



**Rick Staly, Sheriff**  
**FLAGLER COUNTY SHERIFF'S OFFICE**

*"An honor to serve, a duty to protect."*

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**PUBLIC MEETING**

**REGULAR MEETING OF THE FLAGLER COUNTY  
PUBLIC SAFETY COORDINATING COUNCIL**

- Date:** Wednesday, January 8, 2025 @ 8:45 a.m.
- Location:** Flagler County Emergency Operations Center  
1769 E. Moody Blvd., Bldg. #3, Bunnell, FL 32110
- Purpose:** Quarterly Meeting
- Contact:** Sheri Gopie, (386) 586-4891

PLEASE TAKE NOTICE THAT INDIVIDUAL COMMISSIONERS OF THE FLAGLER COUNTY BOARD OF COUNTY COMMISSIONERS MAY ATTEND THIS MEETING. THE COMMISSIONERS WHO ATTEND, WITH THE EXCEPTION OF BOARD MEMBERS WHO ALSO SERVE ON THIS COUNCIL, WILL NOT TAKE ANY ACTION OR TAKE ANY VOTE AT THIS MEETING. THIS IS NOT AN OFFICIAL MEETING OF THE BOARD OF COUNTY COMMISSIONERS OF FLAGLER COUNTY. THIS NOTICE IS BEING PROVIDED TO MEET THE SPIRIT OF THE SUNSHINE LAW TO INFORM THE PUBLIC THAT COMMISSIONERS MAY BE PRESENT AT THESE DISCUSSIONS.

PURSUANT TO SECTION 286.0105 OF FLORIDA STATUTES, IF A PERSON DECIDES TO APPEAL ANY DECISION MADE BY THE BOARD, AGENCY OR COMMISSION WITH RESPECT TO ANY MATTER CONSIDERED AT SUCH MEETING OR HEARING, HE OR SHE WILL NEED A RECORD OF THE PROCEEDINGS, AND THAT A VERBATIM RECORD OF THE PROCEEDINGS IS MADE, WHICH RECORD INCLUDES THE TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

IN ACCORDANCE WITH THE AMERICANS WITH DISABILITIES ACT, PERSONS NEEDING ASSISTANCE TO PARTICIPATE IN THIS MEETING SHOULD CONTACT THE NUMBER LISTED ABOVE AT LEAST 48 HOURS PRIOR TO THE MEETING.

*Proudly Serving the Community Since 1917*  
*A Five Diamond Accredited Law Enforcement Agency*





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**FLAGLER COUNTY**  
**PUBLIC SAFETY COORDINATING COUNCIL**  
**JANUARY 8, 2025 AGENDA**

- 1. Pledge of Allegiance**
- 2. Roll Call**
- 3. Welcome:** Sheriff Rick Staly
  - a. Welcome Flagler Cares Prevention Coordinator Savannah Prince who is replacing Angie Zinno.
  - b. Welcome Commissioners Pam Richardson & Kim Carney who are replacing Commissioner Donald O'Brien.
  - c. Welcome Judge Dawn Nichols who is replacing Judge Terence Perkins.
- 4. Approval of Prior Meeting Minutes:** September 4, 2024 PSCC Meeting
- 5. Old Business**
  - a. Jail Occupancy Report – Chief Daniel Engert
  - b. Mental Health – SMA
  - c. CJMHSA Grant Progress Report - Carrie Baird
- 6. New Business**
  - a. Carrie Baird – Will provide total Grant amount in Budget for Council discussion regarding appropriate grant amount for next year.
- 7. Council Comments**
- 8. Public Comments**
- 9. Next Meeting:** April 9, 2025 at 8:45 at the Emergency Operations Center
- 10. Adjournment**

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*A Five Diamond Accredited Law Enforcement Agency*







# Activity Report

Flagler County Sheriff's Office  
1001 Justice Ln  
Bunnell, FL 32110  
386-437-4116

FCSO Jail

Print Date/Time: 12/12/2024 10:54  
Login ID: flagso\dengert

From Date: 09/04/2024  
To Date: 12/12/2024

Flagler County Sheriff's Office  
ORI Number: FL0180000

### Population Information

Average # of Inmates	251
Highest Population	283
Lowest Population	213
Total Housed	1066

### Racial Population Male

Total Unknown Male	1
Total Oriental Male	1
Total WHITE Male	479
Total BLACK/AFRICAN AMERICAN Male	211
Total ASIAN Male	9
Total UNKNOWN Male	3
Total HISPANIC Male	94
Total Male	798

### Racial Population Female

Total WHITE Female	194
Total BLACK/AFRICAN AMERICAN Female	56
Total ASIAN Female	2
Total HISPANIC Female	16
Total Female	268

### Total Population Unknown

Total Sex Unknown

### Racial Population

Total Unknown	1
Total Oriental	1
Total WHITE	673
Total BLACK/AFRICAN AMERICAN	267
Total ASIAN	11
Total UNKNOWN	3
Total HISPANIC	110
Unknown	0.10%
Oriental	0.10%
WHITE	63.10%
BLACK/AFRICAN AMERICAN	25.00%
ASIAN	1.00%
UNKNOWN	0.30%
HISPANIC	10.30%

### Percentages of Inmates

Males	74.90%
Females	25.10%
Unknown	0.00%



# Activity Report

FCSO Jail

Flagler County Sheriff's Office  
1001 Justice Ln  
Bunnell, FL 32110  
386-437-4116

Print Date/Time: 12/12/2024 10:54  
Login ID: flagso\dengert

From Date: 09/04/2024  
To Date: 12/12/2024

Flagler County Sheriff's Office  
ORI Number: FL0180000

Unknown Males	0.10%
Oriental Males	0.10%
WHITE Males	44.90%
BLACK/AFRICAN AMERICAN Males	19.80%
ASIAN Males	0.80%
UNKNOWN Males	0.30%
HISPANIC Males	8.80%
WHITE Females	18.20%
BLACK/AFRICAN AMERICAN Females	5.30%
ASIAN Females	0.20%
HISPANIC Females	1.50%

<b>Hold for ORI</b>	
FL0180000	155
FL0180100	5
FL0180200	1



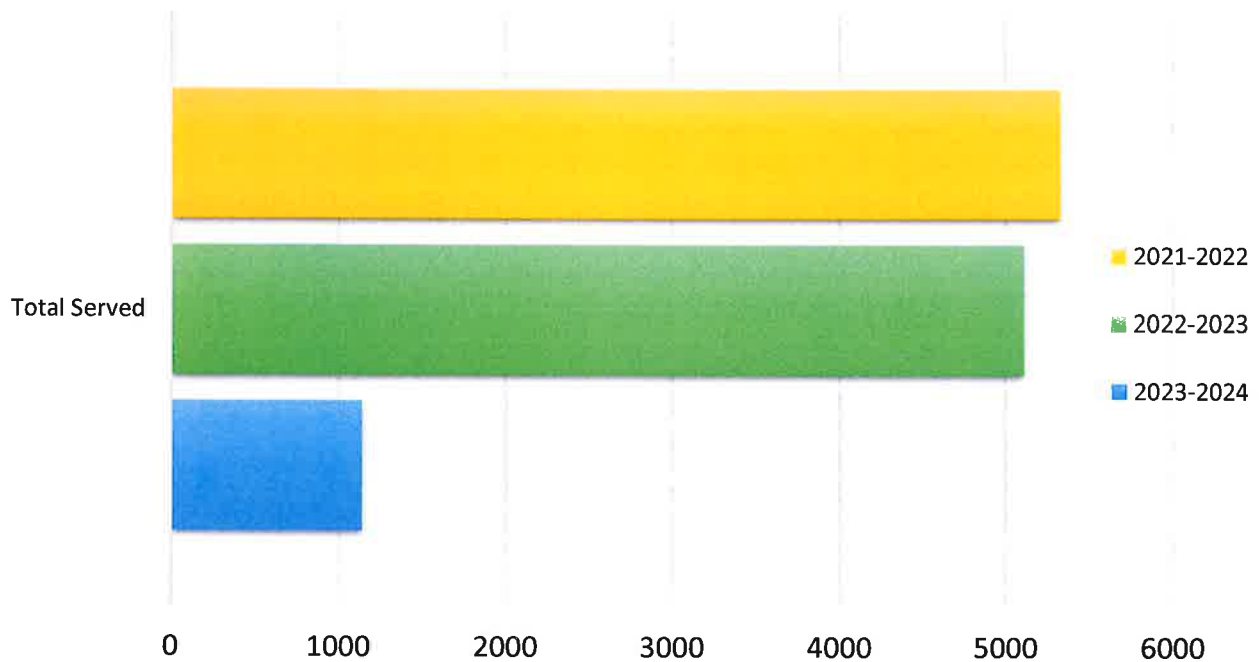
**FLAGLER COUNTY  
 PUBLIC SAFETY COORDINATING COUNCIL  
 Mental Health Report  
 September 21, 2023 thru December 12, 2023**

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**FLAGLER COUNTY RESIDENTS SERVED**

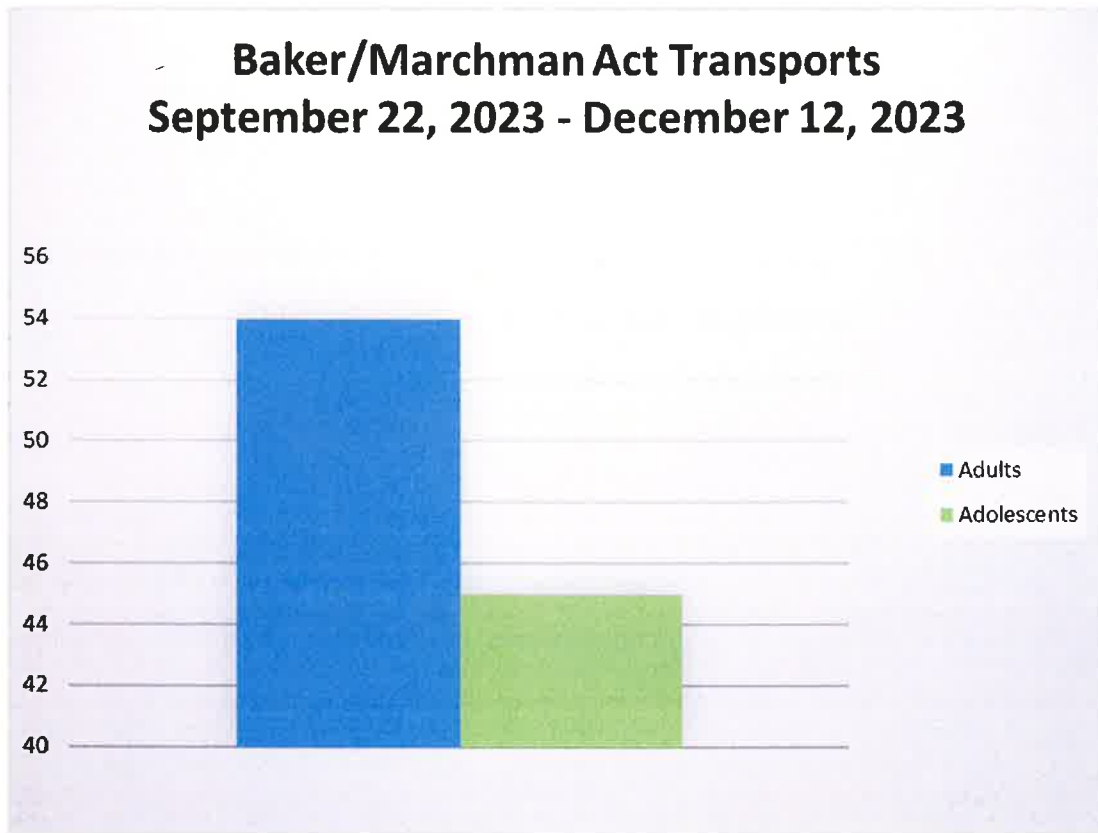
AGE	FY 2022-2023	Q1 FY 2023-2024 Jul-Sept	Q2 FY 2023-2024 Oct-Dec	Q3 FY 2023-2024 Jan-Mar	Q4 FY 2023-2024 April-Jun
UNDER 18	283	30	35		
18-24	842	69	94		
25-35	1473	126	183		
36-50	1473	121	197		
51-65	789	60	153		
OVER 65	255	19	54		
Total	5115	425	716		
Year-to-Date total	5115	425	1141		

**Comparison of FY 2020-2021, FY 2021-2022 and FY 2022-2023**





FLAGLER COUNTY  
PUBLIC SAFETY COORDINATING COUNCIL  
Mental Health Report  
September 21, 2023 thru December 12, 2023  
\*\*\* \*\*



**Baker/Marchman Act Transports:**

<b>Adults</b>	<b>54</b>
<b>Adolescents</b>	<b>45</b>

# Flagler Youth & Young Adult Diversion Expansion Program

Progress Report: July 1 to September 30, 2024 (FINAL)

The grant funded program began on October 1, 2021 as a continuation and expansion of the previous youth-focused diversion project that operated for the previous three years.

## PROGRAM COMPONENTS

- **Started 10-1-21:** Early identification of behavioral health concerns and delinquency risk among school aged youth, referrals for services and care coordination. Implemented by Flagler Schools and Halifax Health.
- **Started 10-1-21:** Behavioral Health services and support enhancement to Flagler Schools' Restorative School/Alternative Placement program for school aged youth
- **Started September 2022:** Co-Responder program with Flagler County Sheriff's Office creating new capacity to respond with deputies to a behavioral health crisis and provide follow-up care coordination to young adults & youth

## NUMBER OF INDIVIDUALS SCREENED & ENROLLED (cumulative)

- **5,251** Individuals Screened
- **4,688** students screened who required services
- **285** youth and youth adults enrolled in the program
  - Of the 240 individuals who actively participated in the program, 66% have successfully completed the program and 18% are still enrolled and receiving services.

## LINC REFERRAL MANAGEMENT SYSTEM

Referral Management and Care Coordination system used to manage and track program data.

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### Program Goals:

- Increase access for at risk youth and young adults to effective mental health and substance abuse interventions, at the earliest point, to prevent contact with the juvenile/adult justice system and to ensure a successful transition after justice involvement into appropriate school and community-based care
- Engage Program partners, Public Safety Coordinating Council (PSCC) agencies, and community behavioral health providers in the Flagler Expansion Project to support adoption and adherence to shared values and goals, regular communication, data sharing and strategic partnership.

### Target Population:

- School-aged youth and young adults up to age 25, with both risk factors for justice involvement (or actual involvement) and indicators of mental health or substance abuse concerns.

### Key Project Contacts:

**Flagler Schools**  
Brandy Williams  
williamsb@flaglerschools.org

**Flagler County Sheriff's Office**  
Commander Jennifer Nawrocki  
jnawrocki@flaglersheriff.com

**Flagler Cares**  
Carrie Baird  
carrie@flaglercares.org

Implemented by: County of Flagler, Flagler County Sheriff's Office, Flagler Schools, Flagler Cares and Halifax Health



## FCSO CO-RESPONDER DATA

Call Descriptions	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Total
Welfare Check	9	46	38	37	48	53	51	37	43	362
Baker Act	9	36	34	51	49	36	39	42	54	350
Juvenile Incident	7	16	13	20	19	13	9	10	9	116
Disturbance, Verbal	7	14	17	15	9	12	11	15	8	108
Assist Public	7	7	14	16	13	7	14	11	14	103
Disturbance, Domestic	6	11	13	11	15	10	13	7	12	98
Assist Other Agency	1	9	10	4	13	8	7	10	8	70
Suspicious Incident		6	8	5	9	8	11	6	2	55
Suicide Threat	4	7	2	4	5	7	5	2	5	41
Suspicious Person		5	2	11	9	1	6	4	1	39
Trespassing	3	6	1	8	5	1	4	1	1	30
Civil	2	4	4	5			2	2	10	29
Follow Up		10							16	26
Death		5	2	7	3	1	3	1	3	25
911 Investigation		2	4	5	1	5	2	2	1	22
Missing Juvenile	1	2	6	2		3	2	1	2	19
Disturbance, Physical	1	4	3		1		2	2	2	15
Missing Person Found		3	1		5		1	1	1	12
Assault/Battery		1	2	1	2	1	1	2	1	11
Crash			1	2	3		2	2	1	11
Overdose	1	2			1	2		2	2	10
Drunk Person	1	1	1	1			2	2	1	9
Missing Adult		1	1	3	1	1			1	8
Special Detail		2			1	1	1	2	1	8
Suicide Attempt			3	2	2				1	8
Threats		2	2			1	1	1	1	8
Sex Offense		1	1	2		1			3	8
Escort/Transport			2	1	2				2	7
Warrant Service		1	1			1	1	1	2	7
Narcotics	1	1				1		1	2	6
Violation of Probation		1		1			1		3	6
BOLO			1	1			1	2		5
Community Policing							1	2	2	5
Stolen Vehicle Recovered			2	0	1			1		4
Traffic Stop						2		1	1	4
Burglary Residential				1	2					3
Larceny				2		1				3
Reckless Driver			1	1			1			3
Information		1						1	1	3
Stolen Vehicle			2						1	3
Suspicious Vehicle	1							1	1	3
Community Presentation		1						1		2
Disturbance, Weapons			1				1			2
Fire Structure		1						1		2
Suicide					1		1			2
Criminal Mischief								1	1	2
Animal Problem								1		1
Burglary Commercial						1				1
Burglary Vehicle									1	1
CPR							1			1
Medical			1							1
Mentally Ill				1						1
Pedestrian/Hitchhiker		1								1
Police Vehicle Damage				1						1
Security Check					1					1
Sex Battery					1					1
Shooting			1	0						1
Solicitor				1						1
	61	210	195	222	222	178	197	179	221	1685

Implemented by: County of Flagler, Flagler County Sheriff's Office, Flagler Schools, Flagler Cares and Halifax Health

**PSCC Grant Summary (Fund 1196)**

	<b>FY 21-22</b>	<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>
<b>Beginning Balance</b>	\$ 139,406	\$ 120,607	\$ 115,091	\$ 124,690	
<b>Revenue</b>	\$ 29,210	\$ 35,486	\$ 39,599	\$ 4,304	
<b>Grants</b>					
Flagler Schools	\$ 47,940				
Presbyterian Counseling Center		\$ 41,000			
EPIC Behavioral Health			\$ 20,000	\$ 20,000	
Flagler PAL			\$ 10,000	\$ 11,000	
Flagler Schools (FTI)				\$ 19,000	
<b>Total Grants</b>	\$ 47,940	\$ 41,000	\$ 30,000	\$ 50,000	
<b>Misc. Expense</b>	\$ 70	\$ 2			
<b>Total Expense</b>	\$ 48,010	\$ 41,002	\$ 30,000	\$ 50,000	\$ -
<b>Balance Remaining</b>	\$ 120,607	\$ 115,091	\$ 124,690	\$ -	\$ -

## Public Safety Coordinating Council Meeting

September 4, 2024

**MEMBERS PRESENT:** Sheriff Rick Staly, Chief Dan Engert, Jason Lewis for R.J. Larizza, Carrie Baird, Weldene Vaneps for Jennifer Whipple, Judge Terence Perkins, Chief David Brannon, Danielle Moye, Patricia Giaccone Courtney Davison for Public Defender Matt Metz, Andrew Williams, Mark Weinberg, John Fanelli

**MEMBERS ABSENT:** Commissioner Donald O'Brien, Judge Melissa Distler, Thomas York, Christy Gillis, Angie Zinno, Commissioner Scott Spradley, Josh Hines, Harry Cole, Chief Dan Merrithew

**STAFF PRESENT:** Sheri Gopie Recording Secretary, FCSO General Counsel John LeMaster

**GUESTS:** See Sign-in Sheet (Attachment 1)

1. **Pledge of Allegiance** - Chair Staly called the meeting to order and lead the Council in the pledge of allegiance.
2. **Roll Call** - Roll call was taken reflecting a quorum was present.
3. **Opening Comments** - Chair Staly welcomed members and made opening remarks.
4. **Approval of Meeting Minutes:** Prior PSCC meeting minutes dated July 10, 2024 were reviewed and unanimously approved.
5. **Old Business:**
  - a. Jail Occupancy Report - Chief Daniel Engert
  - b. Mental Health Report – SMA
  - c. CJMHSA Grant Progress Report – Carrie Baird
6. **New Business:**
  - a. Carrie Baird – Reviewed PSCC Crime Prevention Grant Fund Proposals, Round 2
  - b. Council will discuss appropriate grant amount for next year at January 8, 2025 meeting.
  - c. 2025 PSCC Meeting Calendar Proposed Quarterly Meeting Dates Approved.
7. **Council Comments:**
  - a. Chief Engert stated July average on Flagler County Sheriff's Office Inmate Facility Trends and Fiscal Year ADP Comparison for July should be 273 with YTD 272.
  - b. Jason Lewis inquired about last years numbers on the Mental Health Report Slide.

