

1. Project Title

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

CASL Renaissance Manor - Independent Supportive Housing

LFIR # 1300

2. Senate Sponsor	Joe Gruters						
3. Date of Request	01/22/2021						
4. Project/Program De	escription						
housing that provide community living in a \$9,252 per year. Du County, The HUD fa incidentals or suppo affordable and incor	es case managemen a stable and assisted e to limited resource hir market rent for an rtive services. Housi porating our wrap ar	t and other supped manner. Approses, the person we efficiency is \$80 ing without supperound services.	ring population throughout the services, enabling the services, enabling the serve cannot afford he serve cannot afford he so/month or \$10,200/ye portive services does not clients are able to remain consistently delivered a	g the individual to maidents have an inconsisting on the open of ar. This does not inconsisted treduce recidivism. In stable while living	naintain independent ome between \$0 and market. In Sarasota clude utilities, food, By making our housing independently. Our		
5. State Agency to red	coive requested fur	nde Doport	ment of Children and Fa	amiliae			
•	-	ius Depart	ment of Children and Fa	ummes			
State Agency conta	acted? Yes						
6. Amount of the Noni	recurring Request	for Fiscal Year	2021-2022				
Type of Funding			Amo	ount			
Operations				1,250,000			
Fixed Capital Outlay	<u> </u>			0			
Total State Funds F	Requested		1,250,000				
				•			
7. Total Project Cost f	or Fiscal Year 2021	I-2022 (includir	ng matching funds ava	ilable for this proj	ect)		
7. Total Project Cost f	or Fiscal Year 2021	I-2022 (includir	ng matching funds ava	ilable for this proj	ect)		
•					ect)		
Type of Funding			Amount	Percentage	ect)		
Type of Funding Total State Funds R Matching Funds Federal	equested (from ques	stion #6)	Amount 1,250,000 1,129,000	Percentage 34% 31%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the	equested (from ques	stion #6)	Amount 1,250,000 1,129,000 586,000	Percentage 34% 31% 16%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local	equested (from ques	stion #6)	Amount 1,250,000 1,129,000 586,000 401,748	Percentage 34% 31% 16% 11%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the	equested (from ques	stion #6)	Amount 1,250,000 1,129,000 586,000	Percentage 34% 31% 16%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local	equested (from quested amount of this requ	est)	Amount 1,250,000 1,129,000 586,000 401,748	Percentage 34% 31% 16% 11%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other	equested (from quest amount of this request for Fiscal Year 20	est) 21-2022	Amount 1,250,000 1,129,000 586,000 401,748 275,000	Percentage 34% 31% 16% 11% 8%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs	equested (from quest amount of this request for Fiscal Year 20	est) 21-2022 state funding?	Amount 1,250,000 1,129,000 586,000 401,748 275,000 3,641,748	Percentage 34% 31% 16% 11% 8%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	equested (from quested amount of this requested for Fiscal Year 20 eviously received s	est) 21-2022 state funding?	Amount 1,250,000 1,129,000 586,000 401,748 275,000 3,641,748 Yes Specific	Percentage 34% 31% 16% 11% 8% 100%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	equested (from questance) amount of this requires for Fiscal Year 20 eviously received s	est) 21-2022 State funding?	Amount 1,250,000 1,129,000 586,000 401,748 275,000 3,641,748 Yes Specific Appropriation #	Percentage 34% 31% 16% 11% 8% 100%	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу)	equested (from quested amount of this requested for Fiscal Year 20) eviously received seviously received sev	est) 21-2022 State funding? ount Nonrecurring 1,100,0	Amount 1,250,000 1,129,000 586,000 401,748 275,000 3,641,748 Yes Specific Appropriation #	Percentage 34% 31% 16% 11% 8% 100% Vetoed	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (yyyy-yy) 2020-21	equested (from quested) amount of this requires for Fiscal Year 20 eviously received s Amo Recurring 586,000 kely to be requeste	est) 21-2022 State funding? unt Nonrecurring 1,100,0	Amount 1,250,000 1,129,000 586,000 401,748 275,000 3,641,748 Yes Specific Appropriation # 000 376	Percentage 34% 31% 16% 11% 8% 100% Vetoed	ect)		
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 2020-21 9. Is future funding like a. If yes, indicate n	equested (from questance) amount of this requires for Fiscal Year 20 eviously received s Amo Recurring 586,000 kely to be requeste onrecurring amour	est) 21-2022 State funding? ount Nonrecurring 1,100,0 d? nt per year.	Amount 1,250,000 1,129,000 586,000 401,748 275,000 3,641,748 Yes Specific Appropriation # 000 376	Percentage 34% 31% 16% 11% 8% 100% Vetoed No	ect)		



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

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res	

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

CASL received \$442,500 for pandemic relief. The funds were used to hire additional staff as we opened Arbor Village which increased our capacity by 88 additional beds along with providing additional support in our homes. During the pandemic, CASL increased its support staff by 20%. Additionally, CASL purchased 500 COVID testing kits and equipment for staff to work with clients in their homes to communicate with the doctors/therapist via telemedicine.

