



## **MHSA INNOVATION 10 PROJECT**

### **Removing Barriers to Mental Health Optimization, Through A Suite of On-Demand Services**

#### **The Innovation**

On-Demand Services (ODS) encompass digitally based marketplaces offering timely and convenient access to goods and services for clients who would normally not have access to fresh food and other goods and service that are critical drivers of recovery. The on-demand economy is growing rapidly and expanding into new industries. While many consumers served by the Los Angeles County Department of Mental Health (LACDHM) have access to the technology (a device with Internet access) necessary to engage in the on-demand economy, they under-utilize these services due to income and housing status barriers, such as lacking a proper shipping address or the resources necessary to enter the marketplace. This project aims to eliminate those barriers so they can participate in the on-demand economy to access a broader array of goods and services that will support their wellness and recovery. Additionally, this project aims to improve the logistical infrastructure to provide goods and services more efficiently than before.

#### **The On Demand Array of Products**

ODS will be provided to DMH clients living in supportive housing as an augmentation to the services being offered in their individualized service plan. Clients in the Department of Mental Health (DMH) housing programs will have access to ODS goods and services through an application service, which they and their case management and treatment team will be trained in accessing. These ODS good and services include:

- Access to convenient self-service parcel delivery lockers
- On-demand delivery of healthy produce
- On-demand delivery of supplies to meet a client's basic needs
- Delivery based full-service pharmacy that sorts medications (including vitamins, supplements, and over-the-counter medications) by the dose and delivers to the client's door.
- On-demand home services (cleaners, handyman, plumbers, and/ or other home service providers)
- On-demand wash and fold laundry service that picks up dirty laundry, cleans it, and delivers it back to its owners
- As learning occurs throughout the project, goods and services indicated as needed and/or to no longer indicated, will be adjusted to accommodate the needs of LACDMH clients in the program.

Resources will be available to outreach workers and consumers through self-service parcel lockers strategically placed throughout Los Angeles County. Service providers in the field will have access to the

self-service parcel lockers to obtain critical items to meet the clients' basic needs and to remove barriers to wellness. Clients who experience homelessness will be able to utilize self-service parcel lockers to receive goods from vendors in the on-demand economy. Self-service parcel lockers in certain locations will have 24-hour accessibility to further assist service providers. This offers clients timely resources to those who may not otherwise have access to critical goods and services including emergency clothing, shoes, medication refills, and access to healthy produce.

### **Innovation Criteria**

This project will increase access to supportive On-Demand services to underserved groups by reducing barriers to engaging in the on-demand economy. This project provides an opportunity to transform the system-centered, brick and mortar model of helping clients access goods and services that optimize recovery from mental illness through the four walls of a clinic to a person centered, on-demand model of service delivery. Leveraging the goods and services from the on-demand economy will provide an opportunity to individualize care on a larger scale. Consumers that become well versed in navigating the digital platforms (web and smartphone based) to participate in the on-demand economy will be empowered to tailor the goods and services they need to support their unique journey towards mental wellness. The skills acquired in learning how to use on-demand services are generalizable to other digital platforms, empowering end-users with skills to access additional information and services that support wellness. The innovation projection would include contracting with vendors providing a multitude of services.

### **Primary Purpose**

Introduces a new application to the mental health system of a promising community-driven practice or an approach that has been successful in a non-mental health context or setting.

The on-demand economy is rapidly growing, expanding into new industries, and becoming a ubiquitous part of the marketplace. Other industries are utilizing the on-demand economy to support the well-being of the people they support. Currently, there is a disparity in access to the goods and services available in the on-demand economy. This project will improve the capacity of our system to integrate on-demand goods and services and open the door to new partnerships as a client takes step to live independently and take steps in one's recovery journey to utilize resources available to the general public. ODS will become an integral part of the Department of Mental Health's (DMH) infrastructure, utilizing innovative technology designed to bring more access to goods and services for populations that have historically experienced a digital divide. This Innovation project aims to increase immediate and timely access to needed resources, removing barriers to access, and closing the digital divide between our mental health service providers and the clients we serve throughout Los Angeles County.

