

LFIR # 1853

1. Project Title	STEPS Women's	Residential Service	es with Medication A	ssisted Treatment			
2. Senate Sponsor	Debbie Mayfield						
3. Date of Request	12/13/2021						
4. Project/Program De	scription						
women with children. costs to our commun Brevard County havir from a drug overdose	recovery, and provid Treatment (MAT) for The opioid epidemic ity. The number of w ng the sixth-highest of than the average A	e level II residentia Opioid addiction for chas no boundarie comen who die with death rate for over merican. Parental	al treatment and coor or Brevard County wes and does not disc nin a year of having a doses in Florida and substance use is the	rdination with Child tomen who are pregriminate, bringing was baby is a public he residents are 44 per number one cause	efficient, and cost- Welfare offering mant, post-partum, or ith it enormous financial ealth concern and with ercent more likely to die for removal of children must be aggressively		
5. State Agency to rec	eive requested fun	ds Departme	ent of Children and Fa	amilies			
State Agency contact	<u>-</u>						
		 000					
6. Amount of the Nonro	ecurring Request to	or Fiscal Year 202	22-2023 				
Type of Funding			Amo				
Operations				500,000			
	Fixed Capital Outlay			0			
Total State Funds R	Requested			500,000			
7. Total Project Cost fo	or Fiscal Year 2022.	.2023 (including r	natching funds ava	ilable for this proje	act)		
1. Total i Toject oost it	n i iscai i cai zuzz-	ZUZU (IIICIUUIIIG I	natering runus ava	nable for this proje	501)		
T			A	D			
Type of Funding		tion #6)	Amount	Percentage			
Total State Funds Re		tion #6)	Amount 500,000	Percentage 100%	·		
Total State Funds Re		tion #6)	500,000	100%	·		
Total State Funds Re Matching Funds Federal	equested (from quest		500,000	100%			
Total State Funds Re Matching Funds Federal State (excluding the	equested (from quest		500,000	100% 0% 0%			
Total State Funds Re Matching Funds Federal State (excluding the a	equested (from quest		500,000 0 0	100% 0% 0% 0%			
Total State Funds Re Matching Funds Federal State (excluding the a Local Other	equested (from quest	st)	500,000 0 0 0	100% 0% 0% 0% 0%			
Total State Funds Re Matching Funds Federal State (excluding the a	equested (from quest	st)	500,000 0 0	100% 0% 0% 0%			
Total State Funds Re Matching Funds Federal State (excluding the a Local Other	equested (from quest amount of this reque for Fiscal Year 202	2-2023	500,000 0 0 0	100% 0% 0% 0% 0%			
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Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs 8. Has this project pre	equested (from quest amount of this reque for Fiscal Year 202 viously received st	2-2023 ate funding?	500,000 0 0 0 500,000 Yes	100% 0% 0% 0% 0% 100%			
Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу)	equested (from quest amount of this reque for Fiscal Year 202 viously received st Amou	2-2023 ate funding? int Nonrecurring 500,000	500,000 0 0 0 500,000 Yes Specific Appropriation #	100% 0% 0% 0% 100%			
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Total State Funds Re Matching Funds Federal State (excluding the algorithm Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 2021-22 9. Is future funding like a. If yes, indicate no	equested (from quest amount of this reque for Fiscal Year 202 viously received st Amou Recurring ely to be requested onrecurring amount	2-2023 ate funding? int Nonrecurring 500,000	500,000 0 0 0 500,000 Yes Specific Appropriation # 367	100% 0% 0% 0% 100% Vetoed No			
Total State Funds Re Matching Funds Federal State (excluding the allocal Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 2021-22 9. Is future funding like	equested (from quest amount of this reque for Fiscal Year 202 viously received st Amou Recurring ely to be requested onrecurring amount	2-2023 ate funding? int Nonrecurring 500,000	500,000 0 0 0 500,000 Yes Specific Appropriation # 367	100% 0% 0% 0% 100% Vetoed No			



LFIR # 1853

1(0. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?
	No
	If yes, indicate the amount of funds received and what the funds were used for.

