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| **Youth ACT Staffing** | | | | | |
| List Each Position by Title | Check If  Professional Staff | No. of  FTE’s | Days Worked | Hours/Shift Worked | Estimated Salary |
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| 2. **Indicate the standard workweek (in hours) of a full-time staff position:** | | | 3. **For Team Leader position, indicate percent of Time allocated to administration**: | | |
| 4. **Describe how staff supervision will be provided.** | | | | | |

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| **Youth ACT Team Staffing & Recipient Phase-In Plan** |

**Assumptions:**

1. Plan begins when first staff is hired,
2. No more than 4-6 new enrollments per month until model capacity is reached,

**Plan must include:**

1. Number of active youth at time of licensing to remain in program & confirmation that they meet Youth ACT admission criteria,
2. Number of planned new enrollments per month,

**Starting Month: \_\_\_\_\_\_\_\_\_\_\_**

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| **Phase-in month** | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| **Existing Staff** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Staff hiring** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **New Recipient**  **Enrollment** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Projected**  **Medicaid Revenue** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Staffing Model** | **Actual Staffing at**  **Time of Licensing** | **Staffing Needs and Planned**  **Date to Hire** | **Date Planned to Achieve Competencies\*\***  **S/A Employment Family** | | |
| 1 FT Team Leader |  |  |  |  |  |
| Prescriber (. 50 for 28 slot team, .67 for 36 slot team) |  |  |  |  |  |
| MH Professionals(2 FTE for 28 slot team and 3 FTE for 36 team slot) |  |  |  |  |  |
| PEER/Paraprofessionals (2.5 FTE for 28 slot team and 3 FTE for 36 team model) |  |  |  |  |  |
| Program Assistant (Support) |  |  |  |  |  |