### **Project Length**

The proposed project length is three years. During year one, DMH will develop the infrastructure and procedures necessary to implement the use of ODS with clients and providers. This will include the

installation of self-service parcel units at strategically located access points. These units will allow clients to receive critical documents through the mail to secure and easily accessible locations. Supplies will also be sent to units for outreach and crisis teams to access basic needs for clients in the community. Additionally, training on the digital platforms necessary to procure goods and services will be offered to service providers and consumers. During year two and three, DMH will continue to facilitate and assist clients/consumers of ODS in continued self-reliant access, education, and usage.

### **Target Population**

Target populations include clients in supportive housing and clients experiencing homelessness. Additionally, ODS clients will include those who may need immediate or emergency services such as groceries, clothing or shoes, and/or immediate medication. Two hundred clients in supported housing will be identified on an annual basis for participation in the ODS program, through their supportive housing teams. Providers in supportive housing programs will identify clients who would most benefit from accessing services in the on-demand economy to be included in the pilot project during year one. In years, two and three, DMH will continue to assess and identify clients to use the On-Demand Suite of services, through continued communication and collaboration with supportive housing teams. Additional supports will also be offered through outreach and engagement teams to provide supplies at needed to homeless individuals.

### **Making a Case for the ODS Project**

This innovation project aims to reduce the disparity in access to goods and services consumers in the community mental health system face. This innovation project provides an opportunity to adapt service delivery models to meet the individual's needs. The system of care needs to adapt and search for ways to improve the supply chains and digital infrastructure to deliver goods and services more quickly. Many of the underserved communities in our county reside in "resource deserts" and/or lack access to goods and services to support their wellness and recovery.

The mobilization of on-demand services to smartphones and other devices facilitates the transformation of services beyond the walls of traditional community mental health facilities, and into the homes and everyday lives of the clients, we serve.

### **How the project meets the Values of MHSA**

This project will improve the ability of the system to provide individualized, person centered care by increasing access to mental health services and removing barriers to care. In particular, the project will meet the following values:

**Client and Family Driven:** ODS will increase clients and their family's ability to personalize services. Resulting in an increase in client's autonomy and development of access to the goods and services available from the on-demand economy. This supports the continual growth in clients and family use of technology to assist in day-to-day functioning, and to increase clients' quality of life. ODS provides full implementation to a host of access to goods and services through for the client and her/his family, as

appropriate. The ODS helps clients and families develop an individualized plan of services determined by the individual's goals, strengths, needs.

**Cultural Competence:** Cultural competence is included in the ODS plan. ODS allows for client customization with the expansion of goods and services to diverse populations to more adequately reflect dimensions of multiculturalism in LA Counties to minimize and eliminate disparities in accessibility and availability of mental health services. ODS will implement goods and services that are more culturally and linguistically viable using technology that reflect clients and families culture, race, ethnicity, age, gender, sexual orientation and religious/spiritual beliefs.

**Community Collaboration:** DMH will solidify partnerships with viable community resources directly to leverage the ODS cutting-edge infrastructure that will improve access to care and provide more robust community-based service across the County. This project will open doors to more community collaboration providing access to goods and services.

**Service Integration:** ODS will also include partnerships with other respected community agencies to better serve clients with service integration that meets the current needs of clients for increased access to care, goods and services while aiming at closing the digital divide. ODS service providers will include outreach staff from specialized programs to provide crisis triage with access to needed goods such as emergency, groceries, clothing, shoes, or medication.

**Focus on Recovery:** ODS will be part of a wellness-movement toward whole person care by closing the digital divide and assisting clients with access to healthy produce, emergency clothing and shoes, and immediate medication refills. DMH is highly focused on helping clients get their mental health needs met with access to technology that assists them throughout their journey toward increased recovery and wellness.

### **Goals of the Project**

The primary goal of ODS is to support clients and their families in their wellness journey toward: resilience, respect, personal empowerment, social connectedness, personal responsibility, through DMH service providers, community partnerships and educators, with an innovative technology driven wellness approach. ODS applications will allow clients to become more resilient and self-sufficient by providing access to a technological education and psychoeducation of comprehensive care through nutritional wellness.

It is projected, with the introduction of the ODS project and the provision of a suite of On-Demand Services to increase access to much needed goods and services to communities served, through the removal of removing barriers to mental health optimization, the above will be realized. In particular, goals of the ODS suite include increasing the geographic proximity of goods and services, increase highly individualized and personalized services, decrease and/or remove barriers to access to care by providing timely and immediate crisis goods and services. ODS goals are in alignment with increased client autonomy, self-reliance, digital literacy, individualized/multicultural personalized mental health services, medication compliance, quality of life, and mental health wellness goals.

