

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

LFIR #3639

1. Project Title	Tri-County Human Serv	rices - Detox Beds	
2. Senate Sponsor	Colleen Burton		
3. Date of Request	12/11/2023		
4. Project/Program D	escription		
providing on deman abuse of alcohol, be only funds up to 5.5 Polk County match	d, medical detox and Marcl enzodiazepines, and opiate beds. We do not anticipate requirement is available to	O medical detox beds to serve Polk, Hardee, and High hman Act services to individuals suffering from substates. Currently, funding from the Department of Childrent additional funding from DCF to add the needed detored to fund 4 detox beds for Fiscal Year 2024-25. Funding is ient detox beds are available to meet current needs.	ance use disorders and and Families (DCF) x beds. Funding from a
5. State Agency to re	ceive requested funds	Department of Children and Families	
State Agency conta	ected? Yes		

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	1,667,872
Fixed Capital Outlay	0
Total State Funds Requested	1,667,872

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)	1,667,872	53%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	811,128	26%
Local	660,000	21%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	3,139,000	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?

Yes

a. If yes, indicate nonrecurring amount per year.

1,667,872

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

Tri-County Human Services is currently using Polk County match dollars to fund 4 beds in our detox program.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



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Yes	

11. Status of Construction

If ves. i	indicate the a	amount of funds	received and	what the funds	were used for.
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Two-year total of \$ 1,799,309.21 Purchasing PPE equipment for all employees, COVID-19 testing supplies and wages for qualified employees out of work due COVID-19 positive virus results.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

	a. What is the cu	rrent phase of t	he project?	
	Planning	O Design	Construction	○ N/A
	b. Is the project "	'shovel ready"	(i.e permitted)?	
,	c. What is the es	timated start da	te of construction?	
•	d. What is the es	timated comple	tion date of constru	iction?
12.			o receive, directly or rs of the facility and	r indirectly, any fixed capital outlay funding. Include the d the entity.

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	Staffing costs for the unit that attends to the admitted persons. Includes funding for the medical director, nurse practitioners, registered nurses, LPN's, support staff, case managers, care coordinators, clinical counselors and food service workers. Licensing requirements per 65D-30.006 address the minimum staffing when admitting over 15 individuals into the detoxification program.	1,667,872
Expense/Equipment/Travel/Supplies/Other		0
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)	1,667,872

14. Program Performance



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

To meet the needs of Polk, Hardee, and Highlands counties by providing on demand, medical detox and Marchman Act services to those individuals suffering from substance use disorders and abuse of alcohol, benzodiazepines, and opiates. Tri-County Human Services is the only provider of medical detox services in the counties in which we serve. Our goal is to treat these individuals with the appropriate detox protocols, stabilize them and assist them in seeking the appropriate treatment (residential or outpatient) that will lead to recovery in the longer term.

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

Services provided are medical and clinical interventions to stabilize the patient to reduce the immediate impact of the potential overdose on the individual, initiate a treatment plan to engage the individual to seek further medical and/or clinical assistance in the form of residential or outpatient treatment to address their addiction issues.

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

Direct services include a medical assessment, clinical assessment, treatment plan development discharge planning into the appropriate level of care as defined in the treatment plan, Medication Assisted Treatment (MAT) for those with alcohol or Opiate use disorder diagnosis (use of Vivitrol or Suboxone monitored by qualified medical licensed staff), care coordination for high need/high utilizers of the crisis system to facilitate the individual to engage in identified treatment after detox.

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

The target population are those individuals who have abused their drug of choice or ingested a drug unknowingly, to the point of endangering themselves and requires immediate medical and clinical intervention to stabilize themselves and reduce the risk or further endangerment to themselves. It is anticipated that Tri-County will serve 3,650 individuals annually by this requested funding.

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

Without this funding, there will be increased utilization of our local emergency departments for behavioral health related admissions. This requested appropriation will assist in reducing behavioral health related admissions to our local hospitals. Tri-County will measure this outcome by documenting a reduction of behavioral health related admissions into the local emergency departments as well as document referrals made by the emergency department to our detox program to free up a bed at the emergency department.

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?

Tri-County Human Services will work with our Managing Entity and DCF to develop any necessary and appropriate penalties if performance measures are not met.

5. Requester Contact	Information			
a. First Name	Robert	Last Name	Rihn	
b. Organization	Tri-County Human Service	es, Inc.		
c. E-mail Address	Rrihn@tchsonline.org			
d. Phone Number	(863)709-9392	Ext.	1223	
6. Recipient Contact	Information			

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- Tri-County Human Services, Inc. a. Organization
- **b. Municipality and County** Polk
- c. Organization Type



17.

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□For Profit Entity						
☑Non Profit 501(c)(3)						
□Non Profit 501(c	2)(4)					
□Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	Donn	Last Name	VanStee			
e. E-mail Address	Dvanstee@tchsonline.org	1				
f. Phone Number	(863)709-9392					
Lobbyist Contact Information						
A. Name Frank P. Mayernick Jr.						
b. Firm Name	The Mayernick Group LL	С				
c. E-mail Address	frank@themayernickgrou	p.com				
d. Phone Number	(850)251-8898					