## **Appropriations Project Request - Fiscal Year 2018-19**

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Florida State University - Florida Health Equity Research Institute

2. Date of Submission: <u>11/01/2017</u>3. House Member Sponsor: Janet Cruz

Members Copied:

#### 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, Col. E
- b. What is the most recent fiscal year the project was funded? 2014-15
- 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:

FY:	Input Prior Year Appropriation for this project for FY 2017-18  (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			(Reque	Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
Column:	Α	В	С	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 plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)	
Input Amounts:					1,000,000	1,000,000	

- 5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? 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? Department of Education
  - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes
  - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Failure to meet stated FSU policy, based on Florida Statutes, will result in payments not made and potentially contracts being cancelled.

6. Requester:  a. Name: Penny Ralston  b. Organization: Florida State University  c. Email: pralston@fsu.edu  d. Phone #: (850)841-0407
<ul> <li>7. Contact for questions about specific technical or financial details about the project:         <ul> <li>a. Name: Penny Ralston</li> <li>b. Organization: Florida State University</li> <li>c. Email: pralston@fsu.edu</li> <li>d. Phone #: (850)841-0407</li> </ul> </li> </ul>
<ul> <li>8. Is there a registered lobbyist working to secure funding for this project? <ul> <li>a. Name: Rick Lindstrom</li> <li>b. Firm: Lindstrom Consulting, Inc.</li> <li>c. Email: ralindstrom@gmail.com</li> <li>d. Phone #: (850)251-6112</li> </ul> </li> </ul>
<ul> <li>9. Organization or Name of entity receiving funds:</li> <li>a. Name: Florida State University</li> <li>b. County (County where funds are to be expended): Leon</li> <li>c. Service Area (Counties being served by the service(s) provided with funding): Statewide</li> </ul>
<ul> <li>10. What type of organization is the entity that will receive the funds? (Select one)</li> <li>O For Profit</li> <li>O Non Profit 501(c) (3)</li> <li>O Non Profit 501(c) (4)</li> <li>O Local Government</li> <li>O University or College</li> <li>O Other (Please describe)</li> </ul>

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

This budget request is to provide support for the Florida Health Equity Research Institute (FL HERI). FL HERI was established in 2013 by the Florida Board of Governors to implement the Health Disparities Research Agenda for Florida to improve health of the medically under-served and to increase external funding that will improve economic development in the state. Since its inception, FL HERI has developed 13 partnerships, reached over 990 diverse students, and garnered \$12.2M in awards.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?0? if request is zero for the category
Administrative Costs:		
□a. Executive Director/Project Head Salary and Benefits		
☑b. Other Salary and Benefits	Program Coordinator (0.5FTE)	39,000
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
☑e. Salaries and Benefits	Program Directors for FL HERI Cores (equivalent to 0.05FTE)	97,500
☑f. Expenses/Equipment/Travel/Supplies/Other	Travel (\$5,000) and space rental (\$10,000)	15,000
☑g. Consultants/Contracted Services/Study	Pilot research grants (8@\$50,000=\$400,000), four statewide student symposia (\$100,000), statewide student summer research internships (\$150,000), annual statewide health equity summit (\$50,000), pilot	848,500

	regional cluster projects (\$148,500)	
Fixed Capital Construction/Major Renovation:		
□h. Construction/Renovation/Land/Planning Engineering		
TOTAL		1,000,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

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?

<u>Yes</u>

15a. Please Describe:

The 13 collaborating institutions have provided letters of support and have their logos on the FL HERI website (flheri.org).

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 need for the funds has been documented in the Florida Health Disparities Research Agenda (http://cancer.ufl.edu/files/2012/08/FL CURED.pdf), prepared by the 31-member Health Disparities Advisory Committee in 2011 under the leadership of the Florida Department of Health.

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

<u>Yes</u>

17a. What are the activities and services that will be provided to meet the purpose of the funds?

Pilot research grants, statewide student symposia on health professions, statewide summer research internships, statewide health equity summit, and pilot regional cluster projects.

17b. Describe the direct services to be provided to the citizens by the funding requested.  Innovations to improve health of and health care for medically underserved populations, and educational programs for students, faculty,
community members, and clinicians.
17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").
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
□General (The majority of the funds will benefit no specific group)
☑Other (Please describe): Medically underserved populations
17d. How many in the target population are expected to be served?
O< 25
O25-50
O51-100
O101-200
O201-400
O401-800
<b>⊙</b> >800

# 18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
☑Improve physical health	-number of new innovations in pilot research and regional cluster projects that documents the reduction of chronic disease risk factors in medically underserved populations	-competitive selection of pilot research and regional cluster project recipients and the outcomes of those projects assessed through document review by an external evaluator
☑Improve mental health	-number of new innovations in pilot research and regional cluster projects that document the reduction of chronic disease risk factors in medically underserved populations	-competitive selection of pilot research and regional cluster project recipients and the outcomes of those projects as assessed through document review by an external evaluator
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
☑Improve quality of education	increase awareness/knowledge of high school and college students regarding their preparation for the health professions	-evaluation data collected at student symposia and during summer research internships by external evaluator
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
☑Increase or improve economic activity	-increase in multi-university, multidisciplinary and community- based funding in collaborating	-total amount of awards received annually through survey conducted

	institutions	by external evaluator
□Increase tourism		
□Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		
□Other (Please describe):		

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
Amount Requested from the State in this Appropriations     Project Request:	1,000,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	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?  $\underline{\text{No}}$