## Overarching Learning Questions and Evaluation Design

It is hypothesized that this project will help break down barriers and increase access to care and promote wellbeing. Access to ODS will lead clients to an increased quality of life, increased medication compliance, improved functioning, increased social engagement, increased report in meaningful life activities, reduced mental health impairments, decrease in mental health symptoms, and lead ODS clients toward a gateway of whole person care. Thus, ODS aims to improve the health and mental health outcomes in DMH clients with the use of technology.

DMH will evaluate the ODS suite by collecting outcomes from learning questions in the following areas:

1. Will participants in the project report improvements in multiple domains related to wellness?
  - Upon enrollment into the pilot, providers will administer an instrument measuring well-being to gather the client's baseline measurements of multiple domains of well-being. The provider will administer the measure quarterly to track changes in multiple domains of well-being. (Such as the WHOQOL). The Department is also presently developing a tool to measure well-being, which will be considered as well, based on completion of the tool.
  - Will Milestones of Recovery (MORS) scores for clients increase as a result of participation in this project?
2. Will underserved populations who are consumers of the ODS report increased access to goods and services?
  - LACDMH will measure these essential learning questions through a bi-annual questionnaire to consumers who are in the ODS. The evaluation will include using both pre and post-test measures to assess the data outcomes to determine if the learning goals and objectives were met.
  - Was there a secondary, gain from access to vitamins and minerals, as well a fresh produce and services, which improved basic health outcomes? The following measures will be collected upon enrollment and on a quarterly basis:
    - Weight
    - Blood pressure
    - Cholesterol
    - BMI
    - Blood Sugars, etc.
3. Will the ODS model show an increase digital literacy to the consumers we serve?
  - Quarterly pre/post questionnaires will be collected and at any training/learning instruction to measure the level of improvement in digital literacy.
4. Did medication compliance improve with the introduction of individualized packaging?
  - This will be tracked through monthly inquiries to clients, their doctors and the pharmacy company to ensure medication was delivered. To determine:
    - Was delivery helpful in easy access?
    - Was the bubble packing convenient, and were you more likely to take medication due to easy access?

- Did symptoms decrease, and do you think that was secondary to improved compliance?
  - Did your participation in or initiation of wellness related activities increase, do you believe that was due to improved compliance? etc.
5. Will the ODS economy show an increase in individualized, personalized, multicultural care clients receive?
- A comparison will be made on client access to services and supports across cultures and designated areas within the program on a quarterly basis. Are the resources available, and accessed equal across cultural/ethnic groups, including those living in resource deserts?
  - Were individualized multicultural Mental Health Services increased by access being made to individuals and families to tailor their needs for MH and wellbeing services in the on-demand economy?
  - Was access increased to on-demand goods and services for underserved populations?
6. Will the ODS show a decrease in barriers to mental health services and wellness services?
- ODS clients will be compared to other clients across the Department, as to the level of access they have to obtaining those services needed. Such as:
    - Length of time to access an appointment,
    - Amount of time it takes to receive medication,
    - Length of time to obtain lab results, etc.
  - Will those clients digitally connected to their providers report improved services, as opposed to access to services when they were not digitally connected? A self-report will be collected on a quarterly basis from project participants.
    - Did they improve attendance to mental health and health services; was this due to reminders being sent for all appointments?

Throughout the three-year implementation of the ODS the department will focus on continuous avenues to increase access to on-demand services and reduce the digital divide, including addressing barriers to implementation. As with all components of MHSA, implementation and preliminary outcomes reviewed with LACDMH's SLT periodically and reported upon through the MHSA Annual Updates/MHSA Three Year Program and Expenditures Plan. Results are reflective of a set of common measures, record review, as well as data specific to the project.

### **Program Design and Training**

The ODS suite will be designed by the Program Development and Outcomes Bureau interdisciplinary clinical and administration teams. ODS training will be part of each participant's treatment plan to learn and master the use of on-demand services. Housing specialists and teams involved in providing services to these participants will include assistance with their client's on-demand skills.

Providers and/or Resident Service Coordinators will identify clients living in supportive housing to participate in the pilot. Providers will update the clients individualized service plan to integrate the use

of on-demand services. Providers will hold trainings in groups and individually for mental health consumers to orient them to using on demand services.

