1. **Title of Project:** Ligature Mitigation at WellPath Facilities

2. **Senate Sponsor:** Ed Hooper

3. **Date of Submission:** 03/12/2019

4. **Project/Program Description:**
   These funds would mitigate ligature risks at South Florida State Hospital, South Florida Evaluation and Treatment Center, and Treasure Coast Forensic Treatment Center.

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**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td></td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td>1,573,000</td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td><strong>1,573,000</strong></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>1,573,000</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td><strong>1,573,000</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Fiscal Year (yyyy-yy)</th>
<th>Recurring</th>
<th>NonRecurring</th>
<th>Specific Appropriation #</th>
<th>Vetoed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th>Spending Category Administrative Costs:</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director/Project Head Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
11. Program Performance:

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

These funds would mitigate ligature risks to improve patient safety at South Florida State Hospital, South Florida Evaluation and Treatment Center, and Treasure Coast Forensic Treatment Center.

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

These funds would mitigate ligature risks including replacing door hinges, bathroom doors, water fountains, shelving and furniture, paper towel and soap dispensers, and other plumbing modifications.

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

This request will improve the quality of care and increase patient and staff safety.

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

The target population is the patients residing at South Florida State Hospital, South Florida Evaluation and Treatment Center, and Treasure Coast Forensic Treatment Center. Capacity at these facilities includes 341 beds at South Florida State Hospital, 249 beds at South Florida Evaluation and Treatment Center, and 224 beds at Treasure Coast Forensic Treatment Center.

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

In 2017, the Joint Commission provided more stringent standard requirements for the environment of care as it relates to ligature risks. The presence of ligature risks in the physical environment of a psychiatric patient compromises the patient’s safety. This is particularly an issue for a patient with suicidal ideation. The benefit of this project will be to improve patient outcomes through mitigation of ligature risks and improving the safety of the environment of care. This would be measured by the elimination of ligature risks in the environment of care and decrease in potential for suicide attempts.

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 are addressed in existing 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.
The Department of Children and Families owns the facility and contracts with WellPath to operate the facility.

13. **Requestor Contact Information:**
   a. **Name:** Jeremy Barr
   b. **Organization:** WellPath Recovery Solutions
   c. **E-mail Address:** jbarr@wellpath.us
   d. **Phone Number:** (615)312-7201

14. **Recipient Contact Information:**
   a. **Organization:** WellPath Recovery Solutions
   b. **County:** Statewide
   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:** Jeremy Barr
   e. **E-mail Address:** jbarr@wellpath.us
   f. **Phone Number:** (615)312-7201

15. **Lobbyist Contact Information**
   a. **Name:** Heather Turnbull
   b. **Firm Name:** Rubin, Turnbull & Associates
   c. **E-mail Address:** turnbullh@rubingroup.com
   d. **Phone Number:** (305)495-3868