

## Program Description

Completed by allison.laroy@westcare.com on 8/19/2024 9:10 AM

**Case Id:** 16975

**Name:** WestCare GulfCoast-Florida, Inc.

**Address:** \*No Address Assigned

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### Program Description

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Please provide the following information.



## Alcohol and Drug Abuse Trust Fund Grant FY 2024-2025

**Pinellas County Board  
of County  
Commissioners**  
Human Services  
440 Court St, 2nd Floor  
Clearwater, FL 33756

**Pinellas County and the Substance Abuse Advisory Board (SAAB) are pleased to announce the solicitation of applications for the Alcohol and Drug Abuse Trust Fund award. Funding for the upcoming 24-25 fiscal year is \$35,000.00. The Alcohol and Drug Abuse Trust Fund is generated from court fees in accordance with Sections 938.13 and 893.165 of the Florida Statutes.**

### Eligible Applicants

Applicants must be nonprofit organizations that provide alcohol and/or drug abuse treatment and/or prevention programs and have at least one client-accessible office or service location within Pinellas County. To be eligible for an award your organization must be licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and you must provide a copy of said license with your application.

### Use of Funds

Award funds must be used for one-time-only, non-recurring expenditures such as equipment, special projects, training, renovations, and formalized prevention activities. Awards cannot be used for food and beverage reimbursements.

Drug and Alcohol Abuse Trust Fund Grant awards will range from \$1,000.00 to \$10,000.00. The project period for these awards is October 1, 2024 – September 30, 2025.

### Application Review Process

The SAAB will review and score each application to make funding recommendations. Recommendations will then be presented to the Board of County Commissioners for final approval.

### Alcohol and Drug Abuse Trust Fund Online Application Instructions

Printed By: Maggie Miles on 8/21/2024

Please read the application instructions in their entirety before beginning or applying for funding. Organizations and agencies may only submit one project proposal. Submission of multiple project applications by a single organization will not be accepted.

- **Budget Narrative:** Be aware that the application field will not allow you to copy and paste a table or spreadsheet into the application. Include any additional Budget Narrative to explain the breakdown of how you arrived at that dollar amount.
  - To accommodate tables and spreadsheets you may submit a detailed budget as an attachment in the Budget section, it does allow you to attach multiple files. This is where you would attach bids and estimates.
  - The SAAB has stated they would prefer if multiple bids /estimates are submitted for purchases/ projects if possible. If needing to use a particular vendor, please explain.
- Organizations must attach information regarding their non-profit status and Chapter 397 of the Florida Statutes licenses.
- Be sure to complete all fields and be as thorough as possible.

### **All Grant Award Recipients Must:**

- Attend the SAAB meetings and present written and oral reports as required.
- Submit to a monitoring visit by the County.
- Agree to request in writing, any changes in scope and obtain approval from the SAAB.
- Agree to complete the funded project and expend all awarded funds during the grant funding period

### **Application Timeline**

- Application Opens Wednesday August 7th, 2024.
- Question and Answer Period Closes: Wednesday, August 14th at 4:00pm. Responses will be posted by Friday, August 16th at link: [Human Services Department – Pinellas County](#)
- Application Closes Wednesday, August 21st, 2024, at 4:00pm.
- SAAB Review and Recommendation Meeting Tuesday, August 28th, 2024.
- Board of County Commissioners Recommendation Approval on or about Tuesday, October 15th, 2024. The submission deadline for all applications is **August 21st at 4:00pm (no exceptions)**. Please allow time for submission and technological challenges, as late applications will not be accepted.

### **Scoring Criteria**

Please see attached Scoring Matrix [here](#) which will be used by reviewers to score application

## Eligibility

Completed by allison.laroy@westcare.com on 8/19/2024 9:10 AM

**Case Id:** 16975

**Name:** WestCare GulfCoast-Florida, Inc.

**Address:** \*No Address Assigned

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## Eligibility

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Please provide the following information.

**1. Is the applicant a non-profit organization licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and have at least one client-accessible office or service location within Pinellas County?**

Yes

**2. Does the applicant agree to the terms and conditions of the [FY25 Funding Agreement?](#)**

Yes

## A. Agency Information

Completed by allison.laroy@westcare.com on 8/19/2024 9:11 AM

Case Id: 16975

Name: WestCare GulfCoast-Florida, Inc.

Address: \*No Address Assigned

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### A. Agency Information

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Please provide the following information.

#### LEGAL AGENCY INFORMATION (FOR CONTRACT)

**A.1. Organization Name**

WestCare GulfCoast-Florida, Inc.