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

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits	Program director who is responsible for information management (including electronic health record data), program/contract compliance (QI/QA), program audits/ monitoring and act as security and privacy officer. Oversees data entry of case management/supportive housing and outreach team.	97,500			
Other Salary and Benefits	Part time accountant for processing payroll, financial reports, financial audit compliance and compliance with Generally Accepted Accounting Principles. Employee benefits to include health and disability insurance.	68,000			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs: Other					
Salary and Benefits	Case Management salaries and other cost for employment such as worker's compensation, health insurance, payroll taxes, state unemployment taxes.	989,500			
Expense/Equipment/Travel/Supplies/ Other	Each Case Manager is provided with an office, cell phone, computer and mini van or four door car. The vehicles are used for transporting to appointments, social outings, food, shopping, etc. The funds will be used for gas, vehicle maintenance, cell phone usage, office space, office supplies, computer with IT support and Electronic Health Record System.	95,000			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (m	ust equal total from question #6)	1,250,000			

12. Program Performance

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

Over half of the people served by CASL are homeless prior to admission in addition to their mental illness or co-occurring disorders. From CASL's experience, as well as supported by numerous studies, when supportive housing services are incorporated into their housing, it dramatically reduces the burden on the acute care system. The model that we have developed has proven to dramatically reduce recidivism to the emergency rooms, forensic hospitals, jails and Crisis Stabilization Units. Over the past several years, the recidivism rate of our residents is at our below 5% annually. A study in Lee County showed that persons with severe and persistent mental illness or co-occurring disorders who did not have housing coupled with the supportive services, consumed, on average, \$54,625/year. Residents of CASL's program consumed, on average, \$6,000/year. Our goal is to keep people in their respective communities and out of the acute care and/or forensic system.



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

The case managers in collaboration with each resident, develops an Individual Service Plan (ISP) based on personal goals and three distinct program objectives; 1) Obtain and remain in permanent housing; 2) Achieve self-determination; 3) Increase life skills, income and overall quality of life. Our organization uses the Functional Assessment Rating Scale (FARS) to establish a benchmark of the resident's initial functional ability. The FARS enables the case manger to encourage further independence through metered goals that are primarily driven by the resident. We provide comfortable residential settings in the community which offer security and stabilization, enhancing the confidence and safety felt by our residents. Individualized service plans are utilized to set short and long term goals which are essential to maintaining stability and recovery. Our residents have a case manager who advocate and assist in resolving challenges, barriers, obstacles, and assure goals are met.

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

Two services are provided - Housing and the supportive services essential to sustain persons with SPMI in community-based housing. Our residents have a case manager who advocate and assist in resolving challenges, barriers, obstacles and assure goals are met. This assistance enables our residents to access community resources essential to resiliency, self-determination and independence. Our case mangers provide other types of assistance by working with our clients to develop literacy skills, skills to search for job/volunteer opportunities, budgeting, healthcare access, transportation, community services, crisis intervention, accessing clothing resources, computers skills, nutrition, social skills, hygiene management, security management, safety management and housekeeping skills. Residents receive ongoing encouragement and feedback from our case managers, helping them improve their daily living skills, socialization, personal appearance and living pace upkeep.

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

Typically, CASL targets the Severe and Persistently Mentally III (SPMI0 or Adults with Mental Health Problems (AMHP) as defined by DCF Pamphlet 155-2. Over 50% not only have a mental health diagnosis, but a substance abuse diagnosis as well, co-occurring. In addition to this population, CASL assist local forensic diversion programs. This includes but not limited to individuals from state forensic hospitals and local goals through Comprehensive Treatment Court (CTC), as well as, each of the local Florida Assertive Community Treatment (FACT) teams in each county we serve. Most of these clients typically have a mental Health Diagnosis and (ICD10) code between F20-39 and need to receive services for their current MH Problem for 12 months or more. CASL expects to serve between 430 to 500 people.

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

Services provided by CASL, assist the State in the management of a system of care for persons with mental illness most of whom were homeless, chronically homeless, previously incarcerated due to a disability and extremely low or no income. This care is designed to reduce the occurrence, severity, duration and disabling aspects of mental and behavioral disorders. CASL helps individuals to progress towards recovery and self-fulfillment/actualization through the provision of support services and housing. CASL and its assisted living facility (ALF), Renaissance Manor, seek to assist each individual with the services best suited to each client's individual progress. The outcomes will be measured by individuals served and remaining in an independent living situation.

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?

The managing entity, Central Florida Behavioral Health Network (CFBHN), requires for services and people served to be unloaded/maintained in the Electronic Records Systems (CHDS). CFBHN requires for this information to be uploaded to their system to ensure the amount of services provided equals or exceeds the invoiced amount ensuring that billing matches data. If there is not enough data uploaded into their system to indicated services provided per contract requirements, CFHBN will reduce the payment to the provider. CASL has consistently exceed the outcomes and contract requirements with the 100% reporting compliance. For the past three years, CASL has expanded capacity by 30% per year with a 100-bed expansion which will be opened in March 2020. In May 2021, CASL and it's partner Blue Sky Communities will be opening a 95 unit, 118 bed expansion in Ft. Myers.

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



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14	14. Requestor Contact Information						
	a. First Name	Scott		Last Name	Eller		
	b. Organization	Commun	ity Assisted and	Supported Li	ving		
	c. E-mail Address	scott.elle	scott.eller@caslinc.org				
	d. Phone Number						
15	15. Recipient Contact Information						
	a. Organization	ganization Community Assisted and Supported Living					
	b. Municipality and County Statewide						
	c. Organization Type						
	□For Profit Entity	у					
	☑Non Profit 501(c	c)(3)					
	□Non Profit 501(c	o1(c)(4)					
	□Local Entity						
	□University or College						
	□Other (please specify)						
	d. First Name	Scott		Last Name	Eller		
	e. E-mail Address	scott.eller@caslinc.org					
	f. Phone Number	(941)928-1814					
16	16. Lobbyist Contact Information						
	a. Name	Frank Mayernick					
	b. Firm Name	The Mayernick Group					
	c. E-mail Address	frank@themayernickgroup.com					
	d. Phone Number	(850)251-8898					