



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1592

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

**4. Project/Program Description**

Mental Health First Aid (MHFA) is identified in the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of evidence-based programs. MHFA teaches a basic 5-step intervention that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis, such as contemplating suicide, and helps support them until appropriate professional help arrives. The funds will allow Alpert JFS, in partnership with 3 other non-profits (Goodman JFS, JCS of South Florida, and Directions for Living) to continue to train 11,000 first responders, professionals, and concerned citizens across 10 counties to recognize signs, symptoms, and behavior changes in individuals developing or suffering a mental illness and/or substance use disorder and guide them to the help they need.

5. **State Agency to receive requested funds**
- State Agency contacted?**  Yes

**6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025**

Type of Funding	Amount
Operations	1,911,233
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>1,911,233</b>

**7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,911,233	85%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	338,000	15%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>2,249,233</b>	<b>100%</b>

8. **Has this project previously received state funding?**  Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	1,911,233	378	No

9. **Is future funding likely to be requested?**  Yes
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
- 

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1592

Yes

**If yes, indicate the amount of funds received and what the funds were used for.**

In 2020, Alpert Jewish Family Service received a PPP loan in the amount of \$909,299 that was all used for payroll.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

- Planning    
  Design    
  Construction    
  N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits	Indirect Admin fee of 10% to Alpert JFS for Grants Manager, pre-award and post-award administration and management, including application, compliance, reporting, and daily administration and operational tracking	194,126
Expense/Equipment/Travel/Supplies/Other	Occupancy and phone to Alpert JFS and Broward Goodman JFS	14,710
Consultants/Contracted Services/Study	Coordination Fee of 5% to Alpert JFS from other 3 agencies	52,098
<b>Operational Costs: Other</b>		
Salary and Benefits	Funding will be used for: 5 Supervisors/Directors from the 4 participating agencies 13 Instructors/Trainers from the 4 participating agencies	1,167,196
Expense/Equipment/Travel/Supplies/Other	National Instructor Training MHFA for 13 instructors, National Participant Fees for 11,000 participants, Equipment, Travel/Mileage, National Conference, National Council Membership, and marketing for all 4 partner agencies.	483,103
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,911,233</b>



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1592

#### 14. Program Performance

**a. What specific purpose or goal will be achieved by the funds requested?**

The funds will allow Alpert JFS, in partnership with 3 other non-profits (Goodman JFS, JCS of South Florida, and Directions for Living) to add 13 new Mental Health First Aid nationally certified instructors to train 11,000 first responders, professionals, and concerned citizens across 10 different counties to recognize signs, symptoms, and behavior changes in individuals developing or suffering a mental illness and/or substance use disorder and guide them to the help they need.

**b. What activities and services will be provided to meet the intended purpose of these funds?**

Alpert JFS and its 3 agency partners will send 13 instructors to become certified as MHFA Instructors by The National Council for Wellbeing. The instructors will train 11,000 new community members and professionals to recognize signs, symptoms, risk factors, and behavior changes in individuals developing or suffering a mental illness and/or substance throughout these 10 counties.

**c. What direct services will be provided to citizens by the appropriation project?**

Teaching the 8-hour MHFA classes that allow participants to build confidence in approaching someone showing signs/symptoms of distress, oftentimes preventing suicide and saving lives. The goal is to help support an individual until appropriate professional help arrives. It is the intent to have MHFA become as commonplace as CPR and First Aid.

**d. Who is the target population served by this project? How many individuals are expected to be served?**

MHFA teaches a basic 5-step intervention that empowers ordinary citizens to directly confront someone who is showing signs and symptoms of distress and guide them to the help they need. The population served will be the general population, including education professionals, medical personnel, veterans, ordinary citizens, first responders, and community leaders, among others. The 4 partner agencies are expected to train approximately 11,000 people.

**e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

MHFA teaches a basic 5-step intervention that empowers the participants how to appropriately support someone who might be experiencing a crisis or developing a mental illness and/or substance use disorder and connect them to the help they need. The training helps a person assist someone experiencing a mental health crisis such as contemplating suicide and until professional help arrives. The National Council of Wellbeing overseeing MHFA administers pre-evaluations and post-evaluations to participants once they complete the 8-hour course. Peer-reviewed studies across the globe show that program participants increase their knowledge of signs, symptoms, and risk factors of mental illnesses and addictions allowing more people to get the help they need.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?**

If we fail to meet the agreed upon deliverables, we will negotiate the potential return of a portion of the funds, if appropriate.

#### 15. Requester Contact Information

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

#### 16. Recipient Contact Information

**a. Organization**

**b. Municipality and County**



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1592

#### c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number