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### The Florida Senate

## Local Funding Initiative Request Fiscal Year 2019-2020

LFIR#: 1380

L. Title of Project: Project Save Lives

2. Senate Sponsor: Rob Bradley

3. Date of Submission: 01/08/2019

#### 4. Project/Program Description:

PROJECT SAVE LIVES is expanding to include Opioid Use Disorder (OUD), Substance Use Disorders (SUD) and Mental Health Disorders to provide: 1) a seamless, collaborative, stabilization and treatment solution for crises between three treatment providers in Duval, Clay and Nassau counties all funded through the managing entity, LSF. St. Vincent's Riverside and Clay, Orange Park Medical Center and Baptist Nassau ED's will be provided appropriate staff in EDs from these 3 entities, 2) Reduction in opioid-related overdoses, recidivism and death and high utilization of inappropriate ED admissions for all SUD's and Mental Health Disorders, 3) If indicated, and with patient consent and use of a Care Coordinator &/or Peer Specialists, triage to appropriate treatment providers in the community.

5. State Agency to receive requested funds: Department of Children and Families

State Agency Contacted? Yes

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	696,267
Fixed Capital Outlay	
Total State Funds Requested	696,267

#### 7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	696,267	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	696,267	100.0%

#### 8. Has this project previously received state funding? Yes

Fiscal Year	Amo	ount	Specific	
(yyyy-yy)	Recurring	NonRecurring	Appropriation #	Vetoed
2018-19		624,105	372	No

- 9. Is future-year funding likely to be requested? Yes
  - a. If yes, indicate non-recurring amount per year. \$710,192



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#### 10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	GATEWAY MANAGER - 10%FTE*\$55,000=\$5,500 IN-KIND  CLAY MANAGER - 10%FTE*\$55,000=\$5,500 IN-KIND  STARTING POINT MANAGER - 10%FTE*\$55,000=\$5,500 IN-KIND	0
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	GATEWAY MEDICAL DIRECTOR - \$32,500 IN-KIND CLAY MEDICAL DIRECTOR - \$32,500 IN-KIND STARTING POINT MEDICAL DIRECTOR - \$32,500 IN-KIND	0
Operational Costs:		
Salary and Benefits	GCS 1 Peer Specialist -(at St. V's Riverside) \$30,950.40; GCS 1 Mental Health Worker -( at St. V's Riverside) \$59,520.00; GCS Nurse Visit & Med Manage \$48,000 = 150 pts*\$320 1st month; GCS Buprenorphine= \$58,583 =150 pts*\$390.55 for 1st month; GCS 4 Res Beds \$272,216 =\$5,671.16 a bed per month*4 Bed; Clay 1 Care Coordinator \$55,000.00; Clay 2 Peer Specialists (at St.V's & OP Medical) \$62,400.00; Clay Mental Health Worker (at St. V's) \$60,000.00; Starting Pt 1 Peer Special(at Baptist) \$32,448.00	679,117
Expense/Equipment/Travel/Supplies/Other	3 EHR Licenses \$3,000.00; 1 Computer \$1,000.00; 1 Cell Phone \$680.00 Patient Transportation and Staff Training \$2,370.00; 2 EHR Licenses \$2,000; 1 Cell Phone \$680.00; Patient Transportation and Staff Training \$2,370; 1 EHR License \$1,000; 1 Computer \$1,000; 1 Cell Phone \$680.00; Patient Transportation and Staff Training \$2,370	17,150
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Re	novation:	
Construction/Renovation/Land/Planning		
Engineering		
Total State Funds Requested (must e	equal total from question #6)	696,267

#### 11. Program Performance:

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

Project Save Lives is a seamless, collaborative, stabilization and treatment solution for the crises between three treatment providers in Duval, Clay and Nassau counties all funded through the managing entity, LSF. St. Vincent's Riverside and Clay, Orange Park Medical Center and Baptist Nassau ED's will be provided appropriate staff in EDs from these 3 entities, 2) Reduction in opioid-related overdoses, recidivism and death and high utilization of ED admissions for all SUD & MH issues.

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

Project Saves Lives will fund intervention and referral services in the Emergency Department, Outreach to family members, Short-Term Residential services, Peer Specialists and Buprenorphine medication. These services will be added to currently funded Detox, Outpatient and Continuing Care services funded through other state and local funding.

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

The Project Save Lives will fund intervention and referral services in the Emergency Department, Outreach to family members, Short-Term Residential services, Peer Specialists and Buprenorphine medication. These services will be added to currently funded Detox, Outpatient and Continuing Care services funded through other state and local funding.

- d. Who is the target population served by this project? How many individuals are expected to be served?
  - Opioid overdose patients presenting in the emergency department as well as other Substance Use and Mental Health Disorders. We hope to serve 150 individuals.
- e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Reduction in opioid overdoses, recidivism and death as well as medical issues. Also reduce inappropriate ED visits and increase referrals to community providers. Data will be drawn from the ED's, EMT's and Peer specialist data. Pre- and Post data results.

f. 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?

The penalty for failing to meet these deliverable results in lapsed dollars that will be reduced from the managing entity (LSF) contract.

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.

N/A

#### 13. Requestor Contact Information:

a. Name: Candace Hodgkins

b. Organization: Gateway Community Services

**c. E-mail Address:** chodgkins@gatewaycommunity.com

d. Phone Number: (904)387-4661 Ext. 1004

#### 14. Recipient Contact Information:

a. Organization: Gateway

**b. County:** Duval

c. Organization Type:

O For Profit

● Non Profit 501(c) (3)



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O Non Profit 501(c) (4)

O Local Entity

O University or College

O Other (Please specify)

d. Contact Name: Candace Hodgkins

e. E-mail Address: chodgkins@gatewaycommunity.com

f. Phone Number: (904)387-4661

#### 15. Lobbyist Contact Information

a. Name: None

b. Firm Name: Nonec. E-mail Address:d. Phone Number: