

1: Statement of the problem	1-6	analysis of the population, data and identification of contributing or re-enterring factors		OK
1: Statement of the problem	1-7	reasonable projected number to	72.5%	Willing to waive
1: Statement of the problem	1-8	needs are consistent with the Strategic Plan.		OK
1: Statement of the problem	Subtotal	SUB TOTAL	78.1%	
2: Project Design and Implementation	2A-1	compliance with s. 394.657(2)(a), clearly identifies role of each member		OK
2: Project Design and Implementation	2A-2	Planning council activity, frequency of meetings, previous 12 months and future		OK
2: Project Design and Implementation	Subtotal	SUB TOTAL	87.5%	
2: Project Design and Implementation	2B-1	goals, strategies, milestones and key activities, at least one additional objective		OK
2: Project Design and Implementation	2B-2	key stakeholder responsible for each task and proposed completion date		OK
2: Project Design and Implementation	2B-3	addressing participation of the planning council or committee, communication amongst agencies, frequency of planned meetings, and the decision-making process	73.3%	Willing to waive
2: Project Design and Implementation	2B-4		71.3%	Willing to waive
2: Project Design and Implementation	2B-5	addressing screening, validated needs-based assessments, criteria and tool(s) specific to the Target Population	47.5%	Must Address
2: Project Design and Implementation	2B-6	care coordination to increase access to treatment support services and ancillary social services	78.8%	Willing to waive
2: Project Design and Implementation	2B-7	addressing law enforcement assessment of intercept points, capacity, project diversion initiatives,		OK
2: Project Design and Implementation	2B-8	implementation, sequential Intercept Mapping, update for proposed Target Population, challenges or barriers	76.7%	Willing to waive
2: Project Design and Implementation	Subtotal	SUB TOTAL	72.6%	
2: Project Design and Implementation	2C-1	services and supervision for diversion from arrest, prosecution, or incarceration to treatment and support services.		OK

The target population is any Adult over 24 years old residing or located within the Melbourne Police Department jurisdiction experiencing a mental health crisis or co-occurring with substance use disorder. The process for the Co-Responder Model is as follows: A 911 call is received at MPD. While law enforcement (LE) is responding the call is assessment using an initial questionnaire (unless the location and person is known for mental health and substance use disorder) for the Mobile Crisis Response Team (MRT). Upon determination of MRT need the clinical team is deployed. Once LE secures the scene the MRT begins de-escalating techniques and conducts assessment for need. LE is released from scene. MRT connects the person to services, medication management (if necessary), case management services, and 24 hour follow-up to ensure person is stabilized.



