

LFIR # 3044

1. Project Title	Bridges 2 Recovery

2. Senate Sponsor Darryl Rouson

## 4. Project/Program Description

Since implementing the Bridges not Barriers Program, CORE programs have taken off throughout most of our Tampa Bay counties. Yet, coordination between law enforcement and CORE project stakeholders have been inconsistent and tactical deployment of best practices have yet to be issued. To maximize effectiveness of both interventions, Live Tampa Bay was asked to assist. Building on our work deploying best practices to combat the opioid crisis via policing & post- overdose navigation from crisis (overdose) into treatment/recovery, LTB will bring together first responders and law enforcement agencies and their community partners across jurisdictions to fill this gap by: 1) measuring outcomes of efforts currently being implemented, 2) assisting partners in coordinating/sharing data and lessons learned across jurisdiction, 3) tweaking implementation of efforts based on data/lessons learned, and 4) identifying - and where possible, developing -- supplemental supports.

### 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	750,528
Fixed Capital Outlay	0
Total State Funds Requested	750,528

### 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)	750,528	70%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	100,000	9%
Other	225,000	21%
Total Project Costs for Fiscal Year 2024-2025	1,075,528	100%

8. Has this project previously received state funding? No

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

### 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?

No

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

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

# **11. Status of Construction**

	a.	What	is the	current	phase of	f the	project?
--	----	------	--------	---------	----------	-------	----------

Planning O Design O Construction

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

No

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	CEO (.25 FTE)	37,500
Other Salary and Benefits	Program Implementer, Evaluator, Quality Oversight (1.0 FTE + fringe benefits)	77,160
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study	USF Research Partnership (\$100,000) and project management	120,000
Operational Costs: Other		
Salary and Benefits	liaisons/community support specialists (5.0 FTE + fringe benefits) and communication/outreach specialist (1.0 FTE + fringe benefits)	395,868
Expense/Equipment/Travel/Supplies/ Other	Health Promotion/Outreach Materials, Meetings/Trainings/Events, Equipment/Supplies, Staff Mileage	120,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	750,528

### 14. Program Performance

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



With opioid epidemic time saving strategies lives are saved. Bridges 2 Recovery's overall goal is to more quickly spread tactical implementation of best practices by law enforcement AND fire/rescue throughout the Tampa Bay region. This program will aid coordination across law enforcement jurisdiction and between CORE programs and law enforcement/partners by 1) measuring outcomes of efforts currently being implemented, 2) assisting agencies in coordinating/sharing data and lessons learned across jurisdiction, 3) tweaking implementation of efforts based on data/lessons learned, and 4) assisting in identification and/or development of community supports to assist law enforcement in navigation of post-overdose victims.

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

We will 1) increase the efficacy of programs by sharing best practices and data between agencies and help to coordinate roll-out of new evidence-based practices as appropriate, 2) share positive outcomes with officers and first responders and community at large, and 3) train and assist with certification peers who work with these programs.

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

Citizens will gain increased access to treatment and other evidence-based, data driven, best practices to increase their likelihood of surviving SUD overdose in the future and of connecting to treatment/recovery. Citizens will receive nonclinical direct services via certified peer recovery specialists and navigators through two types of programs.

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

First responders revive those overdosing 12,449 times each year in the Tampa Bay region (Citrus, Hernando, Manatee, Sarasota, Pasco, Pinellas, Polk, Hillsborough counties). By better coordinating CORE and Law Enforcement programs, we aim to reach 10% of this population more effectively, we anticipate serving 1,200 individuals and connecting them to recovery and/or treatment services.

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

#### be measured?

CORE programs, Leave Behind Programs, Behavioral Health Intervention Teams, evaluation of systems breakdowns in fatal overdoses, usage of and coordination through OD Maps, and peer navigation are all best practices being utilized by our fire/rescue and law enforcement agencies in the Tampa Bay region to varying degrees of success. This program will measure the outcomes of implementation of programs already in existence, identify which implementation tactics are most successful according to the data, share this data with first responder & law enforcement agencies, and then offer supplement support in deploying modified tactics for best practice implementation. Once these modified tactics are deployed, these will then be measured to ensure success.

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?

If the post-intervention, modified tactics do not produce better coordination, an increase in efficacy of responses by fire/rescue and law enforcement officers, decrease of community-based stigma, and a decrease in burnout/fatigue around overdose response, then this strategy should be abandoned or improved upon by others.

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

a. First Name	Jennifer		Last Name	Webb	
b. Organization	Live Tam	pa Bay			
c. E-mail Address	jw@liveta	mpabay.org			
d. Phone Number	(727)320-	-6275	Ext.		
16. Recipient Contact Information					
a. Organization	Live Tam	pa Bay			
b. Municipality and	County	Hillsborough			

c. Organization Type



LFIR # 3044

□For Profit Entity				
☑Non Profit 501(c	:)(3)			
□Non Profit 501(c	:)(4)			
Local Entity				
University or Co	llege			
□Other (please sp	pecify)			
d. First Name	Jennifer	Last Name	Webb	
e. E-mail Address	jw@livetampabay.org			
f. Phone Number	(727)320-6275			
17. Lobbyist Contact I	nformation			
a. Name	None			
b. Firm Name				
c. E-mail Address				
d. Phone Number				