



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1228

1. **Project Title** Centerstone Psychiatric Residency2. **Senate Sponsor** Joe Gruters3. **Date of Request** 10/24/20194. **Project/Program Description**

Psychiatric Residency program slots to train and retain psychiatrists in Florida. Addresses a critical statewide shortage of physicians specializing in psychiatry at present and in the future. According to Florida's 2018 Physician Work Force Annual Report, twelve (12) Florida counties have no licensed psychiatrists and eight (8) additional counties have only one licensed psychiatrist. There are 398 psychiatrist vacancies compared to 250 in 2017. The Health Resources and Services Administration (HRSA) estimated a shortage of 800 to 1,000 psychiatrists in Florida compared to estimated need (HRSA, 2018). The FDOH reports 48% of licensed psychiatrists in Florida are over the age of 60, and another 25.2% are over age 50, which will lead to a greater shortage over the next decade, as an estimated 59% of the psychiatry workforce retires. HRSA estimates a shortage of 1250-1480 psychiatrists by 2030 (2018).

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	1,000,000
Fixed Capital Outlay	000
Total State Funds Requested	1,000,000

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)	1000000	51.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	976,532	49 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	1,976,532	100 %

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	373	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
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Other		
Salary and Benefits	Salaries and benefits of psychiatric residents, clinical training coordinator, and supervising psychiatrist.	1,000,000
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		1,000,000



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11. Program Performance

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

16 psychiatric residency slots will be available to train future psychiatrists to address the current and future critical shortage of psychiatrists in Florida. Current access to mental health and addiction care will increase due to residents providing services to Florida's citizens while completing their residency.

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

Each resident will provide psychiatric care to citizens, thereby increasing access to care for all citizens. Upon graduation, each resident will fill a critical need for psychiatry.

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

Psychiatric evaluations, medication evaluations, physical exams, and therapy for mental health and addictions conditions.

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

Floridians struggling with mental health and substance use diseases who are in need of psychiatric care in outpatient, inpatient, residential, and community based settings - 300-600 patients per resident - including elderly persons, persons with poor mental health, persons with poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, homeless, physically disabled, drug users, students, currently/formerly incarcerated persons, drug offenders, victims of crime, and individuals of all ages. Centerstone's service area includes Manatee, Sarasota, Desoto, Hendry, Glades, and Lee Counties.

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

1. Improve mental health - MIPS #391 (Merit-based Incentive Payment System) - Follow up within 7 to 30 days after hospitalization for mental illness; 2. Create specific immediate job opportunities - each residency slot is a job opportunity for one individual; 3. Reduce recidivism - Reduced recidivism through provision of medication assisted treatment for opioid and alcohol use disorders prior to release from jail; 4. Reduce substance abuse - MIPS #431 - Preventive Care & Screening for unhealthy alcohol use and Florida State Reporting - abstain from substance use. Methodology for all = capture data in Electronic Health Records.

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?

Loss of program accreditation and residency slots should result in commensurate reduction in funding.



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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.

N/A

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.