



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 2627

1. Project Title Okaloosa-Walton Mental Health and Substance Abuse Pre-Trial Diversion Program

2. Senate Sponsor George Gainer

3. Date of Request 01/26/2022

4. Project/Program Description

Request funding to support continued operations of a mental health diversion program designed to redirect certain populations away from incarceration in local jails. Participants will be placed into the program typically as a condition of their bond and Pretrial Release Supervision. Services included in the program include needs assessment, service referrals, case management, psychosocial rehabilitation, self-help, advocacy, recovery planning, health and wellness, and relapse prevention.

5. State Agency to receive requested funds Department of Children and Families

State Agency contacted? Yes

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

Type of Funding	Amount
Operations	350,000
Fixed Capital Outlay	0
Total State Funds Requested	350,000

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)	350,000	52%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	325,000	48%
Other	0	0%
Total Project Costs for Fiscal Year 2022-2023	675,000	100%

8. Has this project previously received state funding? Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2021-22	0	200,000	367	No

9. Is future funding likely to be requested? Yes

a. If yes, indicate nonrecurring amount per year. 350,000

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 2627

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

Okaloosa County BCC has expended approximately \$37 million in federal assistance for a variety of costs as a result of COVID.

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	Okaloosa County BOCC has contracted with a behavioral health organization to provide pre- and post- booking diversion for appropriate individuals with misdemeanor and low level felony charges from the criminal justice system as well as post-release wraparound services to those who are released from custody. The annual cost of the program is \$675,000. The county will provide the balance of the funding.	350,000
Operational Costs: Other		
Salary and Benefits		0
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)		350,000

12. Program Performance

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

Provide pre-offense services and for pre- and post-booking diversion for appropriate people with misdemeanor and low level felony charges from the criminal justice system as well as post-release wraparound services to those who are released from custody.

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

Services included in the program include needs assessment, service referrals, case management, psychosocial rehabilitation, self-help and advocacy, recovery planning, health and wellness classes, relapse prevention and education factors that have contributed to their judicial involvement. Active monitoring of participants will be provided by Pretrial Services in coordination with BCI staff.

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

Direct services included in the program include needs assessment, service referrals, case management, psychosocial rehabilitation, self-help and advocacy, recovery planning, health and wellness classes, relapse prevention and education factors that have contributed to their judicial involvement.

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

Persons with poor mental health, economically disadvantaged persons, homeless, drug users, currently or formerly incarcerated persons and the general population of Okaloosa County, which has a population of over 200,000.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 2627

be measured?

Recovery and rehabilitation of patients and reduced recidivism. Test whether costs of incarceration, length of incarceration, recidivism, can be lowered, safety increased and liberty protected in a cost-effective way in counties with a paucity of mental health and substance abuse treatment resources.

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?

Standard contract penalties and/or revocation of grant funds to be considered for failing to meet deliverables or performance standards.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 2627

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