



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 1518

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Funding for the purchase of a 14-passenger van to provide transportation to services. Transportation is listed as one of the foremost barriers to Access to Care for those who are indigent, uninsured, and/or have a behavioral health (mental health or substance use) disorder. Park Place Behavioral Health Care provides transportation to and from services for individuals with serious mental illness and/or a substance use disorder who otherwise lack transportation. We provide daily service transportation for individuals living in our Residential level 2 & level 4 programs.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	60,000
Fixed Capital Outlay	0
Total State Funds Requested	60,000

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	60,000	92%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	5,200	8%
Total Project Costs for Fiscal Year 2022-2023	65,200	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

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?



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

Payroll Protection - \$2,566,624.95 in salary support for the agency during the height of the pandemic (the loans were forgiven). \$275,000 received from County government for Personal Protective Equipment for Staff, Increased Staff engaged in cleaning and sanitizing areas and waiting rooms, Telehealth equipment for the provision of care, Updated Keyless Entry System for our buildings, Sanitizing wands.

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		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	14-passenger transport vehicle (van)	60,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		60,000

12. Program Performance

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

We will purchase a 14 passenger van to provide transportation to services.

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

Transportation from Residential level 2, and 4 to both Park Place and external services.

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

Transportation to and from needed appointments and other community events.

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

Individuals with serious and persistent mental illness and/or substance use disorders involved in services at Park Place and living in our residential services. Approximately 100 unduplicated individuals will receive regular, weekday transportation to and from services and other activities.

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

Improved access to care and other supportive activities for those who live on our residential campus. Purchase of the van and transportation logs.

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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Return of unused 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.**

N/A



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14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number