services for individuals in transitional housing | |
| Substance Abuse | \$582,700 |
| ◆ Prevention and Education Services | |
| ◆ Early Intervention Services to Children of Parents who are Substance Abusers | |
| ◆ Early Intervention Services to Parent of Children who are Substance Abusers | |
| ◆ Early Intervention Services in a Pre-Trial Program to Substance Abusers with Co-Occurring Mental Health Disorder | |
| ◆ Treatment for Co-Occurring Disorders | |
| ◆ Post-Treatment Services in a Step-Down Facility | |
| ◆ Post-Treatment Services in Family-Centered Programs | |
| ◆ Post-Treatment Case Management with Emphasis on Farm Workers and Victims of Abuse or Domestic Violence | |

| | |
|--|---------------------|
| Victims of Domestic Violence or Sexual Assault | \$336,700 |
| <ul style="list-style-type: none"> ◆ Expansion of One Stop Centers ◆ Services to male victims ◆ Increase specialized services for children ◆ Emergency housing for victims with adolescent male children ◆ Community Awareness | |
| Workforce | \$1,177,000 |
| <ul style="list-style-type: none"> ◆ Support Services to obtain and maintain employment ◆ Vocational Mentoring ◆ Training, coaching and mediation services for hard-to-serve job seekers ◆ Neighborhood initiatives ◆ <u>Welcoming/sensitivity</u> training for CBOs and employees | |
| Human Services Integration/Livable Communities/ Cross-Systems Integration | \$950,000 |
| <ul style="list-style-type: none"> ◆ Comprehensive Training in Cross-System Human Services ◆ Special Needs Shared Information/Case Management ◆ Development of Neighborhood Resource Networks ◆ Expansion of existing Neighborhood Resource Networks ◆ Technical Assistance to Neighborhood Resource Networks ◆ Expansion of Continuity of Operations Plans and Disaster Preparedness Planning | |
| District Related Grants | \$3,900,000 |
| Technical assistance to and programmatic evaluation of CBOs | \$1,000,000 |
| Summer Youth Employment | \$1,000,000 |
| <hr/> | |
| Total CBO Funding for 2007-2010 | \$23,912,000 |
| <hr/> <hr/> | |

2007-2010 NOFA FUNDING RECOMMENDATIONS

ATTACHMENT II

BASIC NEEDS

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---|-------------------------------|--|---|
| Development and Expansion of one-stop comprehensive services/activities to address hunger & poverty needs | | Coordinate public awareness campaigns, neighborhood outreach, advocacy, and/or eligibility screening activities in high need communities to reduce hunger & poverty. | Goal 1. Miami-Dade County will have a reduction in poverty. |
| Nutrition Education and Referral to Services | Service Access and Prevention | Increase funding for food distribution services to service low-income individuals and/or persons in crisis. Services include, but are not limited to nutritional education and links consumers to additional services and supports. Preference given to those who collaborate with food recovery entities and/or distribution services. Funds cannot be used for the purchase of food. | Goal 2. Miami-Dade County will see a reduction in the incidence of hunger. |
| Natural Helpers for Access to Services and Benefits | | Fund Neighborhood Based Natural Helpers and Information & Referral Services that link and proactively guide consumers in need to community and public resources on a timely basis and in a culturally competent manner. Job training for these positions offered under Human Services Integration. Job descriptions necessary in applications. | Goal 1. Miami-Dade County will have a reduction in poverty. |
| Legal Services | Early Intervention | Provide direct legal representation to low-income/indigent populations in a culturally competent manner. Provide direct legal representation to immigrant populations. | Goal 5. Legal services providers will offer civil legal assistance to foster low income clients' economic independence, social integration, and quality of life. Goal 5. Legal services providers will offer civil legal |

