



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1270

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The project will expand by 15 beds an existing women's residential substance use disorder (SUD) treatment facility program. The program serves pregnant and post-partum women, as well as women and their children (up to age 9) with harm-reduction models of opioid use disorder treatment as well as other SUDs. It facilitates reunification efforts with women whose children have been removed due to substance use in the home. The expansion doubles the number of women that can be served. Additionally, this program serves a DCF priority population (pregnant women IV drug users) and is a component of the Coordinated Opioid Recovery (CORE) model announced by Governor DeSantis on August 3, 2022.

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               | 1,600,000        |
| <b>Total State Funds Requested</b> | <b>1,600,000</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)       | 1,600,000        | 93%         |
| <b>Matching Funds</b>                                |                  |             |
| Federal  | 0                | 0%          |
| State (excluding the amount of this request)         | 0                | 0%          |
| Local  | 0                | 0%          |
| Other  | 125,000          | 7%          |
| <b>Total Project Costs for Fiscal Year 2023-2024</b> | <b>1,725,000</b> | <b>100%</b> |

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

| Fiscal Year<br>(yyyy-yy) | Amount    |              | Specific<br>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.**

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



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Yes

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

## 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           |
|--|--|------------------|
| <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                      | Scope of work to include the building of a women's substance abuse residential facility adjacent to an existing facility, doubling the beds available to the community to treat those pregnant, post-partum, and women with young children in need of substance use disorder and/or opioid use disorder services that would otherwise be homeless. | 1,600,000        |
| <b>Total State Funds Requested (must equal total from question #6)</b> |  | <b>1,600,000</b> |

### 14. Program Performance

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



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Construct a 30-bed residential substance use disorder facility to replace an existing and aged (1957) 15-bed facility. Demolish the existing facility for parking.

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

With the construction of a 30 bed facility, Brevard County will have access to a women's residential facility treating pregnant IV drug users, other opiate use disorders, and other substance use disorders (SUD) through harm reduction models. The services, including medication assisted treatment (MAT), case management, medical services, individual and group therapy and peer support will reduce the number of opioid overdoses and reduce recidivism to higher levels of care (e.g, emergency departments, detoxification facilities)

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

Medication assisted treatment (MAT), case management, medical services, individual and group therapy, and peer support.

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

The program serves pregnant and post-partum women, as well as women and their children (up to age 9). These women include IV drug users, opioid use disorder, and other substance use disorders. With an average length of stay of 6 months, the residential facility will serve approximately 10 women and their 20 children at any given time.

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

The expected outcomes include: (1) a reduction in substance use disorder symptoms as assessed by the Brief Addiction monitor; (2) reduced recidivism into "deeper end" services such as inpatient detoxification or emergency departments, and (3) reduction in overdoses.

**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?**

Percentage deduction depending on utilization earnings.

**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



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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**