



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2840

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The demand for access to affordable housing option for homeless individual, especially for those with a substance use disorder, continues to be a top priority for the St. Johns County community and across Florida. To address this demand, EPIC Behavioral Healthcare requests funding from the Florida State Legislature to expand its current transitional housing program, Second Wind. Second Wind is a “sober living” housing venture that offers a safe, structured, and sober living environment for adults who have completed residential treatment or are involved in court-ordered treatment (i.e. Drug Court, Veterans Court, Jail Re-Entry program). Program participants of Second Wind must have a job, attend community recovery meetings, attend outpatient treatment, and meet with their Peer Recovery Support Specialist several times a week. They are responsible to pay rent, food & other living expenses, maintain their home via chores, engage in community service, and attend house meetings weekly.

5. **State Agency to receive requested funds**

**State Agency contacted?**  No  Yes

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

Type of Funding	Amount
Operating	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 2025-2026 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,500,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>2,500,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**  No  Yes

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2024-25	0	2,896,385	384A	Yes

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

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 2025-2026

LFIR # 2840

### Complete questions 10 and 11 for Fixed Capital Outlay Projects

**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)?

No

c. What is the estimated start date of construction?

05/01/2025

d. What is the estimated completion date of construction?

06/01/2026

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

Rental Fees, Federal, State and Local Grant Opportunities (Florida Department of Children and Families (DCF) provides funding for addiction recovery programs.) Community Partnerships.

**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.**

The facility is owned by EPIC Community Services, Inc. dba EPIC Behavioral Healthcare who is requesting the fixed capital outlay funding.

**12. 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</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	100% of the funds will be spent to support the design, engineering, and construction expenses for the next phase of the Sober Living Village - 4 additional homes, and furnishings.	2,500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,500,000</b>

**13. Program Performance**

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

**LFIR # 2840**

The goal of the Second Wind transitional housing program is to provide a safe and sober environment for individuals to participate in early recovery and community-oriented services to maintain long-term sobriety with permanent housing to become a self-sufficient and productive member of their community.

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

Construct phase II of an existing state funded Sober Living Village - an additional 4 homes to serve 34 more citizens in St. Johns County. This housing model will provide expanded access to transitional housing offering a safe, structured and sober living environment for adults who have a substance use disorder, are homeless, and have completed residential treatment or are involved in court.

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

Residents must work, pay rent, food & other living expenses, attend recovery meetings, participate in life-skills classes including a financial literacy course and vocational coaching, and meet with the Peer Support Specialist several times a week. These supportive services are provided to help residents meet their recovery goals and to facilitate transition to permanent housing.

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

The target population are men and women who are homeless and have a substance use disorder. The population will have completed detoxification/residential treatment or involved in court-ordered treatment (Drug Court, Veterans Court, Jail Re-Entry Program). It is anticipated that 75-100 adults will be served per year.

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

Benefit or Outcome #1: Reduce Substance Abuse  
 Measure: Reduction of symptoms. Employment and safe/sober housing.  
 Method for measuring outcome: Participation in services provided while in transitional housing. Employed or attending vocational or higher educational programs. Adherence to Second Wind house policies and practices.  
 Benefit or Outcome #2: Improve Mental Health  
 Measure: Reduction of symptoms. Psychiatric Assessment.  
 Method for measuring outcome: Assessment with Licensed Practitioner, adherence to treatment plan, PHQ-9 depression screening at baseline and intervals throughout treatment.  
 Benefit or Outcome #3: Enhance Specific Individual's Economic Self-Sufficiency.  
 Measure: Maintain employment. Pay rent and other living expenses. Secure checking and savings account.  
 Method for measuring outcome: Obtaining and maintaining employment. Successful completion of financial literacy course and other life skills classes.

**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?**

Establish a correction action plan, withhold payment, if necessary, until deliverables are met.

14. Is this project related to mitigation, response, or recovery from a natural disaster?  No

**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?



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2840

- 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:**

**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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2840

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

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.*