### **Stakeholder Involvement in Proposed Innovation Project**

The LACDMH Program Development and Outcomes Bureau (PDOB) began the outreach and development of the INN Pipeline Group in December of 2017. In an effort to expedite the creation and implementation of INN projects in Los Angeles County, the group was established. A “quick guide” to INN guidelines and an “INN feedback form” were developed and posted on the LACDMH website in early January, to cast a wide net, and encourage countywide participation and feedback. The form remains posted, in a click and submit format, thus upon completion it is sent directly to the bureau and taken to the pipeline for review and discussion. Both the pipeline group and feedback form provide ongoing and diverse stakeholder input, feedback and contribution. The pipeline group initially met January 9<sup>th</sup>, 2018, and has met on the following dates, 1/23, 2/6 and 13, 3/6 and 20, 4/3 and 5/1, 5/29 and will continue to meet ongoing, at least monthly, with meetings scheduled to the end of the calendar year. To date, 31 proposals have been submitted, the TT proposal was presented on 1/23 and 2/20 and vetted at the 2/20 pipeline group. Six (6) proposals referred to the PEI division for consideration and development. Seven (7) proposals did not meet INN requirements. Two (2) proposals forwarded to veteran subject matter experts, as they dealt with intricate programming and the group wanted to ensure proposals are accurate, to meet the needs for this population. The group continues to refine and develop two (2) proposals for re-discussion and vetting. At this time, the group’s focus is on the development of the ten (10) proposals submitted in the AB 114 spending plan. Many of the proposals in development are a compilation of several initial submissions, into one proposal.

Presentations made to the System Leadership Team (SLT) in both January and April of 2018, generated useful feedback and suggestions. These discussions, intended to both, encourage participation and gain input into the Pipeline group, as well as share the posted AB 114 INN proposed spending plan (posted 03/23/2018). Both groups are composed of diverse community stakeholders, county staff, family members and individuals who receive mental health services in Los Angeles County. Further stakeholder involvement was stimulated through discussion and distribution of INN pipeline information and feedback forms to the following groups for presentation: The Client Advisory Board Meeting, The Peer Resources Center, The Disability Underserved Cultural Community Meeting/Group, Service Area Advisory Committee (SAAC) Chairs, NAMI Chairs, and the Program Manager III’s to inform various clinics across the county.

Development of this proposal includes a number of interviews with subject matter experts in the field, listed below, and continued research regarding on-demand services. The INN Team presented to the Underserved Cultural Communities Group on 5/14 and the Cultural Competency Committee meeting on 6/13, in an effort to bridge with LA’s diverse cultures and communities and ensure the needs and concerns of the diverse cultures in LA are weaved throughout the develop and implementation of projects. Work with these groups will continue ongoing at the community level, through the implementation phase.

The following is a list of key subject matter experts who engaged during the information gathering process to provide useful information for the development, design, and implementation of this project.

- a) GoLocker: Groom Dinkneh, Vice President Business Development
- b) GoLocker: Nigel Thomas, Founder
- c) Groceryships: Lauren Rejvani, Digital Operations
- d) Groceryships: Dana Rizer, Executive Director
- e) Imperfect Produce: Carola Di Poi, Los Angeles Outreach Administrator
- f) Platejoy: Nicole Villeneuve, Recipe Design Director
- g) Citypak: Ron Kaplan, Founder
- h) Lava Mae: Paul Asplund, Director of Partnerships and Development
- i) Lava Mae: Vanessa Wellmann, Senior Consultant
- j) UdeMy for Business: Sorcha Egan, Workplace Learning Specialist
- k) Concrn: Jacob Savage, Program Director

#### **Timeframe of the Project and Project Milestones**

- April 18, 2018: LACDMH System Leadership Team Presentation
- June 2018: 30 Day Public Posting of Proposed Project
- August 2018: Presentation of full proposal to the MHSOAC
- September 2018: Request positions and approval of INN funds for county-operated programs and Solicitations Finalized
- By November 2018: Review and approval of solicitation by the Department, County Counsel and Chief Executive Office, Approval of Board Letter (Directly Operated)
- December 2018: Bidder's Conference held, proposals received
- January 2019: Selection and awarding of contracts.
- January-February 2019: Implementation begins for county-operated and contracted agency, starting with identifying clients for the pilot and training providers to use ODS.

