



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1082

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Peace River Center is looking to combine three existing facilities located on its Lakeland Gilmore Campus: the Wellness Clinic & Pharmacy, Outpatient Therapy & Psychiatry Center and staff offices. As part of a two-phase project, the funds requested would be used for engineered construction drawings, site work and construction of exterior shell connecting the three facilities to create more usable space for patients, a main access point, and a centralized location for the three buildings.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	2,500,000
<b>Total State Funds Requested</b>	<b>2,500,000</b>

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)	2,500,000	93%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	200,000	7%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>2,700,000</b>	<b>100%</b>

8. Has this project previously received state funding?

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

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Philanthropic or County funding, if available.

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



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

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

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

No

c. What is the estimated start date of construction?

01/01/2024

d. What is the estimated completion date of construction?

12/31/2024

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.

### 13. 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		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	As part of a two phase project, the funds will be for engineered construction drawings, site work, and the construction of the exterior shell to create more usable space, a main access point, and a centralized location for all three current buildings on the campus.	2,500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,500,000</b>

### 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, as well as enhance the client experience and direct care service to the more than 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 enclose the current space between the three buildings on the campus, adding approximately 5,000 square feet in order to create a central access point and additional treatment space in the facility.

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

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, 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?**

PRC serves individuals of all ages who are in crisis or require follow up from a recent crisis situation. Population benefitting 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 CSUs. 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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LFIR # 1082

- 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**