The Florida Senate
Local Funding Initiative Request
Fiscal Year 2026-2027

LFIR # 1291

1. Project Title Operation Warrior Resolution - Innovative Interventions For Veteran Suicide Prevention

2. Senate Sponsor Jim Boyd

3. Date of Request 11/20/2025

4. Project/Program Description

This project expands neuroscience-based, specialized trauma interventions and comprehensive wraparound services for veterans, spouses, and children in order to prevent veteran suicide. Funding supports intensive mental health treatment, case management, family counseling, physical and wellness services, and the construction of additional lodging to accommodate more veterans for overnight clinical programs following the loss of the organization's facility in Hurricane Debby (August 2024). The initiative aims to achieve an 85% improvement rate in trauma, depression, and related risk factors while building resilience and healthy peer support networks.

5. State Agency to receive requested funds Department of Veterans' Affairs

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	700,000
Fixed Capital Outlay	400,000
Total State Funds Requested	**1,100,000**

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,100,000	42%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	625,000	24%
Local	180,000	7%
Other	700,000	27%
Total Project Costs for Fiscal Year 2026-2027	**2,605,000**	**100%**

8. Has this project previously received state funding? Yes

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2025-26	0	2,000,000	580 and 581B	No

9. Is future-year funding likely to be requested? Yes

a. If yes, indicate nonrecurring amount per year. 900,000

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

Federal, Local, Private

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

a. What is the current phase of the project?

○ Planning ○ Design ◉ Construction ○ N/A

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

c. What is the estimated start date of construction? July 1, 2026

d. What is the estimated completion date of construction? 10/31/2026

e. What funding stream will be used for ongoing operations and maintenance of the project?

Private, state, local

11. 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

12. 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		
Salary and Benefits	Clinical and Medical Providers, Program and Operations Management, Grant Compliance, Accounting and Outreach	400,000
Expense/Equipment/Travel/Supplies/ Other	Inpatient and outpatient clinical care, lodging, food, travel, supplies, insurance, facilities, technology, and Electronic Health Records System HIPPA compliant records and electronic data collection for research and outcomes. Essential equipment to enhance serve delivery.	100,000
Consultants/Contracted Services/Study	Clinical development, training and quality assurance to ensure veterans are receiving the highest quality of care. Case management, inpatient support services, outpatient trauma sessions and wrap around services provided to veterans and their family members.	200,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/ Planning Engineering	Construction for additional lodging to house veterans during clinical programs, fire safety equipment.	400,000
Total State Funds Requested (must equal total from question #6)		**1,100,000**

13. Program Performance

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

To reduce veteran suicide by providing rapid, specialized trauma interventions with an 85% improvement rate in trauma, depression, and related symptoms. The program strengthens resilience, builds peer support, and expands access to neuroscience-based treatments and family services.

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

Funds will expand mental health services including outreach, initial and follow-up assessments (including screening for suicidal ideations), specialized mental health interventions, case management, and wraparound therapeutic services delivered in-person and via telehealth. Services also include mental health care for family members to address whole-household challenges.

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

Neuroscience-based individual therapy, group sessions, marriage and family counseling, chronic pain treatment, equine therapy, chiropractic care, medical massage, acupuncture, nutrition, yoga, martial arts, health coaching, and peer-support activities.

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

Persons with poor mental health, persons with poor physical health, physically disabled, Disabled Military Veterans.

Number expected to be served: 401–800.

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

The project will improve physical and mental health by decreasing chronic pain, improving sleep and energy levels, reducing trauma, depression, suicidal ideation, and reducing dependence on drugs, alcohol, and prescription medication. Veterans will experience improved functioning, healthier relationships, and increased peer support. Partnerships with Veteran Court will reduce recidivism, while wraparound services strengthen family stability and social connection. Outcomes will be measured through TSQ trauma screenings, PHQ-9 depression screenings, self-assessment evaluations, satisfaction surveys, annual veteran suicide reports, and data tracked by Florida Courts related to recidivism outcomes.

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 in the contract?

Meeting deliverables and projected outcomes are critical to our success. The organization will submit a review to the State of Florida detailing its plan to meet the deliverables in a reasonable amount of time and/or unused funds will be returned to the state.

14. Is this project related to mitigation, response, or recovery from a natural disaster? Yes

a. If Yes, what phase best describes the project?

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☑ Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

Hurricane Debby

15. Has the entity applied for or received federal assistance for this project?

- ☐ Yes, Applied
- ☐ Yes, Received

☑ No

☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

☐ Yes, Applied

☐ Yes, Received

☑ No

☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name	Kendra	**Last Name**	Simpkins
b. Organization	Operations Warrior Resolution		
c. E-mail Address	kendra@operationwarriorresolution.org		
d. Phone Number	(941)504-3040	**Ext.**	

18. Recipient Contact Information

a. Organization Operation Warrior Resolution

b. Municipality and County Statewide

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	Kendra	**Last Name**	Simpkins
e. E-mail Address	kendra@operationwarriorresolution.org		
f. Phone Number	(941)504-3040	**Ext.**	

19. Lobbyist Contact Information

a. Name	Heather L. Turnbull
b. Firm Name	Rubin, Turnbull & Associates
c. E-mail Address	heather@rubinturnbull.com
d. Phone Number	(305)495-3868

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.