

LFIR # 2060

1. Project Title	Miami Beach Communit	y Health Ce	nter Reinforce Resilie	ence Program						
2. Senate Sponsor	Jason Pizzo									
3. Date of Request	12/28/2021									
4. Project/Program D	Description									
During the COVID- abuse have increas well-being of individual address mental hea	During the COVID-19 pandemic, reports of depression and other mental health issues, intimate partner violence, and child abuse have increased. The Reinforce Resilience Program is a behavioral health initiative aimed at improving the mental well-being of individuals and families negatively impacted by COVID-19, by using cognitive behavioral therapy (CBT) to address mental health issues (e.g. anxiety, depression, suicidal ideation, etc.), improve coping skills, and build resilience in dealing with life's challenges.									
patient-centered me management, and	Miami Beach Community Health Center (MBCHC) is a Federally Qualified Health Center (FQHC) which provides patients a patient-centered medical home with high quality, affordable primary health care and specialty services, chronic disease management, and support services in Miami-Dade County. Services include psychiatric, behavioral health, and substance use disorder treatment services.									
5. State Agency to re	eceive requested funds	Departme	ent of Children and F	amilies						
State Agency cont	•	•								
State Agency Cont	acteu: NO									
6. Amount of the Nor	nrecurring Request for Fis	cal Year 202	22-2023							
Type of Funding			Amo	ount						
Operations				409,000						
Fixed Capital Outla	у		0							
Total State Funds	Requested		409,000							
7. Total Project Cost	for Fiscal Year 2022-2023	(including r	natching funds ava	ilable for this proje	÷ct)					
Type of Funding			Amount	Percentage						
	Requested (from question #6	6)	409,000	71%						
Matching Funds		T								
Federal			167,000	29%						
	e amount of this request)		0	0%						
Local			0	0%						
Other			0	0%						
Total Project Cost	s for Fiscal Year 2022-202	3	576,000	100%						
8. Has this project p	reviously received state fu	ınding?	No							
Fiscal Year (yyyy-yy)	Amount Recurring None	recurring	Specific Appropriation #	Vetoed						
	Rooding 14011	Journing								
9. Is future funding li	ikely to be requested?		No							
a. If yes, indicate i	nonrecurring amount per	year.								
b. Describe the so	ource of funding that can b	e used in li	eu of state funding.							
None.										



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

Yes

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

\$119,926 - FY 2020 Coronavirus Supplemental Funding for Health Centers - PPE and COVID-19 testing \$162,755 - Ryan White HIV/AIDS Program Part C EIS COVID-19 Response - PPE \$1,780,760 - Health Center Coronavirus Aid, Relief, & Economic Security (CARES) Act \$880,939 - FY 2020 Expanding Capacity for Coronavirus Testing (ECT)

\$11,992,500 - FY 2021-2022 - American Rescue Act \$1,073,914 - FY 2021 - Health Center Infrastructure

\$3,281,500 - FY 2020 - Paycheck Protection Program (PPP)

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	MBCHC is requesting \$409,000 to cover the salaries and benefits of five mental health providers.	409,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	409,000

12. Program Performance

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

The purpose of the Reinforce Resilience Program is to improve the mental well-being of individuals and families negatively impacted by COVID-19 by using cognitive behavioral therapy (CBT) to address mental health issues, improve coping skills, and build resilience in dealing with living through a pandemic. The American Psychological Association describes CBT as "a form of psychological treatment that has been demonstrated to be effective for a range of problems including depression, anxiety disorders, [...], marital problems, eating disorders and severe mental illness" which "leads to significant improvement in functioning and quality of life. According to the County Health Rankings (2020), Miami-Dade County residents report an average of 4.2 "poor mental health days" in the past 30 days compared to 4.0 days for Florida overall. The COVID-19 pandemic has increased stresses on individuals and families and exacerbated people's existing mental health issues.

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



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MBCHC's Behavioral Health staff includes a psychiatrist, licensed psychologist, and three Licensed Clinical Social Worker (LCSW) psychotherapists. An initial evaluation will be conducted with the client to identify treatment areas and develop a treatment plan. Follow-up therapy sessions will be scheduled to address issues identified. Therapy consists of talking about factors having a negative impact on the client's life with a caring, objective person who can assist them in tapping into their inner strengths and developing new resources and coping skills. Behavioral health staff provide supportive therapy, crisis intervention, problem solving strategies, grief counseling, management of chronic illness, stress management/relaxation training, childhood behavior management strategies, how to deal with family and relationship issues, and client education. If necessary, psychiatric evaluation and medication management services are available both in person and via telemedicine.

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

Behavioral health services (psychiatric evaluation, cognitive behavioral therapy, and medication therapy management) will be provided by qualified providers in person or via telemedicine.

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

Low-income and uninsured individuals in Miami-Dade County. In 2019, 92.7% of patients were low-income with 80.3% having incomes below the Federal Poverty Guideline. More than a third (37.6%) of patients are uninsured. MBCHC expects to serve 2,500 individuals with this project.

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

The intent of this project is to mitigate the stressors associated with the challenges of living through and build resilience. The expected benefit is improved mental well-being of individuals and families served and the acquisition of coping skills leading to a reduction in negative behaviors such as intimate partner violence, child abuse, and substance abuse. "Self-efficacy refers to an individual's belief in his or her capacity to execute behaviors necessary to produce specific performance attainments (Bandura, 1977, 1986, 1997). Self-efficacy reflects confidence in the ability to exert control over one's own motivation, behavior, and social environment." The methodology to validate and quantify the outcomes is preand post-evaluations for depression, anxiety, and self-efficacy. These evaluations will be conducted before commencing, or at the beginning of, the treatment plan to determine the baseline values and periodically during the course of treatment.

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?

MBCHC does not suggest additional penalties beyond the standard penalties for failing to meet deliverables or performance measures provided for in the contract. MBCHC endeavors to meet all deliverables in funded projects.

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	14. Requestor Contact Information						
	a. First Name	Sorangel	У	Last Name	Menjivar			
	b. Organization	Miami Beach Community Health Center						
	c. E-mail Address	sorangelym@mbchc.com						
	d. Phone Number	(305)538-8835 Ext. 1403						
15.	Recipient Contact	Informatio	on					
	a. Organization	Miami Beach Community Health Center						
	b. Municipality and	y and County Miami-Dade						
	c. Organization Type							
	□For Profit Entity	t Entity						
	☑Non Profit 501(c	(c)(3)						
	□Non Profit 501(c	c)(4)						
	□Local Entity							
	□University or Co	ollege						
	□Other (please sp	se specify)						
	d. First Name	Mark		Last Name	Rabinowitz			
	e. E-mail Address	MRabinowitz@mbchc.com						
	f. Phone Number							
16.	6. Lobbyist Contact Information							
	a. Name	Kelly C. Mallette						
	b. Firm Name	Ronald L. Book PA						
	c. E-mail Address	kelly@rlbookpa.com						
	d. Phone Number	(305)935-1866						