- c. Judge Perkins discussed the jail population numbers and what relation the number of arrests vs. the numbers in custody were and how it relates to the number of charges an individual has vs. how long the case is taking to get to trial and the relation per capita. Chief Engert will reflect on future slide total in and total out.
- d. Sheriff Staly reported that an increase in crime was not seen during economic inflation. Population and growth impacts were examined.
- e. Carrie Baird was awarded the CJMHSA Grant for an additional three (3) years; current grant ending 09-30. Sheriff Staly mentioned having two (2) individuals under Grant and the Budget impact.
- f. The following PSCC Grant applicant individuals made 3-minute presentations during our meeting:
  - Carmen Gray – LLC Rise Above the Violence, Who Cracked My Egg and Moments in Parenting
  - John Fanelli and Renee Kirkland – Flagler Schools, Flagler Technical College
  - Kristine King – Epic Community Services, JET Re-Entry Program
  - Stephanie Ecklin – Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
- g. Jason Lewis asked about success numbers pertaining to Road to Success Graduation and GED Statistics and inquired about success matrix numbers. Ms. Ecklin advised there is a 95% success rate of no reincarceration within the first year. Chief Brannon also inquired about effectiveness.
- h. Council reviewed available grant amount of \$39,000.00 and discussed it being divided between two (2) entities. Motion was made and was carried that the Grant would be divided between EPIC Community Services Inc. (dba EPIC Behavioral Healthcare) and Flagler Schools, Flagler Technical College.
 

EPIC Community Services Inc. (dba EPIC Behavioral Healthcare) receiving \$20,000.00 to support the facilitation of retaining and elevating the transition Specialist role in their full-time status within the JET Re-Entry Program within the Flagler County Detention Facility.

Flagler Schools, Flagler Technical College would be allotted the remaining \$19,000.00 to provide opportunities for GED attainment and career training for at risk youth ages 16-22. .
- i. Motion made to table discussion of appropriate grant amount for next year. Council will discuss at January 8, 2025 meeting when total grant amount in budget is available.
- j. Motion made to accept the 2025 proposed quarterly meeting dates.
- k. Jason Lewis discussed and praised Judge Perkins great tenure in Flagler County and all agreed.

- 8. Public Comments** – Carmen Gray with LLC Rise Above the Violence mentioned her upcoming Casino Night & Silent Auction Event that is taking place on September 21, 2024 from 5:00-9:00 PM located at 1405 Saloon.
- 9. Closing Remarks** – Chair Staly summarized the meeting and provided closing remarks and discussed next meeting date.
- 10. Next Meeting** – January 8, 2025 at 8:45 a.m. and will be located in the Emergency Operations Center.
- 11. Adjournment** – The meeting adjourned at 9:43 a.m.



## Gopie, Sheri

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**From:** Whipple, Jennifer <Jennifer.Whipple@fdc.myflorida.com>  
**Sent:** Monday, August 5, 2024 2:22 PM  
**To:** Gopie, Sheri  
**Cc:** Whipple, Jennifer; Vaneps, Weldene  
**Subject:** Flagler PSCC

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Ms. Gopie,

I will not be able to make the PSCC meeting on September 4<sup>th</sup>. Correctional Probation Senior Supervisor Weldene Vaneps from our Flagler County probation office will attend in my absence.

Thankyou!

### **Jennifer A. Whipple**

Circuit Administrator

Circuit 7

Florida Department of Corrections

328-A East New York Ave.

Deland, FL 32724

Office: (386) 281-6814

Direct: (386) 281-6812

Cell: (904) 860-5308

Fax: (386) 281-6819



***Inspiring Success by Transforming One Life at a Time***

Respect ★ Integrity ★ Courage ★ Selfless Service ★ Compassion

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## Gopie, Sheri

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**From:** Gillis, Christy <Christina.Gillis@myflfamilies.com>  
**Sent:** Monday, August 26, 2024 10:59 AM  
**To:** Gopie, Sheri  
**Cc:** Carrie Baird  
**Subject:** RE: 08-04-2024 PSCC Meeting Reminder, Agenda & Back-up

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Good morning, I will not be in attendance at the meeting as I will be out of town at a conference.

**TOGETHER WE ARE**



**ACCOUNTABLE • VALUED  
EMPOWERED • DETERMINED  
TRANSPARENT • OPTIMISTIC  
ENGAGED • COLLABORATIVE  
IDEAL TEAM PLAYERS**

**Christina "Christy" Gillis**  
**Circuit 7 Community Development**  
**Administrator**  
**Office of Child & Family Well-Being**  
**386-214-8646 Cell**  
**210 North Palmetto Avenue Ste.440**  
**Daytona Beach, FL 32114**  
[Christina.Gillis@myflfamilies.com](mailto:Christina.Gillis@myflfamilies.com)

[www.MyFLFamilies.com](http://www.MyFLFamilies.com)



**From:** Gopie, Sheri <SGopie@flaglersheriff.com>

**Sent:** Monday, August 26, 2024 10:23 AM

**To:** Andrew Williams <awilliams@smahealthcare.org>; Angie Zinno <breakthecycle12angie@gmail.com>; Jones, Brittany <Bjones@circuit7.org>; Carla Prazeres-Reis <cprazereresreis@judicialservices.com>; Carlos Hernandez <chernandez@flaglercounty.org>; Carrie Baird <carrie@flaglercares.org>; Gillis, Christy <Christina.Gillis@myflfamilies.com>; Dan Merrithew <dan.merrithew@djj.state.fl.us>; Danielle Moyer <moyedanielle4@gmail.com>; David Brannon <dbrannon@bunnellpd.us>; Donald O'Brien <dobrien@flaglercounty.org>; Engert, Daniel <DEngert@flaglersheriff.com>; Gopie, Sheri <SGopie@flaglersheriff.com>; Harry Cole <hcole@vfch.org>; Ivan Cosimi <icosimi@smahealthcare.org>; Jason Lewis <lewisj@sao7.org>; Jeanelle Jarrah <jjarrah@cityofflaglerbeach.com>; Jennifer Whipple <Jennifer.Whipple@fdc.myflorida.com>; Jillian Lewandowski <jillian.lewandowski@djj.state.fl.us>; John Fanelli <fanellij@flaglerschools.com>; LeMaster, John <JLeMaster@flaglersheriff.com>; Jonathan Lord <JLord@flaglercounty.gov>; Josh Hines <joshhines@careersourcefv.com>; Ken Bryan <kbryan@cityofflaglerbeach.com>; Lisa Snowden <snowdenl@sao7.org>; Luci Dance <ldance@flaglercounty.org>; Mark Weinberg <mweinberg@circuit7.org>; Matt Doughney <MDoughney@fbpd.org>; Matthew Metz <Metz.Matthew@pd7.org>; Melissa Distler <mdistler@circuit7.org>; Nicholas Murdock <nmurdock@flaglercounty.gov>; R.J. Larizza <LarizzaR@sao7.org>; Renee Rush <rushr@sao7.org>; Rochelle Greiner <rgreiner@smahealthcare.org>; Rose Keirnan <rkeirnan@flaglercounty.gov>; Scott Spradley <sspradley@cityofflaglerbeach.com>; Shirley Olson <solson@circuit7.org>; Staly, Rick <RStaly@flaglersheriff.com>;



Crime  
Prevention  
Presentation



LONG LIVE CURTIS

RISE TO GREATNESS

LIVE ABOVE THE VIOLENCE

RISE ABOVE THE VIOLENCE

## MIDDLE & HIGH SCHOOLERS

# MENTAL & SUBSTANCE USE STATS



Deaths from suicide, ages 12-18 in Flagler County was 11.9 compared to Florida at 5.9 ( *Deaths From Suicide*, 2022). Per 100,000



45.3 % of Flagler County Middle School & High School students are users of "Electronic Vapor Products with Marijuana Oil (EYTS) (Florida Department of Health).



Students who have experienced victimization at school are likely to struggle both emotionally and academically.



Bullying victimization predicts later depression. Therefore, it is arguable that bullying perpetration predicts later criminal offending. (Farrington and Ttofi, 2011; Kaltiala-Heino et al., 1999).



Studies support that youth need Tier 1 support initiatives targeted specifically to help mitigate trauma-induced behavioral issues, Covid-19 related stressors, suicide ideation and self-harm.



Studies show CBT Programs (Cognitive Behavioral Therapy) have been effective in reducing criminal, violent, and antisocial behaviors.

Eggstraordinary Emotional Resilience

WHO CRACKED  
MY EGG?



Tier 1 Support  
Explained  
Using Emotional  
Resilience





## TIER 1 SUPPORT

Services that provide mental health promotion for *all* are considered Tier 1 supports, which are designed to benefit all students by promoting positive social, emotional, and behavioral skills and overall well-being.

- Why is This Important?
- Tier 1 support is both Intervention & Prevention
- According to studies on the correlation between mental illness and criminal behavior, “strong focus on early intervention and prevention can help reduce the likelihood of criminal behavior among those with mental health conditions” (Blough, S. (2009). Mental Illness and Crime.

## Risk Factors for Criminal Offenses in Parents

- **Lack of Support:** Isolation and lack of social support increase vulnerability.
- **Economic Stress:** Financial strain can exacerbate mental health issues.
- **Unaddressed Trauma:** Previous trauma or abuse can manifest in harmful behaviors.
- **Societal Stigma:** Fear of seeking help due to stigma, leading to untreated conditions.





## How PMAD Counseling & Support Services Can Help

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**Early Intervention:** Identifies and treats mental health issues before they escalate.

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**Emotional Support:** Provides a safe space to express feelings and receive professional guidance.

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**Coping Strategies:** Teaches healthy coping mechanisms to manage stress and anxiety.

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**Preventative Measures:** Reduces the risk of criminal behavior by addressing mental health proactively.

Thank you

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- **Carmen Gray**
- **770-876-9592**
- **[www.longlivecurt.com](http://www.longlivecurt.com)**
- **[carmengray@longlivecurt.com](mailto:carmengray@longlivecurt.com)**







epic

BEHAVIORAL HEALTHCARE



Celebrating 50 Years of Community Impact



Your Trusted Source for Quality Substance Use and Mental Health Disorders Services in St. Johns and Flagler Counties

Contact | EPICbh.org | info@EPICbh.org | referral@epicbh.org  
| (904) 829-2273 | Crisis 988

## COMPANY SERVICES

Education. Prevention. Intervention. Counseling.

### Prevention, Community Education Services

- Preventative Interventions for Adolescents
- Vaping Education
- Parenting Education
- Anger Management classes for adolescents and adults
- Behavioral Health Education
  - **Talkable Communities** – Suicide prevention/mental health trainings
  - **EPIC Buzz** – Mental health and substance use resources via social media, EPIC's website, and community education presentations
  - **Opioid Education** – Community-based youth and adult education and training, Narcan/Naloxone distribution
- 1:1 Youth Mentoring as the sponsoring company of Big Brothers Big Sisters of St. Johns County
- Youth Peer Support Services

### Mental Health and Substance Use

#### Outpatient Treatment Services

- Outpatient individual and group therapy for children, adolescents, adults families and couples
- Intensive Outpatient Treatment (IOP) for substance use disorders
- Psychiatric Services (Evaluation and medication management) for children, adolescents, & adults
- Medication-Assisted Recovery Services (MARS Clinic) for adults
- Care Coordination for children and adults
- Peer Support Specialists Services
- Access Support Center – Central point of contact for pre-admission screening and eligibility into behavioral healthcare services
- Rapid Response Team – 24/7 on-call Mobile Response Team providing emergency behavioral health assessment and diversion to alternative placements when appropriate for adults aged 26 and above.

### Field-Based Integration Treatment Teams

- Behavioral Health / Child Welfare Integration programs (*Family Intensive Treatment Team, Family Intervention Services*)
- Behavioral Health / Criminal Justice Integration programs within the St. Johns and Flagler County Sheriff's Office Corrections Unit to include transitioning to community upon release (S.M.A.R.T. & S.I.G.H.T.) JET, Drug Court SJC and FC, Veterans court in SJC
- Hospital Bridge Program with UF Health - Flagler Hospital
- Co-Responder Program with St. Johns Sheriff's Office
- Team based services for criminal justice involved individuals

### EPIC Recovery Center

- Inpatient Substance Use Disorder Treatment Services
- 14-bed medically monitored Detox Unit for adults
- 12-bed Residential Treatment Unit (Level 1 - 30 days) for adults
- Peer Support Specialist service and Care Coordination

### Second Wind Sober Living Homes

- 8-bed Second Wind home for men
- 5-bed Second Wind Home for Women
- Peer Support Specialists Services and Care Coordination
- Transportation, Life-Skills, Recovery Meetings, assistance with employment/food and permanent housing needs

### Clinical Specialties

- Substance Use Disorders (Alcohol, Illicit Drugs, Prescription/Opiate Use)
- Mental Health Disorders (Depression, Anxiety, ADHD, Personality Disorders, Trauma, Grief and Loss, etc.)
- Co-Occurring Conditions
- Children & Adolescent Behavior Difficulties
- Medication Assisted Treatment
- Court Ordered Treatment Services
- Person-Centered Treatment Services
- Crisis Response Services

## BUSINESS PROFILE

- Established in 1973 as a not-for-profit company
- A budget of \$9.5 million; 140+ full-time and part-time employees
- Vision – “The primary leader of quality, comprehensive behavioral healthcare in our community.”
- Mission – “To strengthen our community by providing person-centered care to individuals and families impacted by substance use and mental health disorders, and other behaviors through a comprehensive system of Education, Prevention, Intervention, and Counseling.”
- Accredited through the Commission on Accreditation of Rehabilitation Facilities (CARF International)
- Licensed by the Florida Department of Children and Families, Substance Abuse and Mental Health Program Office
- Commitment to quality by measuring effectiveness, efficiency, and consumer satisfaction
- Accessible, Reliable and Confidential –  
Inpatient facility with 24-hour access; Urgent Care/Rapid Response services 24/7 for brief screening into outpatient treatment; outpatient clinics open Monday through Friday 8:30 a.m. – 5:00 p.m.; evening groups/appointment available Monday-Thursday
- Affordable Care via a variety of funding solutions –  
Fee for Services (Sliding Fee Scale offered), United Way, Commercial Insurance plans, Medicaid Managed Care plans, St. Johns County, Flagler County, State of Florida, and federal HHS grants and contracts
- Development activities through special events, fundraisers, sponsorships, individual/business donors, and a coordinated marketing strategy
- Proactive in solving community needs through leadership in several community initiatives

## LOCATIONS | (904) 829-2273

We accept most commercial insurances, self-pay with sliding scales, Visa & MasterCard.

Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4016

### 1. Central Campus

1400 Old Dixie Highway  
St. Augustine, FL 32084  
Offering Outpatient Mental Health,  
Psychiatric Services,  
and Prevention Programs

### 2. North Campus

3910 Lewis Speedway Ste 1103  
St. Augustine, FL 32084  
Offering Outpatient Substance Use Treatment,  
Criminal Justice and Child Welfare Integration Teams,  
and Administration

### 3. Northwest Campus

175 Hampton Point Dr, Ste. 2,  
St. Augustine, FL 32092  
Offering Outpatient Mental Health Disorder Treatment,  
Outpatient Substance Use Disorder Treatment, and  
Prevention Programs for adolescents and their parents

### 4. EPIC Recovery Center / South Campus

3574 U.S. 1 South  
St. Augustine, FL 32086 | (904) 417-7100  
Offering Inpatient Detox services (14 beds),  
Residential Treatment (12 beds), and Medication  
Assisted Recovery Services

### 5. Flagler County Campus

2323 N. State Street, Suite 57  
Bunnell, FL 32110 | (386) 309-8083  
Offering Outpatient Mental Health Disorder Treatment,  
Outpatient Substance Use Disorder Treatment,  
Prevention Programs for adolescents and their parents,  
and Criminal Justice Integration Team programs

### 6. Second Wind Sober Living Homes

Within the City of St. Augustine  
Women's Home (5 beds)  
Men's Home (8 beds)

### 7. Administration Office

1880 San Sebastian View, St.  
Augustine, FL 32084





# Access Support Center is open at two locations.

Education. Prevention. Intervention. Counseling.

EPIC Behavioral Healthcare offers walk-in services to assess the need for substance use and mental health services at our North Campus on Lewis Speedway and our Northwest Campus on Hampton Point Location.



## HOW IT WORKS

1. SELECT YOUR LOCATION
2. ARRIVE WITHIN OPEN HOURS
3. GET THE HELP YOU NEED

- Call first if you have a referral source.
- We require a 24-hour advance notice for assessment services that require accommodations.
- Screenings, linkages, and service assessments are all provided on the same day.
- Care Coordination services are available.

Scan QR code for map



**MONDAY - THURSDAY**  
 8:30 a.m. to 5:00 p.m.  
**NORTH CAMPUS**  
 3910 Lewis Speedway, Ste. 1105  
 St. Augustine, FL 32084

Scan QR code for map



**FRIDAY**  
 8:30 a.m. to 1:00 p.m.  
**NORTHWEST CAMPUS**  
 175 Hampton Point Dr, Ste. 2  
 St. Augustine, FL 32092

### GET HELP NOW!

(904) 829-2273 | [www.EPICBH.org](http://www.EPICBH.org)

## Walk-ins Welcome

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard. Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4004



# Rapid Response Services

## Providing urgent or immediate assistance for behavioral health needs

Education. Prevention. Intervention. Counseling.