This project proposes a three (3) year Innovation project. Upon approval from the Mental Health Services Oversight and Accountability Commission (MHSOAC), the Department will issue solicitation to identify one or more companies with capacity to immediately initiate deliverables of goods and services for this project proposal.

#### **Disseminating Successful Learning**

DMH and ODS will responsibly and appropriately share the findings of this project with providers and the larger community. ODS will also achieve the goal of sustainability over the next two to three years where we will continue to support users of ODS toward their overarching goals of wellness.

Dissemination of learning will be through clinical programs, such as wellness programs, FSP programs and peer programs, including those focusing on employment.



## **Sustainability**

During year one of the ODS, our clients will be provided the proper education and develop the digital literacy to become more independent during years two and three of the ODS project. During year, two and three the goal is for clients to sustain their digital literacy to continue to have access to ODS goods and services. Based on the learning from this project, LACDMH will attempt to acquire funds through RRR dollars, in order to continue and/or expand these established services. If funding is not available, DMH will consider integrating on-demand services into the existing array of services available to clients.

## **Budget Narrative**

The staffing for this project will consist of 1.0 FTE Clinical Psychologist II, who will be responsible for distribution, analysis and reporting of outcomes, along with supporting digital literacy introduction as needed to providers of the project members.

The budget for this project primarily focuses around the cost and type of On Demand Services that will be made available to clients. For instance, the costs for establishing the self-service parcel lockers, training providers and consumers to use on-demand services, and purchasing goods and services from vendors in the on-demand economy. Below indicates the specific needs and costs associated with the project, followed by an attached budget worksheet. **The total MHSAs cost of the project is \$5,383,674.**

### **Estimated last 6 months of FY 2018-19 MHSAs Only Budget: \$1,082,859**

- 16 self-service delivery kiosks, 2 per service area  
Starter Module \$6,900 plus sales tax 9.5%  
Adder module 1 \$2,400 plus sales tax 9.5%  
Adder Module 2 1,500 plus sales tax 9.5%  
\$11,826 per locker = **\$189,216 total for 16 lockers**
- Weekly organic produce delivery, \$25 per client, per week x 200 clients, \$5,000 per week = \$260,000 annually, **\$130,000 for half the fiscal year.**
- Bubble packed vitamin and mineral supplements, \$100 per client, per month for 200 clients, \$20,000 per month = \$240,000 annually, **\$120,000 for half the fiscal year.**
- Laundry Service, \$90 per client, per month for 200 clients, \$18,000 per month = \$216,000 annually, **\$108,000 for half the fiscal year.**
- On-Demand Home Services, \$200 per client, per month for 200 clients, \$40,000 per month = \$480,000 annually, **\$240,000 for half the fiscal year.**
- Supplies to meet a client's basic needs (e.g. emergency clothes, emergency supplies, hygiene products), \$25,000 per service area = **\$200,000 annually, including first 6 months to establish supply base for service areas.**
- Training related costs, (for on demand digital literacy training) Will contract this service out, and will be used as needed. Estimated cost is up to **\$10,000 annually.**
- Evaluation Staff, Clinical Psychologist II, responsible for the collection and tracking of data outcomes, \$171,286, **\$85,643 for half the fiscal year.**

**Estimated Fiscal Year 2019-20 MHSA Only Budget: \$1,700,326 annually**

- Maintenance for self-service delivery kiosks  
\$1440 per year per locker = **\$23,040 for 16 lockers**
- Weekly organic produce delivery, \$25 per client, per week x 200 clients, \$5,000 per week = **\$260,000 annually.**
- Bubble packed vitamin and mineral supplements, \$100 per client, per month for 200 clients, \$20,000 per month = **\$240,000 annually.**
- Laundry Service, \$90 per client, per month for 200 clients, \$18,000 per month = **\$216,000 annually.**
- On-Demand Home Services, \$200 per client, per month for 200 clients, \$40,000 per month = **\$480,000 annually.**
- Supplies to meet a client's basic needs (e.g. emergency clothes, emergency supplies, hygiene products), \$25,000 per service area = **\$200,000 annually**
- Training related costs, (for on demand digital literacy training) Will contract this service out, and will be used as needed. Estimated cost is up to **\$10,000 annually.**
- Additional On-Demand Services, based on learning and the need to augment services, **\$100,000** will be budgeted annually, should the addition and/or expansion of additional on-demand services be indicated.
- Evaluator, Clinical Psychologist II responsible for the collection and tracking of data outcomes, **\$171,286.**

