



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 2309

1. Project Title Hillsborough Community College Nursing and Allied Health Program Support

2. Senate Sponsor Danny Burgess

3. Date of Request 01/12/2022

4. Project/Program Description

This funding will go towards the acceleration of the entry-level AS Nursing program to a year-round offering resulting in 120 additional registered nurses annually in Tampa, the expansion of the new BSN Nursing program to double offerings. It will also go towards the expansion of the Surgical Technology to full capacity and the expansion of the cardiac catheterization program to full capacity.

5. State Agency to receive requested funds Department of Education

State Agency contacted? Yes

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

Type of Funding	Amount
Operations	2,000,000
Fixed Capital Outlay	0
Total State Funds Requested	2,000,000

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)	2,000,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2022-2023	2,000,000	100%

8. Has this project previously received state funding? No

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

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.

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

Yes



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Fiscal Year 2022-2023

LFIR # 2309

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

The college received \$118 million in Higher Education Emergency Relief Fund dollars. These funds were used for student aid, technology upgrades, lost revenue and HVAC Improvements.

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	2,000,000
Expense/Equipment/Travel/Supplies/Other		0
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)		2,000,000

12. Program Performance

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

1. The acceleration of the entry level AS Nursing program to a year round offering resulting in 120 additional registered nurses annually in Tampa.
2. The expansion of the new BSN Nursing program to double offerings.
3. Expansion of the Surgical Technology to full capacity.
4. Expansion of the Cardiac Catherization program to full capacity.

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

By adding year-round Associate Degree Nursing, Registered Nursing students will graduate 3-6 months earlier generating an average of \$10k additional income per student. Additionally, the total number of entry level nursing graduates sent into the Tampa workforce will increase by approximately 120 per year. Additional BSN faculty will allow all AS graduates to immediately begin their BSN.

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

All funds will directly benefit students, by allowing earlier/accelerated graduation for nursing students, or creating job training opportunities for surgical technology and cardiac catheterization students.

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

Direct impact will be for students in nursing and allied health fields. Indirect impact will be seen in several areas: Veterans, victims of crime, drug offenders (in criminal justice), current or formerly incarcerated persons, university and college students, high school students, grade school students, preschool students, drug users (in health services), physically disabled, developmentally disabled, homeless, at-risk youth, economically disadvantaged persons, elderly persons, persons with poor mental health, persons with poor physical health, jobless persons.

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



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Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 2309

Improve Quality of Education & Increase or Improve Economic Activity:

With an accelerated entry-level nursing program, students will generate an average of \$10k additional income by entering the workforce 3-6 months earlier. With additional faculty in the BSN, Surgical Technology, and Cardiac Catheterization programs, we will be able to meet the hiring needs of the many clinical partners.

Methodology

1. Decreased length of time from entry to graduation.
2. Increased number of residents who are able to enter and graduate annually from the HCC Nursing program.
3. Decreased cost for BSN completion
4. Number of graduates for Surgical Technology
5. Number of graduates for Cardiac Catheterization

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?

Reversal of funding.

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 - No capital outlay funding.



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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