**A.2. DBA (if applicable)**

**A.3. Legal Address**

1735 Martin Luther King Jr. Street, South St. Petersburg, FL  
33705

#### PROJECT INFORMATION

**A.4. Project Title**

Davis Bradley Community Involvement Center Oven

**A.5. Physical Program Address**

1735 Martin Luther King Jr. Street, South St. Petersburg, FL  
33705

**A.6. Program Manager First Name**

Jack

**A.7. Program Manager Last Name**

Shaw

**A.8. Program Manager Title**

Director of Residential Services

**A.9. Program Manager Email**

jack.shaw@westcare.com

**A.10. Program Manager Phone Number**

(727) 502-0188

**A.11. Total Amount Requested**

\$9,923.05

#### APPLICATION CONTACT INFORMATION

**A.15. First Name**

Ronda

**A.16. Last Name**

Lieberman

**A.17. Contact Person/Title**

Senior Accountant

**A.18. Contact Email**

ronda.lieberman@westcare.com

**A.19. Telephone**

727490676730104

**A.20. Executive Officer First Name**

Steve

**A.21. Executive Officer Last Name**

Blank

**A.22. Executive Officer Title**

Regional Vice President

**A.23. Executive Officer Email**

steve.blank@westcare.com

**A.24. Executive Officer Phone Number**

(727) 291-3017

**A.12. Taxpayer/Employer ID**

59-3714627

**A.13. Unique Entity Identifier (UEI- Federal SAM.GOV  
Number) Optional**

HNG6XDT1MNL5

**A.14. Date of incorporation in Florida**

02/21/2001

## B. Organization Profile

Completed by allison.laroy@westcare.com on 8/19/2024 9:11 AM

**Case Id:** 16975

**Name:** WestCare GulfCoast-Florida, Inc.

**Address:** \*No Address Assigned

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### B. Organization Profile

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Please provide the following information.

#### B.1. Describe the mission and purpose of the organization.

WestCare Foundation is a national organization operating in 17 states, Guam, Puerto Rico, the US Virgin Islands, the Republic of Palau, the Dominican Republic, and the Commonwealth of the Northern Mariana Islands. WestCare's mission is to empower everyone with whom we come into contact to engage in a process of healing, growth, and change benefiting themselves, their families, coworkers, and communities. Our vision is to devote our best collective and individual efforts toward "uplifting the human spirit" by consistently improving, expanding, and strengthening the quality, efficacy, and cost-effectiveness of everything we do in building for the future.

WestCare GulfCoast-Florida, Inc. (WCGC-FL), a subsidiary of WestCare Foundation, is an experienced provider of human and behavioral services. WCGC-FL's approach to treatment is client-centered, trauma-focused, and addresses the multiple needs of persons with substance use disorders and co-occurring conditions such as behavioral or mental health problems, criminal justice involvement, or experience with violence and abuse. For over 20 years, WCGC-FL has provided health and human services to individuals experiencing homelessness and substance use disorder (SUD) in St. Petersburg and across Pinellas County, including an emergency shelter, transitional and supportive housing (including Veterans), outpatient services, and residential treatment for justice-involved individuals. Services are offered through three primary locations in St. Petersburg: A Turning Point, a 65-bed 24-hour/365-day emergency intervention shelter and inebriate receiving facility; Mustard Seed Inn, a 67-bed facility providing transitional and supportive housing to homeless individuals who have begun their recovery from alcohol, substance abuse and/or mental illness; and Davis Bradley Community Involvement Center (DBCIC), a 222-bed facility offering residential drug treatment, case management, career/employment services, and support services for individuals involved in the criminal justice system and at high-risk for homelessness. Each of these programs offers an entry point to the coordinated system of care. WCGC-FL accepts client referrals from the coordinated entry system and maintains contracts with other community providers, the court system, Pinellas County Health Department, and other health system providers. WCGC-FL is licensed by the State of Florida Department of Children and Families for prevention (Levels 1 and 2), case management, outpatient treatment, aftercare, general intervention, and (Level 2) residential substance abuse treatment services. WCGC-FL is accredited by The Commission on Accreditation of Rehabilitation Facilities (CARF) and has been since 2009 for outpatient and prevention services, and since 2019 for case management, community housing, diversion/intervention, and residential treatment.

## C. Community Needs

Completed by allison.laroy@westcare.com on 8/19/2024 9:12 AM

**Case Id:** 16975

**Name:** WestCare GulfCoast-Florida, Inc.

**Address:** \*No Address Assigned

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### C. Community Needs

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Please provide the following information.

