#### **Appropriations Project Request - Fiscal Year 2022-23**

For projects meeting the definition of House Rule 5.14

1. Title of Project: Integrated Care and Coordination for Youth (ICCY)

2. Date of Submission: <u>10/25/2021</u>3. House Member Sponsor: <u>Chris Latvala</u>

#### 4. Details of Amount Requested:

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

b. What is the most recent fiscal year the project was funded? 2021-22

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 2021-22 (If appropriated in 2021-22 enter the appropriated amount, even if vetoed.)		(Requests	Develop New Funds Rec for FY 2022-23 for additional RECURRING fu		
Column:	Α	В	С	D	E	F
Funds	Prior Year	Prior Year	Total Funds	Recurring Base	Additional Nonrecurring	TOTAL Nonrecurring plus
Description:	Recurring Funds	Nonrecurring	Appropriated	Budget	Request	Recurring Base Funds
		Funds				
Input Amounts:		250,000	250,000		350,000	350,000

e. Provide the total cost of the project for FY 2022-23 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?
1. Amount Requested from the State in this Appropriations Project Request	350,000	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

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5. Other	0	0.0%	No			
TOTAL	350,000	100%				
5. Is this a multi-year project requiring funding from the state for more than one year	ar?					
Yes	ат.					
a. How much state funding would be requested after 2022-23 over the next 5 y	rears?					
O<1M						
<b>⊙</b> 1-3M						
	O>3-10M					
O>10M						
b. How many additional years of state support do you expect to need for this p	roject?					
O1 year						
O2 years						
O3 years						
O4 years						
•>= 5 years						
<ul> <li>c. What is the total project cost for all years including all federal, local, state, ar project cost. If funds requested are for ongoing services or for recurring activit         <ul> <li>⊙ongoing activity − no total cost</li> </ul> </li> </ul>		_	best describes the total			
O<1M						
O1-3M						

- 6. Which is the most appropriate state agency to place an appropriation for the issue requested? Department of Juvenile Justice
  - a. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes
  - b. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

<u>Failure to meet deliverables or performance measure should initially be dealt with through a corrective action plan.</u>

O>3-10M O>10M

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7. Requeste	r	
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- a. Name: Doug Leonardo
- b. Organization: Chrysalis Health
- c. Email: dleonardo@chrysalishealth.com
- d. Phone #: (727)580-1223
- 8. Contact for questions about specific technical or financial details about the project.
  - a. Name: Doug Leonardo
  - b. Organization: Chrysalis Health
  - c. Email: dleonardo@chrysalishealth.com
  - d. Phone #: (727)580-1223
- 9. Registered lobbyist working to secure funding for this project.
  - a. Name: Eric D. Prutsman
  - b. Firm: Johnson & Blanton
  - c. Email: eric@prutsmanlaw.com
  - d. Phone #: (850)894-6601
- 10. Organization or Name of entity receiving funds:
  - a. Name: Chrysalis Health
  - b. County (County where funds are to be expended): Statewide
  - c. Service Area (Counties being served by the service(s) provided with funding): Escambia, Marion, Okaloosa, Pasco, Pinellas, Santa Rosa
- 11. What type of organization is the entity that will receive the funds?
  - For Profit
  - O Non Profit 501(c) (3)
  - O Non Profit 501(c) (4)
  - O Local Government
  - O University or College
  - O Other (Please describe)
- 12. What is the specific purpose or goal that will be achieved by the funds being requested?

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The goals of the project would be to prevent youths who struggle with behavioral health issues from slipping through the cracks, reduce the likelihood of more severe behaviors manifesting and the need for deeper end, more expensive services such as residential care, and decrease maladaptive delinquent behaviors by treating the underlying psychological disorder.

