

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Keith Perry

02/20/2023

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

Estella Byrd Whitman Wellness & Resource Center

LFIR # 1812

deserts in Marion C primary care to the health and wellness hospitals, which are demographics, the EBWWC is poised each year, to expar	county, Florida. Loca targeted population s. The EBWWC initia e often frequented by targeted population to expand its service	ited in Ocala, Flori of those under seatives are avenues y those on low inco is predominantly A es from the current erations manager	Iness & Resource Centida's Westside commurerved in quality primary to eradicate non-emerome, and/or the uninsu African American throught annual average of 1,0 nent, and to attain the residue.	nity, the agency proving the alth care and heat gency department with the distribution of the matter and the ma	vides comprehensive alth care information for visits at the local ding to current region. The 000 or more clients		
5. State Agency to re	eceive requested fu	ı nds Departr	ment of Health				
State Agency cont	acted? No						
6. Amount of the Nor	nrecurring Request	for Fiscal Year 2	2023-2024				
Type of Funding			Amo	unt			
Operations				250,000			
	Fixed Capital Outlay			0			
Total State Funds	Requested		250,000				
7. Total Project Cost	for Fiscal Year 202	3-2024 (including	g matching funds avai	lable for this proje	ect)		
Type of Funding	Type of Funding			Percentage			
	Total State Funds Requested (from question #6)			100%			
Matching Funds							
Federal			0	0%			
State (excluding the	State (excluding the amount of this request)			0%			
Local			0	0%			
Other			0	0%			
Total Project Cost	s for Fiscal Year 20	023-2024	250,000	100%			
8. Has this project pr	reviously received	state funding?	No				
Fiscal Year	Amo	ount	Specific	Vetoed			
(уууу-уу)	Recurring	Nonrecurring	Appropriation #				
9. Is future funding li			No				
a. If yes, indicate i	nonrecurring amou	nt per year.					
b. Describe the so	ource of funding the	at can be used in	lieu of state funding.				



Expense/Equipment/Travel/Supplies/

Consultants/Contracted

Operational Costs: Other

Services/Study

Other

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4,000

1.800

The Estella Byrd Whitman Wellness & Resource Center had maintained funding sources for private donors and collaborative partnerships, to include: The Honorable Buddy McKay, Former Governor of Florida; Ocala Golf Club-Annual Fundraiser Event; Friends Foundations; Ausley Construction; Greater Hopewell Baptist Church; St, Paul A.M.E. Church; St. John Baptist Church; Ocala Marion Chamber & Economic Partnership; Munroe Regional Foundation; Langley Health Services/Ocala; Board Members; City of Ocala Revitalization.

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

res			
If yes, indicate the amount of	funds received and what the funds were used for.		
\$25,000-ARPA-COVID-Relate \$10,000-Small Business Admir	d-2022 nistration (SBA)-Loan-COVID-Related-2022		
Complete questions 11	and 12 for Fixed Capital Outlay Projects		
1. Status of Construction			
a. What is the current phase	of the project?		
OPlanning ODesign	Construction		
b. Is the project "shovel read	y" (i.e permitted)?		
c. What is the estimated start	date of construction?		
d. What is the estimated com	pletion date of construction?		
2. List the owners of the facilit relationship between the ow	y to receive, directly or indirectly, any fixed capital outlay funding. Incluners of the facility and the entity.	ide the	
3. Details on how the requested	d state funds will be expended		
Spending Category	nding Category Description		
Administrative Costs:			
Executive Director/Project Head Salary and Benefits	Starting CY 2023, Estella Byrd Whitman Wellness & Resource Center (EBWCC), had projected to compensate Carorlyn Adams, ARNP (Executive Director), as an independent contractor, at a rate of \$30 per hour for up to 40 hours per week.		
Other Salary and Benefits EBWWC has projected to compensate Dr. Pamela Lewin, MD (Medical Director), as an independent contractor, at a rate of \$70 per hour, up to 20 hours per week, along with payment at the rate of \$750 per month for her malpractice/liability insurance.			

\$500 per person.

