



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1435

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Northeast Florida has a growing demand for health care workers. Clay County Schools has answered the call by establishing health science programs at six of the seven high schools. Students in these programs can graduate with certifications in EKG (electrocardiography), CNA (certified nursing assistant) or EMR (emergency medical responder), supported through our partnerships with area health facilities. Baptist Medical has recently opened a full-service hospital within a short walking distance from Fleming Island High, the only high school without a health science program. Funds would be used to establish this program at Fleming Island High and would include the purchase of health equipment, furniture, and consumables. Additionally, to meet the ever-changing healthcare needs within our community, funds would be used to enhance each of our health science programs with high-end patient simulators.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	270,000
Fixed Capital Outlay	197,300
<b>Total State Funds Requested</b>	<b>467,300</b>

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	467,300	87%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	60,000	11%
Other	13,500	2%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>540,800</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested?

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?



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Yes

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

Clay County District Schools received approximately \$61,000,000.00 for COVID mitigation strategies and instructional support for students with pandemic-related learning loss (e.g. summer school, tutoring).

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

### 11. Status of Construction

a. What is the current phase of the project?

☒ Planning ☐ Design ☐ Construction

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

No

c. What is the estimated start date of construction?

June 2023

d. What is the estimated completion date of construction?

July 2023

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.

Clay County District Schools is the owner of the facility. Any equipment and renovations funded through this initiative will remain under the direction of Clay County School District.

### 13. 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		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Emergency Medical Responder - Ambulance Simulator for Orange Park High Seven high-end "Nursing Manikin" (a lifelike patient (mannequin) simulator used to represent real-world nursing scenarios) - one for each health science program	270,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Funding will be used to ensure students are provided instruction using industry-standard equipment (e.g. CPR mannequins, EKG machine, scales, hospital beds) to simulate clinical site locations. Funds will also be used to purchase start-up curriculum, including textbooks and anatomical models (e.g. eyes, heart). Funds would also be used to renovate the classroom to include three lab sinks.	197,300



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Total State Funds Requested (must equal total from question #6)

467,300

#### 14. Program Performance

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

To meet the growing demand for skilled health care workers in our community, Clay County District Schools seeks to establish a health science program at Fleming Island High School while enhancing the current health science programs at our remaining 6 high schools. Providing all students with the opportunity to graduate high school with health care certifications and clinical experiences strengthens the pipeline for certified nursing assistants, electrocardiogram technicians, emergency medical responders, and a number of other healthcare professions.

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

These funds will be used to provide educational program for high school students interested in pursuing health care professions. The health science program will allow students to learn through hands-on instruction as well as hands-on experience using industry-standard equipment. Students within the health science program earn industry certifications, which promote the development of a sustainable career-ready workforce to serve within northeast Florida's healthcare system.

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

Green Cove Springs, the county seat for Clay County, is one of the fastest growing communities in Florida, with a population that is expected to double in the next 25 years. Looking closely at the health care needs of our community, we note that 27% of our community members are over the age of 60; the percentage of this demographic is also growing. The establishment of an additional health science program as well as upgrading our existing programs will ease local healthcare staffing challenges, providing more timely medical services to our community.

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

Health science courses are open to all students within a high school. In its first year, this program is expected to serve approximately 125 students.

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

By establishing a seventh health science program and enhancing the existing programs at our other six high schools, we expect that more students will graduate with industry certifications. We would also expect to see a greater number of students participating in clinical experiences at hospitals, clinics or nursing homes. In addition, we should expect that more of our graduates would enter the healthcare field or pursue degrees in the healthcare field. We could easily measure our annual reports on students earning industry certification and participants in area field experiences as well as analyzing our graduating seniors' exit surveys.

##### 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?

NA

#### 15. Requester Contact Information

a. First Name  Last Name   
b. Organization   
c. E-mail Address   
d. Phone Number  Ext.

#### 16. Recipient Contact Information

a. Organization



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**b. Municipality and County**

**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**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

**17. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**