### Providing urgent or immediate assistance to persons experiencing current behavioral health needs, EPIC's Rapid Response Services are designed to:

- Provide on-demand crisis intervention services in any setting in which a behavioral health crisis occurs
- Triage, assess, and then refer to the appropriate treatment
- Lessen trauma

### EPIC's Rapid Response Services offer three pathways to receiving immediate services:

1. Rapid Response Team
2. Access Support Center
3. Co-Responder Program

#### Rapid Response Team

The purpose of the Rapid Response Team is to ensure that individuals 26 years and older in St. Johns County in need of crisis intervention and counseling services receive it within 60 minutes of requesting mobile crisis services.

#### The Team is available 24 hours a day, 7 days a week, 365 days a year.

The Team engages the client at the client's location and assesses for safety, de-escalates the situation, completes a safety risk assessment, and refers to other mental health services through a warm hand-off. They will also follow up with the client for up to 72 hours to ensure they are stable and engaged in treatment services.

If this service is needed, please call 988, as they provide an initial screening before the Team's involvement.

#### Access Support Center

The Access Support Center offers walk-in clinical services for outpatient behavioral healthcare. Assessments evaluate the need for substance use or mental health services with EPIC Behavioral Healthcare or link to community partners as appropriate.

Individuals seeking counseling or behavioral health services can walk into the Center without an appointment between 9:00 a.m. and 5:00 p.m., Monday through Thursday located at EPIC's Central Campus – 1400 Old Dixie Hwy., Ste. B, St. Augustine, FL 32084. EPIC provides screening, linkages, and clinical evaluations on the same day.

Care Coordination services are also available to address barriers to continued access to care. **If this service is needed, please walk in during the Center's hours or call (904) 829-2273, ex 2202.**

#### Co-Responder Program

The Co-Responder program aims to bring together law enforcement and behavioral health specialists to intervene and respond to behavioral health-related calls. These teams utilize the combined expertise of the officer and the behavioral health specialist to de-escalate situations and help individuals with behavioral health issues link to appropriate services.

Co-Responders reach out and provide wellness checks and peer support and can assist in linking the individual to ongoing services. Law enforcement and other first responders make referrals to the Co-Responder Program.

YOU  
MATTER  
DIAL **988**  
24 HOURS

**GET HELP NOW!**

(904) 829-2273 | [www.EPICBH.org](http://www.EPICBH.org)

CENTRAL CAMPUS | 1400 Old Dixie Highway, St. Augustine, FL 32084

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard. Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4016



## Coping Skills

**Breathing exercises.** There are many helpful breathing techniques you can try. Relax your body (especially your neck and shoulders), pick a technique, and stick with it for a few minutes to give it time to work.

- *Breathe as deep as you can, hold for a count of five, and slowly exhale.*
- *Breathe in for two counts, purse your lips like you're going to whistle, and exhale for four counts.*
- *Lay down and put your hand on your stomach or chest as you take deep breaths – focus on your hand rising and falling as you breathe in and out.*

**Call a friend.** Sometimes we all need a reminder that our friends care about us and want to be supportive during the tough moments. List the people in your life that you know have your back to eliminate overthinking when you need to reach out. If you don't have anyone you're comfortable opening up to, try calling 988, a 24/7 crisis hot-line.

**Practice Gratitude:** Reflecting on things you are thankful for can help you change your mindset. Each time you do this, aim to come up with at least three things – but you can never list too many, and nothing is too simple to count. Watch a funny movie. List some of your favorites so that you aren't stumped about what to put on.

**Use your five senses.** Tuning into your sensory experiences can be comforting during intense moments.

**Touch:** stress ball, silly putty, stuffed animal, blanket

**Hear:** click a pen, pop bubble wrap, listen to a calming playlist

**See:** photos with loved ones, snow globe, affirmation/quote cards

**Taste:** sour candy, mints, tea

**Smell:** candle, scented lotion, essential oils

**Distract yourself.** Taking your mind off the problem for a bit can help you return to it with a fresh perspective. Funny videos, puzzles, and books are often great distractions. So are hobbies – write down some specific go-to ideas (like cross-stitching or baking a new recipe), so you don't forget your options.

**Repeat Affirmations:** Saying an affirmation or mantra with positive and personal meaning can bring calm. You can buy an affirmation deck on line or just write your own on a note card. Pick something that speaks to you:

*I believe in myself.*

*Fear doesn't control me.*

*I let go of my sadness.*

*I am safe.*

Process your feelings: Diving into your emotions can help you find a healthy way out of that head-space. Print a feelings chart or remind yourself to journal to get everything in your head on paper.

## National Resources

**Crisis Text Line: Text MHA to 741741,** and you'll be connected to a trained Crisis Counselor. Crisis Text Line provides free, text-based support 24/7.

**National Suicide Prevention Lifeline:** Call **1-800-273-8255** or **1-800-273-TALK** to reach a trained crisis worker. The Lifeline provides 24/7, free, and confidential support for people in emotional distress.

**Disaster Distress Helpline:** Call **1-800-985-5990** or text **TalkWithUs to 66746.** The Disaster Distress Helpline (DDH) provides crisis counseling and support for anyone in the U.S. experiencing distress or other behavioral health concerns related to any natural or human-caused disaster, including public health emergencies like COVID-19.

## Contact

**Anthonia Levy PhD., LMHC**  
Clinical Director, Rapid Response Services

### EPIC Behavioral Healthcare Rapid Response Services

Phone: **904-495-7001**

Access Center Phone: **904-829-2273**

Walk-ins welcome Monday - Thursday between 9:00 a.m. and 5:00 p.m.,

Address: **1400 Old Dixie Hwy., Ste. B, St. Augustine, FL 32084**

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard.

Disabled/hearing-impaired, call (904) 829-2273, x 4002





# MEDICATION ASSISTED

## RECOVERY SERVICES (MARS)

### ABOUT OUR MARS PROGRAM

The MARS Program offers medication assisted treatment (MAT) which is the combination of medications, outpatient counseling, care coordination, peer support services and other behavioral therapies - all to treat opioid and/ or alcohol addiction.

### WE WANT YOU TO RECOVER

If you are ready to stop, we can help. It is difficult and can be dangerous to stop alcohol and opioid use on your own without medical supervision due to withdrawal symptoms. Research shows that the most effective way of treating Opioid Use and/or Alcohol Use Disorder is through medically-assisted treatment which involves medication and counseling.

### MARS - OPIOID & ALCOHOL ADDICTION

#### MEDICAL ASSESSMENT

#### MEDICATIONS

*Bupe (Buprenorphine) & Naltrexone (Vivitrol)*

#### WRAPAROUND SERVICES

*Care Coordination, Counseling, Peer Support*

### REFERRAL SOURCES

- Substance Use Disorder Outpatient Treatment Programs
- Detox & Residential Programs
- Primary Care Physicians
- HHS Providers (i.e. Betty Griffin Center, Health Dept., Family Integrity Program, etc.)
- Judicial System
- Flagler Health+

**Appointments are available Wednesdays between 8:30 a.m. and 5:00 p.m.**

**GET HELP NOW!**  
(386) 309-8083 | [www.EPICBH.org](http://www.EPICBH.org)

**FLAGLER COUNTY OFFICE** | 2323 N. State St., Unit 57, Bunnell, FL 32110  
We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard.  
Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4004



### REFERRAL FOR FORM

#### Mental Health or Substance Use Assessment

Email Completed Referral To: [referral@epicbh.org](mailto:referral@epicbh.org) (904) 824-0724

Date of Referral:		
Client Name:		
Address/Phone: Check here if homeless <input type="checkbox"/>		
Birth Date:		SSN:
Guardian:	<input type="checkbox"/> SELF <input type="checkbox"/> OTHER	
Hearing Impaired? <input type="checkbox"/>	Visually Impaired? <input type="checkbox"/>	
Insurance: Y OR N		Insurance Type:
Referral Source:		
Referral Source Number:		
Referral Source Email:		
Reason For Referral: Provide details:		
Check all that apply: <input type="checkbox"/> Known Substance Use* <input type="checkbox"/> Known Mental Health History* <input type="checkbox"/> Suspected Mental Health Concern <input type="checkbox"/> Suspected Substance Use <input type="checkbox"/> Need for Inpatient Substance Use Services <input type="checkbox"/> Need for Medication Assessment <input type="checkbox"/> Need for Medication Management		
Drug Screen Results	Date of Screen:	Results:
*Comments: (Special Instructions or barriers.)		



Responding to the needs of our community, EPIC is proud to announce the expansion of our services to provide outpatient counseling, prevention programs, and behavioral health support for children, youth, adults, and seniors at our Flagler County office.

### LIST OF SERVICES AND PROGRAMS AVAILABLE FOR PARTICIPATION

#### Outpatient Clinical Services

- Telehealth and Office Appointments
- Substance Use Counseling
- Mental Health Counseling for ages four and up
- Psychiatric Services
- Care Coordination
- Peer Support
- MARS Clinic

Medication-assisted recovery services are available to treat opioid and/or alcohol addiction.

#### Youth Prevention Programs

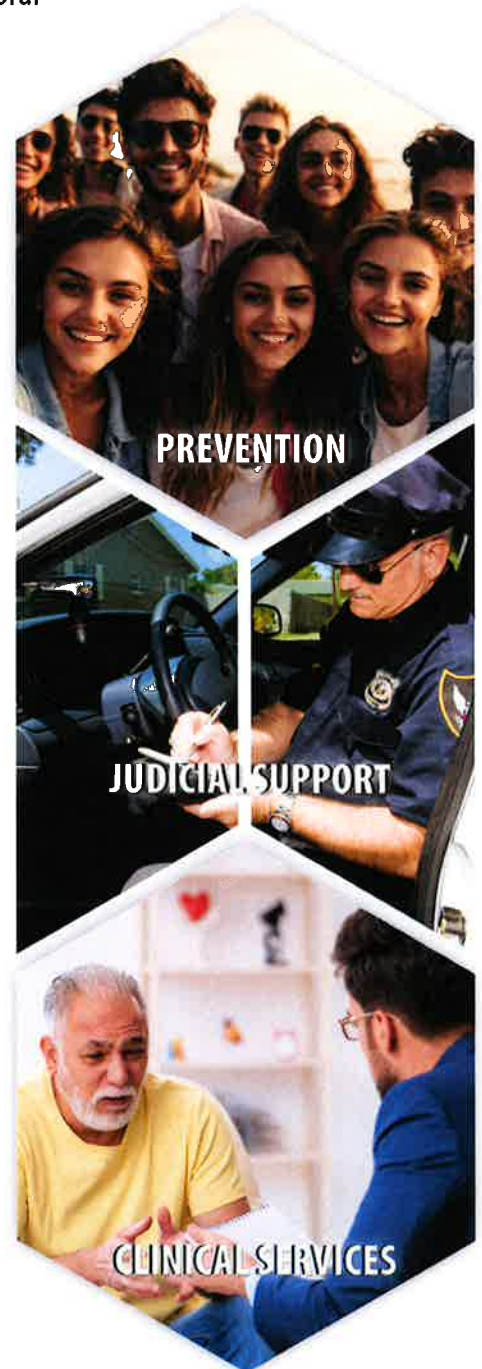
- **THINK! For Success** - Substance use prevention education
- **Active Parenting** - Education for first-time parents, parents of school-age children and/or parents of teens.

#### Coming Soon!

- **Catch my Breath** - Vaping information class (School-based program)
- **Anger Management Class**
- **Tobacco Citation Class**

#### Adult Judicial Programs

- **JET Programs** - provides mental health and/or substance use treatment and care coordination services to incarcerated individuals to aid their recovery and reduce recidivism.
- **SMART Program** (Successful Mental Health and Addiction Recovery Treatment) evidence-based in-custody treatment program
- **Drug Court** - EPIC Behavioral Healthcare is the sole substance use and mental health provider for Drug Court participants



**GET HELP NOW!**

(386) 309-8083 | [www.EPICBH.org](http://www.EPICBH.org)

**FLAGLER COUNTY OFFICE** | 2323 N. State St., Unit 57, Bunnell, FL 32110

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard. Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4004



# Walk-ins Welcome **ACCESS SUPPORT CENTER** is open at **THREE** locations

**Education. Prevention. Intervention. Counseling.**

EPIC Behavioral Healthcare offers walk-in services to assess the need for substance use and mental health services at three locations



You won't be turned away



Your needs come first



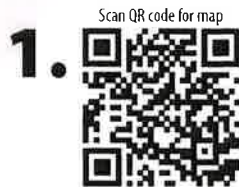
Affordable & Subsidized Services



## HOW IT WORKS

1. SELECT YOUR LOCATION
2. ARRIVE WITHIN OPEN HOURS
3. GET THE HELP YOU NEED

- Call first if you have a referral source.
- Screenings, linkages, and service assessments are all provided on the same day.
- We require a 24-hour advance notice for assessment services that require accommodations.
- Care Coordination services are available.

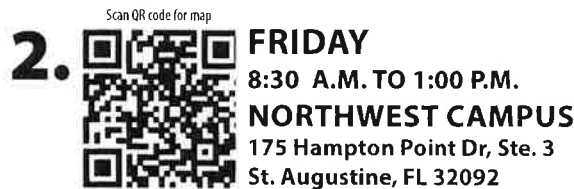


**MONDAY - THURSDAY**

**8:30 A.M. TO 5:00 P.M.**

**NORTH CAMPUS**

3910 Lewis Speedway, Ste. 1105 St. Augustine, FL 32084



**FRIDAY**

**8:30 A.M. TO 1:00 P.M.**

**NORTHWEST CAMPUS**

175 Hampton Point Dr, Ste. 3  
St. Augustine, FL 32092



**FRIDAY | (386) 309-8083**

**8:00 a.m. to 1:00 p.m.**

**FLAGLER CAMPUS**

2323 N. State St., Unit 57  
Bunnell, FL 32110

### GET HELP NOW!

(904) 829-2273 | [www.EPICBH.org](http://www.EPICBH.org)

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard. Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4004



# Criminal Justice Programs

## St. Johns County & Flagler County

To assist incarcerated individuals with substance use and mental health disorders (and their families) EPIC provides many intervention programs. These programs aid their recovery and reduce recidivism.

**Education. Prevention. Intervention. Counseling.**

**Drug Court** (St. Johns & Flagler County)  
EPIC Behavioral Healthcare is the sole substance use and mental health provider organization for the St. Johns County Drug Court since its inception in 2002. Our 20+ years of experience with Drug Court program and our 50+ years of providing substance use and mental health services to our community demonstrates our commitment not only to Drug Court, but to the vital importance of providing quality behavioral healthcare and a continuum of care for those facing substance use and/or mental health challenges.

**S.M.A.R.T.** (Flagler County)  
**Successful Mental Health and Addiction Recovery Treatment**  
The SMART Program (Successful Mental Health and Addiction Recovery Treatment) is an evidence-based in-custody treatment program implemented by EPIC Behavioral Healthcare in collaboration with Flagler County's Sheriff Perry Hall Inmate Detention Facility. EPIC's SMART Program provides mental health and substance use screenings and group counseling for selected inmates. The program helps local inmates succeed once released into the community.

**S.M.A.R.T.** (St. Johns County)  
**State Attorney Mission to Assist Thriving Rehabilitation and Treatment**  
The SMART Program is a pretrial diversion program that helps individuals arrested on repeat non-violent misdemeanors. The goal is to allow them to have the charges dropped by following the SMART program that addresses the underlying issues.

**S.I.G.H.T.** (St. Johns County)  
**Serenity. Integrity. Goals. Hope. Trust.**  
The SIGHT Program is an evidence-based two phase treatment program implemented by EPIC Behavioral Healthcare in collaboration with St. Johns County Sheriff. *Phase One* is a 90 day in-jail intervention

program. *Phase Two* is 16 week post-release with the following weekly requirements: Two therapeutic groups, one individual with clinician, and three AA/NA meetings. Clients must report to EPIC Behavioral Healthcare within 48 hours of their release from The St. Johns County jail.

**J.E.T.** (St. Johns & Flagler County)  
**Jail-based EPIC Transition Team**  
The JET Program is a collaborative effort with St. Johns County Sheriff's Office and Flagler County Sheriff's Office to assist high utilizers of the criminal justice system in transitioning out of jail into the community. JET is a voluntary program that provides mental health and/or substance use treatment, peer support services and care coordination services at income based/low cost to incarcerated individuals to aid their recovery and reduce recidivism.

**Veterans Treatment Court**  
(St. Johns County)  
As an initiative in the 7th Judicial Circuit, Veterans Treatment Court specializes in the distinctive needs of veterans in the criminal justice system. The military acknowledges that veterans have distinct needs, and some may require treatment to cope with Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), substance use and mental health disorders and suicidal ideation. Veterans Court assist veterans to access many of the services and benefits they earned including assist with some basic needs.

To be eligible for participation, an individual charged with a crime must show proof that he/she is a current or former military member. EPIC Behavioral Healthcare is the community partner of Veterans Treatment Court in which we provide Substance use and Mental Healthcare services to veterans in the program.

**Mental Health Court** (St. Johns County)  
The development of the Mental Health Court for St. Johns County is underway.



**GET HELP NOW!**  
(904) 829-2273 | [www.EPICBH.org](http://www.EPICBH.org)

**FLAGLER COUNTY OFFICE** | 2323 N. State St., Unit 57, Bunnell, FL 32110

**EPIC NORTH CAMPUS** | 3910 Lewis Speedway, Ste. 1103, St. Augustine, FL 32084

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard. Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4016



Sponsored by EPIC Behavioral Healthcare, LSF Health Systems, and the State of Florida, Department of Children and Families.

June 27, 2024 9:06 AM

# Active Parenting

Active Parenting is an evidence-based program that helps first-time parents, parents of school-age children, and/or parents of teens.

**Education. Prevention. Intervention. Counseling.**

Active parenting promotes the use of positive parenting practices, such as using positive language, planned discipline, and family routines. It also encourages nurturing behavior and increases parents' knowledge of child development and communication styles.

## Who should register?

Active Parenting programs are designed for new and first-time parents and parents of adolescents. These programs are intended for all types of parents and are appropriate for most individuals required to complete a parent education class.

## PROGRAMS INCLUDE:

### Active Parenting: First Five Years (Four Sessions)

- What a baby's cry means
- Your child's growing brain
- Preventing tantrums and other problems
- Building a loving bond
- Caring for your child at different ages and stages
- Using mindfulness to keep your cool
- Six ways to prepare your child for school success

### Active Parenting: Middle Years (Six Sessions)

- Why children misbehave and how to redirect them
- Nonviolent discipline really works
- How to build courage and character in your child
- How to open up the lines of communication with your children - before the challenging teen years
- How to prevent problems with drugs, alcohol, violence, and sex
- How to stop scolding and start smiling with your kids again!

### Active Parenting of Teens (Six Sessions)

- Methods of respectful discipline
- Skills for clear, honest communication
- Concrete strategies to prevent risky behavior
- How to be an encouraging parent
- Insight into issues such as teens on-line, bullying, and depression



**FREE PROGRAM**

**REGISTER TODAY**

(386) 309-8083 | [www.EPICBH.org](http://www.EPICBH.org)

**FLAGLER COUNTY OFFICE** | 2323 N. State St., Unit 57, Bunnell, FL 32110

There is no charge for the Active Parenting program. Visit [www.EPICBH.org](http://www.EPICBH.org) for information about other services. We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard.