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| BASIC NEEDS | | | |
|--|---------------------------|---|---|
| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
| <p>Legal Education to service providers and community to promote knowledge about legal rights/responsibilities and economic independence</p> <p>Food Distribution and Recovery Services</p> <p>Homeownership Preparation and Stabilization</p> | <p>Early Intervention</p> | <p>Provide direct legal representation to the elderly and/or disabled populations.</p> | <p>assistance to foster low income clients' economic independence, social integration, and quality of life.</p> <p>Goal 5. Legal services providers will offer civil legal assistance to foster low income clients' economic independence, social integration, and quality of life.</p> |
| | | <p>Provide legal education and outreach to service providers and the community. Services include, but are not limited to legal information and community legal education sessions.</p> | <p>Goal 5. Legal services providers will offer civil legal assistance to foster low income clients' economic independence, social integration, and quality of life.</p> |
| | | <p>Fund food recovery & distribution programs that collect surplus food products and distribute them to low-income individuals and/or persons in crisis. Funds cannot be used for the purchase of food.</p> | <p>Goal 2. Miami-Dade County will see a reduction in the incidence of hunger.</p> |
| | | <p>Fund the development of a system and activities that entail follow-through case management of post-closing for first-time homeowners. Services include, but are not limited to homebuyer clubs, peer counseling, financial education, etc.</p> | <p>Goal 1. Miami-Dade County will have a reduction in poverty.</p> |
| | | <p>Provide education and counseling to determine homeownership potential to prospective homebuyers.</p> | <p>Goal 1. Miami-Dade County will have a reduction in poverty.</p> |

CHILDREN & ADULTS WITH DISABILITIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---------------------------------|-------------------------------|---|---|
| Access to services | Service Access and Prevention | Provide a resource specialist to direct children and adults with disabilities through the system(s) to access services and providers in their location of choice. | Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services. |
| | | Provide a resource specialist to work with children aging out of children service program. | Goal 2. Persons with disabilities, their caregivers, professionals, and the community will increase their awareness of available services. |
| | | Provide outreach and education to children and adults with disabilities, and their caregivers about adaptive/special equipment. | Goal 2. Persons with disabilities, their caregivers, professionals, and the community will increase their awareness of available services. |
| Consumer outreach and education | | Provide outreach and education to children and adults with disabilities, and their caregivers about disaster preparedness. | Goal 2. Persons with disabilities, their caregivers, professionals, and the community will increase their awareness of available services. |

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CHILDREN & ADULTS WITH DISABILITIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---|--------------------------------|---|---|
| <p>Community based services to children and adults with physical, sensory or developmental disabilities</p> | <p>Individualized Services</p> | <p>Provide in home supports and services that promote physical, emotional, health and financial independence to developmentally disabled adults.</p> | <p>Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services.</p> |
| | | <p>Provide out of home services and therapies to developmentally disabled adults to improve or increase their functional abilities.</p> | <p>Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services.</p> |
| | | <p>Provide in home supports and services that promote physical, emotional, health and financial independence to adults with physical or sensory disabilities.</p> | <p>Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services.</p> |
| <p>Transition from school</p> | | <p>Provide out of home services and therapies to adults with physical and sensory disabilities to improve or increase their functional abilities.</p> | <p>Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services.</p> |
| | | <p>Provide comprehensive services to children and adults with physical, sensory or developmental disabilities to</p> | <p>Goal 1. Persons with physical, developmental and/or sensory</p> |

CHILDREN & ADULTS WITH DISABILITIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--|-------------------------|---|---|
| Respite and after care | Individualized Services | facilitate transitioning from school to a work environment. | disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services. |
| | | Provide support for caregivers and physically, sensory or developmentally disabled adults which may include in or out of home respite services. | Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services. |
| | | Provide supervised out-of-school care or after-work care for children and adults with physical, sensory or developmental disabilities. | Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services. |
| Cultural enhancement activities for individuals with physical, sensory or developmental disabilities | | Develop and implement cultural and recreational programs with therapeutic value for disabled adults. | Goal 1. Persons with physical, developmental and/or sensory disabilities will have an increase in services. Goal 3. Persons with disabilities will have improved access to services. |

