



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2853

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This program is for men 18 years and older with a substance use disorder and are financially disadvantaged and are unable to afford treatment. This program will provide all surrounding counties access to substance use treatment and mental health treatment if applicable. With these funds we will serve 75 men to help guide them to stable income and housing. We provide services that include individual counseling, group counseling, psychoeducational counseling, family and couples counseling, medication assisted treatment with the use of Vivitrol, medication management and we will provide up to 90 days of financial assistance for medication if eligible. While we focus on the Veterans that are ineligible for our other funding sources, we will assist all individuals in the state of Florida that meet the need.

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	350,000
Fixed Capital Outlay	0
Total State Funds Requested	350,000

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)	350,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	350,000	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2022-23	0	350,000		No

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.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2853

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.

\$1,131,081 was received from the PPP loan and the funds were used to cover payroll and health benefits for all our 21 existing programs in the state of Florida.

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	10% Admin Fees	10,000
Other Salary and Benefits	Chief Operating Officer, Chief Clinical Officer, Director of Administration, Human Resources Director, Financial Controller and IT Specialist. These salaries directly oversee the operation of the Veterans Program and provide supervision/management of clinical staff.	30,000
Expense/Equipment/Travel/Supplies/Other	Administration operational costs to include travel for in-person or virtual training with staff, office space, office supplies, equipment such as copiers/fax/scanner, utilities and gas costs.	10,000
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Clinical Director, Substance Use Counselors/Case Managers, Behavioral Technicians, Operations Manager, Kitchen Manager, Intake Coordinator, Intake Specialist, APRN - all salaries and fringe benefits including health insurance.	222,000
Expense/Equipment/Travel/Supplies/Other	Food, staff training and development, electronic health records system, transportation, laundry, general maintenance, utilities, travel expense for training and supervision, group materials. Funds for psychiatric medications, if applicable, for 90 days.	67,250



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2853

Consultants/Contracted Services/Study	Contracted Medical Director	10,750
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		350,000

14. Program Performance

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

Veterans and other men, over the age of 18 that are struggling with a substance and/or mental health disorder that are financially disadvantaged, will be able to participate in treatment that will help them develop better coping skills and guide them to stable housing. The aim of this project is to help these men to become productive and contributing individuals in our communities. Assisting them into permanent housing and stable employment.

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

Personalized treatment based on individual needs. Individuals with substance use/mental health disorders will be provided individual counseling, group counseling, medication assisted treatment if needed. They will be linked to housing and employment resources to obtain stable income and permanent housing prior to discharge from the program. Individuals may participate in couples or family counseling if needed. Residential services to include 3 meals a day, transportation vouchers, case management and clinical treatment services.

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

Room and Board, 3 meals a day, individual counseling once a week, group and psychoeducational counseling, vocational assessments, linkages to housing and employment resources, SA evaluation, couples/family counseling, random drug screens, medication assisted treatment if needed. Assistance with employment and permanent housing prior to completion from the program. Initial Physical exam, TB test if needed, labwork if requested by PA/NP or MD, STD testing if requested by client.

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

Males, 18 years and older, the priority is given to Veterans that may not be eligible for Grant Per Diem or to VA health benefits. Males that have been involved in the criminal justice system, those unemployed, homeless or close to homelessness. Individuals in Florida that are struggling with substance use and/or mental health issues. We expect to serve 75 individuals during the fiscal year.

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

The outcome of this project is the hope that individuals will stay abstinent from substances and alcohol, that they will obtain stable employment or source of income and find permanent housing upon completion of the program, as well as establish social supports outside the program. This will be measured by random drug screens, treatment plans developed with the client and their progress on completion of goals, and by their participation in the program.

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?

Failing to meet deliverables would mean repayment of the funds.

15. Requester Contact Information



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2853

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)

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