



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Veterans' Institute of Orthotics & Prosthetics - Veteran Support

2. **Senate Sponsor:** Dana Young

3. **Date of Submission:** 11/16/2017

4. **Project/Program Description:**

Funds requested will support a veteran's centric non-profit providing wounded veterans with essential health services to assist them with a successful re-integration into home life and support for their orthotics and prosthetics. Physical and mental therapy, rehabilitation, and wrap around (i.e. service dog pairing, vocational training, wellness programs) will be provided through this funding initiative.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Veterans Affairs

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
1,263,000	215,000	1,478,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	200,000	11.9%
TOTAL	200,000	11.9 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 1,678,000

9. **Previous Year Funding Details:**

- Has funding been provided in a previous state budget for this activity? No
- In the previous 5 fiscal years, how many years was funding provided? (Optional)
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

10. Is future-year funding likely to be requested?

No

11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?

Funds requested will support a veteran's centric non-profit providing wounded veterans with essential health services to assist them with a successful re-integration into home life and support for their orthotics and prosthetics. Physical and mental therapy, rehabilitation, and wrap around (i.e. service dog pairing, vocational training, wellness programs) will be provided through this funding initiative.

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

Essential health services to assist active duty military and veterans with physical and mental therapy, rehabilitation, and wrap around (i.e. service dog pairing, vocational training, wellness programs) will be provided through this funding initiative.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		



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<input checked="" type="checkbox"/> Salary and Benefits	A veterans mental health team consisting of a Psychiatrist, Psychologist and counselor to help active duty and veterans with mental health treatment. Two physical therapists and two prosthetists who help wounded veterans with prosthetics.	533,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	The Computer Assisted Rehabilitation ENvironment(CAREN) targets all aspects of balance and locomotion in clinical treatment. The use of virtual reality enables doctors to assess the veterans behavior and includes sensory inputs like visual, auditory, vestibular and tactile in a prosthetic. There are only 4 systems in the country and none in Florida.	730,000
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	K-9 service dog kennels to start a program to pair wounded veterans with service dogs.	215,000
TOTAL		1,478,000

d. What are the direct services to be provided to citizens by the appropriations project?

Essential health services to assist active duty military and veterans with physical and mental therapy, rehabilitation, and wrap around (i.e. service dog pairing, vocational training, wellness programs) will be provided through this funding initiative.

e. Who is the target population served by this project? How many individuals are expected to be served?



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Elderly persons, Persons with poor mental health, Persons with poor physical health, Jobless persons, Economically disadvantaged persons, Physically disabled, University/college students. Approximately 800 persons.

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

1)The CAREN research system monitors & trains the patient w/ combined impairments into a single session. This technology encompasses balance control strategies, gait monitoring plates, walking platforms, multi-modal virtual reality scenarios and options to monitor kinematics and provide biofeedback. 2)Mental health issues are compounded w/ secondary physical limitations such as disability, or loss of limb. Improving veteran's roles in life through occupational and/or social integration. Treating both physical & mental conditions simultaneously will expedite the healing of whole and enable better outcomes. Patient specific outcome measures utilized during patient intervention are depression, anxiety, PTSD, panic attacks, alcohol abuse, drug abuse. 3)Army research shows that individuals who engaged in animal-assisted therapies experienced a 70% reduction in anxiety & depression symptoms. Accreditation in 2 years by Assistance Dogs International.

g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

N/A

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

International Institute of Orthotics and Prosthetics

13. Requestor Contact Information:

- a. **Name:** Arlene Gillis
- b. **Organization:** International Institute of Orthotics and Prosthetics
- c. **Email:** arlene@iiofoandp.org
- d. **Phone Number:** (813)810-6932

14. Recipient Contact Information:

- a. **Organization:** International Institute of Orthotics and Prosthetics
- b. **County:** Hillsborough, Manatee, Pasco, Pinellas
- c. **Organization Type:**
 - ☐ For Profit
 - ☒ Non Profit 501(c) (3)
 - ☐ Non Profit 501(c) (4)
 - ☐ Local Entity
 - ☐ University or College
 - ☐ Other (Please specify)
- d. **Contact Name:** Arlene Gillis
- e. **E-mail Address:** arlene@iiofoandp.org
- f. **Phone Number:** (813)810-6932



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15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: John White

b. Firm: Mercury

c. Email: jwhite@mercuryllc.com

d. Phone Number: (727)313-2241