**C.1 Clearly identify the problem to be addressed through the program that is requesting project funding. Provide supporting statistics or data specific to Pinellas County such as needs assessments, interviews, waiting lists, surveys, trends and/or analyses. (Describe the program that needs the item, not the item)**

Individuals who are addicted to alcohol or other drugs are at an increased risk for homelessness and are more likely to be high users of public services. At the same time, many individuals among the homeless population have co-occurring substance abuse and mental health disorders or multiple chronic conditions. The 2023 Homeless Leadership Alliance of Pinellas Point-In-Time Homeless Survey indicates a significant population of homeless individuals with SUD. Among 2,114 total homeless individuals, 9% of the sheltered homeless population and 17% of the unsheltered population reported substance use. Opioid-related overdose deaths in Pinellas County are 55% higher than in the State of Florida and are the highest in Tampa Bay. According to the Florida Department of Health Substance Use Dashboard, there were 576 fatal overdoses in Pinellas County in 2021 (a rate of 61.1 per 100,000, higher than the Florida rate of 38.5). When underlying factors, such as trauma, are identified, homeless individuals are often treated with a "silo" approach. Without treatment, there is a high likelihood of continued substance abuse, recidivism, and continued homelessness. Individuals with substance use or co-occurring disorders who are homeless often have repeated encounters with the justice system (police, jail, court services, etc.), emergency medical transportation services, public hospital emergency room care, alcohol detoxification programs, and involuntary commitment services. WCGC-FL's Davis Bradley Community Involvement Center (DBCIC) is a 222-bed facility offering residential drug treatment, case management, career/employment services, and support services for individuals involved in the criminal justice system and at high risk for homelessness. This program helps participants avoid recidivism while building stable employment and supporting recovery.

## D. Project Description

Completed by allison.laroy@westcare.com on 8/19/2024 9:12 AM

Case Id: 16975

Name: WestCare GulfCoast-Florida, Inc.

Address: \*No Address Assigned

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### D. Project Description

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Please provide the following information.

#### D.1. Describe the Project, what problem it is solving, and how it will improve services being provided by the organization?

While living at the DBCIC for 6-8 months, each individual receives supportive services detailed to their specific needs and works with their case manager to develop a housing stability plan. Services include integrated assessment, individualized treatment planning, integrated case management and recovery support services (RSS), individual and group counseling for co-occurring disorders (COD), specialized COD education and support groups, medication management and monitoring, spiritual wellness education, peer support, and family involvement/support groups. Most individuals served come through referrals from local drug courts, the Coordinated Entry System, or A Turning Point Emergency Shelter. Many residents do not have safe or stable housing to return to upon entering residential drug treatment. DBCIC programs help assure stability upon treatment completion through a person-centered, strength-based case management approach.

As a part of programming at DBCIC, about 170 residents receive three hot meals each day. These meals are prepared in a double-door convection oven, which has the capacity to prepare large quantities of food. The primary issue the project aims to solve is the frequent and costly breakdowns of the current oven, which has been disrupting the preparation of daily meals for residents. After 20 years of use, WCGC-FL has recently replaced the solenoid valve, the heat sensors are periodically misreading, the door latches are worn and often do not connect with the sensor, and the chain that circulates the racks for even cooking is very rusty and sticks, all preventing an even and thorough cook. A critical aspect of DBCIC's operation is the provision of consistent, nutritious meals, which are essential for physical health, recovery, and overall well-being. The current oven's frequent malfunctions compromise the organization's ability to reliably deliver these meals, thereby hindering the overall effectiveness of the residential program.

#### D.2. How will funds be used to fix to the problem?

To effectively address the problem and enhance the services provided by the DBCIC, the proposed project focuses on replacing the outdated and malfunctioning double-door convection oven that has been a critical component of the facility's food preparation services for over 20 years. Rather than continually spending money to repair the 20-year-old oven, WCGC-FL is requesting funds to replace the oven. This would include the purchase of a double deck full-size natural gas convection oven and a 2-year protection plan. This project will ensure that meals for residents are adequately prepared and heated to the correct temperature and will eliminate the ongoing maintenance costs associated with the old appliance, allowing these funds to be redirected toward other essential services and improving long-term sustainability. This upgrade will not only enhance the quality of food services but will also contribute to the broader goal of creating a stable, supportive environment where residents can focus on their recovery and long-term housing stability.



## E. Budget

Completed by allison.laroy@westcare.com on 8/19/2024 9:12 AM

**Case Id:** 16975

**Name:** WestCare GulfCoast-Florida, Inc.

**Address:** \*No Address Assigned

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### E. Budget

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Please provide the following information.

#### E.1. Total ProjectBudget

\$9,923.05

#### E.2. Amount of County Funding Request

\$0.00

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### Documentation

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**Project Budget Narrative with estimates/bids \*Required**

2024-2025 SAAB Budget.pdf

## F. Required Documents

Completed by allison.laroy@westcare.com on 8/19/2024 1:35 PM

Case Id: 16975

Name: WestCare GulfCoast-Florida, Inc.

