

Local Funding Initiative Request – Fiscal Year 2017-2018

Project Title: 1.

Community Driven Impact on Nassau County Opioid/Heroin reduction Project

2. Senate Sponsor: Senator Aaron Bean

3. Date of Request:

3/20/2017

Project/Program Description: 4.

A data-driven model and program to prevent and reduce the opioid/heroin epidemic in Nassau County. This is a multi-strategic approach to have a significant impact on the current overdose and deaths our community is experiencing. The proposed project is to use evidence based practices at a systemic level in a rural community setting.

State Agency to receive requested 5. funds: State Agency Contacted?

Dept. of Children and Families through Lutheran Health Systems (managing entity Dept. of Children Families (current task force member)

6. Amount of the Non-Recurring Request:

| o 1 | | | |
|--|----------------------|-----------------------|--|
| Amount Requested for Operations | Amount Requested for | Total Amount of | |
| | Fixed Capital Outlay | Requested State Funds | |
| 150,000.00 | 0 | 150,000.00 | |
| | | | |
| Total Project Cost (if greater than Tota | 150,000.00 | | |

- Total Project Cost (if greater than Total Requested State Funds): 7.
- 8. Type, amount and percent of matching funds available for this project:

| Туре | Amount | Percent |
|---|---------------------------|---------------------------|
| Federal: | Click here to enter text. | Click here to enter text. |
| State (Excluding the amount of this request): | Click here to enter text. | Click here to enter text. |
| Local: | Click here to enter text. | Click here to enter text. |
| Other: | 15,000 | 10% |

9. Was the project previously funded by the State?

| Fiscal Year(s) | Amount | | Vetoed |
|---------------------------|---------------|---------------|---------------------------|
| | Recurring | Non-Recurring | |
| n/a | 0 | 0 | Click here to enter text. |
| Click here to enter text. | Click here to | Click here to | Click here to enter text. |
| | enter text. | enter text. | |
| Click here to enter text. | Click here to | Click here to | Click here to enter text. |
| | enter text. | enter text. | |
| Click here to enter text. | Click here to | Click here to | Click here to enter text. |
| | enter text. | enter text. | |

10. Is future-year funding likely to be requested? If yes, indicate non-recurring amount per year. \$150,000.00

- Program Performance (if needed, include additional documentation): 11.
 - What is the specific purpose or goal that will be achieved by the funds requested? a. Reduce the number of patients in the ER, outpatient, inpatient by 15% in Nassau County by 2019.



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- b. What are the activities and services that will be provided to meet the intended purpose of these funds?
 Increase public awareness of Narcan Use to community and prescribers. Provide training to correctional employees and provide referrals and support for services. Provide training for medical professional in accordance with CDC and national and professional guideliness to include all medical disciplines. Provide guidance and training to physicians and prescripers on alternative pain management options. Train law enforcement on use of nasal spray "Narcan". Provide training and awareness to all Nassau County residents through Public Service Announcements(PSA), and social media. Increase access to Deterra for safe disposal of unused medications. Engage and employ peer specialist to work with families involved in child welfare. Provide relapse prevention support groups to individuals in Nassau County, Florida.
- c. How will the funds be expended?

| Spending Category | Description | Amount | |
|---|-------------------------------------|---------------------------|--|
| Administrative Costs: | dministrative Costs: | | |
| Executive Director/Project Head | To oversee daily operations and | 10,000 | |
| Salary and Benefits | meet with key leaders on | | |
| | implementation | | |
| Other Salary and Benefits | Outreach Cooridinator | 45,000 | |
| Expense/Equipment/Travel/ | Travel to meetings, training sites, | 65,0000 | |
| Supplies/Other | copies, computers, telephone, | | |
| | media campaign, office supplies, | | |
| | Deterra | | |
| Consultants/Contracted Services/ | Physician stipends for training to | 30,000 | |
| Study | physicians and community | | |
| | members | | |
| Operational Costs: | | | |
| Salary and Benefits | Click here to enter text. | Click here to enter text. | |
| Expense/Equipment/Travel/ | Click here to enter text. | Click here to enter text. | |
| Supplies/Other | | | |
| Consultants/Contracted Services/ | Click here to enter text. | Click here to enter text. | |
| Study | | | |
| ixed Capital Construction/Major Renovation: | | | |
| Construction/Renovation/Land/ | Click here to enter text. | Click here to enter text. | |
| Planning Engineering | | | |

d. What are the direct services to be provided to citizens by the appropriations project?

Peer recovery specialists work directly with newly recovered inviduals in child welfare. Relapse prevention to citizens in recovery. Deterra bags to community members. Physicans, law enforcement and corrections to receive training.

- e. Who is the target population served by this project? How many individuals are expected to be served.
 Nassau County residents, individuals with addiction, family members affected by opioids/heroin misuse.
 Physicians, prescribers, law enforcement, child welfare families, and correction officers
- f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be mesasured?

To reduce the negative impact of heroin and opioid misuse, abuse and death from this epidemic. To increase reunification of families in the child welfare system. To increase awareness and education to all sectors of Nassau County. To reduce stigma of addiction and to increase access to care and wellness. Measurement: There will be a 25% increase in knowledge and skills by those sectors trained. 75% of Child welfare families who receive support from a certified peer specialist will be reunified.



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- g. 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?
 Other than standard contract penalities, no future requests for this project would be made.
- 12. 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

| 13. Requestor Contact information: | | | | |
|------------------------------------|--------------------------------|---|--|--|
| | a. | Name and Title: | Susan Woodford Executive Director | |
| | b. | Organization: | Nassau Alcohol Crime Drug Abatement Coalition (NACDAC) | |
| | c. | E-mail Address: | elwoodford@yahoo.com | |
| | d. | Phone Number: | 904-277-3699 | |
| 14. | Recipient Contact Information: | | | |
| | a. | Organization: | NACDAC | |
| | b. | Municipality and County: | Nassau County Florida | |
| | c . □ ⊠ □ □ □ □ | Organization type (check all that a For-profit Entity Non Profit 501(c) (3) Non Profit 501(c) (4) Local Entity University or College | pply): | |
| | | Other (please specify) | Click here to enter text. | |
| | d. | Contact Name and Title: | Click here to enter text. | |
| | e. | E-mail Address: | Click here to enter text. | |
| | f. | Phone Number: | Click here to enter text. | |
| 15. | Lobbyist Contact Information: | | | |
| | a. | Name: | Click here to enter text. | |
| | b. | Firm: | Click here to enter text. | |
| | c. | Email Address: | Click here to enter text. | |
| | d. | Phone Number: | Click here to enter text. | |
| Pleas | e cor | nplete the questions below for Wat | er Projects only. | |

- 16. Have you applied for alternative state funding?
 - □ Waste Water Revolving Loan
 - Drinking Water Revolving Loan
 - Small Community Wastewater Treatment Grant
 - □ Other (Please describe)
 - ⊠ N/A

Click here to enter text.



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- 17. What is the population economic status?
 - Financially Disadvantaged Community (ch. 62-552, F.A.C)
 - Financially Disadvantaged Municipality (ch. 62-552, F.A.C)
 - □ Rural Area of Economic Concern
 - □ Rural Area of Opportunity (s. 288-0656, Florida Statutes)
- What is the status of construction? N/A
- 19. What percentage of the construction has been completed? What is the estimated completion date? n/a

This document will be posted on the Florida Senate website for public viewing.