



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 2868

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

When people with SUD/ODU want help after hours, their options are limited to checking themselves into ED or calling 911 to request a Marchman Act. These are the most expensive entry points into the behavioral health system of care and are often inappropriate. Recovery Epicenter Foundation (REF) has established the Catcher's Mitt as an affordable/effective/immediate alternative solution. They offer 24/7 admission by certified recovery peer specialists who help clients to build their recovery capital and then navigate them into an appropriate longer-term program. Additionally, REF houses clients of treatment programs who have a recurrence during their treatment program. Instead of these programs releasing individuals to an unsafe or unsober home (or to the street), REF will provide housing for them until they have the requisite abstinence time to return to their treatment program. This program costs \$176/day which is less expensive than other alternatives.

5. **State Agency to receive requested funds**

**State Agency contacted?**  Yes

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

Type of Funding	Amount
Operating	535,500
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>535,500</b>

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)	535,500	73%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	200,000	27%
<b>Total Project Costs for Fiscal Year 2026-2027</b>	<b>735,500</b>	<b>100%</b>

8. **Has this project previously received state funding?**  No

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future-year 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.



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### 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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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

**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.**

**12. Details on how the requested state funds will be expended**

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Executive Director (.15) and Operations Director (.2) for program research participation and program management (fringe included).	35,000
Other Salary and Benefits	Administrative Assistant Support (.20) partial payment for employee and other program support.	18,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits	7 Recovery Peer Specialists, 1 Team Lead to maintain 24/7 coverage of respite recovery house and to provide recovery support services and navigation services to clients and any nursing or other consultations to ensure client success (partial payment to account for match dollars).	300,000
Expense/Equipment/Travel/Supplies/Other	rent/utilities/pest control/maintenance of property/furniture/etc for 400 clients; insurance required by DCF (prorated to match grant); drug screen tests, breathalyzers, etc. for 400 clients; and presentation of findings (travel, conference registration) - partial payment to account for match dollars.	132,500
Consultants/Contracted Services/Study	FMHI, USF Researcher (\$50,000) to perform research and evaluation services.	50,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>535,500</b>



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**13. Program Performance**

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

Goal: Reduce number of overdose deaths, 911 calls, and ED hospital admissions.  
 By: Bridging ~9 day gap between desire to get into treatment/recovery and enrollment in a program which will increase retention in recovery.  
 By: Reducing days between unsuccessful completion of treatment due to recurrence and return to treatment program through admission to respite recovery.  
 By: Reducing the number of people released to the streets -- either upon successful completion of treatment or upon unsuccessful completion of treatment -- who then relapse.  
 Goal: Standardize this type of housing within the behavioral health system of care.  
 By: Researching/evaluating program to establish it as a best practice or emerging best practice.  
 By: Demonstrating cost effectiveness of this type of housing through research/evaluation partnership.

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

Provide 24/7 respite recovery housing to 350-400 people with OUD/SUD for an average of 9 days. Increase participants recovery capital (which is a validated measurement of recovery that best aligns with DSM V) and navigate participants to appropriate longer-term treatment/recovery programs. 90% of participants will matriculate to a longer treatment/recovery program. 90% of participants will demonstrate an increase in recovery capital.

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

Provide 24/7 respite recovery housing to 350-400 people with OUD/SUD for an average of 9 days. Increase participants recovery capital (which is a validated measurement of recovery that best aligns with DSM V) and navigate participants to appropriate longer-term treatment/recovery programs.

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

350-400 individuals with SUD/OUD. Especially those who do not have safe, stable, or sober housing or supportive home environments at which they can wait for a bed in a program/treatment to open or that they can be released to after successful or unsuccessful participation in a treatment program.

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

Outcomes:  
 1. significant improvement in connection to care for those early in recovery journey in comparison to those without 24x7 access to safe/sober housing  
 2. 97% of individuals will matriculate from respite housing to recovery/treatment program.  
 3. significant decrease in length of time to return to recovery/treatment programs after recurrence  
 4. increase recovery capita for those involved in program  
 Measurements  
 1. REF will hire USF to craft research design to independently evaluate benefit 1 and 3.  
 2. count of participants enrolled in respite housing divided by count of these participants who are then enrolled in a treatment/recovery program after stabilized in recovery through respite recovery housing.  
 4. pre-/post- intervention evaluation using validated RDP scale.

**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?**

Since this is a pilot program to evaluate effectiveness of respite recovery housing in overcoming the opioid crisis, if this project is unsuccessful, it should not be rolled out statewide. If successful (at effectively and cost efficiently connecting people to treatment/recovery), REF and research partners will work with DCF to educate managing entities on a standardized OCA for funding this type of housing and educating Managing Entities throughout state.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**  No

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

- Mitigation (reducing or eliminating potential loss of life or property)



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- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

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

**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**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**18. Recipient Contact Information**

**a. Organization**

**b. Municipality and County**

**c. Organization Type**



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- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number  Ext.

#### 19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

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