Address: \*No Address Assigned

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### F. Required Documents

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Please upload the following documents.

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#### Documentation

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**Proof of 501(c)(3) status \*Required**

WC-GC- FL 501c3.pdf

**W-9 with legal name which matches that of applicant name \*Required**

62027\_W9 WestCare Gulfcoast Florida 2024 signed.pdf

**Current DCF 397 State Licenses or Registrations \*Required**

7-11-2024\_Aftercare\_Certificate[1].pdf

7-11-2024 General Intervention Certificate.pdf

7-11-2024 Prevention Services Selective Certificate.pdf

7-11-2024 Residential Level 2 Certificate.pdf

Case Management - TP.pdf

Outpatient - All Sites.pdf

**Project Budget Narrative with estimates/bids \*Required**

2024-2025 SAAB Budget.pdf

**Please sign and upload E-Verify form found [here](#) (will be required if you are awarded funds, must be completed before funding award period)**

FY23 HS E-Verify Affidavit for JAG-TF.pdf

## Submit

Completed by kenorbals.grants@westcare.com on 8/20/2024 3:23 PM

**Case Id:** 16975

**Name:** WestCare GulfCoast-Florida, Inc.

**Address:** \*No Address Assigned

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## Certification

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**Once an application is submitted, it can only be "Re-opened" by an Administrator.**

**By clicking submit, I certify that I am an authorized representative of the proposing agency and the information contained in this application is true and accurate to the best of my knowledge and due diligence.**

**I also understand that applications are limited to one per organization, and if more than one application is submitted by my organization, only the first will be considered for funding.**

### Authorized Representative Signature

Ken Orbals

*Electronically signed by kenorbals.grants@westcare.com on 8/20/2024 12:41 PM*

### Date Submitted

08/20/2024



## Program Description

Completed by mbimler@operpar.org on 8/19/2024 1:14 PM

**Case Id:** 16922

**Name:** Operation PAR - Trust Fund

**Address:** \*No Address Assigned

---

### Program Description

---

Please provide the following information.



## Alcohol and Drug Abuse Trust Fund Grant FY 2024-2025

**Pinellas County Board  
of County  
Commissioners**  
Human Services  
440 Court St, 2nd Floor  
Clearwater, FL 33756

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### Use of Funds

Award funds must be used for one-time-only, non-recurring expenditures such as equipment, special projects, training, renovations, and formalized prevention activities. Awards cannot be used for food and beverage reimbursements.

Drug and Alcohol Abuse Trust Fund Grant awards will range from \$1,000.00 to \$10,000.00. The project period for these awards is October 1, 2024 – September 30, 2025.

### Application Review Process

The SAAB will review and score each application to make funding recommendations. Recommendations will then be presented to the Board of County Commissioners for final approval.

### Alcohol and Drug Abuse Trust Fund Online Application Instructions

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Please read the application instructions in their entirety before beginning or applying for funding. Organizations and agencies may only submit one project proposal. Submission of multiple project applications by a single organization will not be accepted.

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- Submit to a monitoring visit by the County.
- Agree to request in writing, any changes in scope and obtain approval from the SAAB.
- Agree to complete the funded project and expend all awarded funds during the grant funding period

### **Application Timeline**

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- Board of County Commissioners Recommendation Approval on or about Tuesday, October 15th, 2024. The submission deadline for all applications is **August 21st at 4:00pm (no exceptions)**. Please allow time for submission and technological challenges, as late applications will not be accepted.

### **Scoring Criteria**

Please see attached Scoring Matrix [here](#) which will be used by reviewers to score application

## Eligibility

Completed by mbimler@operpar.org on 8/8/2024 1:55 PM

**Case Id:** 16922

**Name:** Operation PAR - Trust Fund

**Address:** \*No Address Assigned

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## Eligibility

---

Please provide the following information.

**1. Is the applicant a non-profit organization licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and have at least one client-accessible office or service location within Pinellas County?**

Yes

**2. Does the applicant agree to the terms and conditions of the [FY25 Funding Agreement?](#)**

Yes

## A. Agency Information

Completed by mbimler@operpar.org on 8/20/2024 10:43 AM

Case Id: 16922

Name: Operation PAR - Trust Fund

Address: \*No Address Assigned

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### A. Agency Information

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Please provide the following information.

#### LEGAL AGENCY INFORMATION (FOR CONTRACT)

**A.1. Organization Name**

Operation PAR, Inc.