**Estimated Fiscal Year 2020-21 MHSA Only Budget: \$1,700,326 annually**

- Maintenance for self-service delivery kiosks  
\$1440 per year per locker = **\$23,040 for 16 lockers**
- Weekly organic produce delivery, \$25 per client, per week x 200 clients, \$5,000 per week = **\$260,000 annually.**
- Bubble packed vitamin and mineral supplements, \$100 per client, per month for 200 clients, \$20,000 per month = **\$240,000 annually.**
- Laundry Service, \$90 per client, per month for 200 clients, \$18,000 per month = **\$216,000 annually.**
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- Training related costs, (for on demand digital literacy training) Will contract this service out, and will be used as needed. Estimated cost is up to **\$10,000 annually.**
- Additional On-Demand Services, based on learning and the need to augment services, **\$100,000** will be budgeted annually, should the addition and/or expansion of additional on-demand services be indicated.
- Evaluator, Clinical Psychologist II responsible for the collection and tracking of data outcomes, **\$171,286.**

**Estimated first 6 months of FY 2021-22 MHSA Only Budget: \$900,163**

- Maintenance for self-service delivery kiosks, \$1440 per year per locker = \$23,040 for 16 lockers, **\$11,520 for half the fiscal year.**
- Weekly organic produce delivery, \$25 per client, per week x 200 clients, \$5,000 per week = \$260,000 annually, **\$130,000 for half the fiscal year.**
- Bubble packed vitamin and mineral supplements, \$100 per client, per month for 200 clients, \$20,000 per month = \$240,000 annually, **\$120,000 for half the fiscal year.**
- Laundry Service, \$90 per client, per month for 200 clients, \$18,000 per month = \$216,000 annually, **\$108,000 for half the fiscal year.**
- On-Demand Home Services, \$200 per client, per month for 200 clients, \$40,000 per month = \$480,000 annually, **\$240,000 for half the fiscal year.**
- Supplies to meet a client's basic needs (e.g. emergency clothes, emergency supplies, hygiene products), \$25,000 per service area = **\$200,000 annually, including last 6 months of project.**
- Training related costs, (for on demand digital literacy training) Will contract this service out, and will be used as needed. Estimated cost is up to \$10,000 annually, **\$5,000 for half the fiscal year.**
- Evaluation Staff, Clinical Psychologist II, responsible for the collection and tracking of data outcomes, \$171,286, **\$85,643 for half the fiscal year.**

**Please see attached budget worksheet.**

COUNTY OF LOS ANGELES  
DEPARTMENT OF MENTAL HEALTH  
PROGRAM DEVELOPMENT AND OUTCOMES BUREAU  
INN 10 - Removing Barriers to Mental Health Optimization Through A Suite of On-Demand Services

