

LFIR # 2612

1. Project Title	PEMHS Coordinated Receiving System	
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2. Senate Sponsor Ed Hooper

**3. Date of Request** 12/19/2023

#### 4. Project/Program Description

Designate the Pinellas County Behavioral Health Receiving System as a Coordinated Receiving System through Personal Enrichment Through Mental Health Services, Inc. (PEMHS). This will result in a much more coordinated system, providing immediate crisis intervention, assessment and care coordination services, 24 hours, 7 days a week, 365 days a year. The CRS will expedite processing and treatment of individuals in need of behavioral health care and substance use services, reducing inappropriate use of hospital emergency rooms and jails, increased diversion from higher levels of care when possible, reduced drop off times for law enforcement and Emergency Medical Services personnel, direct individuals to appropriate levels of care, and will employ additional care coordination strategies to ensure continuity of care for those in crisis.

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 2024-2025

Type of Funding	Amount
Operations	2,200,000
Fixed Capital Outlay	0
Total State Funds Requested	2,200,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	2,200,000	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 2024-2025	2,200,000	100%	

8. Has this project previously received state funding?

Fiscal Year	Amount		Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

#### 9. Is future funding likely to be requested?

Yes

No

a. If yes, indicate nonrecurring amount per year.

2,200,000

b. Describe the source of funding that can be used in lieu of state funding.

There is no other available funding source for this project.

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.

PEMHS received a PPP loan to support increased staffing and CARES Act Provider Relief Funds to supplement lost revenue.

# **Complete questions 11 and 12 for Fixed Capital Outlay Projects**

#### **11. Status of Construction**

a. What is the current phase of the project?

O Planning

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List 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

#### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Salary and Benefits for agency administration including CEO and support staff.	16,102
Other Salary and Benefits	Salary and Benefits for agency administration services including executive management, human resources, accounting and finance and information systems.	77,317
Expense/Equipment/Travel/Supplies/ Other	General operating expenses for administrative services.	139,180
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Salaries and Benefits for Nursing, Mental Health Techs, Therapists, Discharge Planning and Transportation.	1,411,953
Expense/Equipment/Travel/Supplies/ Other	General operating expenses to include pharmacy, dietary, maintenance, and other support costs.	395,101
Consultants/Contracted Services/Study	Contracted services for psychiatric and medical services.	160,347
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	2,200,000

#### 14. Program Performance

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



The specific purpose or goal that will be achieved by the funds will be to provide a coordinated receiving system that will provide immediate access to care and treatment for individuals in need of mental health and substance use services. Care coordination services will ensure a no-wrong door model and individuals will receive appropriate services at the right time and at the appropriate level of care.

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

Working with community partners to include behavioral health, substance use, housing, physical health care, law enforcement, corrections, and hospitals, the activities that will be provided to meet the intended purpose of these funds will be coordinated receiving to immediate crisis intervention, triage, screening and assessment, treatment and care coordination services 24 hour, 7 days a week with a warm hand-off.

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

The direct services that will provided to citizens by the appropriations project will be immediate crisis intervention, access to inpatient crisis stabilization services, Psycho-education, medication, care coordination, peer support, diversion to lower level of care when possible, mobile crisis team services to link to mental health and substance use services with a warm handoff to encourage engagement.

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

The target population is all citizens in need of behavioral health crisis services. Approximately 5100 individuals will be served annually.

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

#### be measured?

The benefit of or outcome of this project will be that more individuals will be served and receive appropriate and individualized care for their behavioral health needs. There will be timely delivery of services to meet the growing demands.

## 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?

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 in the contract will be that, the contracting agency has the option to cancel the contract and/or request the return of a percentage of funds.

#### **15. Requester Contact Information**

a. First Name	Maxine	Last Name	Booker
b. Organization	Personal Enrichment thro	ugh Mental H	lealth Services, Inc.
c. E-mail Address	mbooker@pemhs.org		
d. Phone Number	(727)902-7740	Ext.	

#### **16. Recipient Contact Information**

Enrichment through Mental Health Services, a. Organization Inc.

**b. Municipality and County** | Pinellas

## c. Organization Type

□For Profit Entity

☑Non Profit 501(c)(3)



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□Non Profit 501(c	e)(4)			
Local Entity				
□University or Co	□University or College			
□Other (please specify)				
d. First Name	Zofia	Last Name	Whiting	
e. E-mail Address	zwhiting@pemhs.org			
f. Phone Number	(727)452-2282			
17. Lobbyist Contact Information				
a. Name	Frank P. Mayernick Jr.			
b. Firm Name	The Mayernick Group LL	C		
c. E-mail Address	frank@themayernickgroup	o.com		

d. Phone Number (850)251-8898