



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1177

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This project involves the renovation and modification of 10 bathrooms located in our crisis respite home and our supported housing apartments. These facilities are utilized by members of priority populations that are receiving behavioral health services. Services are community based and provided to priority populations. Citizens receiving behavioral health services in the crisis respite home and in the transitional/supported housing center will benefit from having more accessible facilities while receiving needed services.

5. State Agency to receive requested funds

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	200,000
Total State Funds Requested	200,000

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	200,000	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 2025-2026	200,000	100%

8. Has this project previously received state funding? No

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested? No

a. If yes, indicate nonrecurring amount per year.

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

Complete questions 10 and 11 for Fixed Capital Outlay Projects



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1177

10. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

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

c. What is the estimated start date of construction? 07/15/2025

d. What is the estimated completion date of construction? 09/30/2025

e. What funding stream will be used for ongoing operations and maintenance of the project?

Clay Behavioral Health Center will be responsible for ongoing cost of operations and maintenance for this project.

11. 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.

Clay Behavioral Health Center, 501(c) (3) will receive the funding to make needed renovations and modifications to bathrooms located within its Crisis Respite Home and Transitional/Supported Housing apartments.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Renovations of 10 bathrooms to increase accessibility and efficiency. 2 bathrooms located in the Crisis Alternative Program and 8 bathrooms located in the Transitional /Supported Housing program. Renovations will include replacing sinks, toilets, bathtubs/showers, vanities. Replacing plumbing/flooring as needed. Installing grab bars and fixtures, widening doorways, other needed modifications.	200,000
Total State Funds Requested (must equal total from question #6)		200,000

13. Program Performance

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

This funding request will support the renovation of bathrooms located our crisis respite home and transitional/supported living apartments. Upgrading the bathrooms will make the facilities accessible and will allow for fuller access for individuals served who may have physical disabilities or mobility issues.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1177

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

This project involves the renovation and modification of 10 bathrooms located in the crisis respite home and the supported housing apartments. These facilities are utilized by members of priority populations that are receiving behavioral health services. Services are community based and provided to individuals who are included in the priority populations defined in F.S. 394.674

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

This project provides enhancements to facilities that will allow for increased accessibility. Eligible individuals will be receiving behavioral health services designed to allow them to remain safely in the community in the least restrictive environment with access to all needed services and supports. Parents with substance use disorders that may put children at risk will receive services that allow for expedited access to and engagement with treatment.

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

Adults who have severe and persistent mental illness. Older adults in crisis. Persons who are experiencing an acute mental or emotional crisis. Person diagnosed as having a co-occurring mental illness and substance use disorder. Persons served expected to be between 101-200 annually for FY 25-26 and continuing into subsequent years.

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

Citizens receiving behavioral health services in the crisis respite home and in the transitional/supported housing center will benefit from having more accessible facilities while receiving needed services.

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 in the contract?

Any funds allocated will be expended for the stated purpose in the designated time frame.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:



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Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1177

16. Has the entity applied for or received state assistance for this project (other than this request)?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. 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 **Ext.**

19. Lobbyist Contact Information

a. Name

b. Firm Name



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1177

c. E-mail Address

d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.