



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1645

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Phase Two of the Peace River Center Gilmore Outpatient Campus Expansion Project. Peace River Center is looking to combine three existing facilities located on its Lakeland Gilmore Campus: the Wellness Clinic & Pharmacy, the Outpatient Therapy & Psychiatric Center and staff offices.

5. State Agency to receive requested funds

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	2,100,000
Total State Funds Requested	2,100,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,100,000	91%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	200,000	9%
Total Project Costs for Fiscal Year 2024-2025	2,300,000	100%

8. Has this project previously received state funding? No

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

9. Is future 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.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

Yes

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



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Paycheck Protection Program funds (\$3,655,580) used to pay for salary expense for staff. Department of Health & Human Services (\$157,466) for lost program service revenue used to pay for operating expenses.

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
 N/A

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

Yes

c. What is the estimated start date of construction?

October 2024

d. What is the estimated completion date of construction?

June 2026

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.

Peace River Center for Personal Development is the owner of the facility.

13. 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: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	This is second phase of a two phase project where the three current buildings on the campus will be adjoined under one roof to create a single health services complex. During this phase, interior renovations and modifications will occur, as well as the installation of proper fire suppression, technology, security and emergency generator systems.	2,100,000
Total State Funds Requested (must equal total from question #6)		2,100,000

14. Program Performance

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



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To increase the efficiency and usable space at the Gilmore Outpatient Campus, which will create continuity of care for our clients. It will also enhance the client experience and direct care service to the 200+ individuals the location sees on a daily basis. This project would allow us to better serve clients through the provision of outpatient therapy and medication management, primary health care, pharmacy services, care coordination, substance use disorder services and assertive community treatment.

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

Peace River Center will renovate the Gilmore Outpatient Campus to create more usable space to better serve clients.

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

This project allows us to better serve clients through the provision of outpatient therapy and medication management, primary health care, pharmacy services, care coordination, substance use disorder services, assertive community treatment as well as community education.

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

Peace River Center serves individuals of all ages who are in crisis or require follow up from a recent crisis situation. Population benefiting from these Gilmore Campus expansion include PRC constituents in the greater Lakeland community, including persons with poor mental health, substance abuse problems, at risk youth, victims of domestic violence and sexual assault victims. Nearly 20,000 constituents in Polk County have access to the Gilmore Campus for Outpatient Services.

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

An increase in overall health for individuals who receive services from Peace River Center as physical health is often directly effected by mental health. The Wellness Clinic housed on this campus helps clients achieve better physical health in relation to their mental health. PRC will provide efficient and effective mental health care for individuals visiting Gilmore for outpatient services. Through services provided at this location, PRC will lower recidivism rates among individuals who are admitted through PRC crisis stabilization units. Data collection from CSUs on individuals who have returned, as well as positive reports and improvements documented at the Wellness Clinic and Pharmacy on Gilmore Campus.

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?

Failure to meet deliverables outlined in this request would result in return of funds.

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

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)



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- 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