

# The Florida Senate Local Funding Initiative Request Fiscal Year 2021-2022

LFIR # 1053

•	mprehensive Behavioral and Mental Health Services for Autism and lated Disabilities

2. Senate Sponsor Jim Boyd

3. Date of Request 01/25/2021

### 4. Project/Program Description

The program will expand comprehensive mental health services and availability of psychological evaluations for individuals with disabilities in Southwest Florida. These services will focus on early diagnosis and intervention for autism and related disabilities. These early intervention therapies, intensive education and comprehensive behavioral/mental health services will create an increased independence and employability. Services will be provided at our varied sites, in home and virtually as needed.

5. State Agency to receive requested funds

Agency for Persons with Disabilities

State Agency contacted? Yes

## 6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	1,718,695
Fixed Capital Outlay	0
Total State Funds Requested	1,718,695

## 7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	1,718,695	33%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	0	0%	
Other	3,537,500	67%	
Total Project Costs for Fiscal Year 2021-2022	5,256,195	100%	

8. Has this project previously received state funding? Yes

Fiscal Year	Amount		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2020-21	0	1,728,000	248	No	

## 9. Is future funding likely to be requested?

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?

Yes

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No



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

-US Small Business Administration Guaranteed PPP Loan \$832,000 -US Small Business Administration Loan \$150,000 Under Section 7(b) of Small Business Act \* Funds used for payroll -Used for COVID relief due to decreased revenues

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Director of Therapy and Partnerships	114,540
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	<ol> <li>Board Certified Behavior Analyst</li> <li>Clinical Psychologist</li> <li>School Principal</li> <li>Registered Behavior Technicians</li> <li>Diagnostic Coordinator</li> <li>Occupational Therapist</li> <li>Certified Occupational Therapy Assistant</li> <li>Speech-Language Pathologists</li> <li>Physical Therapist</li> <li>Music Therapist</li> <li>Art Teacher</li> <li>Teachers for Autism</li> <li>IT Support coordinator</li> <li>Equine mental health coordinator</li> <li>Therapeutic Riding Instructor</li> <li>Neurofeedback coordinator</li> <li>Case Managers</li> </ol>	1,310,155
Expense/Equipment/Travel/Supplies/ Other	Therapist/Teacher Trainings Travel Diagnostic equipment Educational Supplies Therapy Supplies Technology for teletherapy and virtual education	90,000
Consultants/Contracted Services/Study	6 part time mental health clinicians	204,000
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	1,718,695

#### 12. Program Performance

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

The program will expand comprehensive mental health services and availability of psychological evaluations for individuals with disabilities in Southwest Florida. These services will focus on early diagnosis and intervention for autism and related disabilities. These early intervention therapies, intensive education and comprehensive behavioral/mental health services will create an increased independence and employability. Services will be provided in person as well as virtually as needed.



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

Mental health therapy for children and adults with disabilities to reduce anxiety, depression, oppositional behaviors. Comprehensive diagnostic evaluations by a clinical psychologist which will include the Autism Diagnostic Observation Scale-2 (ADOS-2) when applicable.

Music and art therapies are established health professions in which each medium is used within a therapeutic relationship to address physical, emotional, cognitive and social needs of individuals.

Clinical therapies (speech, occupational, physical therapy) to address developmental delays and disorders.

Equine therapy for physical delays and mental health needs.

Neurofeedback to reduce anxiety and stress and to improve overall focus.

Behavioral therapy for children with significant autism.

Intensive educational services for children with special needs.

Targeted case management for families of children with disabilities who need assistance with system navigation.

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

-Diagnostic services -Mental health therapies -Equine therapy -Music therapy -Art therapy -Educational services -Behavior Analysis -Case Management -Neurofeedback therapy

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

Children and adults with autism and other developmental disabilities that reside in Southwest Florida. Up to 500 children and adults are expected to be served and benefit.

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

#### be measured?

The expected benefit is more children and adults will benefit from comprehensive behavioral/mental health therapeutic and educational services. These services include: diagnostic evaluations, developmental therapy, equine therapy, intensive education, neuro feedback, mental health therapy, art therapy, music therapy and case management. Early intervention will reduce maladaptive behaviors, learning disabilties and improve overall independence and self-esteem. Outcomes will be measured by both weekly data collection/analysis and diagnostic testing twice per year. During the pandemic services will be offered in person and virtually.

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?

We expect to meet and exceed all deliverables and performance measures and have a very strong record of fully complying to all contracts and expectations of all funding sources and partner agencies. In the event deliverables or measures are not met we will repay all funds related to not performing to expectations and immediately implement an improvement plan with associated measurable results.

#### 13. 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.

Not applicable to our application.



## 14. Requestor Contact Information

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	a. First Name	George	Last Name	Pfeiffer		
	b. Organization	Easter Seals Southwest Florida, Inc.				
	c. E-mail Address	gpfeiffer@easterseals-swfl.org				
	d. Phone Number	Number (941)355-7637 Ext. 404				
15.	5. Recipient Contact Information					
	a. Organization	Easter Seals Southwest F	lorida, INC.			
	b. Municipality and County Manatee					
	c. Organization Type					
	□For Profit Entity					
	☑Non Profit 501(c)(3)					
	□Non Profit 501(c)(4)					
	□Local Entity					
	□University or Co	□University or College				
	□Other (please sp	se specify)				
	d. First Name	Nicole	Last Name	Murby		
	e. E-mail Address	s nmurby@easterseals-swfl.org				
	f. Phone Number	Number (941)355-7637				
16.	16. Lobbyist Contact Information					
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