



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 3055

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

The Key Clubhouse of South Florida, based in Miami (Northside), partners with local businesses that align with its values to provide skills development and opportunities for adults with Severe & Persistent Mental Health Illness (SPMI) to gain employment that pays a commensurate wage. State funding last year supported the opening of a new program in Kendall (South Miami). Funding this year would develop transitional and employment programs to recruit and train up to 10 employers to ensure on-the-job success and customized vocational training services for up to 225 members as part of the Key Clubhouse's accredited Mental Health Clubhouse program. A recent survey of Key Clubhouse members shows that 95% reported no or fewer crisis hospitalizations since they became Key Clubhouse members.

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	250,000
Fixed Capital Outlay	0
Total State Funds Requested	250,000

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)	250,000	41%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	360,000	59%
Total Project Costs for Fiscal Year 2025-2026	610,000	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		
2024-25	0	250,000	377	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.
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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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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

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		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	50% of the operating costs for the Kendall campus program (including facility lease, utilities, clubhouse training, travel expenses and vehicle costs (gas, maintenance and insurance) and to purchase 15 computers for the Northside program to replace aging equipment used by Clubhouse members for job related skills training.	197,500
Consultants/Contracted Services/Study	1 Job Training & Employment Specialist for 1 year (est. 20 hours/week) to conduct employer outreach, engagement and training, including travel and per diem costs.	52,500
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		250,000

13. Program Performance

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



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The Mental Health Clubhouse supported employment program is an evidence-based service that helps people living with severe and persistent mental illness (SPMI) find jobs in the competitive marketplace, leading to independence and a better quality of life.

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

Up to 10 new employers will be recruited and 225 Clubhouse members will be equipped with the skills needed to acquire employment in Miami-Dade County. Customized, vocational training services will be provided to up to 225 members as part of the Clubhouse's accredited Mental Health Clubhouse program at both Northside and Kendall campuses.

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

State funding will develop the transitional and employment programs for both the Kendall and Northside Miami Clubhouses. Specifically, state support is needed to recruit and train employers, including employer relationships development, job placement, ensure ADA compliance, assist employers and members with on-the-job training, and ongoing supervision and consultations with members' immediate supervisors to ensure on-the-job success.

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

225 Adults with Severe and Persistent Mental Illness.

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

The program will ensure that the Key Clubhouse is filling the staffing needs for area employers while equipping Clubhouse members with the skills needed to fill jobs, increasing member independence and recovery while reducing their dependency on state benefits. Success factors include the number of members who are placed in jobs in the community through Transitional, Supported and/or Independent Employment, and the number of business employers/partners recruited for member employment.

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?

Disbursed funds for deliverables not met will be returned to the state.

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
- 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. 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)

d. First Name **Last Name**

e. E-mail Address

f. Phone Number **Ext.**

19. Lobbyist Contact Information



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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.