



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2020-2021

LFIR # 2479

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

To establish a Central Receiving System (CRS) to provide crisis assessment, intervention, and referral services (CAIR) along with transitional care beds for St. Johns County as a collaborative effort by Flagler Health +, EPIC Behavioral, and SMA Healthcare. The goal is to provide centralized access to both mental health and substance use services to the community for both adult and youth populations by reducing the fragmentation and miscommunication during level of care transitions, improve access to crisis related services including assessment, stabilization, brief intervention, and referral, enhance the network of care coordination services among community partners, and reduce unnecessary contact with ECC and Law enforcement.

5. **State Agency to receive requested funds**
- State Agency contacted? ☒ Yes ☐ No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input type="text" value="2,530,000"/>
Fixed Capital Outlay	<input type="text" value="000"/>
<b>Total State Funds Requested</b>	<b>2,530,000</b>

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input type="text" value="2530000"/>	<input type="text" value="100.0"/> %
<b>Matching Funds</b>		
Federal	<input type="text" value="00"/>	<input type="text" value="0"/> %
State (excluding the amount of this request)	<input type="text" value="00"/>	<input type="text" value="0"/> %
Local	<input type="text" value="00"/>	<input type="text" value="0"/> %
Other	<input type="text" value="00"/>	<input type="text" value="0"/> %
<b>Total Project Costs for Fiscal Year 2020-2021</b>	<b>2,530,000</b>	<b>100</b> %

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

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

9. **Is future-year funding likely to be requested?** ☐ Yes ☒ No

If yes, indicate nonrecurring amount per year.



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**10. 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		<input style="width: 100%;" type="text"/>
Other Salary and Benefits		<input style="width: 100%;" type="text"/>
Expense/Equipment/Travel/Supplies/Other		<input style="width: 100%;" type="text"/>
Consultants/Contracted Services/Study	4 out-patient exam/counseling rooms for clinical services @ \$500/day operating cost \$730,000	730,000
<b>Operational Costs: Other</b>		
Salary and Benefits	1 FTE Adult & Child Certified Psychiatrist @ 300,000; 4 FTE ARNP @ 125,000 = 500,000; 4 FTE assessment screener @ 40,000 = 160,000; Follow-up treatment professional, Care Coordinators 3 FTE Licensed Mental Health Professional (Therapist) @ 65,000 = 195,000; 4 FTE Masters Level Care Coordinators @ 55,000 = 220,000; 4 FTE Case Managers @ 45,000 = 180,000; 2 administrative/clerical staff @ 30,000 & 1 staff RN @ 65,000 = 125,000; Shared staff (EPIC/SMA, to include peers, case managers) = 120,000	1,800,000
Expense/Equipment/Travel/Supplies/Other		<input style="width: 100%;" type="text"/>
Consultants/Contracted Services/Study		<input style="width: 100%;" type="text"/>
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		<input style="width: 100%;" type="text"/>
<b>Total State Funds Requested (must equal total from question #6)</b>		2,530,000



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#### 11. Program Performance

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

According to a St. Johns County Behavioral Health Consortium and community needs assessment, many gaps in services have been identified. Although a CRS will not solve all the issues in the current Behavioral Health system, a CRS will provide a central location for individuals seeking behavioral health services to access crisis services if needed, connection to community providers via care coordinators, reduce unnecessary contact with ECC and LEO, and enhance the overall experience of individuals seeking services.

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

Flagler Health + CAIR center will provide 24/7 access for all individuals to crisis assessment, brief interventions, referral services, transitional care, and coordinated connection to outpatient service providers; enhance individual experience of service utilizers, improve behavioral health of St. Johns County and reduce emergency room visits and law enforcement contact for both youth and adult populations. CAIR center will work to divert unnecessary Baker Act admissions, provide diversion from criminal justice system, and reduce recidivism to the hospital. CAIR center will establish a robust care coordination program that provides ongoing follow up and connection to resources for both the individual and their family and provide bridge services during the connection process.

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

Flagler Health + CAIR center will streamline crisis stabilization and outpatient behavioral health services for residents of St. Johns County by providing immediate access to screening, assessment, intervention, referrals to community based providers and services, and transition to higher level of care when necessary. CAIR center will provide a safe, welcoming, and inclusive space for anyone seeking assistance. CAIR center staff will provide direct connection and warm hand off to outpatient providers, care coordination services for additional follow up to ensure the needs of the individual and family are met, and provide bridge services when needed.

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

St. Johns County includes 3 cities and towns and 10 zip codes. The estimated county population is 243,812 by US Census Bureau 2017 with an overall projection to continue to increase each year as St. Johns County is growing three times faster than the overall growth of the state. This same 2017 survey identified the addiction and depression in the top 3 health problems in the community as well as Mental Health/Counseling as one of the most difficult services to obtain. Currently, Flagler Health + ECC is the hub for the majority of crisis evaluations. Flagler Health + Crisis Counselors performed 2,505 emergency evaluations in FY 2018-2019, including 1,011 involuntary examination assessments, 344 voluntary assessments, 246 requests for detox assistance, and 389 referrals to community based care providers.

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

Children and youth in crisis will no longer be automatically sent to Baker Act receiving units in Jacksonville or Daytona Beach- the only Pediatric CON receiving facilities in Northeast Florida. The wrap around services needed to meaningfully intervene in the lives of young people will be provided with Flagler Hospital as the anchor and involving all other community providers including the public and private schools, fire rescue, police and sheriff officers, mental health providers, substance abuse interventionists, and others. The expected outcome is to minimize Baker Act admissions for both youth and adults, reduce trauma for children and families, reduce longterm costs of behavioral health care expenses, and reduce recidivism to emergency services and increase diversion from the criminal justice system.

##### 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?

Withhold payments if the program does not demonstrate effectiveness.



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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.

none

13. Requestor Contact Information

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

14. Recipient Contact Information

- a. Organization
- 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

15. Lobbyist Contact Information

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number  Ext.