Accommodations are available for disabled or deaf/hearing-impaired. For assistance, use x 4002





# THINK! For Success

## A Prevention Program for Adolescents

50 Years of Community Impact

**Education. Prevention. Intervention. Counseling.**

The THINK! For Success is a substance use prevention education program for adolescents experimenting with alcohol and other drugs who need to learn about the legal, social, and personal implications of their behavior and choices at home, school, and the community. EPIC provides The THINK! For Success program in partnership with Flagler County School District for all eligible Youth (Grades 6 -12).

The program includes the following minimum required components:

- Enrollment/Assessment Session .. Adolescent and Parents
- Eight Weekly Group or Individual Sessions Adolescents only
- One Individual Session..... Adolescent only
- One Family Session ..... Adolescent and Parents
- Four Active Parenting Sessions..... Parents only
- One Exit Session ..... Adolescent and Parents

**WHERE:** EPIC Behavioral Healthcare provides this program at our Flagler County Campus, 2323 N. State Street, Suite 57, Bunnell, FL 32110

**WHEN:** The THINK! For Success program begins with a Prevention Educator for a initial Assessment. The Program continues with weekly group or individual sessions typically held in the evening. For more information, or to schedule your first appointment, please call (904) 829-2273 ex 2305, and speak with a Prevention Educator.

**COST:** EPIC is pleased to offer this program at no cost to participants.

**CONTACT:** PREVENTION@EPICBH.ORG | (904) 829-2273 Extension: 2305

### IMPORTANT NOTES ON THE AGREEMENT BETWEEN EPIC AND THE SCHOOL DISTRICT

**DISCIPLINE REFERRALS:** Discipline referrals are non-athlete referrals coming from the School District’s Discipline Committee. Unexcused absences and no-shows will result in removal from THINK! For Success. Any absences must be communicated prior to the missed appointment and may require documentation. The EPIC administration’s decision on determination of the unexcused absence is final.

**GET HELP NOW!**  
(386) 309-8083 | [www.EPICBH.org](http://www.EPICBH.org)

**FLAGLER COUNTY OFFICE** | 2323 N. State St., Unit 57, Bunnell, FL 32110  
We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard.  
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# EPIC Recovery Center

## OUR SERVICES



Detoxification



Residential Treatment



Medication Assisted Recovery Services



Peer Support Services and Care Coordination

### FEATURES

- ✓ Medically Supervised Detox
- ✓ Person-Centered Care
- ✓ Chef Prepared Meals
- ✓ Multiple Payment Options
- ✓ St. Augustine Location
- ✓ Clean & Comfortable Facilities

EPIC RECOVERY CENTER / SOUTH CAMPUS | 3574 U.S. 1 South St. Augustine, FL 32086

(904) 417-7100 | [www.EPICBH.org](http://www.EPICBH.org) | [info@EPICBH.org](mailto:info@EPICBH.org)



Sponsored by EPIC Behavioral Healthcare, LSF Health Systems, and the State of Florida, Department of Children and Families.

# Are You...

Concerned about yours or a loved one's alcohol or substance use?

Having trouble with sad or depressed feelings?

Having trouble with worry or anxious feelings?

Concerned about your prescription drug or opioid overuse?

Experiencing marital or relationship problems?

Having trouble adjusting to change?

Having family issues?

Having thoughts about not wanting to live?

Missing work because of any of these matters?

**We can help.**

**Everyday since 1973.**



# Recovery STARTS HERE

The EPIC Recovery Center offers patients a safe, welcoming environment where they can begin the journey to addiction recovery. We accept patients at risk for physical withdrawal and who are ready to start the recovery process.

## Treatment options include:

### Inpatient Detoxification

- Medically monitored detox
- Typically 5-8 days
- Access to counseling groups, 12-step meetings, and recovery-focused classes

### Residential Treatment

- 30-day stay
- Focuses on relapse prevention
- Safe and secure environment to learn and practice recovery skills

### Outpatient MARS program

(Medically Assisted Recovery Services)

- Recovery support through combination of medication and outpatient counseling
- Wrap-around services such as care coordination and peer support

### About the Facility

- The EPIC Recovery Center is a smoke-free facility with 26 beds (14 Detox - 12 residential), allowing us to provide our patients with personalized care.
- Clients must be 18 and older and healthy enough to perform self-care activities.
- To help clients focus on recovery, phone calls are limited.
- Services for medical illnesses unrelated to detoxification are unavailable.

EPIC offers affordable, clean, safe facilities, attentive medical staff, and ongoing care close to home. We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa, and MasterCard.

**Please don't wait to contact us!**  
**We can help!**



Scan QR Code

## Our team of experienced professionals provide

- Mental Health Counseling
- Crisis Counseling
- Family Therapy
- Child & Adolescent Services
- Grief & Loss Counseling
- Psychiatric Evaluation & Medication Management
- Medication Assisted Treatment with Vivitrol & Buprenorphine
- Alcohol & Drug Treatment Programs (Detoxification Services, Residential Treatment, and Outpatient Treatment)

## Payment Options

- Self Pay and Private Insurance Options
- Medicaid Provider
- Sliding Scale Fees are Available
- Visa and MasterCard are Accepted



# GET HELP NOW

**EPIC Behavioral Healthcare**  
**904.829.2273**  
**www.epicbh.org**

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1400 Old Dixie Highway St. Augustine, FL 32084

**North Campus**  
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**North West Campus**  
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**Recovery Center | 904.417.7100**

# Is Your Child or Teen...

Having behavioral problems at school?

Acting out?

Using drugs or alcohol?

Sad or withdrawn?

Anxious? Defiant?

Having trouble adjusting to change?

Unmanageable?

Having problems with anger?

Getting into fights?

Lying or stealing?

**We can help.  
Everyday since 1973.**



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BEHAVIORAL HEALTHCARE  
**Melanie Hardin**  
Community Outreach Coordinator  
1880 San Sebastian View, St. Augustine, FL 32084  
Ph: 904-993-2469 Fax: 904-824-0724  
E: mhardin@epicbh.org  
[www.EPICbh.org](http://www.EPICbh.org)

**epic**  
BEHAVIORAL HEALTHCARE  
**Kristine King**  
Grant Manager  
1880 San Sebastian View, St. Augustine FL 32084  
Ph: (904) 829-2273 ext.4012 Fax: (904) 824-0724  
E: KKing@epicbh.org  
[www.EPICbh.org](http://www.EPICbh.org)

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Education, Prevention, Intervention, Counseling

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To find a location near you scan the QR Code or visit our website.



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**WALK-IN ACCESS CENTER SERVICE**  
Mon - Thur - 8 am - 5 pm | Fri - 8 am - 1 pm  
North Campus NW Campus

**DIAL 988 FOR RAPID RESPONSE SERVICES**

Sponsored By USF Health Systems, and the State of Florida, Department of Children and Families.



USF Health



**In our private outpatient clinic, our team of experienced professionals provide**

- Crisis Counseling
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- Family Therapy
- Alcohol & Drug Treatment Programs
- Mental Health Counseling
- Grief and Loss Counseling
- Teen Prevention Groups
- Psychiatric Evaluation & Medication Management

**Payment Options**

- Self Pay and Private Insurance Options
- Medicaid Provider
- Sliding Scale Fees are Available
- Visa and MasterCard are Accepted



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 1400 Old Dixie Highway  
 St. Augustine, FL 32084

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Celebrating 50 Years of Community Impact



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**WALK-IN ACCESS SERVICE CENTER**  
 Mon - Thur | 8:30- 5:00 | 1400 Old Dixie Highway

**DIAL 988 FOR RAPID RESPONSE SERVICES** **24/7**

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**WALK-IN ACCESS CENTER SERVICE**  
 Mon - Thur • 8:30 am - 5 pm | Fri • 9 am - 1 pm  
 North Campus NW Campus

**DIAL 988 FOR RAPID RESPONSE SERVICES** **24/7**

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**EPIC Behavioral Healthcare**  
 Specializes in the prevention and treatment of mental health and substance use disorders for children, adolescents, families, and adults.

**OUR SERVICES**

- ✔ Prevention Programs For youth and parents
- ✔ Mental Health Counseling
- ✔ Substance Use Counseling
- ✔ Inpatient Detoxification
- ✔ Residential Treatment
- ✔ Care Coordination Services
- ✔ Peer Recovery Support Services
- ✔ Walk-in Access Center
- ✔ Rapid Response Team
- ✔ Psychiatric Services
- ✔ Medication Assisted Recovery Services

We accept most commercial insurances, Medicaid, self-pay with sliding scales, Visa & MasterCard. Accommodations are available upon request for disabled or deaf/hearing-impaired.

TAKE DEEP BREATHS



BE KIND TO YOURSELF



EAT A HEALTHY SNACK



SLOWLY COUNT TO 10



STRESSED OR ANXIOUS?

TRY THESE FOR QUICK RELIEF!

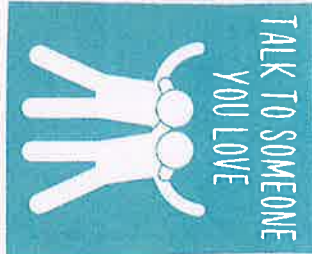
WRITE IN  
A JOURNAL



MOVE YOUR BODY



TALK TO SOMEONE  
YOU LOVE



VISUALIZE WHAT IS  
POSITIVE IN LIFE



STRETCH



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YOU  
MATTER  
DIAL

988  
24HRS

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	Terence Perkins
Date	9/4/2024
Applicant Name	EPIC Community Services, JET Re-Entry Program
Application Number	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	32				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	Terence Perkins
Date	9/4/2024
Applicant Name	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
Application Number	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	21				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	Terence Perkins
Date	9/4/2024
Applicant Name	Flagler Schools, Flagler Technical College
Application Number	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	29				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	LLC Rise Above Violence Terence Perkins
Date	9/4/2024
Applicant Name	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
Application Number	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>23</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Courtney Davison obo Public Defender Metz
<b>Date</b>	9-4-24
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	26				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Courtney Davison Obo Public Defender Metz
<b>Date</b>	9-4-24
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	37				



## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Courtney Davison obo Public Defender Metz
<b>Date</b>	9-4-24
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	36				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Courtney Davison Obo Public Defender Metz
<b>Date</b>	9-4-24
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	34				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	Trish Giaccone
Date	9-3-24
Applicant Name	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
Application Number	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	26.				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	Trish Giaccone
Date	9-3-24
Applicant Name	EPIC Community Services, JET Re-Entry Program
Application Number	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	29				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	Trish Giaccone (B)
Date	9-3-24.
Applicant Name	Flagler Schools, Flagler Technical College
Application Number	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	31				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	TRISH GIACCONE (P)
<b>Date</b>	9-3-2024
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	29				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	DANIEL KENNERLY
Date	9/2/24
Applicant Name	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
Application Number	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	22				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

Proposal Scoring Sheet

Recused

<b>PSCC Member Name</b>	DANIEL ENGERT
<b>Date</b>	9/2/24
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	13				



## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	DANIEL ENGERT
<b>Date</b>	7/2/24
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	25				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	DANIEL ENGERT
<b>Date</b>	9/2/24
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	13				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

PSCC Member Name	<i>Andrew Williams</i>
Date	<i>9/3/24</i>
Applicant Name	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
Application Number	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<i>23</i>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	<i>Andrew Williams</i>
<b>Date</b>	<i>9/3/24</i>
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<i>35</i>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	<i>Andrew Williams</i>
<b>Date</b>	<i>9/3/21</i>
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<i>32</i>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	<i>Andrew Williams</i>
<b>Date</b>	<i>9/3/24</i>
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<i>34</i>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

Proposal Scoring Sheet

ABSTAIN

<b>PSCC Member Name</b>	STALY
<b>Date</b>	9/3/24
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>					

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

Proposal Scoring Sheet

*AJB STAIN*

<b>PSCC Member Name</b>	<i>STALY</i>
<b>Date</b>	<i>9/3/24</i>
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>					



## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	STALY
<b>Date</b>	9/3/24
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	29				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	STALY
<b>Date</b>	9/3/24
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	37				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Jason Lewis, State Attorney's Office
<b>Date</b>	9/4/24
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	29				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	JASON Lewis, State Attorney's Office
<b>Date</b>	9/4/24
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	26				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	JASON Lewis, State Attorney's Office
<b>Date</b>	9/14/24
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	30				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Jason Lewis - State Attorney's Office
<b>Date</b>	9/4/24
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	20				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Carrie Baird
<b>Date</b>	9/3/24
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>30</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Carrie Baird
<b>Date</b>	9/3/24
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>27</b>				



## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Carrie Baird
<b>Date</b>	9/3/24
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>16</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Carrie Baird
<b>Date</b>	9/3/24
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>24</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Jennifer Whipple
<b>Date</b>	August 27, 2024
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>22</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Jennifer Whipple
<b>Date</b>	August 27, 2024
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>TOTAL SCORE</b>	<b>40</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Jennifer Whipple
<b>Date</b>	August 27, 2024
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>TOTAL SCORE</b>	<b>40</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Jennifer Whipple
<b>Date</b>	8-27-2024
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>19</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Brannon, David
<b>Date</b>	08/29/2024
<b>Applicant Name</b>	LLC Rise Above the Violence, Who Cracked My Eff and Moments in Parenting
<b>Application Number</b>	#2A

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>25</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Brannon, David
<b>Date</b>	08/29/2024
<b>Applicant Name</b>	Flagler Schools, Flagler Technical College
<b>Application Number</b>	#2B

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>32</b>				



## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Brannon, David
<b>Date</b>	08/29/2024
<b>Applicant Name</b>	EPIC Community Services, JET Re-Entry Program
<b>Application Number</b>	#2C

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>TOTAL SCORE</b>	<b>32</b>				

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANTS SCORESHEET

### Proposal Scoring Sheet

<b>PSCC Member Name</b>	Brannon, David
<b>Date</b>	08/29/2024
<b>Applicant Name</b>	Boys & Girls Clubs of Volusia/Flagler Counties, Digital Arts for Crime Prevention (DACP) Program
<b>Application Number</b>	#2D

Please provide a score for each of the below proposal criteria. (5 is the highest, 1 is the lowest)

Criteria	1	2	3	4	5
<b>Program Description:</b> The description is clear and detailed and includes the target population.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Priority Focus:</b> The proposed program addresses crime prevention and is focused on mental health and/or substance use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Applicant Organization:</b> The applicant has experience implementing similar programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Program Justification:</b> The proposed program is innovative and can be successfully implemented in one year or sustained through other resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Outcome Measurement:</b> There is a clear plan to measure and report on program outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Budget:</b> The budget is accurate and the costs are reasonable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Budget Narrative:</b> The narrative includes adequate details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Matching Funds:</b> The source of matching funds is clear or the request for a waiver is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL SCORE</b>	<b>26</b>				

Reviewer Name	2A LLC Rise Above the Violence	2B Flagler Schools, Flagler Technical College	2C EPIC, JET Re-Entry	2D Boys and Girls Clubs, Digital Art for Crime Prevention
Matthew Metz	30	34	37	26
Daniel Engert	13	25		22
Rick Staly	29	37		
Jennifer Whipple	19	40	40	22
Mark Weinberg				
Christy Gillis				
Harry Cole				
Carrie Baird	16	27	30	24
Donald O'Brien				
Jason Lewis/RJ Larizza	20	30	29	26
Judge Perkins	23	29	32	21
Judge Distler				
Thomas York/Carol Prazeres-Reis				
Andrew Williams	23	35	34	32
Josh Hines				
Chief Brannon	25	32	32	
Danielle Moye				
Angie Zinno				
Dan Merrithew				
John Fanelli				
Trish Giaccone	29	31	29	26
Average	22.7	32.0	32.9	24.9

20000 EPIC  
19000 Flagler Schools

Abstain

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME Engert, Daniel M		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE Public Safety Coordinating Council		
MAILING ADDRESS 1002nJustice Lane		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:		
CITY Bunnell		COUNTY Flagler	<input type="checkbox"/> CITY	<input checked="" type="checkbox"/> COUNTY
DATE ON WHICH VOTE OCCURRED 9/4/2024		NAME OF POLITICAL SUBDIVISION: Flagler County		
		MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTIVE		

## WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

## INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office **MUST ABSTAIN** from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also **MUST ABSTAIN** from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

\* \* \* \* \*

### ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; *and*

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

\* \* \* \* \*

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

**IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:**

- You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

**APPOINTED OFFICERS (continued)**

- A copy of the form must be provided immediately to the other members of the agency.
- The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

**DISCLOSURE OF LOCAL OFFICER'S INTEREST**

I, Daniel Engert, hereby disclose that on September 4, 20 24 :

(a) A measure came or will come before my agency which (check one or more)

- inured to my special private gain or loss;
- inured to the special gain or loss of my business associate, Epic Behavioral Health ;
- inured to the special gain or loss of my relative, \_\_\_\_\_ ;
- inured to the special gain or loss of \_\_\_\_\_, by whom I am retained; or
- inured to the special gain or loss of \_\_\_\_\_, which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

The FCSO contracts with Epic Behavioral Health and is associated through a subsequent Business Associate Agreement

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

9/4/2024  
Date Filed

Daniel Engert  
Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME Brannon II, David F.	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE Flagler County Public Safety Coordinating Committee
MAILING ADDRESS P.O. Box 756	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:
CITY Bunnell	<input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
COUNTY Flagler	NAME OF POLITICAL SUBDIVISION: County of Flagler
DATE ON WHICH VOTE OCCURRED 09/04/2024	MY POSITION IS:
	<input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTIVE

## WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

## INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office **MUST ABSTAIN** from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also **MUST ABSTAIN** from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

\* \* \* \* \*

### ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; *and*

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

\* \* \* \* \*

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

**IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:**

- You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

**APPOINTED OFFICERS (continued)**

- A copy of the form must be provided immediately to the other members of the agency.
- The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

**DISCLOSURE OF LOCAL OFFICER'S INTEREST**

I, David F. Brannon II, hereby disclose that on September 4, 20 24 :

(a) A measure came or will come before my agency which (check one or more)

- inured to my special private gain or loss;
- inured to the special gain or loss of my business associate, \_\_\_\_\_ ;
- inured to the special gain or loss of my relative, \_\_\_\_\_ ;
- inured to the special gain or loss of Volusia-Flagler Boys & Girls Club, Inc., by whom I am retained; or
- inured to the special gain or loss of \_\_\_\_\_ , which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

Grant Application for funding of a Crime Prevention through Digital Arts program.

I am a current board member of the Volusia-Flagler Boys & Girls Club, Inc.

