



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2774

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Our organization is dedicated to providing medical and food assistance to those who need it most. Through innovative disease prevention programs, we're working hard to improve the health and well-being of people in our communities. We hope to provide free healthcare consultations and treatment for up to 10,000 undeserved and/or low-income individuals and families in our community.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operations	430,000
Fixed Capital Outlay	70,000
<b>Total State Funds Requested</b>	<b>500,000</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)	500,000	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	500,000	50%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>1,000,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

The source of funding that can be used in lieu of state funding originate from the operations of Qtrials Inc (EIN/TIN: 825146778), a medical group facility in Miami-Dade County.

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



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

## 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	This covers the leader's compensation for overseeing the project. It includes salary, performance-based bonuses, and benefits. A competitive package is vital for attracting and retaining a competent project lead.	70,000
Other Salary and Benefits	This category provides compensation for additional administrative and project staff. These funds ensure we maintain a dedicated, skilled team integral to our mission.	85,000
Expense/Equipment/Travel/Supplies/Other	This allocation is for essential operational expenses including medical equipment, supplies, and staff travel, which are crucial for providing consistent, quality healthcare services.	45,000
Consultants/Contracted Services/Study	This covers costs for specialized services and expertise, like consulting and research, to inform and enhance project effectiveness.	15,000
<b>Operational Costs: Other</b>		
Salary and Benefits	This category funds healthcare professionals' compensation, helping us retain skilled staff who provide preventive healthcare services, crucial for advancing health equity.	125,000
Expense/Equipment/Travel/Supplies/Other	This covers operational expenses like medical equipment, supplies, and travel, enabling smooth daily operations and consistent provision of quality healthcare services.	60,000
Consultants/Contracted Services/Study	These funds enable us to engage independent contractors and additional staff as needed, ensuring quality healthcare provision during peak periods.	30,000
<b>Fixed Capital Construction/Major Renovation:</b>		



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Construction/Renovation/Land/Planning Engineering	These funds are dedicated to preconstruction activities including site assessments, land acquisition, and planning costs, vital for expanding healthcare access in undeserved communities.	70,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>500,000</b>

#### 14. Program Performance

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

Our organization is dedicated to providing medical and food assistance to those who need it most. Through innovative disease prevention programs, we're working hard to improve the health and well-being of people in our communities. Our goal is to provide 10,000 free medical consultations and treatment to undeserved individuals and communities in Miami-Dade.

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

- Free preventive health services to include: Early screening for Prostate Cancer (PSA)
- Early screening for Breast Cancer (radiological technique, doctor's examination)
- Early diagnosis tests for Colon Cancer (detection of occult blood in the stool)
- Early screening for Cervical-Uterine Cancer and communicable diseases (Pap Smear)
- Physical Examination
- Blood Tests
- Covid-19 Tests

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

- Free preventive health services to include: Early screening for Prostate Cancer (PSA)
- Early screening for Breast Cancer (radiological technique, doctor's examination)
- Early diagnosis tests for Colon Cancer (detection of occult blood in the stool)
- Early screening for Cervical-Uterine Cancer and communicable diseases (Pap Smear)
- Physical Examination
- Blood Tests
- Covid-19 Tests

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

The target population will be low-income, homeless, and undeserved individuals and families of Miami-Dade county. We expect to serve 10,000 individuals between 2024 and 2025.

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

The expected benefit outcome of this project is to alleviate the burden of the Hospitals, Healthcare facilities and other related healthcare provider/offices. Also to decrease hospitalizations of undeserved communities by providing early screenings and preventive healthcare. The outcome will be measured by collecting feedback surveys from patients, monthly reports showing how many undeserved patients were treated. We will track the number of formerly incarcerated individuals participating in our programs, and liaise with local law enforcement and social service agencies to monitor re-offense rates. We will also conduct surveys to measure participants' health status, employment stability, and social reintegration as key factors in reducing recidivism.

##### 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?

We can suggest to consider decreasing the provided funding until the all the deliverables and performance measures are met.



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#### 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

#### 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