

# Appropriations Project Request - Fiscal Year 2020-21

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Change Everything Initiative - The Florida Opioid Crisis Pilot Project
2. Date of Submission: 11/12/2019
3. House Member Sponsor: Mike La Rosa  
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, Col. E***
- 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:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget  <i>(Will equal non-vetoed amounts provided in Column A)</i>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring plus Recurring Base Funds</b>  <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					389,400	389,400

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? 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 Children and Families
  - 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.  
Pro-rata return of state funds for portions of project deemed noncompliant.

6. Requester:

- a. Name: Andrae Bailey
- b. Organization: Change Everything Initiative dba Project Opioid Inc.
- c. Email: andrae@change-everything.com
- d. Phone #: (407)456-0605

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Andrae Bailey
- b. Organization: Change Everything Initiative dba Project Opioid Inc.
- c. Email: andrae@change-everything.com
- d. Phone #: (407)456-0605

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

9. Organization or Name of entity receiving funds:

- a. Name: Change Everything Initiative dba Project Opioid, Inc.
- b. County (County where funds are to be expended): Orange
- c. Service Area (Counties being served by the service(s) provided with funding): Orange, Osceola, Seminole

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)

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

Project Opioid intends to curb opioid misuse, dependency and overdoses and save lives by creating a comprehensive roadway system to ending the opioid crisis that closes the gaps between prevention, response, and recovery. We will achieve this by launching a comprehensive advocacy campaign, implementing our Corporate Engagement on Opioids (C.E.O.) HR programs in businesses and developing our Community Resource Centers (CRCs) across the state of Florida.

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:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Executive Director Community Relations Director Communications Director	22,000
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Statewide Project Director Regional Project Manager (Central Florida) Part-Time Statewide Project Assistant	11,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	C.E.O. HR program in businesses across Florida. Piloting our Community Resource Centers throughout Florida. Statewide Advocacy and Awareness Campaign.	269,000
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Contracting of expert Addiction and Recovery consultants to aide at our Community Resource Centers for recovery assistance. Partnership with UCF for completion of Data Study on the Opioid Crisis in the state	60,000

	of Florida.	
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Startup Operation expenses such as office equipment, project space, event expenses etc.	27,400
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		389,400

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)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (Please describe)

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:

Project Opioid has the commitment of the City & Orange County. It also has the support of leaders from the business, faith, healthcare, nonprofit, philanthropist, law enforcement and local government sectors. We also have official Letters of Support from across Central Florida.

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

No

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

Yes

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

Creation of Community Resource Centers and Corporate Engagement on Opioids (C.E.O.) HR Programs. Advocacy and Awareness Campaign. Phase 2 Data Study in partnership with UCF.

17b. Describe the direct services to be provided to the citizens by the funding requested.

An aggressive campaign that will inform, educate & engage the community on OUD, break down stigma on addiction, arm public w/accurate info., motivate people to seek help, & improve access to help.

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)

17d. 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 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
<input checked="" type="checkbox"/> Improve physical health	Increasing access to preventative treatment options in our communities. Ensuring healthcare and insurance providers recommend alternative treatments to opioids.	Project Opioid will use future SAMSHA reports to measure the level of success of our work.
<input checked="" type="checkbox"/> Improve mental health	Prevention by working to break down barriers in mental health that lead to opioid misuse and addiction.	Project Opioid will use future SAMSHA reports to measure the level of success of our work.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Our CRCs and aggressive advocacy campaign will educate the public about Opioid Use Disorder (OUD) and de-stigmatize addiction.	Our success in this effort will be measured by organizational polling of our "New Frontline" EPs and measurement analytics of our

		advocacy campaign.
<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.)	Our CEO HR programs, CRCs and advocacy campaign will steer the public away from opioids and guide them towards effective pathways to recovery.	Overall – the Media, future SAMSHA and Florida Medical Examiner reports.
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Working with healthcare and insurance providers to improve access and coverage of treatment options will break down financial barriers to recovery.	Comparing these changes with future reports of SAMSHA designated Opioid Treatment Providers' (OTPs) capacities and censuses will measure our success.
<input checked="" type="checkbox"/> Reduce recidivism	Working with law enforcement on their response to victims of OUD will reduce funneling into the justice system, shifting away from 'offender' mentality and funneling them into treatment options.	We will see success when the rates of incarceration and drug charges decrease as well as comparing these changes with future reports of SAMSHA.
<input checked="" type="checkbox"/> Reduce substance abuse	Our CEO HR programs, CRCs and advocacy campaign will reduce overall misuse of legal and illegal opioids through wrap around efforts that target at-risk populations.	Success will be measured by a comprehensive progress study that will compare and synthesize data from future SAMSHA and Florida Medical Examiner reports.

<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Our CEO HR programs for law enforcement will help divert victims and the at-risk populations away from the justice system and towards preventative and recovery options.	Success will be measured by a comprehensive progress study that will compare and synthesize data from future SAMSHA and Florida Medical Examiner reports.
<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 2020-21 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:	389,400	39.2%	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:	604,300	60.8%	Yes
<b>TOTAL</b>	<b>993,700</b>	<b>100%</b>	

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

No