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

09/04/2024

Date Filed



Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME Moye Danielle	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE Public Safety Coordinating Council
MAILING ADDRESS 4600 E. Moody Blvd 19 M	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="checked" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY Bunnell	COUNTY Flagler
NAME OF POLITICAL SUBDIVISION:	MY POSITION IS: <input checked="checked" type="checkbox"/> ELECTIVE <input type="checkbox"/> APPOINTIVE
DATE ON WHICH VOTE OCCURRED 9/4/2024	

## WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

## INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office **MUST ABSTAIN** from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also **MUST ABSTAIN** from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

\* \* \* \* \*

### ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; *and*

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

\* \* \* \* \*

### APPOINTED OFFICERS:

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

**IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:**

- You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)



**APPOINTED OFFICERS (continued)**

- A copy of the form must be provided immediately to the other members of the agency.
- The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

**DISCLOSURE OF LOCAL OFFICER'S INTEREST**

I, Danielle, hereby disclose that on September 4th, 20 24 :

(a) A measure came or will come before my agency which (check one or more)

- inured to my special private gain or loss;
- inured to the special gain or loss of my business associate, \_\_\_\_\_ ;
- inured to the special gain or loss of my relative, \_\_\_\_\_ ;
- inured to the special gain or loss of \_\_\_\_\_, by whom I am retained; or
- inured to the special gain or loss of \_\_\_\_\_, which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

I am employed by EPIC Behavioral Healthcare

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

9-4-2024  
Date Filed

*Danielle Maye*  
Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME <b>Staly, Rick Justin</b>	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE <b>PSCC</b>
MAILING ADDRESS <b>61 Sheriff Ew Johnston Dr</b>	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY COUNTY <b>Bunnell FL 32110 Flagler</b>	NAME OF POLITICAL SUBDIVISION: <b>Flagler County Sheriff's Office</b>
DATE ON WHICH VOTE OCCURRED <b>9-04-2024</b>	MY POSITION IS: <input checked="" type="checkbox"/> ELECTIVE <input type="checkbox"/> APPOINTIVE

## WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

## INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

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For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

\* \* \* \* \*

### ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; *and*

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

\* \* \* \* \*

### APPOINTED OFFICERS:

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**APPOINTED OFFICERS (continued)**

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- The form must be read publicly at the next meeting after the form is filed.

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- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

**DISCLOSURE OF LOCAL OFFICER'S INTEREST**

I, Rick Stacy, hereby disclose that on September 4, 20 24:

(a) A measure came or will come before my agency which (check one or more)

- inured to my special private gain or loss;
- inured to the special gain or loss of my business associate, \_\_\_\_\_;
- inured to the special gain or loss of my relative, \_\_\_\_\_;
- inured to the special gain or loss of \_\_\_\_\_, by whom I am retained; or
- inured to the special gain or loss of an organization associated with my Agency which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

*I am employed at the Flagler County Sheriff's Office as the Sheriff. Presenter Stephanie Ecklin is employed by Epic who we use as a contractor at our Detention Facility, therefore, I have abstained from voting.*

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

9-04-2024

Date Filed

Rick Stacy  
Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

<small>LAST NAME—FIRST NAME—MIDDLE NAME</small> <b>Staly, Rick Justin</b>	<small>NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE</small> <b>PSCC</b>
<small>MAILING ADDRESS</small> <b>1el Sheriff EW Johnston Dr.</b>	<small>THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:</small> <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
<small>CITY</small> <b>Bunnell, FL 32110</b>	<small>NAME OF POLITICAL SUBDIVISION:</small> <b>Flagler County Sheriff's Office</b>
<small>DATE ON WHICH VOTE OCCURRED</small> <b>9-4-2024</b>	<small>MY POSITION IS:</small> <input checked="" type="checkbox"/> ELECTIVE <input type="checkbox"/> APPOINTIVE

### WHO MUST FILE FORM 8B

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\* \* \* \* \*

#### **ELECTED OFFICERS:**

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

**PRIOR TO THE VOTE BEING TAKEN** by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; *and*

**WITHIN 15 DAYS AFTER THE VOTE OCCURS** by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

\* \* \* \* \*

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**APPOINTED OFFICERS (continued)**

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**DISCLOSURE OF LOCAL OFFICER'S INTEREST**

I, Rick Staly, hereby disclose that on September 4, 20 24:

(a) A measure came or will come before my agency which (check one or more)

- inured to my special private gain or loss;
- inured to the special gain or loss of my business associate, \_\_\_\_\_;
- inured to the special gain or loss of my relative, \_\_\_\_\_;
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- inured to the special gain or loss of \_\_\_\_\_, which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

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*I am employed by the Flagler County Sheriff's Office as the Sheriff. I am also on the Board of Directors for the Boys and Girls Club of Volusia/Flagler Counties therefore, I have abstained from voting.*

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09-04-2024

Date Filed

*Rick Staly*

Signature

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# FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME <i>Farelli John</i>	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE <i>Public Safety Coordinating Council</i>
MAILING ADDRESS <i>1769 East Moody Blvd. <del>Flagler</del></i>	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY      COUNTY <i>Bunnell      Flagler</i>	NAME OF POLITICAL SUBDIVISION: <i>Flagler Schools</i>
DATE ON WHICH VOTE OCCURRED <i>9/4/24</i>	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTIVE

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\* \* \* \* \*

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**DISCLOSURE OF LOCAL OFFICER'S INTEREST**

I, John Fanelli, hereby disclose that on September 4, 20 24:

(a) A measure came or will come before my agency which (check one or more)

- inured to my special private gain or loss;
- inured to the special gain or loss of my business associate, \_\_\_\_\_;
- inured to the special gain or loss of my relative, \_\_\_\_\_;
- inured to the special gain or loss of Flagler Schools, by whom I am retained; or
- inured to the special gain or loss of \_\_\_\_\_, which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

*The agency with whom I work for submitted a grant to the PSCL.*

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

9/4/24

Date Filed

John Fanelli  
Signature

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## Gopie, Sheri

---

**From:** Stephanie Ecklin <secklin@bgcvfc.org>  
**Sent:** Wednesday, September 4, 2024 12:24 PM  
**To:** Gopie, Sheri; Staly, Rick; Dave Brannon  
**Subject:** Schedule Meeting - Follow-up

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Sheriff Staly and Chief Brannon

Thank you for allowing me the opportunity to present before your meeting today. I am very sorry about misstating the Flagler statistics in my presentation. I welcome the opportunity to meet with both of you to go over the most accurate stats for our County as well as discuss some strategies that we can implement that would help bridge the prevention gap. Please let me know what date and time works best for both of you.

Also, below you will find some of the PSA videos that we have created. Please forward to other members on the committee that requested it today during the meeting. Thanks again

Staying Positive

<https://youtu.be/Trgx0526wuQ?si=Uff6VzbFMbyyAi3n>

Bullying

<https://youtu.be/nJ-TKgR5QG0?si=MvrBIAvC41roH9vd>

Healthy Tips

<https://youtu.be/MerfJ-02cDk>

Water Conservation

[Boys and Girls Club Water Conservation PSA \(youtube.com\)](#)

Positive Outlook

[Gratitude Journal PSA \(youtube.com\)](#)



Whatever It Takes to Build Great Futures  
[Learn More About Us](#)



**Stephanie Ecklin**

Director of Development

Boys & Girls Clubs of Volusia/Flagler Counties

101 N. Woodland Blvd. Ste. 400

DeLand, FL 32720

Office: (386) 734-0555

Cell: (386) 675-3774

[www.bgcvcfc.org](http://www.bgcvcfc.org)

## Gopie, Sheri

---

**From:** Stephanie Ecklin <secklin@bgcvfc.org>  
**Sent:** Wednesday, September 4, 2024 12:29 PM  
**To:** Gopie, Sheri; Staly, Rick; Dave Brannon  
**Subject:** Re: Schedule Meeting - Follow-up

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

One more.

[DeLand Police Department on X: "Ride along with one of our officers as he talks about his career in law enforcement. Interested in a rewarding career? DPD holds an Open House the fourth Saturday of each month. Next one is Saturday 8/24 at 8 a.m. Contact DPDrecruiting@deland.org or by phone at 386-626-7470. <https://t.co/NfYeX1ZSXM>" / X](#)



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[Learn More About Us](#)

**Stephanie Ecklin**  
Director of Development  
Boys & Girls Clubs of Volusia/Flagler Counties  
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DeLand, FL 32720  
Office: (386) 734-0555  
Cell: (386) 675-3774

[www.bgcvfc.org](http://www.bgcvfc.org)

---

**From:** Stephanie Ecklin  
**Sent:** Wednesday, September 4, 2024 12:24 PM  
**To:** Rick Staley 2 <sgopie@flaglersheriff.com>; Rick Staley <rstaley@flaglersheriff.com>; Dave Brannon <dbrannon@bunnellpd.us>  
**Subject:** Schedule Meeting - Follow-up

Sheriff Staly and Chief Brannon

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[Boys and Girls Club Water Conservation PSA \(youtube.com\)](#)

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[Gratitude Journal PSA \(youtube.com\)](#)



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#### **Stephanie Ecklin**

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[www.bgcvcfc.org](http://www.bgcvcfc.org)

**Public Safety  
Coordinating Council**  
1769 E. Moody Blvd Bldg 2  
Bunnell, FL 32110



[www.flaglercounty.org](http://www.flaglercounty.org)  
Phone: (386)313-4001

September 5, 2024

Honorable Andy Dance, Chair  
Flagler County Board of County Commissioners  
1769 East Moody Blvd., Bldg. 2  
Bunnell, FL 32110

Dear Chairman *Andy* Dance:

The Public Safety Coordinating Council met on September 4, 2024 at 08:45 to review the Crime Prevention Grant and Cumulative scoring submissions.

It was discussed and decided that the Grant Allocation of \$39,000.00 would be divided between two entities with EPIC Community Services Inc. (dba EPIC Behavioral Healthcare) receiving \$20,000.00 to support the facilitation of retaining and elevating the transition Specialist role in their full-time status within the JET Re-Entry Program within the Flagler County Detention Facility.

Flagler Schools, Flagler Technical College would be allotted the remaining \$19,000.00 to provide opportunities for GED attainment and career training for at risk youth ages 16-22.

The Public Safety Coordinating Council eagerly anticipates the implementation of this Grant allocation to significantly support the Flagler County Community.

Sincerely,

**RICK STALY**  
**Sheriff**  
**Chair of Public Safety Coordinating Council**

Enclosure

Cc: County Administrator Petito  
Financial Services Director John Brower

RS/sg

---

**Andy Dance**  
**District 1**

**Greg Hansen**  
**District 2**

**David Sullivan**  
**District 3**

**Joe Mullins**  
**District 4**

**Donald O'Brien Jr.**  
**District 5**

Reviewer Name	2A LLC Rise Above the Violence	2B Flagler Schools, Flagler Technical College	2C EPIC, JET Re-Entry	2D Boys and Girls Clubs, Digital Art for Crime Prevention
Matthew Metz	30	34	37	26
Daniel Engert	13	25		22
Rick Staly	29	37		
Jennifer Whipple	19	40	40	22
Mark Weinberg				
Christy Gillis				
Harry Cole				
Carrie Baird	16	27	30	24
Donald O'Brien				
Jason Lewis/RJ Larizza	20	30	29	26
Judge Perkins	23	29	32	21
Judge Distler				
Thomas York/Carol Prazeres-Reis				
Andrew Williams	23	35	34	32
Josh Hines				
Chief Brannon	25	32	32	
Danielle Moye				
Angie Zimmo				
Dan Merrithew				
John Fanelli				
Trish Giaccone	29	31	29	26
Average	22.7	32.0	32.9	24.9

Abstain

**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

<b>Applicant Name</b>	Flagler Schools
<b>Program Name</b>	Flagler Technical College
<b>Grant Funds Requested</b>	\$39,000.00
<b>Matching Funds Committed</b>	\$9,600.00
<b>Project Commencement Date</b>	Oct 1, 2024
<b>Project Completion Date</b>	May 31, 2024

**Program Description**

Provide a detailed description of the proposed Crime Prevention project/program. Include the target population for the project and describe the strategies and interventions to be implemented.

The primary target population for this program is at-risk youth aged 16-22 who have dropped out of high school or are at risk of dropping out. This population often faces economic, social, and academic challenges that increase their vulnerability to involvement in crime. This program aims to reduce crime rates by addressing the root causes of juvenile delinquency and adult crime through education and skill development. By providing opportunities for GED attainment and career training, the program seeks to equip participants with the tools necessary to become productive members of society. Linking GED programs with career and technical education (CTE) is a strategic approach to not only helping individuals earn their high school equivalency but also preparing them for successful careers. By combining these two essential components, programs can provide a comprehensive and effective pathway to economic independence and personal growth.

**Priority Focus**

Describe how the proposed program addresses crime prevention with a focus on mental health and/or substance use.

A GED can be a powerful tool in crime prevention. Research indicates a strong correlation between education levels and criminal activity. Individuals with higher levels of education, including those with a GED, are less likely to engage in criminal behavior.

By providing opportunities for young people to earn a GED, we equip them with essential skills and knowledge. These qualifications can lead to employment, financial stability, and personal growth. When individuals have a clear path to success, they are less likely to turn to crime. Ultimately, investing in GED programs is an investment in safer communities.

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION 2024-25, Round 2

### Applicant Organization

Provide an overview of the applicant's experience implementing crime prevention programs and past success of similar programs, if applicable.

Flagler Technical College, in partnership with CareerSource, successfully operated a GED dropout prevention program for twelve years until funding was abruptly terminated. During this period, the program facilitated the attainment of GED certificates for nearly 400 students and successfully transitioned graduates into career and technical education programs, state colleges, or the United States Armed Forces.

### Program Justification

Describe how this program will use innovation or new ideas to address crime prevention. Since this is one year funding, how will this one year of funding impact crime or be sustained overtime.

Linking GED programs with career and technical education (CTE) is a strategic approach that offers numerous benefits for both individuals and communities. By creating a seamless transition between these two educational pathways, we can empower individuals to achieve their full potential and contribute to the workforce. While one year of funding may seem limited, it provides a crucial foundation for long-term success. By demonstrating the program's effectiveness in reducing dropout rates and increasing GED attainment, we can build a compelling case for continued support.

### Outcome Measurement

Describe the desired outcomes of the project and how success will be measured and reported on.

**GED attainment rates:** Tracking the number of students who successfully earn their GED is fundamental. Analyzing trends over time can reveal program effectiveness.

**Employment rates:** Assessing the employment outcomes of GED graduates is crucial. Tracking job placement rates, wages, and career advancement can demonstrate the program's impact on economic mobility.

**Post-secondary enrollment:** Monitoring the number of GED graduates who pursue further education, whether through college, vocational training, or apprenticeships, highlights the program's role in expanding opportunities.

### Program Budget

Provide a Budget Summary in the format below with a detailed Budget Narrative.

Budget Item	Grant Funds	Matching Funds	Total Project Budget
Personnel	\$35,800.00	\$9,600.00	\$45,400.00
Fringe			
Travel			
Equipment			

**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

<b>Supplies</b>			
<b>Contracted Services</b>			
<b>Other (GED Assessment Cost)</b>	\$3,200.00		\$3,200.00
<b>Total Direct Charges</b>			
<b>Indirect Charges</b>			
<b>TOTAL</b>			\$48,600.00

**Budget Narrative**

Provide details for each budget item noted above.

GED Assessment Cost - 25 students at \$128 per student for a total cost of \$3,200.00 GED Instructor Cost - 1 instructor for 179 days at \$200 per day for a total cost of \$35,800.00
---

**Matching Funds**

What is the source of your match funding? Provide a justification if you are requesting a waiver of the match requirement.

Flagler Technical College Student Services Specialist - 1 day per week for 43 weeks with a total cost of \$9,600.00
---

**DECLARATION(S) Applicant**

We/I declare that the information provided is correct.

<b>Name</b>	John Fanelli & Renee Kirkland
<b>Title</b>	Student Services Director & Flagler Technical College Director
<b>Signature</b>	<i>John Fanelli &amp; Renee Kirkland</i>
<b>Phone</b>	(386)437-7526 ext. 1107
<b>Email</b>	Fanellij@flaglerschools.com Kirklandr@flaglerschools.com



**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

<b>Applicant Name</b>	EPIC Community Services, Inc. (dba EPIC Behavioral Healthcare)
<b>Program Name</b>	JET Re-Entry Program, Flagler County
<b>Grant Funds Requested</b>	\$39,000.00
<b>Matching Funds Committed</b>	\$18,024.00
<b>Project Commencement Date</b>	10/1/2024 (Project is ongoing)
<b>Project Completion Date</b>	9/30/2025 (Project is ongoing)

**Program Description**

Provide a detailed description of the proposed Crime Prevention project/program. Include the target population for the project and describe the strategies and interventions to be implemented.

EPIC Behavioral Healthcare currently facilitates the JET Re-Entry Program within the Flagler County Detention Facility, providing critical services to incarcerated individuals. At this juncture, EPIC is endeavoring to secure additional funding with the objective of retaining and elevating the Transition Specialist role in their full-time status within the program. Retaining this key position is aimed at bolstering the support framework for our target demographic—incarcerated individuals diagnosed with substance use and/or mental health disorders who are also frequent utilizers of criminal justice and behavioral health services.

The JET Re-Entry Program is staffed by a dedicated team comprising a Transition Specialist, Clinician, Care Coordinator, and Peer Support Specialist. This team is instrumental in delivering a comprehensive suite of therapeutic and support services designed to facilitate the reintegration of participants into the community. The strategies and interventions implemented within the program are multifaceted and include:

- 1. Pre-Release Screening and Assessment:** Conducted during the booking process by the Transition Specialist, this initial screening assesses the level of treatment needed for substance use and mental health issues. Based on their assessment scores, individuals who meet the criteria are enrolled in the program.
- 2. Clinical Services:** This component of the program offers a continuum of outpatient treatment services. These encompass a thorough bio-psychosocial assessment, meticulous treatment planning, personalized counseling, as well as group and family therapy sessions, culminating in strategic discharge planning.
- 3. Intensive Care Coordination:** Through a detailed assessment, the Care Coordinator develops a re-entry plan tailored to the individual's needs. This plan involves matching participants with appropriate services and initiating these services while the individuals are still in custody, continuing through to 12 months post-release to ensure a seamless transition into the community.

**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

4. **Peer Recovery Services:** Delivered by the Peer Support Specialist, this aspect of the program leverages the unique perspective of lived experience to offer recovery-oriented support and group planning. The specialist assists participants in developing robust recovery networks and activities in the community, fostering a lifestyle rooted in recovery principles.

The Transition Specialist is pivotal throughout the entire spectrum of the program, from initial pre-release assessments to the comprehensive support provided as participants navigate their reintegration. This role is crucial in developing personalized Transition Plans that support job placement, secure housing, and coordinate supportive services, ensuring each participant receives targeted interventions 2-3 times weekly.

To truly optimize these efforts and maximize outcomes for our participants, EPIC is actively seeking funding to support the Transition Specialist position as a full-time employee. This full-time position is critical for providing sustained, intensive support that can significantly alter the trajectories of our participants' lives, thereby enriching their community reintegration process and reducing the likelihood of recidivism.

**Priority Focus**

Describe how the proposed program addresses crime prevention with a focus on mental health and/or substance use.

The primary objectives of the JET Re-Entry Program, in conjunction with the expert guidance offered by the Transition Specialist, are designed to deliver a comprehensive suite of services aimed at actively engaging inmates who have been diagnosed with mental health and/or substance use disorders. This engagement is crucial during their incarceration, with a seamless provision of supportive transition and sustained recovery-oriented care upon their reintegration into the community. The overarching goal of these initiatives is to significantly diminish the likelihood of re-arrest by facilitating a smoother transition.