**A.2. DBA (if applicable)**

**A.3. Legal Address**

6655 66th St N Pinellas Park, FL 33781-5033

#### PROJECT INFORMATION

**A.4. Project Title**

PAR Village Residential Furniture

**A.5. Physical Program Address**

13800 66th St N Largo, FL 33771

**A.6. Program Manager First Name**

Michael

**A.7. Program Manager Last Name**

Flores

**A.8. Program Manager Title**

Adult Residential Director

**A.9. Program Manager Email**

mflores@operpar.org

**A.10. Program Manager Phone Number**

(727) 507-4673

**A.11. Total Amount Requested**

\$9,021.99

**A.12. Taxpayer/Employer ID**

59-1349234

#### APPLICATION CONTACT INFORMATION

**A.15. First Name**

Martin

**A.16. Last Name**

Bimler

**A.17. Contact Person/Title**

VP Grants and Philanthropy

**A.18. Contact Email**

mbimler@operpar.org

**A.19. Telephone**

7276039461

**A.20. Executive Officer First Name**

Jim

**A.21. Executive Officer Last Name**

Miller

**A.22. Executive Officer Title**

CEO

**A.23. Executive Officer Email**

jmiller@operpar.org

**A.24. Executive Officer Phone Number**

(727) 545-7564

Printed By: Maggie Miles on 8/21/2024



**A.13. Unique Entity Identifier (UEI- Federal SAM.GOV Number) Optional**

C13SMME1FRE6

**A.14. Date of incorporation in Florida**

01/14/1970

## B. Organization Profile

Completed by mbimler@operpar.org on 8/19/2024 2:04 PM

**Case Id:** 16922

**Name:** Operation PAR - Trust Fund

**Address:** \*No Address Assigned

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### B. Organization Profile

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Please provide the following information.

#### **B.1. Describe the mission and purpose of the organization.**

The mission of Operation PAR is to strengthen our community by caring for families and individuals impacted by substance use and to promote mental well-being. Operation PAR strives to be a beacon of hope in our community – helping people be aware, be responsible, and be healthy and happy. As a leading provider of services for prevention, intervention, and treatment of substance use disorders and co-occurring mental health issues, we help children, adults and their families overcome their struggles with substances and to maintain their recovery.

Founded in 1970 by a mother, Shirley Coletti, who's child was experimenting with drugs, Operation PAR now serves more than 3,700 individuals daily and nearly 10,000 annually. One of Operation PAR's first programs was a methadone clinic in St. Petersburg and Operation PAR continues to be a leading and highly respected program for the treatment of opioid use disorder. Operation PAR is the leading not for-profit substance use treatment provider in Pinellas County providing all levels of evidence-based care including outpatient, adolescent and adult residential, inpatient and outpatient medically managed withdrawal detoxification services for adults, and Medication Assisted Treatment (MAT). Outpatient services are delivered both face-to-face and through telehealth technology, giving individuals choice and increased access to services. Currently, Operation PAR provides Medication Assisted Treatment (MAT) in eleven locations across eight counties (Citrus, Hernando, Pasco, Pinellas, Manatee, Sarasota, Charlotte, and Lee) and is the sole provider of all three FDA-approved medications for the treatment of opioid use disorder in many of those locations. Operation PAR is on the executive board of the Florida Behavioral Health Association and the Florida Juvenile Justice Association to advocate and educate for policy to support individuals and families suffering from substance use. Operation PAR is a founding member of the National Institute on Drug Abuse (NIDA) Clinical Trials Network as a participating member of the Florida Node Alliance.

Each year, Operation PAR provides residential substance use treatment and support services at our Largo Campus to approximately 250 unique residents, including nearly 200 women and their children. Residential programs include both short-term and long-term treatment programs and include supportive services to help ensure long-term recovery after the completion of treatment.

## C. Community Needs

Completed by mbimler@operpar.org on 8/19/2024 1:15 PM

Case Id: 16922

Name: Operation PAR - Trust Fund

Address: \*No Address Assigned

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### C. Community Needs

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Please provide the following information.

**C.1 Clearly identify the problem to be addressed through the program that is requesting project funding. Provide supporting statistics or data specific to Pinellas County such as needs assessments, interviews, waiting lists, surveys, trends and/or analyses. (Describe the program that needs the item, not the item)**

The need for comprehensive addiction and mental health services continues to increase in Pinellas County, the Tampa Bay region, and in the state of Florida. Despite this, the number of "Adult Substance Abuse Beds" in Pinellas County has remained relatively flat since 2010 with a rate of 2.4 beds per 100K residents in 2010 and a rate of 2.2 beds per 100K residents in 2023 (Florida Department of Health, FLHealthCHARTS; Healthy People 2030). While this is better than the statewide decline of 2.1 to 1.5 over this same period, it has not addressed the increased demand for residential services. Central Florida Behavioral Health Network (CFBHN) indicated in the DCF Assessment of Behavioral Health Services for FY 22-23 that availability and access to beds in short-term residential facilities in all of the counties they manage, including Pinellas, needs to be expanded.