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	Staffing for the program to include a clinical director, program director, counselors, behavioral techs, nurses and dietitians.	376,000
Expense/Equipment/Travel/Supplies/ Other	Expenses including software, training, client transportation and operating supplies.	102,000
Consultants/Contracted Services/Study	Consultations with medical director, CPA and psychiatrist.	22,000
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	500,000

12. Program Performance

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

While we have been focused on the Covid-19 pandemic, the overdose epidemic has only continued to rise and its related societal effects on overdose deaths and child welfare removals show a troubling increase associated with the pandemic. According to the Florida Department of Health, in the first eight months of 2020 there was an unprecedented 43 percent spike in drug overdose deaths in Florida compared to the same time in 2019. The specific goal of the STEPS residential treatment program will be to reduce costs for multiple publicly funded systems by reducing child welfare removals, reducing emergency room visits, and reducing arrests and incarceration. Funding of these residential beds in advance of an encounter with the criminal justice alone will yield tremendous benefits with the average cost of MAT of approximately \$4,000 compared to the \$22,000 average cost to taxpayers for incarceration.

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

As defined in Florida Administrative Code (65D-30, F.A.C), Residential Level II treatment is structured to serve clients who need a safe and stable living environment in order to develop sufficient recovery skills for the transition to a lesser restrictive level of care or reintegration into the general community in accordance with placement criteria. STEPS will provide these beds in addition to providing Child Welfare coordination and Medication Assisted Treatment (MAT) to all participants through a client-centered approach and Evidenced Based Treatment Services that includes group therapy, individual and family counseling. Recognition of the extent of women's exposure to opioids and the attendant consequences has been limited therefore through established Memorandum of Agreements (MOA), STEPS will provide a wraparound approach to link additional services unique to women's needs with crucial community providers including preand post-natal care.

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



LFIR # 1853

Data from the Florida Department of Law Enforcement, Medical Examiners Commission 2020 Inte Trrim Report, indicated there were 3,834 opioid-related deaths, a 30% increase as compared with the same time period of 2019. Funds for this project will provide ten (10) level II residential treatment beds, evidenced based group, individual and family counseling, transportation to and from treatment as well as all appointments including visitation with child(ren) in dependency care and Medication Assisted Treatment (MAT) with an E-therapy component to Pregnant; post-partum women; and women with child(ren) who are addicted to opioids residing in Brevard County. After transitioning back to Brevard County, participants will be placed in an Outpatient/case management program to receive aftercare and follow up services, as needed.

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

The target population served by this project are women addicted to opioids who are pregnant or post-partum; and women with child(ren) residing in Brevard County. Depending on the length of stay which is anticipated at 4-6 months, a total of 20 individuals are expected to be served.

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

Program outcomes will be measured through the following methods:

- (1) 75% of program participants will successfully complete treatment as evidenced by documentation in the discharge summary:
- (2) 75% of program participants will increase access to safe and sober housing as evidenced by documentation in the transition plan and discharge summary.
- (3) 75% of program participants will achieve reunification with their child(ren) as evidenced by documentation in child welfare case plans, the transition plan and discharge summary.
- (4) 75% of program participants will improve their probation outcome as evidenced by documentation in probation reports, the transition plan and discharge summary.
- 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?

Suggested penalties may include: No payment of funds to the agency as a result of not admitting clients within 60 days of funding being made available; or No payment of funds to the agency if identified beds are vacant more than 30 days.

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.

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- 1	N/A		
- 1	IN/7		



LFIR # 1853

14. Requestor Contact	Informati	ion			
a. First Name	Cheryl		Last Name	Bello	
b. Organization	Specialized Treatment Education and Prevention Services (STEPS), Inc				
c. E-mail Address	CHERYL.BELLO@FLSTEPS.ORG				
d. Phone Number	(407)879-	-1201	Ext.		
15. Recipient Contact Information					
a. Organization	Specialized Treatment Education and Prevention Services (STEPS), Inc				
b. Municipality and	l County	Brevard			
c. Organization Ty	c. Organization Type				
□For Profit Entity	r Profit Entity				
☑Non Profit 501(c	c)(3)				
□Non Profit 501(c	c)(4)				
□Local Entity					
□University or Co	ollege				
□Other (please sp	□Other (please specify)				
d. First Name	Cheryl		Last Name	Bello	
e. E-mail Address	CHERYL	.BELLO@FLSTE	PS.ORG		
f. Phone Number					
16. Lobbyist Contact I	nformatio	n			
a. Name	Christoph	ner T. Dawson			
b. Firm Name	GrayRob	inson PA			
c. E-mail Address	chris.dawson@gray-robinson.com				
d. Phone Number	(407)843	-8880			