



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1799

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This project seeks to create a 100-person in-patient facility that provides quality inpatient and outpatient care and housing for patients with substance use disorders and/or mental illness. This project places an emphasis on treating veterans and Native Americans with substance use disorders and/or mental illness.

5. State Agency to receive requested funds

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	500,000
Fixed Capital Outlay	0
Total State Funds Requested	500,000

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	500,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	500,000	100%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested? No

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

No

If yes, indicate the amount of funds received and what the funds were used for.



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List 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.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits	Salary for 4 full-time behavioral health techs, 4 part-time behavioral health techs, and an operations supervisor	210,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Hiring outside consultant as a non-entity employee to provide compliance and technical assistance.	50,000
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	TRANSPORTATION: gas oil changes, general maintenance. WELLBRIETY/WHITE BISON: tuition for five staff members to attend certification training, ceremony supplies, airfare to/from training. VA Program: veteran specific literature that is also branch specific, meditation supplies, veteran certified staffing for groups. UTILITIES: electric, water, sewer, trash, recycling, dumpster rental.	240,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		500,000

14. Program Performance

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

To provide adequate and quality intensive inpatient and outpatient care and housing for citizens with substance use disorder and or mental illness. This project places an emphasis on treating veterans and Native Americans with substance use disorder and/or mental illness.



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

Intensive inpatient, outpatient, aftercare, wrap around services and housing for clients with substance use disorder, mental illness or both.

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

Intensive therapy for any and all issues leading to substance use disorder. Therapy for multiple mental illnesses. Housing for transition from inpatient for anyone attending the above program.

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

Persons with poor mental health, Persons with poor physical health, Veterans, Economically-Disadvantaged Person, Formerly Incarcerated Individuals, Individuals with substance abuse/dependencies, Native Americans. The program will serve approximately 100-200 individuals annually.

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

Overall improvement of mental health as evidenced by therapeutic treatment by appropriately credentialed clinical staff. This outcome will be measured by industry-recognized and approved tests.

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 the contract?

Repayment of funds to the state on a pro-rated basis.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. 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**



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e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number