

The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

LFIR # 3415

1. Project Title	26Health's Street Medicine Initiative

2. Senate Sponsor Carlos Smith

3. Date of Request 3/12/2025

4. Project/Program Description

Take it to the Streets brings medical care, testing, and treatment to underserved communities through a mobile care team, community health workers, and peer navigators. By leveraging partnerships, workshops, and incentives, it engages young adults and communities of color, offering HIV/STI screenings, wellness exams, counseling, and substance misuse treatment to improve health and access to care.

5. State Agency to receive requested fund	5.	. State	Agency	to	receive	requested	funds
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Department of Health

State Agency contacted? No

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

Type of Funding	Amount
Operating	500,000
Fixed Capital Outlay	0
Total State Funds Requested	500,000

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)	500,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	500,000	50%
Total Project Costs for Fiscal Year 2025-2026	1,000,000	100%

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

Fiscal Year	Amount		Specific	Vetoed
(уууу-уу) Recurring Nonrec		Nonrecurring	Appropriation #	

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

Yes	
500,000	

a. If yes, indicate nonrecurring amount per year.

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

SAMHSA and 340B Program are sources of funding that will be used in lieu of state funding,

Complete questions 10 and 11 for Fixed Capital Outlay Projects

No

OF TUO	Loc	The Flori cal Funding I Fiscal Yea	nitiati	ve Request		LFIR # 3415
10. Status of Const a. What is the cu O Planning	ruction Irrent phase of th	ne project?	◯ N/A			
c. What is the es d. What is the es	stimated complet	i.e permitted)? te of construction? tion date of construct sed for ongoing ope		nd 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	Project Head Salary and Benefits will cover salary, health insurance, retirement contributions, PTO, and professional development. These funds ensure leadership compensation, support retention, and enhance project success through training and conferences.	65,000			
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/ Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs					
Salary and Benefits	Funds will support a Clinical Practice Director, Clinical Practice Manager, Patient Service Coordinator as support staff salaries and benefits, ensuring adequate personnel for project operations.	315,000			
Expense/Equipment/Travel/Supplies/ Other	Funds will cover incentives to encourage community participation, marketing to promote outreach efforts, and Every Letter Health Equity initiatives to address healthcare disparities.	120,000			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (must equal total from question #6) 500,000					

13. Program Performance

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

Take It to the Streets provides medical care, testing, and treatment to underserved communities via a mobile team, community health workers, and peer navigators. It offers HIV/STi screenings, wellness exams, counseling and substance misuse treatment, engaging young adults and communities of color to improve health and access to care.

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



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Will provide mobile medical care, including HIV/STI screenings, wellness exams, counseling, and substance misuse treatment. Additionally, community health workers and peer navigators will engage underserved populations, particularly young adults and communities of color, through outreach, education, and access to resources, ensuring improved health and access to care.

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

Will provide direct services such as mobile health clinics offering HIV/STI screenings, wellness exams, counseling, and substance misuse treatment. The initiative will also offer health education, referrals, and resources to underserved communities, ensuring improved healthcare access and outcomes.

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

The target population for Take It to the Streets includes underserved individuals, particularly young adults and communities of color who face barriers to accessing healthcare. The project aims to serve hundreds of individuals annually, providing essential health services and resources to improve their well-being and access to care.

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

be measured?

The expected benefit of Take It to the Streets is to improve health outcomes through increased access to healthcare services, including HIV/STI screenings, wellness exams, and substance misuse treatment. The outcome will be measured through tracking the number of individuals served, health improvements such as reduced STI rates, patient feedback, and engagement levels in health education programs, ensuring the initiative's effectiveness in addressing healthcare disparities.

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 contracting agency may impose temporary service suspensions, renegotiate the contract or terminate it for ongoing failure to meet deliverables or performance measures. Additional actions could include disclosing shortcomings to stakeholders, requiring mandatory training, or restricting referrals to ensure compliance and protect the program's integrity.

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 th	ne program and state age	ncy (ex. Local Govern	ment Emergency Bridg	e Loan, Department of
Commerce):				-

17. Requester Contact Information

a. First Name	Kimberly	Last Name	Collins
b. Organization	26Health, Inc.		
c. E-mail Address	kimberlyc@26health.org		
d. Phone Number	(689)339-1270	Ext.	

18. Recipient Contact Information

a. Organization	26Health	, Inc.	
b. Municipality and	d County	Orange	

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	Kimberly	Last Name	Collins
e. E-mail Address	kimberlyc@26health.org		
f. Phone Number	(689)339-1270	Ext.	

19. Lobbyist Contact Information

a. Name

None	



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