Participants in this program are afforded the necessary services tailored to meet their specific needs, while simultaneously acquiring the skills needed to effectively navigate through various systems of care. This is done with substantial support, steering them away from reverting to previous detrimental connections that might jeopardize their recovery. Without this critical support, there is an often-inevitable loss of hope, which can precipitously lead to relapse and potential reoffending.

Furthermore, reducing recidivism is not merely a benefit to the individual but is also a pivotal aspect of broader crime prevention strategies. This is particularly salient for those contending with the dual challenges of substance use and mental health disorders. By addressing these underlying issues with a comprehensive, compassionate approach, the JET Re-Entry Program not only aids in the recovery and stabilization of participants but also contributes significantly to the safety and well-being of the community.

**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

**Applicant Organization**

Provide an overview of the applicant's experience implementing crime prevention programs and past success of similar programs, if applicable.

EPIC, a non-profit behavioral health organization, has been serving the community since 1973 – providing 50 years of community impact. EPIC specializes in the prevention and treatment of substance use and mental health disorders. The JET Re-Entry Program was initially developed by EPIC and the St. Johns County Sheriff's Office through a Florida Department of Children and Families Substance Abuse Mental Health/Criminal Justice Reinvestment Grant in 2019. The model proved to be an effective model as supported by program outcomes with respect to recidivism, employment, and stable housing. The St. Johns County Sheriff's Office endorsed the continuation of the program as a permanent addition in their Detention Center. The Flagler County Sheriff's Office had experience implementing programs in the criminal justice system and reached out to EPIC to partner with them to bring services into the Flagler County Jail. Additionally, EPIC has successfully implemented a number of programs for adults in the criminal justice system including: Adult Drug Court (St. Johns County) in 2002, Veterans Treatment Court (2017), the In-Jail/SIGHT program (2004), and has partnered with the Flagler County's Sheriff's Office to replicate a program similar to SIGHT which is called SMART (Successful Mental Health Addiction Recovery Treatment) and is currently the treatment provider for Flagler County Drug Court.

## FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION 2024-25, Round 2

**Program Justification**

Describe how this program will use innovation or new ideas to address crime prevention. Since this is one year funding, how will this one year of funding impact crime or be sustained overtime.

The Transition Specialist plays a pivotal role within the JET Re-Entry Program, drawing on the evidence-based Wrap Around model to offer essential support to individuals with complex needs. This role is particularly crucial for assisting those challenged by mental health or substance use disorders, aiding them in accessing resources and forging connections that might otherwise be unmanageable without professional help.

Over the past year, with the support of 2023-2024 Crime Prevention funding, the Transition Specialist has significantly expanded their capacity beyond merely conducting screenings at the jail. Notably, the specialist has begun conducting earlier screenings, particularly at court appearances, thereby broadening the scope and impact of their work. This change has addressed a significant gap, as some potential participants secure bail and thus lose the chance to join the program at a critical juncture. Initiating screenings at this earlier stage has allowed for more timely interventions, providing individuals with a broader timeframe to connect with necessary resources and receive more comprehensive support. Over time, these enhancements are likely to significantly bolster efforts in reducing crime among individuals once they reintegrate into the community.

It is EPIC's aspiration that retaining the Transition Specialist in a full-time role will not only augment the program's effectiveness but also solidify the foundation for ongoing funding. By demonstrating improved outcomes and the crucial benefits of early intervention, EPIC aims to secure the necessary support to maintain this position on a full-time basis, thereby ensuring sustained impact on the participants and the community at large.

**Outcome Measurement:**

Describe the desired outcomes of the project and how success will be measured and reported on.

<u>Activities</u>	<u>Outcomes</u>	<u>Indicators</u>	<u>Data Source(s)</u>	<u>Data Collection Method</u>
Re-Entry Transition and Recovery/ Clinical Support Services	Adults completing their treatment episode will live a healthy, safe, stable, and meaningful life.	91% of clients who successfully complete their JET clinical/recovery plan will have improved functioning at discharge.	Discharge note  DLA (daily living activities) scores	Client EHR
Re-Entry Transition and Recovery/ Clinical Support Services	Adults completing their treatment episode will be stably housed at discharge.	75% of clients who successfully complete their JET clinical/recovery plan will have stable housing at discharge.	Discharge Note  Care Coordination Plan	Client EHR  Quarterly Reporting Data

**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

Re-Entry Transition and Recovery/ Clinical Support Services	Adults completing their treatment episode will be employed, be self-sufficient, and participate in their community.	70% of clients who successfully complete their JET clinical/recovery plan will be employed, be enrolled in school, or have a regular volunteer job at discharge.	Discharge Note Data  Care Coordination Plan  DLA (daily living activities) scores	Client EHR  Quarterly Reporting Data
Re-Entry Transition and Recovery/ Clinical Support Services	Adults involved in the criminal justice system will seek to sustain their recovery status.	95% of JET clients who successfully complete their clinical/recovery plan will not be re-incarcerated in the one-year period following release from custody.	Database Enrollment Data  Law Enforcement Arrest Database	Client EHR  Quarterly Reporting Data

**Program Budget:**

Provide a Budget Summary in the format below with a detailed Budget Narrative.

Budget Item	Grant Funds	Matching Funds (LSF)	Total Project Budget
Personnel	\$33,000	\$13,800	\$46,800
Fringe	\$3,843	\$1,110	\$4,953
Travel	\$162	\$162	\$324
Equipment	\$600	\$1,000	\$1,600
Supplies	\$666	\$634	\$1,300
Contracted Services	-	-	-
Other	-	-	-
<b>Total Direct Charges</b>	<b>\$38,271</b>	<b>\$16,706</b>	<b>\$54,977</b>
<b>Indirect Charges</b>	<b>\$729</b>	<b>\$1,318</b>	<b>\$2,047</b>
<b>TOTAL</b>	<b>\$39,000</b>	<b>\$18,024</b>	<b>\$57,024</b>

**FLAGLER COUNTY PSCC CRIME PREVENTION GRANT APPLICATION  
2024-25, Round 2**

**Budget Narrative:**

Provide details for each budget item noted above.

- o Personnel - (1.0 FTE) Transition Specialist for SUD/MH for Jail Bridge Program SMART
- o Fringe – (1.0 FTE) Health, Dental, Vision, Worker's Comp, Life & Short-Term Disability and Employer taxes
- o Travel – (1.0 FTE) Mileage: 50 miles monthly at \$0.54/per mile.
- o Equipment – (1.0 FTE)- (1) Laptop, Docking Station, Monitor, Signature Capture Pad, Headset, Mouse/Mousepad;(1) Cell phone lease & and monthly cell service.
- o Supplies – (1.0 FTE) Office Supplies, Evidence based assessments, screening tools & other program supplies
- o Indirect Charges - Executive Leadership to provide Oversight & Compliance with State, Federal & Local Laws, IT support, Human Resources, Utilization Review and Finance - tracking and billing.

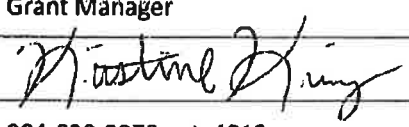
**Matching Funds**

What is the source of your match funding? Provide a justification if you are requesting a waiver of the match requirement.

LSF State Grant – Contract ME005

**DECLARATION(S) Applicant**

We/I declare that the information provided is correct.

<b>Name</b>	Kristine King
<b>Title</b>	Grant Manager
<b>Signature</b>	
<b>Phone</b>	904-829-2273 ext. 4012
<b>Email</b>	KKing@epicbh.org



Department of the Treasury  
Internal Revenue Service

Cincinnati Service Center  
CINCINNATI OH 45999-0038

In reply refer to: 0256581538  
May 22, 2023 LTR 4168C 0  
59-1502582 202312 67

00016540  
BODC: TE

EPIC COMMUNITY SERVICES INC  
% TIMOTHY ALEXANDER  
3910 LEWIS SPEEDWAY STE 1106  
ST AUGUSTINE FL 32084-8649

021378

Employer ID number: 59-1502582  
Form 990 required: Y

Dear EPIC COMMUNITY SERVICES INC:

We're responding to your request dated May 15, 2023, about your tax-exempt status.

We issued you a determination letter in 01011979, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(03).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at [www.irs.gov/forms-pubs](http://www.irs.gov/forms-pubs) or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

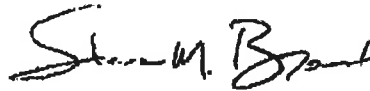
0256581538  
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59-1502582 202312 67  
00016541

EPIC COMMUNITY SERVICES INC  
% TIMOTHY ALEXANDER  
3910 LEWIS SPEEDWAY STE 1106  
ST AUGUSTINE FL 32084-8649

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,



Steve M. Brown, Operations Manager  
Operations 3-CIN





## Flagler County Board of County Commissioners Volunteer Advisory Board and Committee General Application

New Application       Reappointment Request

Name: Carrie Baird      Date: 9/18/24

Mailing Address: 160 Cypress Point Parkway, B302, Palm Coast, FL 32164

Physical Address (if different): \_\_\_\_\_

County of Residence: Volusia      Are you a registered voter? yes

Email: carrie@flaglercares.org      Years in Flagler: (work: 10)

Phone: 386-295-1112       Office     Home     Cell

Phone: \_\_\_\_\_       Office     Home     Cell

Advisory Board/Committee Applying for: Public Safety Coordinating Council

What aspect of this Board/Committee interests you?

I have been a member of the PSCC for over 4 years and am interesting in the intersection of behavioral health and criminal justice.

Describe your training and/or experience that would make you a good fit for this position:

I have over 25 years of experience in health and social services, including behavioral health, corrections and juvenile justice.

What contributions do you feel you could make to this Board/Committee should you be selected?

I have served on the PSCC for over 4 years and am a regular attendee and contribute to group discussions. I also facilitate the grant review process.

Have you ever served on a Flagler County appointed Board/Committee?

No       Yes, if so, please identify those on which you have served:

Advisory Board / Committee

Dates Served

PSCC

2020-current

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Education: BS

Business (name & type): Flagler Cares, Inc.

Business Address: 160 Cypress Point Parkway, B302, Palm Coast, FL 32164

Business Phone: 386-295-1112 Position: CEO

Applicable Professional Organization Memberships:

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.

**Carrie Baird**

Digitally signed by Carrie Baird  
Date: 2024.09.18 13:18:16 -04'00'

**9/18/24**

Applicant Signature

Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)

*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**

## Gopie, Sheri

---

**From:** Rose Keirnan <rkeirnan@flaglercounty.gov>  
**Sent:** Wednesday, September 18, 2024 1:44 PM  
**To:** Gopie, Sheri  
**Subject:** RE: Application for Reappointment to PSCC

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Sheri,  
Absolutely. I will get to work on this!

Can you please confirm:

- It is the PSCC's intention to move to appointment for Ms. Carrie
- For the role listed in the appointment letter, do you approve the following text:
  - *as a representative from our community, experienced in work with offenders and victims, including health and social services, behavioral health, corrections, and juvenile justice.*
- For the expiration – will it be 4 years from today (Sept 18, 2028)?

Thank you!

**Rose Keirnan**

Exec. Admin. Asst. to the Deputy County Administrator and BoCC

E: [rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov) | V: (386) 313-4094 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd, Bldg #2  
Bunnell, FL 32110



***The mission of Flagler County is to provide high-quality services through a responsive workforce committed to excellence, integrity, in collaboration with the cities and to act as a fiscally responsible steward.***

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**Flagler County Board of County Commissioners  
Volunteer Advisory Board and Committee  
General Application**

New Application       Reappointment Request

Name: Mark Weinberg      Date: 9/18/2024

Mailing Address: 125 E. Orange Ave., Rm. 200, Daytona Beach, FL

Physical Address (if different): \_\_\_\_\_

County of Residence: Volusia      Are you a registered voter? \_\_\_\_\_

Email: mweinberg@circuit7.org      Years in Flagler: \_\_\_\_\_

Phone: (386) 257-6097       Office     Home     Cell

Phone: \_\_\_\_\_       Office     Home     Cell

Advisory Board/Committee Applying for: Public Safety Coordinating Council

What aspect of this Board/Committee interests you?

Issues related to jail population and other criminal justice related activities.

Describe your training and/or experience that would make you a good fit for this position:

I have worked in the field of Court Administration for over 40 years and have served as a member of the Flagler PSCC since 2007.

What contributions do you feel you could make to this Board/Committee should you be selected?

My work experince and previous service on the PSCC make me uniquely qualified to continue to serve.

Have you ever served on a Flagler County appointed Board/Committee?

No       Yes, if so, please identify those on which you have served:

Advisory Board / Committee	Dates Served
<u>Public Safety Coordinating Council</u>	<u>2007 - present</u>
_____	_____
_____	_____

Education: \_\_\_\_\_  
Business (name & type): Court Administration, Seventh Judicial Circuit of Florida  
Business Address: 1769 E. Moody Blvd., Bldg. # 1, Bunnell, FL 32110  
Business Phone: (386) 257-6097 Position: Court Administrator

Applicable Professional Organization Memberships:

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:  
See also sec. 394.657(2)(a)(9), Florida Statutes

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.

  
Applicant Signature

9/18/2024  
Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)  
*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**

## Gopie, Sheri

---

**From:** Rose Keirnan <rkeirnan@flaglercounty.gov>  
**Sent:** Wednesday, September 18, 2024 4:31 PM  
**To:** Gopie, Sheri  
**Subject:** FW: Application for Reappointment to PSCC - Weinberg

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Hi Sheri,  
Second letter is drafted for Chair's signature.

Can you please confirm:

- It is the PSCC's intention to move to appointment for Mark.
- For the role listed in the appointment letter, do you approve the following text:
  - *representing Court Administration.*"
- The term expiration will be 4 years from today (Sept 18, 2028)?

Thank you!

### Rose Keirnan

Exec. Admin. Asst. to the Deputy County Administrator and BoCC

E: [rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov) | V: (386) 313-4094 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



### Flagler County Board of County Commissioners

1769 E. Moody Blvd, Bldg #2  
Bunnell, FL 32110



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## Gopie, Sheri

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**From:** Luci Dance <ldance@flaglercounty.gov>  
**Sent:** Wednesday, September 18, 2024 4:00 PM  
**To:** Rose Keirnan  
**Cc:** Gopie, Sheri; Karen Callahan  
**Subject:** RE: PSCC vacancy - request announcement at BoCC regular meeting

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I will add it to the Chair's notes. I've copied Karen so we can loop Communications in to help!

**Luci Dance**  
Exec. Admin. Asst. to the County Administrator

E: [ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov) | V: 386-313-4093 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd., Bldg #2  
Bunnell, FL 32110



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**From:** Rose Keirnan <rkeirnan@flaglercounty.gov>  
**Sent:** Wednesday, September 18, 2024 3:04 PM  
**To:** Luci Dance <ldance@flaglercounty.gov>  
**Cc:** Sheri Gopie (Sheriff Exec Admin) <SGopie@flaglersheriff.com>  
**Subject:** PSCC vacancy - request announcement at BoCC regular meeting

Hi Luci,  
Is it possible to include the following with our next regular meeting agenda.  
Thank you,

**Announcements by the Chair:**

- a) Boards and Council Vacancies:** Flagler County solicits registered voters residing in Flagler County for various citizen volunteer boards and councils.

**Vacancies:**

The Public Safety Coordinating Council (PSCC) has a vacancy for a committee member to serve on the Council, who is:  
a family-member of a primary-consumer of community-based mental-health, or abuse, treatment services from our area.



For further information contact PSCC liaison, Sheri Gopie (Executive Assistant to Sheriff Staly) at (386) 586-4891 or to apply, visit the Advisory Board Vacancies page [www.FlaglerCounty.gov](http://www.FlaglerCounty.gov) Positions are open until filled.

**Rose Keirnan**

Exec. Admin. Asst. to the Deputy County Administrator and BoCC

E: [rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov) | V: (386) 313-4094 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd, Bldg #2  
Bunnell, FL 32110



***The mission of Flagler County is to provide high-quality services through a responsive workforce committed to excellence, integrity, in collaboration with the cities and to act as a fiscally responsible steward.***

**Gopie, Sheri**

---

**From:** Luci Dance <ldance@flaglercounty.gov>  
**Sent:** Wednesday, September 18, 2024 4:36 PM  
**To:** Gopie, Sheri; Rose Keirnan  
**Cc:** Karen Callahan  
**Subject:** RE: PSCC vacancy - request announcement at BoCC regular meeting

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Chairs ready to go!

**b) Please visit [www.FlaglerCounty.gov](http://www.FlaglerCounty.gov) to view our **Transparency Dashboards**.**

**“Citizen Advisory” Board** to view open positions and learn more about them.  
Positions are open until filled.

The **Public Safety Coordinating Council (PSCC)** has a vacancy for a committee member to serve on the Council, who is a family-member of a primary-consumer of community-based mental-health, or abuse, treatment services from our area. For further information or to apply contact PSCC liaison:  
Sheri Gopie, Executive Assistant to Sheriff Staly  
(386) 586-4891 or email [SGopie@FlaglerSheriff.com](mailto:SGopie@FlaglerSheriff.com)  
Or visit the Advisory Board Vacancies page [www.FlaglerCounty.gov](http://www.FlaglerCounty.gov)

**“Aircraft Noise Abatement”** to submit a concern or view the report map  
**“Capital Projects:** to see project status, funding and schedule.  
**“Drainage Maintenance”** to view the current schedule  
***And many more topics!***

**Luci Dance**  
Exec. Admin. Asst. to the County Administrator

E: [ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov) | V: 386-313-4093 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd., Bldg #2  
Bunnell, FL 32110



## Gopie, Sheri

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**Subject:** Safety Council Application - Savannah Prince  
**Attachments:** Resume\_Savannah Prince .pdf; SP\_Council Application.pdf

**From:** Luci Dance <[ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov)>  
**Sent:** Monday, October 14, 2024 1:34 PM  
**To:** Gopie, Sheri <[SGopie@flaglersheriff.com](mailto:SGopie@flaglersheriff.com)>  
**Cc:** Savannah Prince <[savannah@flaglercares.org](mailto:savannah@flaglercares.org)>  
**Subject:** FW: Safety Council Application - Savannah Prince

Good Afternoon Sheri,

Attached is an application for consideration. I have copied Savannah so she can communicate with you directly should she have any questions.

Thank you,  
Luci

**Luci Dance**  
Exec. Admin. Asst. to the County Administrator

E: [ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov) | V: 386-313-4093 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)

**From:** Savannah Prince <[savannah@flaglercares.org](mailto:savannah@flaglercares.org)>  
**Sent:** Monday, October 14, 2024 1:31 PM  
**To:** Luci Dance <[ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov)>  
**Subject:** Safety Council Application

Hi Luci,

I hope this message finds you well and that you and your team fared okay during the storm.

Thank you for your assistance with our proclamation last week; I truly appreciate your support.

I would like to express my interest in the open seat on the Safety Council. Attached are my resume and application for your review. If you need any additional information, please don't hesitate to reach out.