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CHILDREN, YOUTH AND FAMILIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--|----------------------------|---|---|
| Child Neglect | | Provide information, referral and assessment services to reduce the potential risk of abuse, neglect and abandonment of children in their homes or in relative care settings. Communities to be targeted include those with highest numbers of A/N/A reports in 2005. | Goal 2. Children, youth and families will improve their health and wellness. |
| Final phase: Transition from relative care/independent living | Early Intervention | Provide short term supportive services to include information and referral to employment, housing, health, social and recreational services to young adults, up to 23 years of age, exiting relative care or Independent Living. | Goal 5. Youth will develop positive social and life skills. |
| School Advocacy and Mentoring Service (SAMS) Crime Prevention Programs | | Provide full-time staff who intensively support youths at risk of school failure/ dropout to succeed in school or plan for alternative vocational training. Must be established in Miami-Dade high schools classified as "D" or "F" and serve at-risk youth. Preference given to referred youths who have committed a criminal or delinquent offense. | Goal 4. Children and youth will increase their school readiness and academic performance. |
| Life skills and healthy choices | Service Access/ Prevention | Provide after school and/or community based initiatives, including weekends, to address nutrition, exercise, sex education, recreation activities, job readiness, financial literacy, anger management, conflict resolution, assertiveness, communication, time management and stress reduction for adolescents, teens and parents. | Goal 5. Youth will develop positive social and life skills. |
| Health Education to Children | Service Access/ Prevention | Provide in or after school programs, including weekends, to address nutrition education, health and healthy lifestyles, for children 5 to 12 years old. | Goal 2. Children, youth and families will improve their health and wellness. |
| Relative Care | Prevention | Provide supportive services for a relative other than the natural parent who has the responsibility of child | Goal 5. Youth will develop positive social and life skills. |

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CHILDREN, YOUTH AND FAMILIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--------------------------------------|----------------------------|---|---|
| Positive Youth Development | Service Access/ Prevention | <p>rearing/supervision. Services include information & referral to community based resources, educational workshops addressing child development, child rearing best practices, conflict resolution, stress management and behavior management.</p> <p>Fund programs that will provide information, activities and exposure to events that address cultural awareness, artist expression, mentoring and tutorial services.</p> | Goal 5. Youth will develop positive social and life skills. |
| Stabilization Step-down Care Program | Individualized Services | <p>Provide pre-discharge linkage to community based services to children with a DSM-IVR diagnosis being discharged from a crisis stabilization unit to insure services are received within 5 days of discharge.</p> <p>Provide assessment testing with an individualized treatment plan to children in grades 1st- 5th who attend a Zone elementary school and did not receive a pre-school screening that identified health, mental health, developmental and educational delays or disabilities that impact academic success.</p> | <p>Goal 5. Youth will develop positive social and life skills.</p> <p>Goal 1. Children, youth and families will have improved access to services.</p> |
| Universal Comprehensive Test | Capacity | <p>Provided training in subsidized day care centers to early childhood teachers and aides that address indicators of service needs for children, understanding of the human services system and best practices in the areas of child care.</p> | Goal 4. Children and youth will increase their school readiness and academic performance. |
| Training in Early Childhood | Capacity | | |

CRIMINAL JUSTICE

| NOFA Priority | Continuum Category | Description | Social Service Master Plan Goal |
|---|---------------------------|--|--|
| <p>Family Empowerment Crime Prevention (FEP) (recommendation of CJC)</p> | <p>Early Intervention</p> | <p>Provide a program for adjudicated and non-adjudicated youth diverted from the juvenile court, as well as other court involved youth. Includes family members in the delivery of services in order to reduce the impact of familial risk factors on delinquency. Aimed at re-offense prevention through research-based, risk-oriented strategies consistent with the <i>Communities that Care Social Development Prevention and Intervention Model</i>. Programs must address substance abuse issues as research suggests the co-occurrence of drug abuse with delinquency in juveniles. Greatest need is in Commission Districts 1, 2, 3, 5, and 9.</p> | <p>Goal 4. Youth crime prevention and criminal justice interventions will be replicated from evidenced-based best practices.</p> |
| <p>Community Enhancement Programs (CEP) (formerly Neighborhood Empowerment) (recommendation of CJC)</p> | | <p>Target at-risk communities (public or private housing developments within high crime areas) to promote safety and stability in the communities and support risk-focused crime prevention methodologies. Youths on community control or probation are referred by the Department of Juvenile Justice. Services and activities must include interventions designed to prevent or reduce targeted risk factors in the community and to enhance prevalent protective factors. Preference is for small community-based organizations.</p> | <p>Goal 4. Youth crime prevention and criminal justice interventions will be replicated from evidenced-based best practices.</p> |

