



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2864

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Capital Outlay for the construction of a 40,000 square foot facility for much needed Baker Act evaluation, psychiatric inpatient and outpatient services to the residents of Citrus and Hernando Counties and the surrounding region. Currently there is no facility to do this in the region.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	2,000,000
Total State Funds Requested	2,000,000

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)	2,000,000	15%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	2,000,000	14%
Local	10,000,000	71%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	14,000,000	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	2,000,000	387A	No

9. Is future-year 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.

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2864

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?

12/18/2024

d. What is the estimated completion date of construction?

08/01/2026

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

Fee for service - medical facility

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.

LifeStream Behavioral Center, Inc. is the applicant/entity and the owner of the facility.

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	Architecture, planning, engineering, plumbing, electrical, civil engineering, and all associated goods and services, etc. for a 40,000 sq ft Central Receiving Facility to serve Citrus and Hernando Counties and the surrounding region.	2,000,000
Total State Funds Requested (must equal total from question #6)		2,000,000

13. Program Performance

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

The allocation will support Capital Outlay for the construction of 40,000 square foot facility to provide much needed Baker Act evaluation, psychiatric inpatient, outpatient and residential services to the residents of Citrus and Hernando counties and the surrounding region. Upon completion, LifeStream will operate the psychiatric inpatient beds as a public Baker Act Receiving Facility in accordance with F.S. 394.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2864

A Baker Act Receiving Facility with 24/7 emergency services and short-term residential treatment units provide a safe environment for the care and recovery for individual's experiencing a psychiatric crisis. It offers significant cost savings due to reduced hospital inpatient utilization, emergency department diversion, less utilization of the jail/prison system to treat mental health disorders and more appropriate use of community-based behavioral health services. In fact, research has demonstrated that the net benefit for mental health crisis stabilization services yield a return of \$2.16 for every dollar invested.

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

The direct services that will be provided include psychiatric inpatient, evaluation and assessment, crisis stabilization, nursing care, integrated primary care services, therapy and life skills education, brief and intensive stabilization services, medication management, discharge services, and management coordination. These services will avert a public safety issue due to the behavioral health crisis.

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

Residents of Citrus and Hernando Counties, and the surrounding region, specifically those in need of behavioral health services. Persons with severe mental illness will benefit from treatment in the Baker Act Receiving Facility. Crisis Stabilization services in a state designated public Baker Act Receiving Facility are utilized for any citizen who is determined to be a danger to themselves or others in accordance with F.S. 394. The facility will serve a more than 4,000 annually.

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

To assure care is available to individuals under the Baker Act. LifeStream provides this much needed care to individuals placed under the Baker Act by licensed professionals, the judicial system and/or law enforcement. The lack of available services will result in costly and ineffective services that are provided in emergency rooms and jail/prison system, and place undue risk of public safety. Additionally, Baker Act capacity will allow law enforcement to spend more time protecting the community and result in cost savings. The general public will benefit due to increased public safety. The outcomes will be tracked, analyzed and reported as appropriate. This includes output data, number of admissions, number of consumers served, utilization rate, days of service provided, recidivism, cost per episode of care, successful completion, diversion from State Hospital or more expensive modalities, and individual improvement of functioning.

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?

If there is an area in which LifeStream is deficient, it is suggested that a corrective action plan be implemented and monitored to ensure that the deficient area(s) is/are corrected in a timely fashion. If LifeStream is not meeting the deliverables or performance outlined in the contract, then the State has the option to cancel the contract for these services.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2864

- 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
- University or College
- Other (please specify)



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2864

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.