Thank you for considering my application

*Thanks,*



Prevention Coordinator, Flagler Cares  
**Savannah Prince**



**Flagler County Board of County Commissioners  
Volunteer Advisory Board and Committee  
General Application**

New Application       Reappointment Request

Name: Savannah Prince      Date: 10/14/2024

Mailing Address: 33 Ranwood Lane, Palm Coast, FL 32164

Physical Address (if different): \_\_\_\_\_

County of Residence: Flagler      Are you a registered voter? Yes

Email: savannahbprince@gmail.com      Years in Flagler: 2

Phone: 9044955009       Office     Home     Cell

Phone: \_\_\_\_\_       Office     Home     Cell

Advisory Board/Committee Applying for: Public Safety Council

What aspect of this Board/Committee interests you?

I am eager to serve on the Flagler County Public Safety Council because I believe that effective public safety is deeply intertwined with the well-being of our community. I am eager to contribute to the safety and resources in our county.

Describe your training and/or experience that would make you a good fit for this position:

My extensive knowledge in substance use and mental health equips me to address the critical issues facing our residents. With a background in sociology, I understand the social dynamics that impact public health and safety. I have worked in this industry for over six years.

What contributions do you feel you could make to this Board/Committee should you be selected?

Additionally, my experience in the nonprofit sector has honed my ability to collaborate with diverse stakeholders and implement evidence-based solutions. I am passionate about fostering a safer, healthier environment for all residents.

Have you ever served on a Flagler County appointed Board/Committee?

No       Yes, if so, please identify those on which you have served:

Advisory Board / Committee

Dates Served

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Education: Bachelor's in arts in Sociology from the University of Central Florida.

Business (name & type): Flagler Cares, Social Services

Business Address: 160 Cypress Point Pkwy, Suite B302, Palm Coast, FL 32164

Business Phone: 386-986-5831 Position: Prevention Coordinator

Applicable Professional Organization Memberships:  
Flagler Beach Rotary

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:

I am also committed to promoting awareness and reducing stigma around mental health and substance use issues, which are vital for creating a supportive community. My goal is to contribute to strategies that enhance public safety while prioritizing holistic approaches to health and well-being. I am passionate about fostering a safer, healthier environment for all residents and am committed to using my expertise to make a meaningful contribution to the council's efforts.

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.

Savannah Prince

Applicant Signature

10/14/2024

Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)

*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**

**Education**

<u>Year</u>	<u>Degree</u>	<u>Institution</u>
2022-2023	Bachelor of Arts in Sociology	University of Central Florida
2015-2018	Associate of Arts Degree	Saint Johns River State College

**Work Experience**

September 2024 - Current      **Flagler Cares - Prevention Coordinator**

- Educate youth and families on substance youth and other risky behaviors through prevention based practices.
- Develop and lead coalition initiatives and prevention events while fostering relationships.

May 2022 – September 2024      **Flagler Open Arms Recovery Services – Program Lead/Executive Assistant**

- Committed to expanding our programs, fostering community relationships, and supporting the overall growth and development of our organization. I have increased our funding revenue, helped triple our workforce, and established over fifty community relationships.
- Developed several presentations for national conferences such as: “The World of Recovery Community Organizations” for the Behavioral Health Conference in Florida, "Empowering Peer Support: Cultivating Well Being, Motivation, and Growth" for the Taking Action for Wellbeing Conference in Pennsylvania, and “SUD Peer Panel: Embracing Diversity” for the Leadership Summit in Florida.
- Design and implement policies to strengthen company culture and uphold organizational vision as diversity and inclusion recruiting processes, planning staff and board retreats, developing policies centered around self-care and wellness, and leading the committee for strategic planning.

November 2021 –      **Silver Creek Retirement – Activities director**  
May 2022

- Committed to enriching the lives of residents by providing stimulating activities that promote physical, social and emotional well-being
- Proactively involved residents, families, and staff to collaborate and create a supportive and inclusive environment that fosters social connections and emotional support
- Managed activity budgets, resources, and scheduling to ensure efficient operations and maximum resident engagement
- Evaluated program effectiveness and solicited feedback to continuously improve services and meet the evolving needs of residents.

April 2021 –      **Resurgence Behavioral Healthcare - Logistics director**  
November 2021

- Optimized logistical operations to support the nationwide delivery of treatment services through strategic planning and effective resource management
- Contributed to the organization's ability to provide critical care and support to individuals across the country
- Orchestrated the logistics and distribution of medical supplies, equipment, and medications to treatment centers across the country, ensuring timely delivery and availability.
- Oversaw transportation logistics, including fleet management and route optimization, to enhance efficiency and reduce environmental impact.

June 2020 – April 2021      **Pearl of the Sea Retreat (Operated by Resurgence) - Program and Office Manager**

- Oversaw daily operations and program management for a busy detox and residential facility, ensuring efficient and effective service delivery to clients in recovery
- Led a team of administrative and support staff, coordinated scheduling, and managed resources to maintain a supportive and structured environment
- Implemented and improved administrative processes, facilitated communication between departments, and ensured compliance with regulatory standards

October 2019 – June 2020      **EPIC Behavioral Health Care - Certified Recovery Peer Support**

- Provided direct peer support to individuals in recovery, leveraging personal experience and training to offer empathy, guidance, and encouragement
- Facilitated group sessions and one-on-one meetings to assist clients in developing coping strategies and building a support network
- Collaborated with healthcare professionals to create individualized recovery plans, promoting holistic and sustainable recovery

### **Volunteer Work and Notable Projects**

2022 – Current      **Recovery Music Festivals**

- I organized and managed three recovery music festivals which includes: coordinating bands, organizing over 50 vendors and nonprofit organizations, maintaining schedules, providing logistics, maining and cultivating donors to make them successful fundraisers, arranging food vendors, and handling social media promotions.

2022 – Current      **Flagler Beach Rotary**

- I volunteer to help run large food distributions monthly and assist in organizing major community events such as WarBirds Over Flagler.

2022-2023      **Research Project: The Relationship Between Social Media and the Perceptions on Substance Use**

- This project sought to examine the relationship between social media use and the perceptions on substance use. The previous research studies covered a variety of topics from news in the media, to motivations in using media, how gender plays a role, perceptions on substance use, biases and stigma and specific impacts related to college students.

### **Skills and Certifications**

Experience using Microsoft Office Suite and Google Suite, experience with Salesforce, Canva, Adobe, Certified Recovery Peer Specialist with designations in Youth, Family, and Adults, Certified in Mental Health First Aid, Certified in Basic Life Support,

## Gopie, Sheri

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**From:** Luci Dance <ldance@flaglercounty.gov>  
**Sent:** Tuesday, October 29, 2024 11:48 AM  
**To:** Gopie, Sheri; Staly, Rick  
**Subject:** November 4, 2024 BOCC Regular Agenda Item 7c PSCC Council Appt

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Just a quick note to let you know the appointment of Savannah Prince is on our upcoming agenda for ratification.

### Board of County Commissioners Regular Meeting

- **Date:** 11/04/2024 9:00 AM - 12:00 PM
- **Location:** Government Services Building - Chambers  
[1769 E. Moody Blvd., Bldg. 2, 1st Floor, Board Chambers](#)  
[Bunnell, Florida 32110](#)
- **Agenda:** [2024 11 04 BOCC Regular Agenda](#)
- **Agenda:** [2024 11 04 BOCC Regular Agenda and Backup](#)

Have a great week,  
Luci

**Luci Dance**  
Exec. Admin. Asst. to the County Administrator

E: [ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov) | V: 386-313-4093 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd., Bldg #2  
Bunnell, FL 32110



*The mission of Flagler County is to provide high-quality services through a responsive workforce committed to excellence, integrity, in collaboration with the cities and to act as a fiscally responsible steward.*



## Gopie, Sheri

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**Subject:** FW: November 4, 2024 BOCC Regular Agenda Item 7c PSCC Council Appt

**From:** Luci Dance <[ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov)>  
**Sent:** Monday, November 4, 2024 4:43:58 PM  
**To:** Gopie, Sheri <[SGopie@flaglersheriff.com](mailto:SGopie@flaglersheriff.com)>  
**Subject:** RE: November 4, 2024 BOCC Regular Agenda Item 7c PSCC Council Appt

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Hi Sheri,

Just a quick note to let you know this appointment was ratified today. I'm sure Rose will follow up with you if you require anything else.

Have a good evening,  
Luci

**Luci Dance**  
Exec. Admin. Asst. to the County Administrator

E: [ldance@flaglercounty.gov](mailto:ldance@flaglercounty.gov) | V: 386-313-4093 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd., Bldg #2  
Bunnell, FL 32110



***The mission of Flagler County is to provide high-quality services through a responsive workforce committed to excellence, integrity, in collaboration with the cities and to act as a fiscally responsible steward.***

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This message contains confidential information and is intended only for the individual(s) addressed in the message. If you are not the named addressee, you should not disseminate, distribute, or copy this e-mail. If you are not the intended recipient, you are notified that disclosing, distributing, or copying this e-mail is strictly prohibited.

## Gopie, Sheri

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**From:** Fanelli, John <fanellij@flaglerschools.com>  
**Sent:** Monday, December 2, 2024 11:00 AM  
**To:** Gopie, Sheri  
**Cc:** Carrie Baird; Rose Keirnan  
**Subject:** Re: John Fanelli - PSCC Appointment Expires 12-31-2024

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Good morning,

Yes, I would be happy to continue in this capacity.

Have a great day,

John M. Fanelli III M.Ed.

Flagler County Schools  
Director Student Services  
Student Services (386) 437-7526 ext. 1106

On Sun, Dec 1, 2024 at 10:58 AM Gopie, Sheri <[SGopie@flaglersheriff.com](mailto:SGopie@flaglersheriff.com)> wrote:

Good morning John,

I hope you had a nice Thanksgiving!

Since your PSCC appointment falls under the below and does not require a BOCC Chair Appointment, I am just confirming that you would like to stay on the Council 4 more years.

Rose Keirnan is cc'd on this e-mail if you could reply to all please.

- **Appointments that align with the Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant Program Statute 394.659:** i.e. "Other" seats that are a requirement of *this* statute (see their examples #15, 16, 17... which your bylaws reflect), there is NOT a requirement for BoCC Chair appointment.

Thanks so much and have a great week!

**Sheri Gopie**

**Executive Assistant to Sheriff Rick Staly**

**Flagler County Sheriff's Office**

Office Direct: 386-586-4891

Email: [sgopie@flaglersheriff.com](mailto:sgopie@flaglersheriff.com)

[www.flaglersheriff.com](http://www.flaglersheriff.com)

★ *"An honor to serve, a duty to protect"*

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PLEASE NOTE: Florida has a very broad public records law per Fla. Statute 119. Most written communications to or from the Flagler County Sheriff's Office regarding public business are public records available to the public and media upon request. Your e-mail communications may be subject to public disclosure. If you do not want your e-mail address released, do not send electronic mail to this agency. Instead, contact this office by phone..



**Flagler County Board of County Commissioners  
Volunteer Advisory Board and Committee  
General Application**

New Application       Reappointment Request

Name: Chief David Brannon      Date: 12/02/2024

Mailing Address: P.O. Box 756

Physical Address (if different): 1769 E. Moody Blvd, Bldg 14, Bunnell, FL 32110

County of Residence: Volusia      Are you a registered voter? Yes

Email: dbrannon@bunnellpd.us      Years in Flagler: 2.5

Phone: 386-437-7508       Office     Home     Cell

Phone: 386-529-4589       Office     Home     Cell

Advisory Board/Committee Applying for: Public Safety Coordinating Committee

What aspect of this Board/Committee interests you?

Participating in discussions/decisions about the future of public safety measures in Flagler County.

Describe your training and/or experience that would make you a good fit for this position:

Current chief of police for the City of Bunnell with more than 30 years of public safety experience ranging from dispatch, patrol deputy, detective, training officer, first-line supervisor, command, and emergency management.

What contributions do you feel you could make to this Board/Committee should you be selected?

I am committed to offering constitutionally grounded guidance prioritizing collaboration between the public and private sectors. My focus is on identifying and implementing the most efficient and effective best practices to address the board's objectives and serve our

Have you ever served on a Flagler County appointed Board/Committee?

No       Yes, if so, please identify those on which you have served:

Advisory Board / Committee	Dates Served
<u>Public Safety Coordinating Committee</u>	<u>2022-2024</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>

Education: BA - Organizational Management; SPI - Command Officer

Business (name & type): Bunnell Police Department

Business Address: P.O. Box 756, Bunnell, FL 32110

Business Phone: 386-437-7508 Position: Chief of Police

Applicable Professional Organization Memberships:

International Association of Chiefs of Police  
Florida Police Chiefs Association

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:

Please see attached.

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.

**David Brannon**

Digitally signed by David Brannon  
Date: 2024.12.02 13:33:56 -05'00'

12/02/2024

Applicant Signature

Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)

*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**

# DAVID F. BRANNON II

105 San Marino Lane ♦ DeLand, Florida 32724 ♦ Phone: (386) 747-9001 ♦ dfbrannon2home@gmail.com

## EXPERIENCE

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<b>CITY OF BUNNELL, FLORIDA</b> <i>Chief of Police</i>	FEB 2022 TO PRESENT
<b>MBI DIRECT MAIL</b> <i>National Sales Advisor</i>	AUG 2019 TO FEB 2022
<b>SENIOR BENEFITS &amp; SAVINGS, LLC</b> <i>Owner – Self-employed</i>	MAY 2021 TO DEC 2021
<b>GRACE (GODLY RESPONSE TO ABUSE IN THE CHRISTIAN ENVIRONMENT)</b> <i>Case Manager</i>	APR 2018 TO APR 2021
<b>VOLUSIA COUNTY SHERIFF'S OFFICE</b> <i>Captain, Lieutenant, Sergeant, Investigator, Field Training Officer, Deputy Sheriff II</i>	OCT 1993 TO JUL 2019
<b>COCOA BEACH POLICE DEPARTMENT</b> <i>Communications Officer, Community Service Officer</i>	MAY 1989 TO DEC 1992

## EDUCATION

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<b>CHIEF EXECUTIVE SEMINAR – 56TH SESSION</b> <i>Florida Department of Law Enforcement</i>	2023 Tallahassee, Florida
<b>COMMAND OFFICERS DEVELOPMENT COURSE – 57TH SESSION</b> <i>Southern Police Institute, University of Louisville</i>	2009 Louisville, Kentucky
<b>BACHELOR OF ARTS, ORGANIZATIONAL MANAGEMENT</b> <i>Warner University</i>	2004 Lake Wales, Florida
<b>FLORIDA CJSTC BASIC LAW ENFORCEMENT CERTIFICATION</b> <i>Eastern Florida State College</i>	1993 Melbourne, Florida
<b>HIGH SCHOOL DIPLOMA</b> <i>Cocoa Beach High School</i>	1989 Cocoa Beach, Florida

## HONORS & AWARDS

---

Service Above Self Commendation by Bunnell Police Department	2024
“Lest We Forget” Community Service Award by the Santa Maria Del Mar Catholic Church	2023
Unit Commendation Bar awarded by Sheriff Mike Chitwood	2019
Community Service Bar awarded by Sheriff Mike Chitwood	2018
Sheriff's Award for Hurricane Irma Response by Sheriff Mike Chitwood	2017
Unit Commendation Bar awarded by Sheriff Mike Chitwood	2017
Unit Commendation Bar awarded by Sheriff Ben F. Johnson	2015
Unit Commendation Bar awarded by Sheriff Ben F. Johnson	2015
Point of Light Award for Volusia Honor Air	2012
Volusia League of Cities Public Safety Employee of the Year Nominee	2012
Distinguished Service Citation presented by Rotary District 6970 Governor Cynde Covington	2011
Gold Volunteer Service Award presented by the President of the United States Barack Obama	2010
Rotary International Presidential Citation presented by President John Kenny	2010
Premier Rotary Club Award presented by Rotary District 6970 Governor Dave Faraldo	2010
Rotarian of the Year presented by the Rotary Club of DeLand	2008
Service Above Self Award presented by the Rotary Club of DeLand	2007
Sheriff's Commendation Bar awarded by Sheriff Ben F. Johnson	2009

# DAVID F. BRANNON II

105 San Marino Lane ♦ DeLand, Florida 32724 ♦ Phone: (386) 747-9001 ♦ dfbrannon2home@gmail.com

Unit Commendation Bar awarded by Sheriff Ben F. Johnson	2003
Law Enforcement Officer of the Year awarded by the Deltona Elks Lodge	1998
Law Enforcement Officer of the Year awarded by the American Legion	1996
Unit Commendation Bar awarded by Sheriff Robert L. Vogel, Jr.	1995
Young Adult Citizen of the Year, Cocoa Beach Optimist Club	1989
Explorer of the Year, Cocoa Beach Police Department	1987

## SKILLS & TRAINING

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### *Command & Management*

SPI Command Officers Course	Line Supervision
DHS Threat & Risk Assessment	Managing the Patrol Function
FDLE Advanced Leadership	Developing Law Enforcement Managers
Middle Management	Leadership DeLand

## PROFESSIONAL ASSOCIATIONS & COMMUNITY SERVICE

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<b>FLAGLER COUNTY VETERANS DAY PARADE</b> Chairman	2023 to Present
<b>FLORIDA POLICE CHIEFS ASSOCIATION</b> Legislative Committee Member; Co-Chair 2024 to Present	2022 to Present
<b>FLAGLER COUNTY PUBLIC SAFETY COORDINATING COMMITTEE</b> Committee Member	2022 to Present
<b>BOYS &amp; GIRLS CLUB OF VOLUSIA – FLAGLER COUNTIES</b> Board of Directors	2022 to Present
<b>CRIME STOPPERS OF NORTHEAST FLORIDA</b> Board of Directors	2022 to Present
<b>FLAGLER SHERIFF'S POLICE ATHLETIC LEAGUE</b> Board of Directors	2022 to Present
<b>G.W. CARVER GOVERNANCE BOARD</b> Vice-Chairman Board of Directors	2023 to Present
<b>VOLUSIA-FLAGLER POLICE CHIEFS ASSOCIATION</b> Parliamentarian	2023 to Present
<b>DEPARTMENT OF JUVENILE JUSTICE CIRCUIT 7 ADVISORY BOARD</b> Board Member	2023 to Present
<b>VCISO CHARITY COMMITTEE, INC.</b> President (2007-08), Treasurer (2006-07), Fundraising Chair (2006-08, 2015-19)	1994 to 2019
<b>VOLUSIA COUNTY MULTI-CULTURAL TASK FORCE</b> Committee Member	2006-07
<b>ROTARY INTERNATIONAL/ CLUB OF DELAND</b>	2005 to 2023

**Club:** President (2009-10), Vice-President (2010-11), Secretary (2008-09), Board of Directors (2006-20), Volusia Honor Air Founding Member (2008-12), Newsletter Editor (2009-12), Co-Chairman Florida in February Fundraising Barbecue Contest (2022)

**District 6970:** Chairman, Rotary Youth Leadership Awards (RYLA) (2006-08); Newsletter Editor (2009-12)



Flagler County Board of County Commissioners  
Volunteer Advisory Board and Committee  
General Application

PER  
YOUR  
REQUEST

New Application  Reappointment Request

Name: CARLA PRAZERES-REIS Date: 12-5-2024

Mailing Address: Judicial Correction Services  
2729 E. Moody Blvd. Suite 703

Physical Address (if different): Bunnell, FL 32110

County of Residence: FLAGLER Are you a registered voter? YES

Email: CPRAZERESREIS@JUDICIALSERVICES.COM Years in Flagler: N/A

Phone: 386-261-1048  Office  Home  Cell

Phone: \_\_\_\_\_  Office  Home  Cell

Advisory Board/Committee Applying for: COUNTY PROBATION

What aspect of this Board/Committee interests you?