However, access to appropriate residential treatment options is only one barrier to care. It is critical to create a supportive, welcoming, and nurturing environment for individuals in residential drug treatment. Retention in services is a strong indicator of positive treatment outcomes and has been widely studied. A patient-centered approach to care addresses several key factors, including the physical environment and comfort of patients. The creation of a welcoming environment for residents helps to reduce anxiety, create a safe space for therapy, and ultimately helps retain residents in care. If people feel safe and cared for in their environment, see they are valued as people, and are provided with the tools needed to change, they are more likely to stay in treatment.

## D. Project Description

Completed by mbimler@operpar.org on 8/19/2024 1:16 PM

Case Id: 16922

Name: Operation PAR - Trust Fund

Address: \*No Address Assigned

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### D. Project Description

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Please provide the following information.

#### D.1. Describe the Project, what problem it is solving, and how it will improve services being provided by the organization?

Operation PAR is requesting funds to create a more functional and welcoming environment for residents in our care. The quality of a resident's experience in treatment can have a significant impact on their retention in care. And, their experience is impacted by both their time in and out of counseling sessions.

Several of our client or guest chairs in counselors' offices are ripped, stained, and showing other signs of extensive use. When clients feel comfortable, safe, and valued, they are more likely to openly share thoughts and feelings with their counselor. Ensuring furniture is safe, clean, and comfortable is a simple way to help residents feel trusted and valued during sessions. Additionally, residents may be asked to write letters, journal, or otherwise reflect on their treatment outside of sessions. They may also need to complete vocational documents or schoolwork during the evening or outside of formal treatment times. Unfortunately, several of our shared rooms only have a single desk for multiple residents to use. This can limit a resident's access and potentially create needless conflict, anxiety, and stress. Additionally, when an individual has access to "their" desk, it helps to foster a sense of belonging and a personal space that creates a connection to the program - which may ultimately help them to stay in treatment longer.

#### D.2. How will funds be used to fix to the problem?

Specifically, funds will be used to purchase twelve (12) new armchairs for client use during individual counseling sessions and other meetings with staff and fifteen (15) desks for residents. The chairs will replace existing furniture. The desks will enhance and expand current furniture. Existing desks will be consolidated to ensure rooms have matching desks. Our current capacity for residents includes 18 beds in our Men's program, 40 beds in our Women's program, and 20 beds in our Short-Term program.

The contemporary, upholstered armchairs will add a clean and professional, but comfortable and inviting place for clients. The neutral gray color will complement existing office decor and help conceal future dirt and wear. A commercial/office grade chair will help ensure it can withstand a high-use environment.

The industrial grade steel frame desk is designed to stand up to the excessive wear and tear of an institutional setting, while the contemporary style provides a modern feel that is easy to clean and maintain. A 60" workspace allows ample room for both working and creating a personalized space for photos and other belongings that help make a shared space feel more personal.

12 Chairs x \$205.99 = \$2471.88

15 Desks x \$420 = \$6300; + Shipping @ \$250.11 = \$6,550.11

Total Amount Request: \$9,021.99



## E. Budget

Completed by mbimler@operpar.org on 8/19/2024 1:16 PM

**Case Id:** 16922

**Name:** Operation PAR - Trust Fund

**Address:** \*No Address Assigned

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### E. Budget

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Please provide the following information.

#### E.1. Total Project Budget

\$9,021.99

#### E.2. Amount of County Funding Request

\$0.00

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### Documentation

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**Project Budget Narrative with estimates/bids \*Required**

Operation PAR - Budget Narrative and Justification.pdf

## F. Required Documents

Completed by mbimler@operpar.org on 8/19/2024 1:13 PM

Case Id: 16922

Name: Operation PAR - Trust Fund

Address: \*No Address Assigned

---

### F. Required Documents

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Please upload the following documents.

