

The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 3394

4. Due la et Title	Oinevit 44 Oil I	Otabili-ative Heit				
1. Project Title	Circuit 14 Crisis	Stabilization Unit In	riprovements			
2. Senate Sponsor	Jay Trumbull					
3. Date of Request	equest 01/08/2024					
4. Project/Program D	escription					
project funding will pexisting Baker Act re	provide for renovation	on and safety impro inally constructed ir	f Northwest Florida's vements for the staff, n 1992. The project w Department of Childre	clients, and the cor ill also prepare the f	nmunity within an acilities to establish a	
5. State Agency to re	ceive requested fu	unds Departm	ent of Children and F	amilies		
State Agency conta	•	•				
6. Amount of the Non		for Fiscal Year 20	24-2025			
Type of Funding	<u> </u>		Amo	ount		
Operations				0		
Fixed Capital Outlay	/			3,000,000		
Total State Funds	Requested			3,000,000		
7. Total Project Cost f	for Fiscal Year 202	24-2025 (including	matching funds ava	ilable for this proje	ect)	
Type of Funding			Amount	Percentage		
Total State Funds Requested (from question #6)			3,000,000	100%		
Matching Funds						
Federal			0	0%		
State (excluding the amount of this request)			0	0%		
	Local			0%		
	Other			0%		
Total Project Costs	s for Fiscal Year 2	024-2025	3,000,000	100%		
8. Has this project pr	eviously received	state funding?	No			
Fiscal Year	Amount		Specific	Vetoed		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #			
	_					
9. Is future funding li	kely to be request	ed?	No			
a. If yes, indicate n	onrecurring amou	ınt per year.				
b. Describe the so	urce of funding th	at can be used in I	ieu of state funding			
10. Has the entity req	uesting this proje	ct received any fed	deral assistance rela	ated to the COVID-	19 pandemic?	
Yes						
	amount of funds	received and what	the funds were use	nd for		
ii yes, iliulcate the	aniount or funds	received and wild	e iuilus wele use	u 101.		



11. Status of Construction

1

Circuit 14.

a. What is the current phase of the project?

The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 3394

\$2.8 million Payroll Protection Program (PPP) loan forgiveness received from the Small Business Association (SBA). No federal assistance has been obtained for this project.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Planning	O Design	O Construction (⊃ N/A			
b. Is the project	"shovel ready" (i.e permitted)?	Yes			
c. What is the es	stimated start da	te of construction?	10/01/202	4		
d. What is the es	stimated comple	tion date of constructi	on? 6/01/2025			
		o receive, directly or in rs of the facility and th		d capital out	ay funding. In	clude the

13. 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	This is a renovation project for the Circuit 14 Baker Act receiving facility for mentally ill adults. Licensed crisis stabilization unit services will be provided and enhanced for seriously mentally ill adults. This project will provide for increased safety and security for patients and staff. Facilities will be prepared to establish a Central Receiving Facility (CRF) within Circuit 14 per the Department of Children and Families statewide model.	3,000,000
Total State Funds Requested (m	ust equal total from question #6)	3,000,000

Facility is fully owned by Life Management Center of Northwest Florida, Inc., a private non-profit 501(C)3 entity serving

14. Program Performance

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



The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 3394

Provide for increased safety, security, and capacity for adult Baker Act patients receiving Crisis Stabilization Unit services in Circuit 14. Increase diversion from state hospitalization and improve safety for staff and the communities served. Prepare facilities to establish a Central Receiving Facility (CRF) within Circuit 14 per the Department of Children and Families statewide model.

and Families stat	ewide model.		
b. What activities	and services will be provided to meet the intended purpose of these funds?		
This is a license	Baker Act receiving service and facility.		
c. What direct se	rvices will be provided to citizens by the appropriation project?		
This is a license	Baker Act receiving service and facility.		
d. Who is the tar	get population served by this project? How many individuals are expected to be served?		
Mentally ill adults Approximately 80	s meeting Florida Baker Act criteria are served in a currently licensed 16 bed capacity facility. 0 persons served annually.		
e. What is the ex	pected benefit or outcome of this project? What is the methodology by which this outcome will		
be measured?			
Renovations will data will be main	provide for increased safety, security, and diversion from state hospitalization. Census and recidivism ained.		
f. What are the s	uggested penalties that the contracting agency may consider in addition to its standard penalties		
for failing to mee	et deliverables or performance measures provided for the contract?		
Reduce funding	if required.		
15. Requester Conta	ct Information		
a. First Name	Edwin R. "Ned" Ailes		
b. Organization	Life Management Center of Northwest Florida		
c. E-mail Address	nailes@Imccares.org		
d. Phone Numbe	(850)522-4485 Ext. 1300		
16. Recipient Contac	t Information		
a. Organization	Life Management Center of Northwest Florida		
b. Municipality a	nd County Bay		
c. Organization T	уре		
□For Profit Entit	/		
☑Non Profit 501	(c)(3)		
□Non Profit 501	(c)(4)		
□Local Entity			
□University or C	ollege		
□Other (please	specify)		
d First Name	Edwin R "Ned" Last Name Ailes		



The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 3394

e. E-mail Address	nailes@Imccares.org	
f. Phone Number	(850)522-4485	
Lobbyist Contact Information		

17. Lobbyist Contact Information

a. Name	Joel T. Overton
b. Firm Name	Larry J. Overton & Associates Inc
c. E-mail Address	admin@loverton.net
d. Phone Number	(850)224-2859