N/A

Describe your training and/or experience that would make you a good fit for this position:

N/A

What contributions do you feel you could make to this Board/Committee should you be selected?

N/A

Have you ever served on a Flagler County appointed Board/Committee?

No  Yes, if so, please identify those on which you have served:

Advisory Board / Committee	Dates Served
<u>currently PSCC</u>	



See your request

Education: \_\_\_\_\_

Business (name & type): \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Position: \_\_\_\_\_

Applicable Professional Organization Memberships:

COUNTY PROBATION

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:

N/A

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.



Applicant Signature

12-5-2024

Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)

*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**



Flagler County Board of County Commissioners
Volunteer Advisory Board and Committee
General Application

New Application Reappointment Request

Name: Christina "Christy" Gillis Date: 12/9/2024

Mailing Address: 210 N Palmetto Ave. Daytona Beach, FL 32114

Physical Address (if different):

County of Residence: Volusia Are you a registered voter? Yes

Email: Christina.Gillis@myflfamilies.com Years in Flagler: 4

Phone: Office Home Cell

Phone: Office Home Cell

Advisory Board/Committee Applying for: Public Safety Coordinating Council

What aspect of this Board/Committee interests you?

I am currently serve on the Board as the DCF Representative. My work currently covers Flagler County as it relates to my current role as the Circuit Community Development Administrator. I have worked in Flagler County for over 20 years with various Social Services Agencies. This board has made a positive impact to individuals that are in need of services.

Describe your training and/or experience that would make you a good fit for this position:

I am currently involved in various committees and programs that involve individuals and families in Flagler County. This includes the Behavioral Health Consortium, Flagler County Disadvantage Transportation Board, Human Trafficking Taskforce, Volusia/Flagler Coalition for the Homeless, Community Alliance and Juvenile Justice Community Advisory Board. I believe that I have a broad understanding of the needs and services in Flaadler County.

What contributions do you feel you could make to this Board/Committee should you be selected?

I believe that I have a background and current working knowledge of the behavioral health system of care and the criminal justice system.

Have you ever served on a Flagler County appointed Board/Committee?

No Yes, if so, please identify those on which you have served:

Table with 2 columns: Advisory Board / Committee, Dates Served. Row 1: Public Safety Coordinating Council, Current.

Education: BA Psychology

Business (name & type): State of Florida, Department of Children and Families

Business Address: 210 N Palmetto Ave. Daytona Beach, FL 32114

Business Phone: 386-214-8646 Position: Community Development Administrator

Applicable Professional Organization Memberships:

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.

  
Applicant Signature

12/9/2024  
Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)

*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**

**Gopie, Sheri**

---

**Subject:** Commissioner assignment to Advisory Board

**From:** Rose Keirnan <[rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov)>  
**Sent:** Tuesday, December 3, 2024 4:39 PM  
**To:** Staly, Rick <[RStaly@flaglersheriff.com](mailto:RStaly@flaglersheriff.com)>  
**Subject:** FW: Commissioner assignment to Advisory Board

MESSAGE FROM You don't often get email from [rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov). [Learn why this is important](#).

**This email originated outside the Flagler Sheriff email system. DO NOT CLICK any links or open any attachments from this email unless you know the sender and know the content is safe.**

Hello Sheriff,

Attached is a letter from Chair Dance regarding the Commissioner(s) appointed to represent Flagler County on your advisory board.

Please update your email / calendar distribution lists to include:  
Commissioner Carney [kcarney@flaglercounty.gov](mailto:kcarney@flaglercounty.gov)  
Commissioner Richardson [prichardson@flaglercounty.gov](mailto:prichardson@flaglercounty.gov)  
Rose Keirnan (Admin Assistant) [rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov)

Thank you,  
Rose

**Rose Keirnan**  
Exec. Admin. Asst. to the Deputy County Administrator and BoCC

E: [rkeirnan@flaglercounty.gov](mailto:rkeirnan@flaglercounty.gov) | V: (386) 313-4094 | W: [www.flaglercounty.gov](http://www.flaglercounty.gov)



**Flagler County Board of County Commissioners**  
1769 E. Moody Blvd, Bldg #2  
Bunnell, FL 32110



***The mission of Flagler County is to provide high-quality services through a responsive workforce committed to excellence, integrity, in collaboration with the cities and to act as a fiscally responsible steward.***

**Rose Keirnan**  
Exec. Admin. Asst. to the Deputy County Administrator and BoCC



**Flagler County Board of County Commissioners  
Volunteer Advisory Board and Committee  
General Application**

New Application       Reappointment Request

Name: Danielle Moye      Date: 12/11/2024

Mailing Address: 4600 E. Moody Blvd 19M, Bunnell, FL 32110

Physical Address (if different): \_\_\_\_\_

County of Residence: Flagler      Are you a registered voter? Yes

Email: moyedanielle4@gmail.com      Years in Flagler: 10

Phone: 386-283-0788       Office     Home     Cell

Phone: 386-586-2740       Office     Home     Cell

Advisory Board/Committee Applying for: Consumer of Substance Abuse Services

What aspect of this Board/Committee interests you?

I am interested in this board because of the significant impact it has on our community. I am passionate about ensuring individuals receive the care and support necessary for recovery from mental health challenges and addiction, fostering a healthier and stronger community for everyone.

Describe your training and/or experience that would make you a good fit for this position:

I have been a Certified Recovery Peer Specialist in Florida for four years, during which I have gained extensive experience working directly with individuals recovering from addiction and mental health challenges. For over two years, I have been employed within the Flagler Jail, where I have focused on providing recovery support, facilitating resources, and guiding individuals toward community programs to support their ongoing journey to wellness.

What contributions do you feel you could make to this Board/Committee should you be selected?

I feel my contributions to this board would include advocating & representing individuals with addiction and mental health challenges, while offering valuable insight into strategies that are effective in addressing their needs.

Have you ever served on a Flagler County appointed Board/Committee?

No       Yes, if so, please identify those on which you have served:

Advisory Board / Committee	Dates Served
<u>Public Safety Coordinating Council</u>	<u>12/31/20 - Present</u>
_____	_____
_____	_____

Education: High School Diploma, Certified Recovery Peer Specialist

Business (name & type): EPIC Behavioral Healthcare

Business Address: 2323 N State St UNIT 57, Bunnell, FL 32110

Business Phone: (386) 309-8083 Position: Certified Recovery Peer Specialist

Applicable Professional Organization Memberships:

As an applicant, you are encouraged to provide additional information (including a cover letter and/or resume) to better explain your qualifications for the position for which you are making application. This information will aid in the decision of the County Commission when making appointments.

Additional Information you wish to share:

I faced addiction as both a woman and a mother for over a decade, but the treatment services available in Flagler County transformed my life. In 2018, I sought treatment at WARM and accessed many other invaluable resources that supported both me and my children. Having experienced addiction and the journey of recovery firsthand, it has been an honor to serve on this board alongside such dedicated individuals. I look forward to the opportunity to continue contributing for another four years.

If appointed, I will attend meetings in accordance with the adopted policies of Flagler County. If at any time my business or professional interests' conflict with the interests of the Advisory Board or Committee, I will sign the appropriate (Form 8B) and excuse myself from participating in such deliberations. I understand that if appointed, I will serve at the pleasure of the Board of County Commissioners.

  
Applicant Signature

12/11/2024

Date

Email Application To: [LDance@FlaglerCounty.gov](mailto:LDance@FlaglerCounty.gov)

*\*Please note a hard copy is not required.*

Flagler County BOCC  
Attn: Administration  
1769 E. Moody Blvd., Building 2, Suite 302, Bunnell, FL 32110

**Additional Questions: (386) 313-4001**

# Flagler County

## YEAR-TO-DATE BUDGET REPORT



FOR 2025-99

ACCOUNTS FOR:	ORIGINAL APPROP	TRANSFERS/ADJUSTMENTS	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USE/COL
1196 Crime Prevention Fund							
<u>0000 Non-Division</u>							
1196-001-0000-0000000-390-00-000-000-398000-	0	5% statutory Reduction	0	.00	.00	.00	.0%
1196-001-0000-0000000-390-00-000-000-399000-	-118,591	Other Sources-Fund Bal Fwd	-118,591	.00	.00	-118,591.00	.0%
1196-001-0000-359000-350-00-000-000-359006-	-29,000	Crime Prevention	-29,000	-4,836.29	.00	-24,163.71	16.7%
1196-001-0000-361200-360-00-000-000-361201-	0	Fair Value of Investments	0	532.78	.00	-532.78	100.0%
1196-001-0000-361100-360-00-000-000-361100-	-150	Misc-Interest	-150	.00	.00	-150.00	.0%
TOTAL UNDEFINED ROLLUP CODE	-147,741	0	-147,741	-4,303.51	.00	-143,437.49	2.9%
TOTAL Non-Division	-147,741	0	-147,741	-4,303.51	.00	-143,437.49	2.9%

# Flagler County



## YEAR-TO-DATE BUDGET REPORT

FOR 2025 '99

ACCOUNTS FOR: 1196 Crime Prevention Fund

5000 Reserves

TOTAL OT1196Reserves

1196-150-5000-000000-590-00-000-598010-

TOTAL OT1196Reserves

TOTAL Reserves

ACCOUNTS FOR:	ORIGINAL APPROP	TRANSFERS/ADJUSTMTS	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USE/COL
5000 Reserves							
TOTAL OT1196Reserves	136,541	Reserve - Contingency -39,000	97,541	.00	.00	97,541.00	.0%
1196-150-5000-000000-590-00-000-598010-	136,541	-39,000	97,541	.00	.00	97,541.00	.0%
TOTAL Reserves	136,541	-39,000	97,541	.00	.00	97,541.00	.0%



# Flagler County



## YEAR-TO-DATE BUDGET REPORT

FOR 2025-99

ACCOUNTS FOR:	ORIGINAL APPROP	TRANSFRS/ADJUSTMTS	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USE/COL
1196 Crime Prevention Fund							
<b>9210 Law Enforcement Education</b>							
<b>00104 GR1196Law Enf Ed</b>							
1196-149-9210-521800-520-52-000-000-582000-	0	Aids to Private Organization 20,000	20,000	3,333.34	16,666.66	.00	100.0%
<b>TOTAL GR1196Law Enf Ed</b>	0	20,000	20,000	3,333.34	16,666.66	.00	100.0%
<b>00104 OP1196Law Enf Ed</b>							
1196-149-9210-521300-520-52-000-000-531000-	100	Professional Services 0	100	.00	.00	100.00	.0%
1196-149-9210-521300-520-52-000-000-549005-	100	Bank Analysis Fees 0	100	.00	.00	100.00	.0%
1196-149-9210-521800-520-52-000-000-534006-	0	other Contracted Services 0	0	.00	.00	.00	.0%
1196-149-9210-521800-520-52-000-000-534013-	0	IT other Contracted services 0	0	.00	.00	.00	.0%
<b>TOTAL OP1196Law Enf Ed</b>	200	0	200	.00	.00	200.00	.0%
<b>00104 OT1196Law Enf Ed</b>							
1196-149-9210-521800-520-52-000-000-581004-	11,000	Budget for PAL Aid to other Governments 19,000	30,000	10,000.00	.00	20,000.00	33.3%
<b>TOTAL OT1196Law Enf Ed</b>	11,000	19,000	30,000	10,000.00	.00	20,000.00	33.3%
<b>TOTAL Law Enforcement Education</b>	11,200	39,000	50,200	13,333.34	16,666.66	20,200.00	59.8%
<b>TOTAL Crime Prevention Fund</b>	0	0	0	9,029.83	16,666.66	-25,696.49	100.0%
<b>TOTAL REVENUES</b>	-147,741	0	-147,741	-4,303.51	.00	-143,437.49	
<b>TOTAL EXPENSES</b>	147,741	0	147,741	13,333.34	16,666.66	117,741.00	

# Flagler County



## YEAR-TO-DATE BUDGET REPORT

FOR 2024-99

ACCOUNTS FOR:	ORIGINAL APPROP	TRANSERS/ADJUSTMTS	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USE/COL
1196 Crime Prevention Fund							
<b>0000 Non-Division</b>							
1196-001-0000-000000-390-00-000-000-398000-	0	5% Statutory Reduction	0	.00	.00	.00	.0%
1196-001-0000-000000-390-00-000-000-399000-	-100,244	Other Sources-Fund Bal Fwd	-113,942	.00	.00	-113,942.00	.0%
1196-001-0000-359000-350-00-000-000-359000-	-29,000	Crime Prevention	-29,000	-33,209.93	.00	4,209.93	114.5%
1196-001-0000-361200-360-00-000-000-361201-	0	Fair Value of Investments	0	-156.53	.00	156.53	100.0%
1196-001-0000-361100-360-00-000-000-361100-	-150	Misc-Interest	-150	-6,232.95	.00	6,082.95	4155.3%
TOTAL UNDEFINED ROLLUP CODE	-129,394		-143,092	-39,599.41	.00	-103,492.59	27.7%
TOTAL Non-Division	-129,394		-143,092	-39,599.41	.00	-103,492.59	27.7%

# Flagler County



## YEAR-TO-DATE BUDGET REPORT

FOR 2024 '99

ACCOUNTS FOR: 1196 Crime Prevention Fund

ORIGINAL APPROP	TRANSFERS/ADJUSTMENTS	REVISED BUDGET	YTD. ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT. USE/COL.
<b>5000 Reserves</b>						
<b>T0150-0T1196reserves</b>						
1196-150-5000-0000000-590-00-000-000-598010-	Reserve - Contingency 13,698	112,892	.00	.00	112,892.00	.0%
TOTAL OT1196Reserves	13,698	112,892	.00	.00	112,892.00	.0%
TOTAL Reserves	13,698	112,892	.00	.00	112,892.00	.0%

# Flagler County

## YEAR-TO-DATE BUDGET REPORT



FOR 2024 - 99

ACCOUNTS FOR:	ORIGINAL APPROP	TRANSFERS/ADJUSTMENTS	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USE/COL
1196 Crime Prevention Fund							
<b>9210 Law Enforcement Education</b>							
<b>60104 GR1196Law Enf Ed</b>							
1196-149-9210-521800-520-52-000-000-582000-	0	Aids to Private Organization	20,000	20,000.00	.00	.00	100.0%
TOTAL GR1196Law Enf Ed	0	20,000	20,000	20,000.00	.00	.00	100.0%
<b>00104 Op1196Law Enf Ed</b>							
1196-149-9210-521300-520-52-000-000-531000-	100	Professional Services	0	.00	.00	100.00	.0%
1196-149-9210-521300-520-52-000-000-549005-	100	Bank Analysis Fees	0	.00	.00	100.00	.0%
1196-149-9210-521800-520-52-000-000-534006-	0	other Contracted Services	0	.00	.00	.00	.0%
1196-149-9210-521800-520-52-000-000-534013-	0	IT other Contracted Services	0	.00	.00	.00	.0%
TOTAL OP1196Law Enf Ed	200	0	200	.00	.00	200.00	.0%
<b>00104 OT1196Law Enf Ed</b>							
1196-149-9210-521800-520-52-000-000-581004-	30,000	Aid to other Governments	10,000	10,000.00	.00	.00	100.0%
TOTAL OT1196Law Enf Ed	30,000	-20,000	10,000	10,000.00	.00	.00	100.0%
TOTAL Law Enforcement Education	30,200	0	30,200	30,000.00	.00	200.00	99.3%
TOTAL Crime Prevention Fund	0	0	0	-9,599.41	.00	9,599.41	100.0%
TOTAL REVENUES	-129,394	-13,698	-143,092	-39,599.41	.00	-103,492.59	
TOTAL EXPENSES	129,394	13,698	143,092	30,000.00	.00	113,092.00	

Flagler County Board of County Commissioners  
 Crime Prevention Fund

**FY25 PSC GRANT DISPURSEMENT \$39,000**  
 Aid to Private Organization - \$20,000 EPIC  
 Aid to Other Governments - \$30,000 → \$11,000 FCSO PAL  
 \$19,000 Flagler Technical College

	FY22	FY23	FY24	FY25
<b>Crime Prevention Revenue</b>				
1196-001-0000-359000-350-00-000-000-359006-	29,472.05	32,077.94	33,209.93	4,836.29
1196-001-0000-361200-360-00-000-000-361201-	(629.33)	1,005.58	156.53	(532.78)
1196-001-0000-361100-360-00-000-000-361100-	367.59	2,402.90	6,232.95	-
<b>Total</b>	<b>29,210.31</b>	<b>35,486.42</b>	<b>39,599.41</b>	<b>4,303.51</b>
<b>Expense</b>				
Aid to Other Govt	47,940.00	-	10,000.00	30,000.00
Aid s to Private Org	-	-	20,000.00	20,000.00
Prof. Svcs	29.68	2.35	-	-
Bank Analysis	40.00	-	-	-
Other Contracted	-	41,000.00	-	-
<b>Total</b>	<b>48,009.68</b>	<b>41,002.35</b>	<b>30,000.00</b>	<b>50,000.00</b>
	<b>120,607.00</b>	<b>115,091.07</b>	<b>124,690.48</b>	<b>78,993.99</b>

Grants to be paid out

**FY23**

**Monthly Revenue Breakdown:**

Oct-22	\$ 2,664.00
Nov-22	\$ 1,991.41
Dec-22	\$ 2,061.06
Jan-23	\$ 3,022.43
Feb-23	\$ 2,758.36
Mar-23	\$ 3,332.23
Apr-23	\$ 2,752.56
May-23	\$ 3,141.03
Jun-23	\$ 2,832.00
Jul-23	\$ 2,158.42
Aug-23	\$ 2,727.89
Sep-23	\$ 2,636.56
<b>Total</b>	<b>\$32,077.95</b>

**FY25**

**Monthly Revenue Breakdown:**

Oct-24	\$ 3,046.88
Nov-24	\$ 1,789.41
Dec-24	-
Jan-25	-
Feb-25	-
Mar-25	-
Apr-25	-
May-25	-
Jun-25	-
Jul-25	-
Aug-25	-
Sep-25	-
<b>Total</b>	<b>\$ 4,836.29</b>

**FY24**

**Monthly Revenue Breakdown:**

Oct-23	\$ 2,436.18
Nov-23	\$ 2,836.09
Dec-23	\$ 2,170.89
Jan-24	\$ 2,741.43
Feb-24	\$ 2,783.70
Mar-24	\$ 3,210.16
Apr-24	\$ 3,496.59
May-24	\$ 2,530.68
Jun-24	\$ 2,659.19
Jul-24	\$ 3,012.42
Aug-24	\$ 2,514.42
Sep-24	\$ 2,818.18
<b>Total</b>	<b>\$33,209.93</b>