

LFIR # 2887

1. Project Title	Mental Health &	Substance Use P	revention & Early Inter	vention Program	
2. Senate Sponsor	Shevrin Jones				
3. Date of Request	3/5/2025				
4. Project/Program D	escription				
The mental health risk for and or expen	prevention and early riencing mental heal	intervention prog th and substance	ram is a program for ir abuse problems.	ndividuals (children a	and adults) who are a
5. State Agency to re	ceive requested fu	nds Departr	ment of Children and F	amilies	
State Agency conta	acted? No				
. Amount of the Non	recurring Request	for Fiscal Year 2	025-2026		
Type of Funding			Amo	ount	
Operating				500,000	
Fixed Capital Outlay	У			0	
Total State Funds	Requested			500,000	
Type of Funding	for Fiscal Year 202	5-2026 (including	g matching funds ava Amount	Percentage	ect)
Total State Funds R	Requested (from que	stion #6)	500,000	71%	
Matching Funds		<u> </u>	333,033	, ,	
Federal			0	0%	
State (excluding the	amount of this requ	iest)	0	0%	
Local			0	0%	
Other			200,000	29%	
Total Project Costs	s for Fiscal Year 20	25-2026	700,000	100%	
3. Has this project pro	•	_	No		
Fiscal Year	Amo		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	Vetocu	
9. Is future-year fund	ing likely to be req	uested?	Yes		
a. If yes, indicate n	onrecurring amou	nt per year.	500,000		
b. Describe the so	urce of funding tha	nt can be used in	lieu of state funding.		
N					1
None at this time					

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



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b. Is the project	t "shovel ready" ((i.e permitted)?			
c. What is the e	stimated start da	te of construction?			
d. What is the e	stimated comple	tion date of constru	ction?		
e. What fundinç	ງ stream will be ບ	sed for ongoing ope	erations and main	itenance of the pro	ject?
				xed capital outlay	C

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

a. What is the current phase of the project?

Spending Category	Description	Amount	
Administrative Costs:			
Executive Director/Project Head Salary and Benefits	Oversight of the program administrative, clinical and delinquency intervention, education and mental health and substance abuse service implementation.	66,500	
Other Salary and Benefits	Clerical Support, data collection/input, order supplies, etc, travel, computers, printing, schedule appointments.	22,500	
Expense/Equipment/Travel/Supplies/ Other	Office supplies, travel (lease vehicle) computers, printers.	27,000	
Consultants/Contracted Services/Study	N/A	0	
Operational Costs			
Salary and Benefits	Direct service staff implementing the service with clients and their families.	295,500	
Expense/Equipment/Travel/Supplies/ Other	Activities and education supplies, travel to and from program and weekend activities. food facility maintenance etc	56,000	
Consultants/Contracted Services/Study	Behavioral Management, nutrition, employability skills/job linkage.	32,500	
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?

To provide comprehensive evidence based prevention and early intervention mental health, physical health and substance abuse program for individuals who are at risk and/or in early stages of experiencing mental health, physical health and substance abuse disorders. The goal is to prevent the occurrence and/or re-occurrence of chronic illnesses and to promote mental and physical wellness in order to improve the quality of life for the participants and subsequently the community.

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



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Mental Health, physical health and substance use prevention/education, educational activities for family relations, effective parenting; case management (linkage) to community resources mental health and substance use screening and treatment; physical health screening and suicide prevention.

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

Mental and physical health and substance use screening; counseling, medication management; educational group session on suicide, substance use, nutrition, effective parenting, trauma, diabetes, hypertension, stress reduction, anxiety, depression; case management and outreach.

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

Elderly, person with poor mental and/or physical health, at-risk youth, homeless, drug users, students at all grade level, s formerly incarcerated persons, drug offenders, victims of crime, physically disabled. 401-800 individuals expected to be served.

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

Participation in general health, mental health and substance use screening; education groups on identified topics, i.e., nutrition, diabetes, hypertension, obesity, etc. Referral and linkage to health care providers. Pre and Post evaluation of increase in knowledge of physical wellness. Successful linkage with a primary health provider. Participation in didactic education sessions on mental wellness, i.e., suicide, trauma, depression, anxiety, parenting, grief, etc. Develop intervention plans/ goals including medication management and other therapeutic treatment. Pre and Post evaluation of increase in knowledge of mental health wellness. Level of achievement of intervention plan/goals; Post 6month survey of participants status of mental health wellness. Participation in substance use education including risk factors, and substance use treatment and development of an intervention plan, including goals; drug screening.

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?

The agency shall adhere to penalties which the Department of Children & Families provides in its contract with providers

during contract negotiations.					
14.	ls ti	his project related to mitigation, response, or recovery from a natural disaster? No			
á	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)			
k	b. Na	ame 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?			
	□ Y	es, Applied			
	□ Y	es, Received			
		lo			
		lo, but intends to apply			
á	a. If v	yes, provide the FEMA project worksheet ID#:			



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b. Provide the total	project c	ost listed on the	e FEMA proj	ect worksheet:	
Has the entity app	lied for o	r received state	assistance	for this project (other tha	n this request)
☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends t	o apply				
a. If yes, specify th Commerce):	e progran	n and state ager	ncy (ex. Loca	al Government Emergenc	y Bridge Loan
Requester Contact		ion	1]
a. First Name	Portia	·:t-		Newbold-Knight	
b. Organization		izons Community	у імептаі неа	ith Center	
c. E-mail Address					
d. Phone Number	(786)433	-0470	Ext.		
Recipient Contact	Information	on			
a. Organization	New Hori Center	izons Community	y Mental Hea	lth	
b. Municipality and	d County	Miami-Dade			
c. Organization Ty	pe				
□For Profit Entity					
☑Non Profit 501(d	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					
□University or Co	llege				
□Other (please sp	pecify)				
d. First Name	Portia		Last Name	Newbold-Knight	
e. E-mail Address	pnewbold	d@nhcmhc.org			
f. Phone Number	(786)433	-8476	Ext.		



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a. Name	Kelly C. Mallette	
b. Firm Name	Ronald L. Book PA	
c. E-mail Address	kelly@rlbookpa.com	
d. Phone Number	(305)935-1866	

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