



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2020-2021

LFIR # 1007

1. **Project Title** Agape Village Health Center2. **Senate Sponsor** Manny Diaz3. **Date of Request** 09/23/20194. **Project/Program Description**

Funding for construction of the "Agape Village Health Center", a community health and residential treatment facility, expanding capacity from 62 to 141 beds, providing an Educational & Vocational Center, Clinic & Wellness Center, Supported Housing Units/Cottages, and a Preschool/Early Education/Day Care Center.

5. **State Agency to receive requested funds** Department of Children and FamiliesState Agency contacted? ☐ Yes ☒ No6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	000
Fixed Capital Outlay	1,500,000
<b>Total State Funds Requested</b>	<b>1,500,000</b>

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,500,000	68.0 %
<b>Matching Funds</b>		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	96,000	4 %
Other	608,554	28 %
<b>Total Project Costs for Fiscal Year 2020-2021</b>	<b>2,204,554</b>	<b>100 %</b>

8. **Has this project previously received state funding?** ☒ Yes ☐ No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2019-20	00	1,000,000	381A	No

9. **Is future-year funding likely to be requested?** ☒ Yes ☐ No

If yes, indicate nonrecurring amount per year. 1,000,000



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#### 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	0	0
Other Salary and Benefits	0	0
Expense/Equipment/Travel/Supplies/Other	0	0
Consultants/Contracted Services/Study	0	0
<b>Operational Costs: Other</b>		
Salary and Benefits	0	0
Expense/Equipment/Travel/Supplies/Other	0	0
Consultants/Contracted Services/Study	0	0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Funding for construction of the "Agape Village", a Community Health & Residential Treatment Facility, expanding capacity from 62 beds to 141-beds with an Educational & Vocational Center, Clinic & Wellness Center, Supported Housing Units/Cottages, and a Preschool/Early Education/Day Care Center. Clients will be served through an integrated behavioral health and primary care medical home that moves clients toward a quicker recovery and self-sufficiency with a continuum of care into the community.	1,500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		1,500,000



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#### 11. Program Performance

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

Capital construction funding to expand the facilities for Integrated Behavioral Health and Primary Care Services.

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

Psychiatry, Residential Treatment, Medication Assisted Treatment, Assessment, Therapy, Case Management and Care Coordination.

- c. What direct services will be provided to citizens by the appropriation project?

Integrated Behavioral Health and Primary Care Services.

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

Elderly persons, persons with poor mental health, persons with poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, homeless. 2,500 individuals are expected to be served annually.

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

Access to timely integrated behavioral health and primary care for uninsured and underinsured low-income residents; increases in medication management; decreases in hospitalizations/ institutional settings; and decreases in criminal justice costs associated with involvement in crime/infractions by those experiencing mental illness.

- 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?

Return of funds.



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12. **The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

Agape Network, Inc. will receive any fixed capital outlay funding. Agape Network, Inc. is a corporation. It does not have individual owners.

13. **Requestor Contact Information**

- a. First Name  Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number  Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- ☐ For-profit Entity
- ☒ Non-Profit 501(c) (3)
- ☐ Non-Profit 501(c) (4)
- ☐ Local Entity
- ☐ University or College
- ☐ Other (please specify)
- d. First Name  Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number  Ext.