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CRIMINAL JUSTICE

| NOFA Priority | Continuum Category | Description | Social Service Master Plan Goal |
|--|------------------------------------|--|---|
| <p>Gang Prevention/ Intervention Program (recommendation of CJC)</p> | <p>Early Intervention</p> | <p>Fund youth gang initiatives under a consolidated contract. Services and activities include maintaining the Youth Gang Resource Center as the central source of information on all current initiatives addressing youth gang issues and the 24/7 Gang Hotline, producing the annual Gang Summit, and applying an appropriate level of intervention and/or referral as needed. Preference is for applications that reflect strong collaboration among various organizations.</p> | <p>Goal 4. Youth crime prevention and criminal justice interventions will be replicated from evidenced-based best practices.</p> |
| <p>Multisystemic Therapy (MST) (recommendation of CJC)</p> | <p>Community-based Treatment</p> | <p>Build capacity within Miami-Dade County for MST by training one local CBO on the technique which will then be funded to provide these 24/7 services locally. MST is a nationally recognized intensive family and community based treatment that addresses the multiple determinants of serious antisocial behavior in juvenile offenders. It uses methods that promote positive social behavior and decrease antisocial behavior to change how youth function. It encompasses: the individual, the family, and the extra familial (peer, school, neighborhood). Providers currently trained in MST are not eligible to apply.</p> | <p>Goal 4. Youth crime prevention and criminal justice interventions will be replicated from evidenced-based best practices.</p> |
| <p>Literacy Proficiency and Job Readiness</p> | <p>Employment and Day Programs</p> | <p>Raise literacy proficiency and job readiness of incarcerated individuals in local jails to a minimum level to become eligible for work/apprenticeship programs. Coordinate services with community providers, Miami-Dade Department of Corrections and Rehabilitation, and Ex-Offender Reentry Council. As feasible, implement the forthcoming recommendations of Miami-Dade Blue Ribbon Advisory Committee on Education/Training.</p> | <p>Goal 1. Incarcerated individuals at their point of entry, during their incarceration, and upon release, will have needed support services identified and provided.</p> |

CRIMINAL JUSTICE

| NOFA Priority | Continuum Category | Description | Social Service Master Plan Goal |
|--|---------------------------|---|--|
| Ex-offender Reentry Council | Community Living Supports | Develop an Ex-offender Reentry Council with appropriate community representation and develop a comprehensive community reentry plan that will identify, map, draw upon and redeploy existing resources to better coordinate and provide service accessibility to ex-offenders. In years 2 & 3, execute the plan as a pilot program in a targeted geographic area in coordination with other local efforts. Requires the leveraging of funds from other sources as well as working closely within the Alliance4HS's cluster system. | Goal 2. A profile of ex-offenders and their needs, and a summary of the impacts and costs/benefits of interventions will be developed. Goal 3. Re-entry programs to help ex-offenders survive in the community will be created and implemented. |
| Assessment and Provision of Services to Inmates During and After Incarceration | Community Living Supports | Establish a demonstration/pilot program, based on a national model, to conduct a comprehensive assessment for selected inmates in State prison upon their incarceration, devise an initial plan with identified services (e.g., education/ training, health, mental health, substance abuse) and goals/benchmarks, and follow up by directly connecting inmates to service providers. The services and plan will be subject to periodic review during and following incarceration, together with progress made toward accomplishing goals. Coordination with FL Dept of Corrections and leveraging of public resources are critical elements. | Goal 1. Incarcerated individuals at their point of entry, during their incarceration, and upon release, will have needed support services identified and provided. |

CRIMINAL JUSTICE

| NOFA Priority | Continuum Category | Description | Social Service Master Plan Goal |
|--|----------------------------------|---|---|
| <p>Female Offenders - Special Needs</p> | <p>Community Living Supports</p> | <p>Address the family dynamic of having a mother who is incarcerated, both during incarceration and upon her return home, to mitigate the impact on her children and ease her transition back into family life and the community. This theme recognizes the fact that female offenders have additional needs and greater influence on their families.</p> | <p>Goal 1. Incarcerated individuals at their point of entry, during their incarceration, and upon release, will have needed support services identified and provided.</p> |
| <p>Independent Evaluation and Technical Assistance (recommendation of CJC) Note: This priority is included in the Technical Assistance and Evaluation Set Aside</p> | <p>Capacity Development</p> | <p>Conduct process and outcome research and analysis to evaluate the effectiveness of the Family Empowerment, Neighborhood Empowerment, School Advocacy and Mentoring Services & Gang Prevention/Intervention programs.</p> | |