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

Spending Category  Administrative Costs:	Description	Amount Requested (Should equal 4d, Col. E) Enter "0" if request is zero for the category
☐a. Executive Director/Project Head Salary and Benefits	0.5 FTE Project Director to provide	20,000
	direct oversight of the program,	
	ensure contract deliverables are	
	being achieved, provide	
	supervision of program staff	
☑b. Other Salary and Benefits	1 FTE Data Specialist to ensure all	30,000
	program data is reported in an	
	accurate and timely way to DJJ.	
	Provide data to program staff to	
	ensure outcomes are being	
	achieved.	
□c. Expense/Equipment/Travel/Supplies/Other		
☐d. Consultants/Contracted Services/Study		
Operational Costs:		
☑e. Salaries and Benefits	6 FTE's to provide statewide	292,000
	services to youth in the ICCY	
	program. Individual/family	

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		outpatient services can be	
		provided in the office, school or	
		home: • Training for JPO staff on	
		a variety of behavioral health	
		topics	
		topics	
	☑f. Expenses/Equipment/Travel/Supplies/Other	Computers, office supplies and	8,000
		travel reimbursement.	
	☐g. Consultants/Contracted Services/Study		
	Fixed Capital Construction/Major Renovation:		
	☐h. Construction/Renovation/Land/Planning Engineering		
	TOTAL		350,000
14. F	or Fixed Capital Costs requested in Question 13, what type of ownership will the OFor Profit ONon Profit 501(c) (3)	e facility be under when complete?	
	ONon Profit 501(c) (4)		
	OLocal Government (e.g., police, fire or local government buildings, loc	al roads, etc.)	
	OState agency owned facility (For example: college or university facility	, buildings for public schools, road	s in the state transportation system,
eto	c.)		
	OOther (Please describe)		
15. Is	s the project request an information technology project?		

16. 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>

<u>No</u>

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	<ul> <li>a. Please Describe:         <ul> <li>The Chief's of Probation in Circuit 1 and Circuit 5 strongly support the program as it is currently running in their areas.</li> </ul> </li> </ul>
17.	Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?  No
18.	Will the requested funds be used directly for services to citizens?  Yes
	<ul> <li>a. What are the activities and services that will be provided to meet the purpose of the funds?</li> <li>Clinical staff will be embedded into to DJJ Probation offices to work in an integrated fashion with probation staff.</li> </ul>
	b. Describe the direct services to be provided to the citizens by the funding requested.
	Individual/family outpatient services can be provided in the office, school or home
	c. 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
	☐ 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)

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□Victims of crime □General (The majority of the funds will benefit no specific group)	
□Other (Please describe)	
d. How many in the target population are expected to be served?	
O< 25	
O25-50	
O51-100	
O101-200	
<b>⊙</b> 201-400	
O401-800	
O>800	

19. 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 or outcome
☐Improve physical health		
☑Improve mental health	Youth will demonstrate an improvement in their mental health symptoms	The DLA-20 is an evidenced based assessment tool that determines level of improvement in symptoms.
□Enrich cultural experience		
□ Improve agricultural production/promotion/education		
□Improve quality of education		
☐Enhance/preserve/improve environmental or fish and wildlife quality		

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☑Protect the general public from harm (environmental, criminal, etc.)	100% of youth released from the program will not receive Offense During Service (ODS)	The percentage of youth released from the program that shall not receive ODS shall be at or above the last Comprehensive Accountability Report (CAR) of similarly classified services (greater or lesser depending on the measure)
□Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
□Create specific immediate job opportunities		
□Enhance specific individual's economic self sufficiency		
☑Reduce recidivism	90% of youth will not receive any additional charges while in the program.	This percentage is calculated by dividing the number of youth that did not recidivate by the total number of youth that completed program services. Recidivism is defined as an offense that occurs within twelve (12) months of program completion that results in an adjudication, adjudication withheld, or an adult conviction for any new law violation.
☐Reduce substance abuse		

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☑Divert from Criminal/Juvenile justice system	Youth will not move deeper into DJJ system as a result of the mental health issues.	The number of youth who have remained on probation and not moved to a higher level of custody within the DJJ will increase.
□Improve wastewater management		
☐Improve stormwater management		
☐ Improve groundwater quality		
□ Improve drinking water quality		
☐Improve surface water quality		
□Other (Please describe):		