

## The Florida Senate

# Local Funding Initiative Request Fiscal Year 2019-2020

LFIR#: 1347

1. Title of Project: Compass Center Renovation, Punta Gorda

2. Senate Sponsor: Joe Gruters

3. Date of Submission: 01/29/2019

4. Project/Program Description:

Major renovations to Compass Center, a regional residential treatment program for adolescents with substance use disorders and mental illnesses. This project is needed to make the environment more therapeutic and safe for residents and staff. Renovations will include remodeling of all seven bathrooms and the kitchen including new appliances, replacement of eight air conditioners, new flooring, and repair and painting of exterior and interior walls. Replacement of Video Surveillance and Access Control Systems is also included. This is needed for safety and security issues.

**5. State Agency to receive requested funds**: Department of Children and Families State Agency Contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	
Fixed Capital Outlay	750,000
Total State Funds Requested	750,000

#### 7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	750,000	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	750,000	100.0%

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

Fiscal Year	Am	nount	Specific	
(yyyy-yy)	Recurring	NonRecurring	Appropriation #	Vetoed

- 9. Is future-year funding likely to be requested? No
- 10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		



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Executive Director/Project Head Salary and	N/A	0
Benefits		
Other Salary and Benefits	N/A	0
Expense/Equipment/Travel/Supplies/Other	N/A	0
Consultants/Contracted Services/Study	N/A	0
Operational Costs:		
Salary and Benefits	N/A	0
Expense/Equipment/Travel/Supplies/Other	Replacement of Video Surveillance and Access Control Systems.	39,933
	This is needed for safety and security issues.	
Consultants/Contracted Services/Study	N/A	0
<b>Fixed Capital Construction/Major Re</b>	novation:	
Construction/Renovation/Land/Planning	Major renovations including remodeling of all seven bathrooms	710,067
Engineering	and the kitchen including new appliances, replacement of eight air	
	conditioners, new flooring, and repair and painting of exterior and	
	interior walls.	
Total State Funds Requested (must e	qual total from question #6)	750,000

#### 11. Program Performance:

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

The goals of the residential treatment center are to help adolescents learn to live lives without drug or alcohol abuse and to recover from mental illnesses. In the context of the national drug overdose epidemic, services at The Compass Center are crucial for turning lives around. The proposed renovations will create a more therapeutic environment of the adolescents. The new environment will help residents by reducing stress, improving performance and improve the social milieu in general.

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

The Compass Center, a licensed residential treatment program, provides a range of professional services including psychiatric evaluation, medication management, group and individual therapies, school, and tutoring. Adolescents can stay for up to 90 days.

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

The services described above are limited to residents of the program and those considering admission. Many of the adolescents are involved in the child welfare and juvenile justice systems, and their services become part of the court's plans for the residents and in some cases for the families.

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

Adolescents who have co-occurring mental illnesses and substance use disorders. Most are at high risk of school failure and involvement in criminal justice.

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

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Adolescents will have committed to a life of recovery from alcohol, drugs and mental illnesses. They will become successful in school, occupation and our communities, and they will have no involvement in criminal justice systems and no further involvement.

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?

Coastal Behavioral Healthcare has over 60 outcome and performance measures as part of its existing contract with the managing entity, Central Florida Behavioral Health Network (CFBHN). The Compass Program is part of that contract. The outcome measures are mandated by the federal government, the Florida legislature, DCF and CFBHN. Failure to substantially meet the measures can result in financial penalties and even loss of contract. Applicable measures for The Compass Program include days in school, percent who successfully complete treatment, and stable housing.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

Coastal is a 501(c)(3) not-for-profit corporation and has no owner per se. It has a voluntary, non paid, board of directors.

#### 13. Requestor Contact Information:

a. Name: Jack Minge

**b. Organization:** Coastal Behavioral healthcare, Inc.

c. E-mail Address: jminge@coastlbh.org

d. Phone Number: (941)927-8900

#### 14. Recipient Contact Information:

a. Organization: Coastal Behavioral Healthcare, Inc.

b. County: Charlottec. Organization Type:

O For Profit

● Non Profit 501(c) (3)

O Non Profit 501(c) (4)

O Local Entity

O University or College

O Other (Please specify)

d. Contact Name: John Minge

e. E-mail Address: jminge@coastalbh.org

f. Phone Number: (941)927-8900

#### 15. Lobbyist Contact Information

a. Name: Carole Green

**b. Firm Name:** Capitol Strategies, Inc.



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c. E-mail Address: Carole@capitolstrategiesinc.com

**d. Phone Number:** (850)590-2206