

# Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: Fixed Capitol Outlay Project - FDOH in DeSoto
2. Date of Submission: 01/21/2016
3. House Member Sponsor(s): Ben Albritton

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No  
***If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d***
- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 <i>(If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2016-17 <i>(If no new Recurring or Nonrecurring funding is requested, enter zeros.)</i>			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: Column A + Column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A )</i>	<b>INCREASED or NEW Recurring Requested</b>	<b>TOTAL Nonrecurring Requested</b> <i>(Nonrecurring is one time funding &amp; must be re-requested every year)</i>	<b>Total Funds Requested Over Base Funding</b> <i>(Recurring plus Nonrecurring: Column E + Column F)</i>
Input Amounts:					0	10,557,300	10,557,300

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs

5. Requester:

- a. Name: Penny Kurtz
- b. Organization: DeSoto County Health Department
- c. Email: penny.kurtz@flhealth.gov
- d. Phone #: (863)303-3701

6. Organization or Name of Entity Receiving Funds:

- a. Name: DeSoto County Health Department
- b. County (County where funds are to be expended) DeSoto
- c. Service Area (Counties being served by the service(s) provided with funding) DeSoto

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

\$10,557,300 is requested as a Fixed Capital Outlay (FCO) for a construction project to erect a new health department to replace an existing facility (Baldwin) built in 1984 in DeSoto County FL and eliminate the use of a leased site built in 1976. The Baldwin Ave. facility is approved as an Area of Critical Need. Minor repairs have proven to be inadequate to maintain a safe and secure environment. Windows are leaking; flooring is compromised; continual roof leaks, fade has begun cracking further compromising the building integrity and safety. In June of 2013 the clinical operations co-located in a remodeled and leased former grocery store as the Baldwin building is no longer able to meet existing and the growing need of CHD services. The Baldwin building is not ADA compliant as has failed indoor air quality standards. As an ER Diversion site for the county, the FDOH in DeSoto had 23,998 medical and dental visits (open 42hr week) as compared to the ER visits for DeSoto Memorial Hospital of 12,091. (open 24/7 or 189hr week) in the last fiscal year. DeSoto County FL is Medically Underserved, Uninsured and Health Professional Shortage Area, shortages of primary care, dental and mental health providers. The new facility would house the Women, Infants and Children Nutritional Services, Healthy Start, medical and dental services/ER Diversion, social services, communicable disease education and prevention, environmental health, Pharmaceutical Assistance, Vital Statistics.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

- Federal: 0
- State: 0 (Excluding the requested Total Amount in #4d, Column G)
- Local: 0
- Other: 0

9. Is this a multi-year project requiring funding from the state for more than one year?

No