

1. Project Title

**Type of Funding** 

Fixed Capital Outlay

**Total State Funds Requested** 

Operations

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

Mental Health Assistance Allocation for Florida Virtual School

LFIR # 1117

2. Senate Sponsor	Kathleen Passidomo		
3. Date of Request	01/29/2021		
4. Project/Program D	escription		
the Florida Education	on Finance Prògram´(FEFP)	not receive any funding through the Mental Health Assistance Allocation in despite being held to the same statutory requirements for providing	
program that would based mental healt	provide part-time and full-till	This appropriation would provide funding to FLVS to implement a pilot me FLVS students, ages 12 and older, with access to app- or computeress to mental health services will help FLVS students deal with anxiety, lent mental health issues.	
program that would based mental healt depression, domes	provide part-time and full-till h services for one year. Acc	me FLVS students, ages 12 and older, with access to app- or computeress to mental health services will help FLVS students deal with anxiety,	

**Amount** 

300,000

300,000

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)	300,000	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 2021-2022	300,000	100%

8. Has this project previously received state funding?

Fiscal Year	Amount		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2020-21	0	625.000	114	Yes	

(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
2020-21	0	625,000	114	Yes
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9. Is future funding likely to be requested?

Yes

a. If yes, indicate nonrecurring amount per year.

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

FEFP operating dollars; however, FLVS does not receive funding through the Mental Health Assistance Allocation.

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



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

FLVS received \$5M in CARES Act funding on servers and IT infrastructure.

#### 11. 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		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study  FLVS will contract with a telehealth provider to implement a one-year pilot project to provide app- or computer-based mental health services to part- and full-time students ages 12 and older.		300,000			
Operational Costs: Other					
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	Fixed Capital Construction/Major Renovation:				
Construction/Renovation/Land/ Planning Engineering		0			
Fotal State Funds Requested (must equal total from question #6) 300,000					

#### 12. Program Performance

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

Currently, FLVS does not receive funding for mental health services in the FEFP. Consequently, FLVS students do not have direct access to mental health counseling, despite being public school students. The funds requested will provide FLVS students with access to app- or computer-based mental health services through a one-year pilot program.

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

The funds requested will provide FLVS students with access to app- or computer-based mental health services through a one year pilot program.

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

FLVS students, ages 12 and older, will be provided with direct access to a licensed mental health provider through an app- or computer-based service.

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

All FLVS students, part- and full-time, ages 12 and older.

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

Students will have access to one-on-one mental health counseling, able to be scheduled through an app. The services will help students deal with anxiety, depression, domestic violence, and other prevalent mental health issues.

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?



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Funding should be withheld if deliverables are not met.	

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.

-/-		
n/a		



### **The Florida Senate**

## Local Funding Initiative Request Fiscal Year 2021-2022

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14	14. Requestor Contact Information					
	a. First Name	Mike Last Name Miller				
	b. Organization	Florida V	Florida Virtual School			
	c. E-mail Address	mimiller@	flvs.net			
	d. Phone Number	(407)245-0588 <b>Ext</b> .				
15	. Recipient Contact	Informatio	on			
	a. Organization	Florida V	irtual School			
	b. Municipality and	l County	Statewide			
	c. Organization Ty	ре				
	☑For Profit Entity					
	□Non Profit 501(c	:)(3)				
	□Non Profit 501(c	□Non Profit 501(c)(4)				
	□Local Entity					
	□University or Co	llege				
	□Other (please sp	pecify)				
	d. First Name	Mike		Last Name	Miller	
	e. E-mail Address	mimiller@	oflvs.net			
	f. Phone Number	(407)245-0588				
16	16. Lobbyist Contact Information					
	a. Name	Megan F				
	b. Firm Name	Capital C	City Consulting			
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