

LFIR # 1265

1.	1. Project Title International Institute of Orthotics and Prosthetics Sustainable Expansion							
2.	Senate Sponsor	Danny Burgess						
3.	Date of Request	02/01/2021						
4.	Project/Program De	escription						
	This project expands O&P graduate program from 12 students to 24.							
	The National Commission on Orthotics and Prosthetics Education (NCOPE) commissioned a study showing in 2014 there were 6,675 licensed or certified orthotists and prosthetists in the United States. It also showed that by 2025, an "overall supply of credentialed O&P providers would need to increase by about 60% to meet the growing demand."							
	Despite the demand numbers of clinicians	Despite the demand for trained professionals, orthotics and prosthetics programs do not have the capacity to train sufficien numbers of clinicians. This year, only about 250 students will graduate with master's degrees in O&P.						
	Current programs wi future conflicts deser	II not graduate the rve.	number of clini	cians	needed to provide t	he care Wounded W	/arriors from current and	
5.	State Agency to rec	eive requested fu	ı nds Depa	rtmer	nt of Education			
	State Agency conta	cted? No						
	otato Agono, conta	110						
6.	Amount of the Nonr	ecurring Request	for Fiscal Yea	r 202	21-2022			
Type of Funding Amount								
	Operations					550,000		
Fixed Capital Outlay				200,000				
	Total State Funds F				750,000			
7.	Total Project Cost fo	or Fiscal Year 202	1-2022 (includ	ing r	matching funds ava	ilable for this proje	ect)	
	Type of Funding				Amount	Percentage		
	Total State Funds Re	equested (from que	estion #6)		750,000	100%		
	Matching Funds							
	Federal				0	0%		
	State (excluding the	amount of this requ	uest)		0	0%		
	Local				0	0%		
Other					0	0%		
	Total Project Costs	for Fiscal Year 20	021-2022		750,000	100%		
8. Has this project previously received state funding?								
	Fiscal Year (yyyy-yy)	Amo Recurring	ount Nonrecurrii	ng	Specific Appropriation #	Vetoed		

9. Is future funding likely to be requested?	No
a. If yes, indicate nonrecurring amount per year.	

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



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10. Has	he entity requesting this project received any federal assistance related to the COVID-19	pandemic?			
Yes					
If yes	If yes, indicate the amount of funds received and what the funds were used for.				
The	nstitute received \$69,000 via the Paycheck Protection Loan.				

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits	Executive Director	10,000			
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/ Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs: Other	Operational Costs: Other				
Salary and Benefits	Faculty -4 Lab Manager-1 Staff Assistant-1	300,000			
Expense/Equipment/Travel/Supplies/ Other	Lab Supplies and Components Equipment, maintenance and replacement	240,000			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering	Adapt space and facility for additional students	200,000			
Total State Funds Requested (must equal total from question #6) 750,000					

12. Program Performance

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

This project expands O&P graduate program from 12 students to 24.

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

The institute will hire the appropriate instructors and purchase equipment needed to expand their number of students.

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

Access to education in Orthotics and Prosthetics and ultimately access to educated well-trained O & P providers.

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

The physically disabled, wounded veterans, amputees, and people with poor physical health.

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

IIOP is one of the twelve national training programs and the only O&P school in the state of Florida; located in Tampa Bay central to multiple VHA medical facilities.

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f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties



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for failing to meet deliverables or performance measures provided for the contract?

Repayment of funds.

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.

Veterans Stride Foundation DBA International Institute of O&P



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14. Requestor Contact Information						
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	b. Organization	Veterans Stride Foundation DBA International Institute of				
	c. E-mail Address	arlene@iiop.com				
	d. Phone Number	(813)517-1741 Ext.				
15.	Recipient Contact Information					
	a. Organization	Organization Veterans Stride Foundation DBA International Institute of O & P Municipality and County Hillsborough				
	b. Municipality and	l County	Hillsborough			
	c. Organization Ty	ре				
	□For Profit Entity					
	☑Non Profit 501(c)(3)					
	□Non Profit 501(c)(4)					
	□Local Entity					
	□University or Co	or College				
	□Other (please sp	ner (please specify)				
	d. First Name	Arlene		Last Name	Gillis	
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16.	16. Lobbyist Contact Information					
	a. Name Ron Pierce					
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	c. E-mail Address	ddress ron@rsaconsultingllc.com				
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