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#### Documentation

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**Proof of 501(c)(3) status \*Required**

501-c3 Determination Letter.pdf



**W-9 with legal name which matches that of applicant name \*Required**

Operation PAR W-9 January 2024.pdf



**Current DCF 397 State Licenses or Registrations \*Required**

11-30-2023 Employee Assistance Program Certificate.pdf

11-14-2023 General Intervention Certificate.pdf

11-14-2023 Outpatient Treatment Certificate.pdf

10-26-2023 Prevention Services Indicated Certificate.pdf

10-26-2023 Residential Level 1 Certificate.pdf

10-26-2023 Residential Level 3 Certificate.pdf

10-26-2023 Residential Level 4 Certificate.pdf

10-31-2023 Residential Level 2 Certificate.pdf



**Project Budget Narrative with estimates/bids \*Required**

Operation PAR - Budget Narrative and Justification.pdf



**Please sign and upload E-Verify form found [here](#) (will be required if you are awarded funds, must be completed before funding award period)**

E-Verify Affidavit.pdf

## Submit

Completed by mbimler@operpar.org on 8/20/2024 1:02 PM

**Case Id:** 16922

**Name:** Operation PAR - Trust Fund

**Address:** \*No Address Assigned

---

## Certification

---

**Once an application is submitted, it can only be "Re-opened" by an Administrator.**

**By clicking submit, I certify that I am an authorized representative of the proposing agency and the information contained in this application is true and accurate to the best of my knowledge and due diligence.**

**I also understand that applications are limited to one per organization, and if more than one application is submitted by my organization, only the first will be considered for funding.**

### Authorized Representative Signature

Martin Bimler for Jim Miller

*Electronically signed by mbimler@operpar.org on 8/20/2024 1:01 PM*

### Date Submitted

08/20/2024



## Program Description

Completed by tess.benham@gcjfcs.org on 8/12/2024 3:16 PM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

### Program Description

---

Please provide the following information.



## Alcohol and Drug Abuse Trust Fund Grant FY 2024-2025

**Pinellas County Board  
of County  
Commissioners**  
Human Services  
440 Court St, 2nd Floor  
Clearwater, FL 33756

**Pinellas County and the Substance Abuse Advisory Board (SAAB) are pleased to announce the solicitation of applications for the Alcohol and Drug Abuse Trust Fund award. Funding for the upcoming 24-25 fiscal year is \$35,000.00. The Alcohol and Drug Abuse Trust Fund is generated from court fees in accordance with Sections 938.13 and 893.165 of the Florida Statutes.**

### Eligible Applicants

Applicants must be nonprofit organizations that provide alcohol and/or drug abuse treatment and/or prevention programs and have at least one client-accessible office or service location within Pinellas County. To be eligible for an award your organization must be licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and you must provide a copy of said license with your application.

### Use of Funds

Award funds must be used for one-time-only, non-recurring expenditures such as equipment, special projects, training, renovations, and formalized prevention activities. Awards cannot be used for food and beverage reimbursements.

Drug and Alcohol Abuse Trust Fund Grant awards will range from \$1,000.00 to \$10,000.00. The project period for these awards is October 1, 2024 – September 30, 2025.

### Application Review Process

The SAAB will review and score each application to make funding recommendations. Recommendations will then be presented to the Board of County Commissioners for final approval.

### Alcohol and Drug Abuse Trust Fund Online Application Instructions

Printed By: Maggie Miles on 8/21/2024

Please read the application instructions in their entirety before beginning or applying for funding. Organizations and agencies may only submit one project proposal. Submission of multiple project applications by a single organization will not be accepted.

- **Budget Narrative:** Be aware that the application field will not allow you to copy and paste a table or spreadsheet into the application. Include any additional Budget Narrative to explain the breakdown of how you arrived at that dollar amount.
  - To accommodate tables and spreadsheets you may submit a detailed budget as an attachment in the Budget section, it does allow you to attach multiple files. This is where you would attach bids and estimates.
  - The SAAB has stated they would prefer if multiple bids /estimates are submitted for purchases/ projects if possible. If needing to use a particular vendor, please explain.
- Organizations must attach information regarding their non-profit status and Chapter 397 of the Florida Statutes licenses.
- Be sure to complete all fields and be as thorough as possible.

### **All Grant Award Recipients Must:**

- Attend the SAAB meetings and present written and oral reports as required.
- Submit to a monitoring visit by the County.
- Agree to request in writing, any changes in scope and obtain approval from the SAAB.
- Agree to complete the funded project and expend all awarded funds during the grant funding period

### **Application Timeline**

- Application Opens Wednesday August 7th, 2024.
- Question and Answer Period Closes: Wednesday, August 14th at 4:00pm. Responses will be posted by Friday, August 16th at link: [Human Services Department – Pinellas County](#)
- Application Closes Wednesday, August 21st, 2024, at 4:00pm.
- SAAB Review and Recommendation Meeting Tuesday, August 28th, 2024.
- Board of County Commissioners Recommendation Approval on or about Tuesday, October 15th, 2024. The submission deadline for all applications is **August 21st at 4:00pm (no exceptions)**. Please allow time for submission and technological challenges, as late applications will not be accepted.

