

The Florida Senate Local Funding Initiative Request

LFIR # 2863

FISCAL	rear	2025-2026	

1. Project Title Miami Center for Mental Health and Recovery - Involuntary Outpatient Services

2. Senate Sponsor Bryan Avila

3. Date of Request 3/3/2025

4. Project/Program Description

Miami-Dade County is opening the first of its kind mental health diversion facility (The Miami Center for Mental Health and Recovery) for the most acutely ill and most expensive population with SMI that cycle through homelessness, jail and hospitalization. These funds will be used to expand IOS (SB12 - 2016) and will be used to provide care coordination. It will reduce homelessness, save critical tax dollars and improve public safety by breaking the cycle of despair.

5. State Agency to receive requested funds Depar

Department of Children and Families

State Agency contacted? Yes

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

Type of Funding	Amount
Operating	750,000
Fixed Capital Outlay	0
Total State Funds Requested	750,000

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)	750,000	7%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	10,100,000	93%	
Other	0	0%	
Total Project Costs for Fiscal Year 2025-2026	10,850,000	100%	

8. Has this project previously received state funding? Yes If yes, provide the most recent instance:

Fiscal Year	Amount		Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
2024-25	0	200,000	377	No

9. Is future-year funding likely to be requested?

Yes	
750.00	0

a. If yes, indicate nonrecurring amount per year.

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

Source of funding that can be used in lieu of state funding has not been identified.

Complete questions 10 and 11 for Fixed Capital Outlay Projects

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10. Status of Const a. What is the cu	ruction Irrent phase of the project?	
c. What is the es d. What is the es	Design Construction N/A "shovel ready" (i.e permitted)? timated start date of construction? timated completion date of construction? stream will be used for ongoing operations and maintenance of the projec	:t?

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.

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	5% of the appropriated funds will be used for administrative costs.	37,500
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study	Funding will be used to cover the cost of conducting IOS examinations, preparations of petitions, costs associated with court hearings, care coordination, behavioral health treatment and social support services, medications, housing and ancillary needs.	712,500
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		

13. Program Performance

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

Mandating community-based treatment through the use of involuntary outpatient services for individuals with histories of treatment noncompliance and criminal justice system involvement will reduce demand for more costly inpatient placement in crisis stabilization units, residential treatment programs, and state civil and forensic treatment facilities. In addition, it is anticipated that the state and county will experience positive fiscal impact from reduced recidivism to jails and prisons, as well as improvements to public health and safety.

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



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Funds will be contracted to a community-based service provider with demonstrated expertise in providing behavioral health treatment services to individuals with histories of criminal justice involvement or a risk of criminal justice involvement. They are mostly homeless and cycling through the acute systems. Funding will be utilized to provide staffing, necessary treatment, and support services.

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

Funding will be used to cover the cost of conducting IOS examinations and preparation of petitions, costs associated with court hearings, care coordination, behavioral health treatment and social support services, medications, housing, care coordination and ancillary needs.

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

Individuals served will have histories of repeated admissions to mental health and/or co-occurring mental health and substance abuse treatment services in the criminal justice and acute care treatment systems, as well as histories of treatment noncompliance and/or refusal to engage treatment. The target is to serve upwards of 200 individuals.

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

be measured?

Funding will help to reduce demand for mental health and/or co-occurring mental health and substance abuse treatment services provided in institutional settings, including state and local correctional facilities, state civil and forensic treatment facilities, and crisis stabilization units. Performance measures will include: 1) Reduced admissions to inpatient and acute care settings pre- vs post-program enrollment; 2) Maintain or increase treatment compliance with treatment while in the program measured by ongoing receipt of services; 3) Increased diversion of people with mental illnesses from the criminal justice system; and 4) Decreased recidivism to the criminal justice system.

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?

Financial consequences in the form of reduced payment of invoices for failing to meet established performance measures.

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 infastructure)

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#:



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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. I	ocal Government Emergency	Bridge Loan, Department of
Commerce):		

17. Requester Contact Information

a. First Name	Judge Steve	Last Name Leifman (ret.)
b. Organization	Miami Foundation for Mer	ntal Health, Inc.
c. E-mail Address	sleifman@bellsouth.net	
d. Phone Number	(305)803-3181	Ext.

18. Recipient Contact Information

b. Municipality and County Miami-Dade

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	Paul	Last Name	Singerman, Esq.	
e. E-mail Address	singerman@bergersingerman.com			
f. Phone Number	(305)714-4343	Ext.		

19. Lobbyist Contact Information

a. Name

Joseph R. Salzverg



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b. Firm Name	GrayRobinson PA	
c. E-mail Address	joseph.salzverg@gray-robinson.com	
d. Phone Number	(850)577-9090	

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