INN 10 -Budget Worksheet-ATTACHMENT

MHSA 3 YEAR PLAN - BUDGET - \$ 5,378,674

DESCRIPTION			* FY 2018-19 TOTAL SALARY & EB Jan 1, 2019 thru Jun 30 2019	FY 2019-20 TOTAL SALARY & EB	FY 2020-21 TOTAL SALARY & EB	* FY 2021-22 TOTAL SALARY & EB Jul 1, 2022 thru Dec 31 2022
ITEM NO.	ITEM DESCRIPTION	FTEs				
<b>SALARIES &amp; EMPLOYEE BENEFITS (EB)</b>						
<b>CLINICAL</b>						
8697A	CLINICAL PSYCHOLOGIST II (Evaluation Staff)	1.0	\$ 75,467.77	\$ 150,935.54	\$ 150,935.54	\$ 75,467.77
<b>Clinical FTE Subtotal</b>		<b>1.0</b>				
<b>TOTAL SALARIES &amp; EMPLOYEE BENEFITS</b>		<b>TOTAL FTEs</b>	<b>\$ 452,806.62</b>	<b>1.0</b>	<b>\$ 75,467.77</b>	<b>\$ 150,935.54</b>
<b>TOTAL SALARIES &amp; EMPLOYEE BENEFITS</b>			<b>\$ 75,467.77</b>	<b>\$ 150,935.54</b>	<b>\$ 150,935.54</b>	<b>\$ 75,467.77</b>
<b>START UP COST / ANNUAL TRAINING / MAINTENANCE FEES</b>						
16 SELF-SERVICE DELIVERY KIOSKS, TWO (2) PER SERVICE AREA STARTER MODULE @ \$ 6,900 + 9.5% SALES TAX = \$7,555.00 PER MODULE ADDER MODULE 1 @ \$ 2,400 + 9.5% SALES TAX = \$2,628.00 PER MODULE ADDER MODULE 2 @ \$1,500 + 9.5% SALES TAX = \$1,642.50 PER MODULE 16 LOCKERS @ \$11,826 PER LOCKER						
<b>TOTAL SELF-SERVICE DELIVERY KIOSKS &amp; LOCKERS</b>			<b>\$ 189,216.00</b>	<b>\$ 189,216.00</b>		
WEEKLY ORGANIC PRODUCE DELIVERY @ \$25.00 PER CLIENT PER WEEK FOR 200 CLIENTS BUBBLE PACKED VITAMIN AND MINERAL SUPPLEMENTS @ \$100.00 PER CLIENT PER MONTH FOR 200 CLIENTS LAUNDRY SERVICE @ \$90.00 PER CLIENT, PER MONTH FOR 200 CLIENTS ON-DEMAND SERVICES @ \$200 PER CLIENT FOR 200 CLIENTS SUPPLIES TO MEET CLIENT'S BASIC NEEDS (e.g. emergency clothing, supplies, hygiene products) @ \$25,000 per service area TRAINING RELATED COSTS (for on demand digital literacy training) Utilized as needed (Contracted services) up to \$10,000 annually MAINTENANCE FOR SELF-SERVICE DELIVERY KIOSKS @ \$ 1,400 ANNUALLY ADDITIONAL ON-DEMAND SERVICES (as needed basis to augment services) @ \$100,000 annually						
<b>TOTAL START UP COST / ANNUAL TRAINING / MAINTENANCE FEES</b>			<b>\$ 4,869,816.00</b>	<b>\$ 997,216.00</b>	<b>\$ 1,529,040.00</b>	<b>\$ 1,529,040.00</b>
<b>TOTAL START UP COST / ANNUAL TRAINING / MAINTENANCE FEES</b>			<b>\$ 4,869,816.00</b>	<b>\$ 997,216.00</b>	<b>\$ 1,529,040.00</b>	<b>\$ 814,520.00</b>
<b>SERVICES &amp; SUPPLIES: ONGOING COST</b>						
	County Telephone	800	\$ 400.00	\$ 800.00	\$ 800.00	\$ 400.00
	Telecommunication (Cell Phone/Pagers)	700	350.00	\$ 700.00	\$ 700.00	350.00
	Office Supplies	600	300.00	\$ 600.00	\$ 600.00	300.00
	Personal Computer Software	500	250.00	\$ 500.00	\$ 500.00	250.00
	Computers	1000	500.00	\$ 1,000.00	\$ 1,000.00	500.00
	Printer/Peripherals	400	200.00	\$ 400.00	\$ 400.00	200.00
	Space (Clinical)	15000	7,500.00	\$ 15,000.00	\$ 15,000.00	7,500.00
	Training	800	400.00	\$ 800.00	\$ 800.00	400.00
	Utilities	250	125.00	\$ 250.00	\$ 250.00	125.00
	Mileage	200	100.00	\$ 200.00	\$ 200.00	100.00
	Travel	100	50.00	\$ 100.00	\$ 100.00	50.00
<b>TOTAL SERVICES &amp; SUPPLIES - ONGOING</b>			<b>\$ 61,050.00</b>	<b>\$ 10,175.00</b>	<b>\$ 20,350.00</b>	<b>\$ 20,350.00</b>
<b>TOTAL SERVICES &amp; SUPPLIES - ONGOING</b>			<b>\$ 61,050.00</b>	<b>\$ 10,175.00</b>	<b>\$ 20,350.00</b>	<b>\$ 10,175.00</b>
			<b>\$ 1,082,859</b>	<b>\$ 1,700,326</b>	<b>\$ 1,700,326</b>	<b>\$ 900,163</b>
			<b>GROSS PROGRAM COST</b>			<b>\$ 5,383,673</b>

\* DENOTES LAST HALF OF FY 2018-19 & FIRST HALF OF FY 2021-22