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ELDERS

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---|-------------------------------|---|--|
| Access to services | Service Access and Prevention | Provide case management to link elders being discharged from medical facilities with services in the community to support aging in place. Must show collaboration with medical facilities to enable transition and implementation of the case plan. | Goal 1. Elders will live where they choose for as long as they have the capacity to do so. Goal 6. Frail and/or cognitively impaired elders will have access to Assisted Living Facilities. |
| Early Intervention/Prevention | Early Intervention | Provide services for up to 60 days to elders who are victims of abuse, neglect or exploitation who have exhausted services through the Community Care for the Elderly Program. | Goal 3. Elders will be protected from abuse, exploitation and neglect. |
| Center-based socialization, nutrition and recreational services | Early Intervention | Provide elders with neighborhood based programs to promote socialization including but not limited to: information and referral, screening and assessment, recreation, social activities, education, congregate meals, nutrition services, counseling, wellness activities and intergenerational programs. | Goal 4. Elders will continue to enjoy the basis life needs- housing, food, companionship. |
| Home-based services for the frail elderly, including home delivered meals | Individualized Services | Provide assistance to frail, homebound elders by offering services that allows them to age in place and promote physical, emotional, health and financial independence, including assistance before and after natural disaster events. Examples of services offered are homemakers, personal care, chore, home delivered meals, minor home repairs or modifications and hurricane preparedness. | Goal 1. Elders will live where they choose for as long as they have the capacity to do so. Goal 2. Crisis events will have minimal impact on elders. |
| Respite care for caregivers and elders | | Provide caregiver support which may include in or out of home respite services, adult day care services and other supports for adults caring for elderly. | Goal 5. Caregiver, including the entire family, will be supported. |

| ELDERS | | | |
|---|-----------------------------|---|---|
| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
| <p>Cross systems training about the impact of elder abuse and crisis events</p> | <p>Capacity Development</p> | <p>Develop training to educate service providers, law enforcement, first responders, policy makers, private sector and the community about elder abuse and the impact of crisis events on elders.</p> | <p>Goal 2. Crisis events will have minimal impact on elders. Goal 3. Elders will be protected from abuse, exploitation and neglect.</p> |

| HEALTH | | | |
|--|-------------------------------|---|---|
| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
| Community health workers to work with community at large | | Educate communities and consumers on navigating the health system. Education should encompass accessing services, follow through tracking and health literacy (for example, "Ask Me 3" campaign). Services will be expanded to neighborhoods that do not already have community health workers such as Overtown, Miami Beach, Opa Locka, Miami Gardens, Hialeah, Palm Springs North, Sweetwater, West Dade, Kendall/West Kendall and Homestead. | Goal 1. Resident will know how and where to access healthcare services. |
| Health Navigators to work with providers | Service Access and Prevention | Fund navigators to coordinate with community-based collaborative and health and human service providers to increase referrals to public-funded health programs. Neighborhoods in need of health navigators include Overtown, Miami Beach, Opa Locka, Miami Gardens, Hialeah, Palm Springs North, Sweetwater, West Dade, Kendall/West Kendall and Homestead. | Goal 1. Resident will know how and where to access healthcare services. Goal 2. Residents will have equal opportunities for access to comprehensive healthcare services. |
| HIV/AIDS education and prevention | | Provide HIV/AIDS education and prevention services to at-risk youth, the elderly and incarcerated populations in accordance with the resolution adopted by the County Commission in memory of Luis Penelas, Jr. | Goal 3. Residents will be knowledgeable and have the capability to make healthy lifestyle choices and effectively manage their health and wellbeing. |
| Mobile health services to the homebound | Early Intervention | Provide health status screenings to the uninsured homebound and ensure individuals who have identified health issues will be referred to and followed through with appropriate health services and appropriate transportation. | Goal 2. Residents will have equal opportunities for access to comprehensive healthcare services. |
| Chronic disease management – new and innovative programs | Capacity Development | Identify and replicate an innovative and effective model of client-based chronic disease management for low-income individuals with preference to the | Goal 4. Healthcare providers will provide culturally appropriate care to |

