



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2912

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This innovative project is a law enforcement transformation in the delivery of co-occurring behavioral health and substance abuse treatment for those judicially incarcerated in Franklin, Gulf, Calhoun, and Liberty counties. The 32-bed corrections facility expansion will provide regional "in-house" 24-hour/7-day crisis intervention, stabilization, targeted case management treatment, and rehabilitation. The goal is to reduce recidivism, enhance public safety, and reduce costs.

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               | 6,500,000        |
| <b>Total State Funds Requested</b> | <b>6,500,000</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)       | 6,500,000        | 81%         |
| <b>Matching Funds</b>                                |                  |             |
| Federal  | 0                | 0%          |
| State (excluding the amount of this request)         | 0                | 0%          |
| Local  | 1,500,000        | 19%         |
| Other  | 0                | 0%          |
| <b>Total Project Costs for Fiscal Year 2025-2026</b> | <b>8,000,000</b> | <b>100%</b> |

8. Has this project previously received state funding?

If yes, provide the most recent instance:

| Fiscal Year<br>(yyyy-yy) | Amount    |              | Specific<br>Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
|                          | Recurring | Nonrecurring |                             |        |
|                          |           |              |                             |        |

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**



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**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?** 07/25

**d. What is the estimated completion date of construction?** 11/26

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

1. Franklin County BOCC funding will be pursued for corrections FTE/ Facility Operations & Maintenance. Costs will be offset with agency billing and prorated multicounty rate sharing.  
 2. NWF Health Network, for clinical/treatment professional FTE staffing

**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 Franklin County Sheriff's Office will be the only entity receiving capital outlay dollars. However, the project will be a regional treatment facility for high-level substance abuse and behavioral health inmates as determined by acuity scale screening for those judicially involved from Franklin, Gulf, Calhoun, and Liberty. Interlocal agreements will outline cost-share and terms of the agreement.

**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                      | The requested funds will be utilized in phase one; fast-track permitting & engineering PD&E. Phase two will be dedicated procurement of professional/construction contracting and execuion | 6,500,000        |
| <b>Total State Funds Requested (must equal total from question #6)</b> |  | <b>6,500,000</b> |

**13. Program Performance**

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



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It is our intention to construct a 32-bed corrections treatment facility, for co-occurring behavioral health and substance abuse, adjacent to our existing jail facilities. This facility will be an "in-house" licensed behavioral health and substance abuse facility. It will provide 24-hour/7-day a week crisis intervention, stabilization, and treatment through a collaborative partnership agreement with the four Sheriffs of Franklin, Gulf, Calhoun, and Liberty County. This licensed facility and innovative treatment program design with in-house licensed providers will reduce inmate recidivism, corrections facility costs, reduce staff turnover, and protect public safety as inmates re-enter the four communities.

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

This facility will be a licensed 24-hour/7-days-a-week behavioral health and substance abuse crisis and treatment facility portal for inmates with complex, high acuity-based co-occurring diagnoses within the four counties. The facility will provide an "in-house" multidisciplinary team, including a psychiatrist, licensed therapist, care coordinators, and community outreach/reentry specialist to guide the inmate with post-release navigation and community reintegration. The facility will provide in-house treatment, behavioral health, and substance abuse rehabilitation services.

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

The evidenced based statistics demonstrate significant public safety impacts including a significant reduction of incarceration trends, unemployment rates with the formerly incarcerated, and individual/families within the State Medicaid and/or DCF agencies. The collective clinical and financial synergies and economies of scale within this 4-county model will dramatically reduce taxpayer responsibilities with continued corrections costs, recidivism, staff-turnover, comp. time, and community resource management.

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

This facility will target the highest acuity scaled inmates within the four county correction facilities. Our interdisciplinary team will assist the other county jails based on crisis stabilization, assessment, and portal navigation of the projected behavioral health/substance abuse individuals within their current jail rosters. We anticipate screening 26-50% of the inmate population based on internal metric data.

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

This facility will follow statutory guidelines (Chapter 397) and Chapter 65D-30 of the Florida Administrative Code. The evidence based studies suggest that cognitive-behavioral programs while incarcerated reduce recidivism by 15% with some studies showing trends upward to 30%. Recidivism will be tracked internally utilizing linear correlation coefficient statistics modeling. Psychiatric and addiction best practice (CMS) guidelines will be implemented and outcome measures reported. Utilizing DCF and AHCA annual reviews audits and measures will be followed and objectives met on annual basis.

**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?**

Construction will follow all federal, state, and local statues in the bidding, contracting, construction, building inspection, and occupancy phases. Construction requisites cited within the Florida Model Jail Standards will be adhered to. All medical staff will follow and be reviewed by professional, ethical, and scope of care guidelines outlined in statute. As a licensed facility all penalties based on statutory guidelines and agency rules will dictate performance measures, compliance, and penalty.

**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):**



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**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:**

**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)



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- 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

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.*