

LFIR # 2522

1. Project Title	IMPOWER Subs	stance Misuse Treat	ment Program Facili	ty Renovations		
2. Senate Sponsor	Jason Brodeur					
3. Date of Request	11/30/2021					
4. Project/Program De	escription					
remodeling of the gill lab and restroom, ar	rls dormitory, addin nd external painting	g sprinklers to meet of facility. The reno	fire code, the renova	ation of the medical POWER to provide a	e of work to include the offices to create on-site a safe and therapeutic	
5. State Agency to red	ceive requested fu	nds Departme	ent of Children and F	amilies		
State Agency conta	cted? Yes					
6. Amount of the Noni	recurring Request	for Fiscal Year 20	22-2023			
Type of Funding			Amount			
Operations			0			
Fixed Capital Outlay	1		450,000			
Total State Funds I	Requested		450,000			
7. Total Project Cost f	or Fiscal Year 202	2-2023 (including	matching funds ava	ilable for this proje	ect)	
Type of Funding			Amount	Percentage		
Total State Funds R	equested (from que	estion #6)	450,000	100%		
Matching Funds						
Federal			0	0%		
State (excluding the amount of this request)			0	0%		
Local			0	0%		
Other	. (- - - - - - - -	200 0000	0	0%		
Total Project Costs	S for Fiscal Year 20	J22-2U23	450,000	100%		
8. Has this project pro	eviously received	state funding?	Yes			
Fiscal Year	Amo	ount	Specific	Vetoed		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #			
2021-22		150,000	374D	No		
9. Is future funding lik	celv to be requeste	ed?	No			
a. If yes, indicate n						
b. Describe the sou	urce of funding tha	at can be used in li	eu of state funding			
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10. Has the entity req	uesting this proje	ct received any fed	ierai assistance rela	ated to the COVID-	19 pandemic?	
Yes						
If yes, indicate the	amount of funds	received and what	the funds were use	ed for.		



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Agency was granted \$1,236,736 in PPP funds to cover salary, benefits and utility expenses.

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		0				
Consultants/Contracted Services/Study		0				
Fixed Capital Construction/Majo	r Renovation:					
Construction/Renovation/Land/ Planning Engineering	Scope of work to include the remodeling of the girls dormitory, installation of sprinklers to meet fire code, and renovation of the medical office to incorporate a lab and restroom. To provide a safe and therapeutic living environment for youth as they move through the treatment and recovery process.	450,000				
Total State Funds Requested (must equal total from question #6)						

12. Program Performance

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

To provide a safe and therapeutic living environment for youth as they move through the treatment and recovery process. To provide a healing center for the mind, body and spirit.

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

Safer and better quality of life, and more comfortable living quarters for boys and girls at the treatment program.

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

Overall addictions treatment to include medical examinations, medical treatment and drug testing.

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

Florida male and female adolescents between 13 and 18 yrs old who meet criteria for residential substance abuse treatment because they are addicted to one or more of the following: opioids, benzodiazepines, methamphetamine, (crack) cocaine, cannabis, alcohol, among others.

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

Funding will assist IMPOWER in strengthening its holistic approach to helping youth with crippling chemical dependency issues build a foundation for long-term recovery/wellness. Outcomes will include sustained health and sobriety in youth who graduate the program and will be measured by % of youth who successfully complete the treatment program and % of youth who remain sober 1 year and 5 years post-discharge.

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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Action would be taken with staff and management if performance measures were not properly tracked, collected and reported as instructed. IMPOWER is confident that through the use of its evidenced-based practice models, outcomes would remain strong. If this is not the case, there would be no future legislative 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.

IMPOWER a recognized 501c3 organization.



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14.	Requestor Contact	Informat	ion							
	a. First Name	Anna		Last Name	Kesic					
	b. Organization	IMPOWER, Inc.								
	c. E-mail Address	akesic@impowerfl.org								
	d. Phone Number	none Number (407)491-0965 Ext.								
15.	Recipient Contact	Informatio	on							
	a. Organization	IMPOWER, Inc.								
	b. Municipality and	I County	Seminole							
	c. Organization Type									
	□For Profit Entity	or Profit Entity								
	☑Non Profit 501(c	1(c)(3)								
	□Non Profit 501(c	(c)(4)								
	□Local Entity	ty								
	□University or College									
	□Other (please specify)									
	d. First Name	Anna		Last Name	Kesic					
	e. E-mail Address	akesic@impowerfl.org								
	f. Phone Number									
16.	16. Lobbyist Contact Information									
	a. Name	Jonathan Alexander Setzer								
	b. Firm Name	Florida Alliance Consulting LLC								
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