

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1431

1. Project Title	Clay County Substance Abuse Recovery Center						1
i. Froject fille	Ciay Courty Sub	osance Abuse	17600	very C	511161		I
2. Senate Sponsor	Jennifer Bradley						
3. Date of Request	02/06/2023						
4. Project/Program De	escription						
Construct a substan services. Currently, t	ce abuse recovery here is no facility lik	center in Clay ke this in the Co	Countounty.	ty to of	fer detoxifica	tion, residential, an	d outpatient treatment
5. State Agency to rec	eive requested fu	nds Depa	artme	nt of C	hildren and F	amilies	
State Agency conta	cted? No						
6. Amount of the Nonr	ecurrina Request	for Fiscal Yea	r 202	3-2024	l.		
Type of Funding					Amo	nunt	1
Operations					AIIIC	1	
Fixed Capital Outlay						<u>-</u>	
Total State Funds R	Requested					3,000,000 3,000,000	
	•						-
7. Total Project Cost fo	or Fiscal Year 202	3-2024 (includ	ing m	natchir	ng funds ava	ilable for this pro	ject)
Type of Funding				Am	ount	Percentage	
Total State Funds Re	equested (from que	estion #6)			3,000,000	100%	<u>, </u>
Matching Funds							
Federal					0	0%	<u>)</u>
State (excluding the	amount of this requ	ıest)			0	0%	<u>)</u>
Local					0	0%	<u>)</u>
Other	Other				0	0%	,
Total Project Costs	for Fiscal Year 20	23-2024			3,000,000	100%	
8. Has this project pre	viously received	state funding?	,	Yes]		
o. Has tins project pre]		7
Fiscal Year (уууу-уу)	Amo	NI	20		pecific opriation #	Vetoed	
2022-23	Recurring 0	Nonrecurrir 1,000			•	Yes	
2022 20	0	1,000	,000			165	_
9. Is future funding lik	ely to be requeste	ed?	•	Yes			_
a. If yes, indicate nonrecurring amount per year. 1,000,000							
b. Describe the sou	rce of funding tha	at can be used	in lie	u of s	tate funding	•	
The County has not other state and fede	specifically identifi ral opioid preventio	ed an alternativ	ve fun nt prog	ding so	ource. Some may be avail	funding through able in the future.	
10 Has the entity rem	locting this project	at received en	, fod	vral ac	cictonoo rol	ated to the COVID	-10 nandomic?
10. Has the entity requ	acoung uno projec	or received ally	y i e ut	ziai as	SiStance len	ated to the COVID	· i a panueinic :
If yes, indicate the	amount of funds i	received and v	vhat t	he fur	ıds were use	ed for.	



11. Status of Construction

14. Program Performance

Planning

a. What is the current phase of the project?

ODesign

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?

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1431

The County received CARES, ARPA, and COVID-19 related grant funding for a broad range of public health and economic recovery projects related to the pandemic.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

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

Development and construction of a County Substance Abuse Recovery Center

Design and construction of the Substance Abuse Recovery Center

	possible	
2. List the owners of the facility to relationship between the owne	o receive, directly or indirectly, any fixed capital outlay funding. Inc rs of the facility and the entity.	lude the
Clay County Board of County Co	ommissioners will own and maintain the center and partner with local nor	n-profit groups.
. Details on how the requested st	ate funds will be expended	
Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		1
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/ Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Substance Abuse Recovery Center land/building acquisition, design, and (funds permitting) construction	3,000,00
Total State Funds Peguested (m	ust equal total from question #6)	3,000,00

No

Once planning is completed.

As soon as

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



a. Name

Mercer Fearington Jr.

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1431

c. What direct ser	rvices will be provided to	citizens by t	ne appropriation project	?	
Detoxification, res	sidential, and outpatient trea	atment servic	es		
d. Who is the targ	jet population served by t	his project?	How many individuals a	re expected to be served?	
This project will b	enefit the general populatio	n and serve	citizens county-wide (218,2	245).	
e. What is the exp	pected benefit or outcome	of this proj	ect? What is the methodo	ology by which this outcome will	
Benefits include in Recovery Center	mproved quality of life, oppowill be maintained by the Co	ortunities for sounty and eva	sustained substance abuse aluated regularly by Depart	e recovery. The Substance Abuse ment of Health staff.	
f. What are the su	ggested penalties that the	e contractin	g agency may consider iı	n addition to its standard penaltie	
for failing to meet	t deliverables or performa	ince measur	es provided for the contr	act?	
The local governr governments mus requirements.	nent is responsible for confo t comply with federal regula	orming with a itions and cei	all federal and state regulat rtify that, if funded, they wil	ions governing the program. All local comply with all applicable laws and	
15. Requester Contac	t Information				
a. First Name	Betsy	Last Name	Condon		
b. Organization	Clay County Board of County Commissioners				
c. E-mail Address	betsy.condon@claycountygov.com				
d. Phone Number	(904)284-6394	Ext.			
16. Recipient Contact	Information				
a. Organization	Clay County Board of Cou	unty Commis	sioners		
b. Municipality and	d County Clay				
c. Organization Ty	pe				
□For Profit Entity	,				
□Non Profit 501(c)(3)				
□Non Profit 501(c)(4)				
☑Local Entity					
□University or Co	ollege				
□Other (please s	pecify)				
d. First Name	Charlie	Last Name	Lathan		
e. E-mail Address	charles.latham@claycoun	itygov.com			
f. Phone Number	lber (904)529-5269				
17. Lobbyist Contact	Information				



The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1431

b. Firm Name	The Southern Group
c. E-mail Address	fearington@thesoutherngroup.com
d. Phone Number	(850)671-4401