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| HEALTH | | | |
|---|-----------------------------|--|--|
| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
| <p>Healthy Community and Built Environment models</p> | <p>Capacity Development</p> | <p>uninsured. The model should respect cultural heritage and ethnicity and might include holistic or nutrition-based components.</p> <p>Fund a healthy community model for a project that, for example, expands a worksite wellness initiative; conducts a needs assessment and evaluation of playgrounds or of a contaminated neighborhood area followed by full implementation of the identified improvements such as providing green spaces and beautification.</p> | <p>the populations they serve.</p> <p>Goal 3. Residents will be knowledgeable and have the capability to make healthy lifestyle choices and effectively manage their health and wellbeing.</p> |

IMMIGRANTS AND NEW ENTRANTS

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--|-------------------------------|---|--|
| Community-based Adaptation and Socialization (including access to social services) | Service Access and Prevention | Provide peer and neighborhood-based outreach, information and referral, support services to address adaptation to life in the United States, focusing on acculturation, education on availability of social services, civic/financial literacy to prevent loss of benefits to elders and other vulnerable populations and enhancing citizenship preparation programs. | Goal 1. Immigrants and new entrants will have improved access to social services and benefits. Goal 3. Immigrants and new entrants will be empowered to integrate into the community. |
| Academic and Vocational Training to Maximize Economic Self-sufficiency | Individualized Services | Provide academic/vocational services to include employment/vocational assessments, adult literacy in first language and English proficiency, adult general education consisting of programs designed to improve the employability skills of individuals who do not qualify for federally funded services. | Goal 1. Immigrants and new entrants will have improved access to social services and benefits. Goal 3. Immigrants and new entrants will be empowered to integrate into the community. |
| Public Policy Education and Outreach | Capacity Development | Provide public policy education and outreach to the community at large regarding the rights of immigrants and new entrants, includes training/capacity building and networking opportunities for service providers and concerned citizens on immigrant issues and laws. | Goal 2. Community groups, health and human services providers, and governmental entities will establish formal and informal cross-systems collaboration regarding immigrants. |

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SPECIAL NEEDS: HOMELESSNESS

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--|---|--|---|
| Matching Funds for Supportive Services | Service Access and Prevention, Capacity Development | Make available match/leverage funds for federal, state and local or private grants that provide housing and/or services to homeless persons, and provide continued infrastructure support to homeless programs currently funded through the CBO process. Funding available for programs providing supportive services. | Goal 1. Homelessness within Miami-Dade County will be reduced. Goal 4. Homeless will spend less time in transitional shelters. |
| Homeless Prevention Case Management | Service Access and Prevention | Provide enhanced case management services designed to identify and address issues that impact an individual's ability to sustain housing. Fundable services/activities include: case management and a one-time supplemental rent subsidy to a participant who has received an eviction assistance payment. | Goal 2. Emergency homeless prevention services will be expanded. |
| | Early Intervention | Expand homeless outreach services to include weekend and evening hours, especially in areas of Miami-Dade County where the homeless census numbers have shown dramatic increases in the last year. | Goal 3. Homeless street people homeless will receive expanded outreach services. |
| Obtaining of Vital Identification/Personal Documents | Service Access and Prevention | Provide assistance to homeless individuals in obtaining vital personal/identification documents including all related costs. (i.e. drivers licenses) | Goal 1. Homelessness within Miami-Dade County will be reduced. Goal 3. Homeless street people homeless will receive expanded outreach services. Goal 5. Homeless clients' income will increase through employment and benefits. |

SPECIAL NEEDS: MENTAL HEALTH

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---|-------------------------|--|--|
| Baker Act Guardian Advocate Program | Early Intervention | Provide guardian advocates to individuals needing representation during the Baker Act process. | Goal 1. Adults with mental illness, including co-occurring disorders (with substance abuse) will have expanded outpatient treatment and services. |
| Services to individuals with co-occurring disorders | Individualized Services | Provide comprehensive services to adults whose primary diagnosis is mental illness and who have a co-occurring substance-abuse disorder. | Goal 1. Adults with mental illness, including co-occurring disorders (with substance abuse) will have expanded outpatient treatment and services. |
| Mental health treatment/post treatment services | | Provide wrap-around services to mentally-ill children or adults, including individualized treatment plans and targeted case management. | Goal 1. Adults with mental illness, including co-occurring disorders (with substance abuse) will have expanded outpatient treatment and services. Goal 4. Young people with mental illness will have greater access to outpatient treatment, clinical and other services. |
| Transitional services to 14-22 year-olds to adult vocational and mental health system | | Provide case management, job skills education and wrap-around services to facilitate the transition. | Goal 3. Individuals with mental illness, including co-occurring disorders, will have more employment opportunities. Goal 5. Young people with mental illness transitioning |

