



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1044

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

4. Project/Program Description

The Centerstone Trauma Recovery Center will provide trauma-focused treatment, training, and support services in Manatee, Sarasota, and Desoto Counties. The Center currently serves sexual assault survivors in Manatee County. There are many types of trauma; including sexual abuse, physical abuse, accidents, school and community violence, natural disasters, domestic violence, trafficking, combat, and war. Expansion will enable the Center to: serve adults, adolescents, and children who have experienced or witnessed a traumatic event, and their families; serve veterans and military families who have unique culture and distinctive needs; support development of a trauma-informed community through training and education; provide training and education to providers regarding best practices for working with victims of sexual abuse and trafficking, military and other cultural competence, and best practices for working with military children; obtain safe housing for trauma survivors.

5. **State Agency to receive requested funds**
- State Agency contacted?** Yes

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

Type of Funding	Amount
Operations	750,000
Fixed Capital Outlay	0
Total State Funds Requested	750,000

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)	750,000	73%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	182,189	18%
Other	95,091	9%
Total Project Costs for Fiscal Year 2023-2024	1,027,280	100%

8. **Has this project previously received state funding?** Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2022-23	0	750,000	372	No

9. **Is future funding likely to be requested?** Yes
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
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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.

Centerstone has received assistance for the cost of Personal Protective Equipment (PPE) from FEMA (\$267,000), for the cost of technology for telehealth from FCC (\$147,000), and for revenue loss from HHS (\$261,000) in 2021 and 2022.

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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Administrative oversight.	30,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Program staff (service providers).	500,000
Expense/Equipment/Travel/Supplies/Other	Facility, Technology, Vehicle leases, Insurance, Fuel, Supplies, Training, Health records.	150,000
Consultants/Contracted Services/Study	Safe housing for survivors.	70,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		750,000

14. Program Performance

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



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Reduce the negative impacts of trauma on the lives of trauma survivors.

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

Evaluation; therapy, care coordination, peer support, mentoring, linkage to additional resources, supported housing, and community education.

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

Evaluation, therapy, care coordination, peer support, mentoring, housing, and training.

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

Adult survivors of trauma; community members; 1,200 total served through mental health care, support, trauma training and education.

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

Outcomes:
 1. Establish a community-based, culturally competent, quality, accessible program to provide and increase access to effective trauma-focused treatment and service systems. Measured via numbers served, accessibility of services and education.
 2. Improve health status outcomes for trauma survivors. Measured via evidence-based evaluation tool.

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?

State agency contract requirements and penalties are adequate.

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)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)



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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