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: Jerome Golden Center Co-occurring Disorder Program (Residential Level II)

2. Date of Submission: 11/23/2015

3. House Member Sponsor(s): MaryLynn Magar

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes

 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? 2015-16
- 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 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
Column:	Α	В	С	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	INCREASED or NEW Recurring Requested	TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year)	Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:	0	575,000	575,000	0	575,000	0	575,000

e.	New Nonrecurring Funding Requested for FY 16-17 will be used for:						
	□Operating Expenses	☐Fixed Capital Construction	□Other one-time costs				
	P						
f	New Recurring Funding Requested for FY 16-17 will be used for:						
١.		•					
١.		☐Fixed Capital Construction					

5. Requester:

a. Name: Linda De Piano, Ph. D.

b. Organization: Jerome Golden Center for Behavioral Health, Inc.

c. Email: LDEPIANO@GOLDENCTR.ORG

d. Phone #: (561)383-5711

- 6. Organization or Name of Entity Receiving Funds:
 - a. Name: Jerome Golden Center for Behavioral Health, Inc.
 - b. County (County where funds are to be expended) Palm Beach
 - c. Service Area (Counties being served by the service(s) provided with funding) Indian River, Martin, Okeechobee, Palm Beach, Saint Lucie

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.)

The program is an evidence-based, licensed Residential Treatment Facility Level II; operating within a 6,753 square foot area. The program is a short-term (30 to 90 day) structured living environment, for adults in Palm Beach County who have concurrent psychiatric and substance abuse diagnoses. Provides residential integrated services where both disorders are primary and treated by one team simultaneously. The program targets individuals experiencing difficulty functioning within the community, as well as individuals who are at risk of being admitted to the state hospital. Projected program attendance is 12 clients per month on average, and 48 individuals annually. All residents attend a minimum of nine hours of therapeutic and educational groups per week, one hour of individual therapy, medication management every other week or more often if needed; additionally all residents sign at time of admission a commitment to complete 90 AA and NA meetings in 90 days. The program utilizes an evidence-based curriculum for Integrated Combined Therapies (ICT), which includes aspects of Motivational Enhancement Therapy (MET), Cognitive Behavioral Therapy (CBT), and Twelve Step Facilitation (TSF). The therapeutic groups are designed to help enhance residents? communication and coping skills, develop a relapse prevention plan, and strengthen the daily living skills necessary for their successful functioning in the community. For the year 2016-2017 the total projected operating expenses for this program is \$775,000. Out of the \$775,000 the State share is \$575,000 and \$200,000 will be generated from other funding such as Medicaid. See attached budget. Community donations of \$50,000 were obtained to complete the renovations/capital expenses in order to open the program in March 2015. The non-recurring 2015-2016 appropriation allows the program to remain open until June 30, 2016. For the fiscal year 2014-2015, Jerome Golden Center for Behavioral Health was awarded \$200,000 for the opening of this co-occurring unit. Because the program has only been in operation for seven months, only preliminary performance data are available but the results are promising. The first client was admitted March 23, 2015. The average stay for the first 11 individuals completing the program was 90 days. 100% of the individuals admitted were homeless, unemployed and suffering from co-occurring disorder of mental illness and substance abuse at the time of admission. Nine clients completed the program. 100% were discharged to a stable housing environment and 44% of them secured a job prior to discharge. It is worth mentioning that the statewide target for this population is a 10 percentage change in client?s employment from admission to discharge. This program had a 44% change which far exceeds the statewide target. Palm Beach County currently operates very few short-term residential facilities like this one, and none take on the complex task of specifically addressing co-occurring psychiatric and substance abuse diagnoses. This is an issue of significant concern. During the Palm Beach County Mental Health Forum in February 2014, the Southeast Florida Behavioral Health Network identified a need for more housing for individuals in the County diagnosed with severe and persistent mental illnesses (SPMI). The Palm Beach County Substance Abuse Forum additionally identified ?client engagement challenges? as a current impediment to the County?s substance abuse treatment services. By its nature, this short-term integrated residential treatment program that utilizes evidence-based practices (EBPs) effectively addresses both of these service gaps. Additional information indicated residents may also become less likely to experience homelessness, arrest, or re-arrest, or to require or resort to costly means of assistance such as emergency room services and first responders. Expected results are: ? 100% of adults admitted to the program eligible for entitlement will have applied for entitlement benefits within 30 days of admission. ? Total number of clients served will be at least 90% of the total number of clients proposed to be served. ? Percent of adults who successfully complete substance abuse treatment services will be at least 60%. ? Percent of adults with substance abuse who live in a stable housing environment at the time of discharge will be at least 30%

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: <u>0</u>

Other: 200,000

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

<u>Yes</u>