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ATTACHMENT II

SPECIAL NEEDS: MENTAL HEALTH

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---|---------------------------|---|--|
| Transitional housing with supportive services | Individualized Services | Provide comprehensive treatment and post-treatment services to individuals in a transitional housing and step-down program to integrate them back into the community. | to adulthood will receive appropriate services. Goal 1. Adults with mental illness, including co-occurring disorders (with substance abuse) will have expanded outpatient treatment and services. Goal 2. Adults with mental illness, including co-occurring disorders, will have safe and affordable housing. |

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SPECIAL NEEDS: SUBSTANCE ABUSE

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--------------------------------------|-------------------------|--|--|
| Prevention and Education Services | Prevention | Provide prevention and education programs to children and young adults in a culturally competent/evidence-based environment. | Goal 3. Substance abuse prevention and education services will increase. |
| Early Intervention | Early Intervention | Provide and expand early intervention services to children of parents who are substance abusers. | Goal 2. Women and families experiencing substance abuse or co-occurring disorders will have increased access to services. |
| Treatment for Co-Occurring Disorders | Individualized Services | Provide services to substance abusers with co-occurring mental health disorders in a pre-trial program. | Goal 2. Women and families experiencing substance abuse or co-occurring disorders will have increased access to services. |
| Post-Treatment Services | Individualized Services | Provide services to youth and adults diagnosed primarily as substance abuser with co-occurring mental-health disorders. | Goal 1. Youths and adults with substance abuse or co-occurring (with mental health) disorders will have increased access to treatment and post-treatment services. |
| Post-Treatment Services | Individualized Services | Provide services in step-down facilities to enable individual's integration into the community. | Goal 1. Youths and adults with substance abuse or co-occurring (with mental health) disorders will have increased access to treatment and post-treatment services. |

SPECIAL NEEDS: SUBSTANCE ABUSE

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|-------------------------|-------------------------|--|---|
| Post-Treatment Services | Individualized Services | <p>Provide services in family-centered programs (Family Case Management) for post-substance abuse treatment recovery.</p> <p>Provide case management programs that facilitate post-treatment employability and educational skills with emphasis on farm workers and victims of abuse or domestic violence.</p> | <p>Goal 1. Youths and adults with substance abuse or co-occurring (with mental health) disorders will have increased access to treatment and post-treatment services.</p> <p>Goal 1. Youths and adults with substance abuse or co-occurring (with mental health) disorders will have increased access to treatment and post-treatment services.</p> |

SPECIAL NEEDS: VICTIMS OF DOMESTIC VIOLENCE OR SEXUAL ASSAULT

| NOFA Priority | Continuum Category / | Description | Social Services Master Plan Goal |
|---|----------------------|--|---|
| Expansion of One-Stop Centers | | Fund One-Stop Neighborhood- Based Outreach Centers providing coordinated support services for victims of domestic violence, rape and sexual assault with special attention to areas in Northwest Dade including Miami Gardens, Opa- Locka and North Miami Beach. | Goal 1. Victims of domestic violence or sexual assault will have greater access to improved services. |
| Services to male victims | Early Intervention | Provide community awareness, educational programs and supportive service delivery systems to target male victims of domestic violence, rape and sexual assault. | Goal 1. Victims of domestic violence or sexual assault will have greater access to improved services. |
| Increase specialized services for children who are witnesses of domestic violence | | Provide training to first responders on how to recognize and manage a child's emotional and other needs. | Goal 1. Victims of domestic violence or sexual assault will have greater access to improved services. |
| Emergency housing/shelter for victims with adolescent male children | | Provide matching rental assistance funds as an emergency alternative housing. | Goal 2. Victims of domestic violence or sexual assault will have access to emergency shelter and housing. |
| Community Awareness | Capacity Development | Provide community education and training that is culturally relevant and appropriate in all aspects of domestic violence, rape or sexual assault regarding prevention, intervention, and supportive services with special attention given to the elderly, persons with disabilities and immigrants and new entrants. | Goal 3. The Community will be aware of prevention strategies and services for victims of domestic violence or sexual assault. |

