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: West Kendall Crisis Stabilization Unit

2. Date of Submission: 12/22/2015

3. House Member Sponsor(s): Jeanette Nunez

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 (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:					2,200,337	0	2,200,337

. New Nonrecurring Funding Requested for FY 16-17 will be used for:							
□Operating Expenses	☐ Fixed Capital Construction	□Other one-time costs					
New Recurring Funding	ing Requested for FY 16-17 will be used for:						
0 0	•						
Expenses	El ixea capital construction	Dottier one time costs					
	☐Operating Expenses New Recurring Funding	New Nonrecurring Funding Requested for FY 16-17 will □Operating Expenses □ Fixed Capital Construction New Recurring Funding Requested for FY 16-17 will be □ Operating Expenses □ Fixed Capital Construction					

5. Requester:

a. Name: John Dow

b. Organization: South Florida Behavioral Health Network

c. Email: jdow@sfbhn.org d. Phone #: (305)860-0653

- 6. Organization or Name of Entity Receiving Funds:
 - a. Name: South Florida Behavioral Health Network, Inc.
 - b. County (County where funds are to be expended) Miami-Dade
 - c. Service Area (Counties being served by the service(s) provided with funding) Miami-Dade
- 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.)

It is requested that \$2,200,337 in permanent proviso funding be sought to fund an Adult Crisis Stabilization Unit (CSU) for the West Kendall region that will serve consumers 18 and older experiencing a mental health crisis. CSU services are acute care services, offered twenty-four hours per day, seven days per week,that provide brief, intensive mental health residential treatment services. These services meet the needs of individuals who are experiencing an acute crisis and who, in the absence of a suitable alternative, would require hospitalization.

The South Florida Behavioral Health Network (SFBHN) is a managing entity (ME) for behavioral health services that delivers comprehensive planning and coordination for the prevention and treatment of behavioral health disorders at the community level. Our goal is to develop, implement and refine a coordinated system of behavioral health care within the community that enhances prevention, treatment and recovery services for those at risk of or who are suffering from mental health and substance abuse problems. SFBHN conducts various activities to determine community needs. As part of those activities, SFBHN identified West Kendall as an area in need of services with limited resources.

West Kendall is a Miami suburb in Miami-Dade County, Florida, United States. This includes the communities of Kendale Lakes, Kendall West, The Hammocks, The Crossings, Calusa, Devon Aire, Three Lakes, Deerwood, and Country Walk which include zip codes: 33175, 33177, 33183, 33185, 33186, 33193, and 33196. Below is a table with the West Kendall zip codes which breaks down the population totals for those zip codes based on the 2012 census. For zip code 33175, there were 53,206 residents. For zip code 33177, there were 53,191 residents. For zip code 33183, there were 35,949 residents. For zip code 33186, there were 61,137 residents. For zip code 33193, there were 46,044 residents. For zip code 33196, there were 46,620 residents. This is a total of 329,336 residents for the West Kendall area.

*Data Source ? 2012 Census

Based on the State Mental Health prevalence data (2011-12) an estimated 3.75% of the Adult population at large has a serious mental illness (SMI); therefore, there is an estimate of 12,350 adult residents in the West Kendall area with SMI. Additionally, SFBHN data reflects that only approximately 30% of the SMI population in the community received services. Applying those estimates to the West Kendall population suggests that approximately only 3,705 residents that needed SMI services from West Kendall received services leaving approximately 8,645 residents without care.

Additionally, zip code mapping and penetration rates for services within the Southern Region identified a need for services in this region. Data from Crisis Intervention Team (CIT) officers was also utilized to validate need in the West Kendall area.

For the identified zip codes the penetration rate for consumers accessing services for the West Kendall region ranges from 0.84%-2.58%. For zip code 33175, there was a penetration rate of 1.17%. For zip code 33177, there was a penetration rate of 2.58%. For zip code 33183, there was a penetration rate of 1.20%. For zip code 33185, there was a penetration rate of 0.84%. For zip code 33186, there was a penetration rate of 1.01%. For zip code 33193, there was a penetration rate of 1.28%. For zip code 33196, there was a penetration rate of 1.04%. In comparison to other areas of the county where penetration rates are between 3.00%-6.00%, this region is under served.

There have been no funding increases by the State of Florida in over 15 years for behavioral health. When funding was first distributed in Miami-Dade County, the county had not expanded to the West Kendall area. With the population grow into the West the last several years and no funding increases by the State, there has not been an opportunity to expand services into this part of the county.

Work with community agencies in the West Kendall area have also identified the need for behavioral health services and are collaborating with SFBHN to address the needs. West Kendall Baptist Health (WKBH) data show over \$42 million in charity care of which many of it is correlated with behavioral health needs. Because of this identified need, WKBH has developed a behavioral health work group to guide their advisory committee on this need. The below chart identifies how much charity work was provided by West Kendall Baptist Health by the various zip codes.

Based on the identified need in West Kendall, within the current limited resources, the SFBHN Board of Directors has proposed shifting the outpatient, crisis support, and medical services into this community. SFBHN put out a proposal to fund these services in the West Kendall area and is in process of negotiating with two providers for implementation to commence in January 2016.

However, despite this expansion additional services are needed to better serve the community. With the closure of two crisis stabilization units (CSUs) in Miami-Dade County, 32 beds have been lost in the community. Other CSUs within the community have absorbed the excess utilization and have been over utilized as high as 141%. By opening a CSU in the West Kendall area, it will assist in the over utilization of current providers. Furthermore, it will assist in the access to services for consumer in that geographic area.

Below is a detailed projected operating budget:

PROPOSED West Kendall Crisis Stabilization Unit Budget

Personnel Detail	FTE	AM	OUNT				
Psychiatrist	0.50	\$	98,800.00		00		
Administrator	0.30	\$	22,500.00		00		
Case Manager	1.00	\$	37,500.00				
Registered Nurse		4.20	\$ 226,800.00		226,800.00		
ARNP 1.00	\$		115,00	0.00			
Discharge Planner		1.00	\$		45,000.00		
Environmental Tech	nician		1.50	\$	30,750.00		
Mental Health Tech	nicians		13.50	\$	336,960.00		
Peer Specialist	1.00	\$		23,000.	00		
Driver 1.00	\$		20,80	0.00			
Per Diem Staff	\$		45,00	0.00			
Subtotal	\$	1,002,110.00					
Fringe benefits	Fringe benefits 200,422.00						
	5						
Total Personnel & B	enefits		\$	1,202	2,532.00		
Other Expenses							
(1) Building Occupa	ncv \$		198,70	9 00			
(2) Professional Ser	\$	130,70	100,000.	00			
(3) Travel \$	-	4.00	100,000.				
(4) Equipment \$ 6,661.00							
(5) Food Services \$ 70,080.00							
(6) Medical and Ph	\$	-,	212,350.	.00			
(7) Subcontracted S	\$		-				
(8) Insurance \$ 1,796.00							
(9) Interest Paid \$ -							
(10) Operating Supplies & Expenses \$ 34,665.00							
(11) Donated Items \$ -							
(12) Other Expense				-			
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Subtotal -Other Expenses \$ 627,805.00

Other Support 170,000 Administration 200,000

Grand Total \$ 2,200,337.00

Total number of Beds 16

Cost per bed \$ 376.77

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: <u>0</u>

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