



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1770

1. **Title of Project:** Hillsborough County Baker Act Bed Restoration

2. **Senate Sponsor:** Tom Lee

3. **Date of Submission:** 02/14/2019

4. **Project/Program Description:**

The funds will support a total of 13 additional Indigent Baker Act beds which were cut from Hillsborough county in recent legislative session.

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	1,596,331
Fixed Capital Outlay	
<b>Total State Funds Requested</b>	<b>1,596,331</b>

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)	1,596,331	100.0%
Federal		0.0%
State (excluding the amount of this request)		0.0%
Local		0.0%
Other		0.0%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>1,596,331</b>	<b>100.0%</b>

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		
2017-18		525,000	369	No

9. **Is future-year funding likely to be requested?** Yes

a. If yes, indicate non-recurring amount per year. 1,596,331

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1770

Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits	Salary and benefit cost of direct service personnel required to staff the 13 indigent CSU beds. Includes Behavioral Health Tech, Nursing and Psychiatrist services as required by statute.	1,347,782
Expense/Equipment/Travel/Supplies/Other	Supplies, Facility Insurance, Meals, Medications, Pharmacy.	248,549
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,596,331</b>

**11. Program Performance:**

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

Reduce more costly admissions to state hospital. Allow for immediate CSU admission versus the utilization of Emergency Rooms and LIP dollars. Reduces the use of jails as mental health facilities. Coordination of care upon discharge by Gracepoint and Northside supports the statewide system of care by managing re-entry and follow up services designed to reduce recidivism rates.

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

The funds will support a total of 13 additional Indigent Baker Act beds which were cut from Hillsborough county in recent legislative session. The need for these beds is overwhelming. While currently only funded for 37 indigent Baker Act beds, Gracepoint provided a daily average of 35.48 uninsured beds this year". Additionally, Northside provided an average of 3 beds a day which were reimbursed while being unable to accept an average of another 4 indigent bed requests from local hospitals.

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

The funding for the beds will create a capacity for an annual total of 4,475 bed days, serving an estimate 1,581 patients. The DCF has identified the following as a StateWide Baker Act Need: Statewide, 717 Baker Act beds are needed to meet the standard of 1 bed per 10,000 population. To ensure access to this crisis service and maintain the current proportion of state funded beds, funding for an additional 315 beds is justified. In Hillsborough County with the population exceeding 1.3 million, the standard of 1 bed per 10,000 residents indicates a need of 130 beds. Currently, only 37 indigent CSU beds are funded

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

Persons with poor mental health. The funding for the beds will create a capacity for an annual total of 4,475 bed days, serving an estimate 1,581 patients.

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1770

Reduce more costly admissions to state hospital. Allow for immediate CSU admission versus the utilization of Emergency Rooms and LIP dollars. Reduces the use of jails as mental health facilities. Coordination of care upon discharge by Gracepoint and Northside supports the statewide system of care by managing re-entry and follow up services designed to reduce recidivism rates. Performance measures utilized are readmission rates, average length of stay, number served, number of bed days utilized and cost per bed day.

**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?**

Penalties would be reduction of funding specific to actual beds utilized.

**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:** Joe Rutherford
- b. **Organization:** Gracepoint/ Northside Mental Health Center
- c. **E-mail Address:** jrutherford@gracepointwellness.org
- d. **Phone Number:** (813)239-8083

**14. Recipient Contact Information:**

- a. **Organization:** Central Florida Behavioral Health Network- Gracepoint and Northside Bed Restoration
- b. **County:** Hillsborough
- 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:** Joe Rutherford
- e. **E-mail Address:** jrutherford@gracepointwellness.org
- f. **Phone Number:** (813)239-8083

**15. Lobbyist Contact Information**

- a. **Name:** Larry Overton
- b. **Firm Name:** Larry J. Overton and Associates
- c. **E-mail Address:** loverton@loverton.net
- d. **Phone Number:** (850)224-2859