WORKFORCE

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|--|-------------------------|---|--|
| Crisis and Emergency Services for Job-Seekers and Newly Employed | | Provide support services for job seekers and newly employed (< 6 months) low-income individuals to obtain and maintain employment. Services are to address personal emergencies (i.e. flat tires, child care, and counseling) and community emergencies (i.e. natural disaster). | Goal 1. Hard-to-serve job seekers (poorly educated, poorly skilled, individuals with disabilities, ex-offenders, at-risk youth or elder) will have increased employment opportunities. |
| Vocational Mentorship for at-risk youth | Early Intervention | Provide all at-risk youth with mentoring in an area of vocational interest. Program must include a social and life skills component and must link youth and their families with public services for which they are entitled. | Goal 3. Hard-to-serve youth (youth with disabilities, in foster care, at-risk, juvenile offenders) will have successful transitions from education programs to post-secondary education, training and/or work. |
| Coaching for hard-to-serve job seekers | | Provide job general employability and development skills training/services for job placement and coaching and mediation services to ensure job retention. Examples include educational and employment resources such as resume writing, interview skills, customer service, etc. | Goal 3. Hard-to-serve youth (youth with disabilities, in foster care, at-risk, juvenile offenders) will have successful transitions from education programs to post-secondary education, training and/or work. |
| Demonstration Employment Programs and Job Readiness Programs | Individualized Services | Initiatives that have a coordinated system of services for training, employment and supportive help services for hard-to-serve job seekers that is focused on serving a particular neighborhood (Demonstration Employment Programs). General employability and job readiness programs for neighborhood residents. Program must include development of an individualized case plan for | Goal 2. Community-based organizations, health and human services providers, the private sector and governmental entities will work together to improve access to workforce. |

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ATTACHMENT II

| WORKFORCE | | | |
|--|---|--|--|
| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
| Education and training on the needs of hard to serve job seekers | Individualized Services Capacity Development | individual to achieve job development and job placement goals Sensitivity training and education for employers and co-workers of hard-to-serve job seekers. Training must include components that address welcoming and awareness. Training for school system personnel, FBO's, and CBO's, on the needs of hard to serve job seekers. | development services and training for hard-to-serve job seekers Goal 4. Hard-to-serve job seekers living in redeveloping areas will have employment opportunities within their neighborhoods. Goal 1. Hard-to-serve job seekers (poorly educated, poorly skilled, individuals with disabilities, ex-offenders, at-risk youth or elder) will have increased employment opportunities. Goal 3. Hard-to-serve youth (youth with disabilities, in foster care, at-risk, juvenile offenders) will have successful transitions from education programs to post-secondary education, training and/or work. |

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HUMAN SERVICES INTEGRATION/CROSS-SYSTEMS/LIVABLE COMMUNITIES

| NOFA Priority | Continuum Category | Description | Social Services Master Plan Goal |
|---|--|---|--|
| <p>Comprehensive Training in Cross-system Human Services</p> | <p>Capacity Development</p> | <p>Fund the development and implementation of a training curriculum in Cross-System Human Services. Different levels of training to various populations including natural helpers (neighborhood/community workers), navigators (specialized), and case workers in various human services areas (including employment intake specialists).</p> | <p>Note: It covers Basic Needs Goal 3. Service providers will improve their communication skills and overall ability to serve clients; and Basic Needs Goal 4. Service providers will be both culturally and linguistically competent.</p> |
| <p>Demonstration Project: Special Needs Shared Information/Case Management Neighborhood Resource Networks</p> | <p>Service Access and Prevention, Early Intervention</p> | <p>Fund a demonstration project for the development of a shared case management/information system on clients receiving services for the Special Needs populations. Fund the development of Neighborhood Resource Networks (NRN's) for the organization and empowerment of community residents, the formation/maintenance of a service provider partnership and development of a neighborhood care center to meet the identified needs of the community. Fund the expansion of existing Neighborhood Resource Networks including emergency preparedness and the formation of a neighborhood care center. Expansion of existing NRN's will include a focus on maintaining current partnership and resident groups as well as the assessment of other issues affecting the community and ways to improve them. *This RFP excludes NRN's who have received consecutive A4HS funding.</p> | <p>Note: CYF Goal 3. Neighborhood environments will be safe and supportive. The Alliance for Human Services recognizes the need to promote and value the cross-systems and service integration needs for greater effectiveness in Miami-Dade County's human services delivery system(s).</p> |

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