

Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Manatee County Opioid Addiction Recovery Peer Pilot Program

2. Date of Submission: 02/06/2017

3. House Member Sponsor: Joe Gruters

Members Copied:

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?

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 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2017-18 (Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring .)		
Column:	A	B	C	D	E	F
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)	Additional Nonrecurring Request	TOTAL Nonrecurring Request (Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)
Input Amounts:					500,000	500,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2017-18? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Department of Children and Families

6. Requester:

- a. Name: Nicholas Azzara
- b. Organization: Manatee County Government
- c. Email: nicholas.azzara@mymanatee.org
- d. Phone #: (941)745-3771

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: Joshua Barnett
- b. Organization: Manatee County Government
- c. Email: joshua.barnett@mymanatee.org
- d. Phone #: (941)749-3030

8. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: Cari Roth
- b. Firm: Dean Mead Attorneys at Law
- c. Email: croth@deanmead.com
- d. Phone #: (850)999-4100

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: Manatee Co Gov; Neighborhood Services/Com Serv. Dept
- b. County (County where funds are to be expended): Manatee
- c. Service Area (Counties being served by the service(s) provided with funding): Manatee

10. What type of organization is the entity that will receive the funds? (Select one)

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☐ Local Government

- ☐ University or College
- ☒ Other (Please describe) Will be competitively procured, unknown at this time

11. What is the specific purpose or goal that will be achieved by the funds being requested?

To implement the evidence-based practice of community-based Peer Coaching utilizing a professional workforce of individuals who have achieved recovery from a substance abuse disorder. Peer Coaches will use their recovery experience to mitigate further adverse outcomes while simultaneously enhancing positive treatment outcomes associated with opioid addiction/dependence.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	1 FTE Project Head Lead Peer, 0.1 FTE of Executive Organizational Leadership and 0.5 FTE Clinical Lead from the procured agency(ies).	101,920
<input type="checkbox"/> b. Other Salary and Benefits		
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Travel Mileage Reimbursement Documentation Equipment will be an expense related to this contract due to the Community-based outreach methodology of this program type.	5,000
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Evaluation 1.5% of Budget	7,500
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Peer Coaches will be paid a commensurate rate related to their certification status (CADC, CCDP, CRPS, or the like) and professional	365,580

	work experience. Hourly rates based upon FTE status of each Peer Coach staff.	
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Peer Coaches will be provided necessary equipment and travel reimbursement for community-based outreach services.	20,000
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		500,000

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

N/A

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

Manatee Board of County Commissioners 01/31/2017 Work Session; Drug Free Manatee's Addiction Crisis Task Force: "Peer Coaches were #1 most suggested necessary resource for opioid-addictions intervention".

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

The Drug Free Manatee 'Addiction Crisis Task Force,' a membership made up of Law Enforcement, Government, Treatment Providers, Research Professionals, Educators, and Fellowship had consensus for a Peer Coach Recovery Intervention program.

17. Will the requested funds be used directly for services to citizens?

Yes

17a. Describe the target population to be served. Select all that apply to the target population:

- ☐ Elderly persons
- ☒ Persons with poor mental health
- ☒ Persons with poor physical health
- ☐ Jobless persons
- ☒ Economically disadvantaged persons
- ☐ At-risk youth
- ☐ Homeless
- ☐ Developmentally disabled
- ☐ Physically disabled
- ☒ Drug users (in health services)
- ☐ Preschool students
- ☐ Grade school students
- ☐ High school students
- ☐ University/college students
- ☒ Currently or formerly incarcerated persons
- ☒ Drug offenders (in criminal Justice)
- ☐ Victims of crime
- ☒ Other (Please describe): Opioid abusers & misusers who reside in Manatee Co. with a primary focus on emergency dept. utilizer

17b. How many in the target population are expected to be served?

- ☐ < 25
- ☐ 25-50
- ☐ 51-100
- ☐ 101-200
- ☒ 201-400
- ☐ 401-800
- ☐ >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input checked="" type="checkbox"/> Improve physical health	Of those enrolled in Peer Coach program, reduced utilization of emergency departments related to opioid overdose	Aggregate reduction of emergency department utilization of enrolled opioid abusers
<input checked="" type="checkbox"/> Improve mental health	Increased time in community between detox or drug-seeking behavior	Tracking individual and aggregate periods of time not in treatment due to Peer Coaching enrollment
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Community Education provided by Peer Coaches on impacts of opioid prescription abuse, misuse and illicit heroin drug use	Intermittent assessment of community education events and comprehension utilizing pre and post assessments
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Opioid addicted individuals may engage in criminal behaviors in order to fund or procure narcotic medications or illicit substances to address their addiction disorder.	Recidivism data of those arrested for behaviors associated with their opioid addiction can be analyzed to assess intervention strategies.
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Substance abuse such as opiate dependence or addiction can affect job productivity, absenteeism, and job loss rates which cumulatively affect	Tracking not feasible in pilot stage but tracking potential may be possible in furthered implementation and more

	the local economy.	robust data analysis.
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Peer Coaches will be hired.	Track number of unemployed rate prior to hire in the Peer Coach role.
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Peer Coaches may be individuals in receipt of disability due to their disorder, the role may provide income necessary to move off of disability benefits due to employment directly tied to their disability, overall improving their self economic sufficiency.	Tracked by employment agency.
<input checked="" type="checkbox"/> Reduce recidivism	Arrest, emergency department, and detox recidivism will be reduced.	These data will be tracked in aggregate based on enrolled participants.
<input checked="" type="checkbox"/> Reduce substance abuse	Peer Coach program is designed to reduce substance abuse frequency, amount, and varieties.	Overdose rates and fatal overdose rates in aggregate at community level and programmatic level based upon enrollment
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Peer Coaching can provide support necessary to seek treatment thus reducing criminality of drug use behavior	Tracked in aggregate and at individual level based upon identified persons enrolled
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		

<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	500,000	50.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	500,000	50.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	1,000,000	100%	

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

No