Starting CY 2023, EBWWC had projected to compensate Carolyn Adams (Executive Director) and Dr. Pamela Lewin (Medical Director) for travel to at least (4) speaking engagements at a fixed fee rate of

As of CY 2020, EBWWC compensates Ms. Gerry Brent (Diabetic

Consultant), a fixed fee rate of \$1,500 for the diabetic (DEEP) class offered by the center. Additionally, the EBWWC has compensated Cynthia Griffin, MSW, at a rate of the retainer fee of \$300.



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Salary and Benefits	Payroll expenses at an expected rate of \$10,816; Payroll taxes at an expected annual rate of \$1,190; Independent contractors at an expected rate \$75,000	87,006
Expense/Equipment/Travel/Supplies/ Other	Medical supplies at the projected cost of \$5,001 EBWWC had projected to purchase a lab machine for blood testing purposes, at the rate of \$9,889	14,890
Consultants/Contracted Services/Study Consultant payments are expected to at a rate of \$8,504		8,504
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	To be determined	0
Total State Funds Requested (must equal total from question #6)		

14. Program Performance

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

The funds requested will allow the Estella Byrd Whitman Wellness & Resource Center (EBWWC) to maintain healthcare management operations and to aid in the center's ability to implement blood testing accurately, and the ability to add to the existing services that the center currently provides in the healthcare deserts of Marion County, Florida, which will also alleviate non-emergency visits at local hospitals, by underserved populations.

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

EBWWC will implement its Client Assessment Survey as a bio-psychosocial assessment to each client, which will serve as a tool for operations research for quality improvements and to address the individual healthcare and wellness needs of each client. Clients will be provided primary healthcare and healthcare information to maintain health and wellness. Community outreach to provide quality healthcare to healthcare deserts in Marion County, Florida. Mental health counseling referrals, classes for health maintenance, and healthcare information resources. A certified COVID-19 testing site, and implementations of safeguard information against the coronavirus; Life Skills training/Goal Plans, Self-sufficiency initiatives.

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

Sports physicals; HIV testing and counseling; Free Diabetic classes; pregnancy testing and counseling; Pre-Diabetes A1C classes; Wellness Checks, Chronic care management, Smoking Cessation counseling; Bystander Life Support training; Mental health resources and support groups; Substance Abuse counseling; community health fairs with collaborative church partnerships; primary care exams, dental exams, health education, and health supplied.

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

According to the current Center for Disease Control and Prevention (CDC), and national data on healthcare deserts in Marion County, Florida demographic data, the targeted population will be predominantly African American. Currently, the EBWWC averaged a rate of 1075 clients, on an annual basis, with projected growth of 2000 clients, in the CY 2023.

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

The EBWWC Client Assessment Survey is implemented as the initial intake process, which provides the center with a bio-psychosociological assessment of each individual client with their specific health and wellness needs, the clients are also provided a Client Goal Plan to record progress. Both tools provide the center with measurements of the impact of the center's inputs and outputs, and the measures of efficiency and efficacy. The Client Assessment Survey, along with the Client Goal plan, provides monitoring abilities, and implications for operations research, for quality control improvements.

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?

Deductions in funding of the initial request.

15. Requester Contact Information



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	a. First Name	Carolyn		Last Name Adams			
	b. Organization	Estella Byrd Whitman Wellness & Resourc Center					
	c. E-mail Address	ebwwcrc@gmail.com					
	d. Phone Number	(352)875	-2226	Ext.			
16.	6. Recipient Contact Information						
	a. Organization	Estella Byrd Whitman Wellness & Resource Center					
	b. Municipality and County Marion						
	c. Organization Type						
	□For Profit Entity	For Profit Entity					
	☑Non Profit 501(c	(c)(3)					
	□Non Profit 501(d						
	□Local Entity						
	□University or Co	ollege					
	□Other (please specify)						
	d. First Name	Carolyn		Last Name	Adams		
	e. E-mail Address	ebwwcrc@gmail.com					
	f. Phone Number	(352)875-2226					
17.	17. Lobbyist Contact Information						
	a. Name	None					
	b. Firm Name	None					
	c. E-mail Address						
	d. Phone Number						