### **Scoring Criteria**

Please see attached Scoring Matrix [here](#) which will be used by reviewers to score application

## Eligibility

Completed by tess.benham@gcjfcs.org on 8/12/2024 3:17 PM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

## Eligibility

---

Please provide the following information.

**1. Is the applicant a non-profit organization licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and have at least one client-accessible office or service location within Pinellas County?**

Yes

**2. Does the applicant agree to the terms and conditions of the [FY25 Funding Agreement?](#)**

Yes

## A. Agency Information

Completed by tess.benham@gcjfcs.org on 8/20/2024 11:00 AM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

### A. Agency Information

---

Please provide the following information.

#### LEGAL AGENCY INFORMATION (FOR CONTRACT)

**A.1. Organization Name**

Gulf Coast Jewish Family & Community Services -  
Clearwater, FL

**A.2. DBA (if applicable)**

**A.3. Legal Address**

14041 ICOT Blvd. Clearwater, FL 33760-3702

#### PROJECT INFORMATION

**A.4. Project Title**

Visitor Management

**A.5. Physical Program Address**

14041 ICOT Blvd. Clearwater, FL 33760-3702

**A.6. Program Manager First Name**

Meghan

**A.7. Program Manager Last Name**

Harrigan

**A.8. Program Manager Title**

Senior Director of Behavioral Health

**A.9. Program Manager Email**

meghan.harrigan@gcjfcs.org

**A.10. Program Manager Phone Number**

(727) 422-8550

**A.11. Total Amount Requested**

\$8,000.00

**A.12. Taxpayer/Employer ID**

Printed By: Maggie Miles on 8/21/2024

#### APPLICATION CONTACT INFORMATION

**A.15. First Name**

Tess

**A.16. Last Name**

Benham

**A.17. Contact Person/Title**

Director of Grants

**A.18. Contact Email**

tess.benham@gcjfcs.org

**A.19. Telephone**

7274791863

**A.20. Executive Officer First Name**

Sandra E.

**A.21. Executive Officer Last Name**

Braham

**A.22. Executive Officer Title**

President and Chief Executive Officer

**A.23. Executive Officer Email**

sandra.braham@gcjfcs.org

**A.24. Executive Officer Phone Number**

(727) 479-1800

59-1229354

**A.13. Unique Entity Identifier (UEI- Federal SAM.GOV  
Number) Optional**

C8Q3FR2KA2K8

**A.14. Date of incorporation in Florida**

07/02/1974

## B. Organization Profile

Completed by tess.benham@gcjfcs.org on 8/20/2024 11:01 AM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

### B. Organization Profile

---

Please provide the following information.

#### **B.1. Describe the mission and purpose of the organization.**

Since 1960, Gulf Coast JFCS has been uplifting lives for thousands of families in need. While inspired by Jewish values, we are a non-religious human services agency whose mission is to protect the vulnerable, empower individuals, and strengthen families. What distinguishes Gulf Coast JFCS from other human service agencies is the diversity of programming, emphasis on client-centered, trauma-informed care, and decades of positive community impact.

Today's complex lives bring equally complex challenges. Our compassionate professionals and extensive network of programs, resources, and partners work together to identify and innovate solutions to address unmet community needs. By convening people, ideas, and resources, Gulf Coast JFCS bridges critical gaps in services for people of all ages, faiths, cultures, and identities and proudly assists many high-need, at-risk, or under-resourced populations.

Gulf Coast JFCS provides a variety of Behavioral Health services. Agency programs offer a comprehensive approach to treating the whole person with the goal of integrating persons with severe and persistent mental illnesses (SPMI) and co-occurring substance use disorders (SUD) back into the community with improved independent living skills and reduced symptomology. Our programs, within the Tampa Bay region, include our Pasco County Adele Gilbert and Darlington Residential Treatment Facilities, the Alternative Family Program, the Pinellas County Quick Response Team, CALL: Community Assistance and Life Liaison program, Supported Housing, Substance Abuse Prevention, and Intervention Services.

Our Substance Use Intervention and Prevention programs are licensed under Chapter 397 of Florida statutes with the Florida Department of Children and Families and hold three licenses to provide substance abuse services for the following service categories General Intervention, Prevention Services Selective, and Prevention Services Universal Indirect.

## C. Community Needs

Completed by tess.benham@gcjfcs.org on 8/19/2024 3:34 PM

Case Id: 16921

Name: Gulf Coast Jewish Family and Community

Address: \*No Address Assigned

---

### C. Community Needs

---

Please provide the following information.

**C.1 Clearly identify the problem to be addressed through the program that is requesting project funding. Provide supporting statistics or data specific to Pinellas County such as needs assessments, interviews, waiting lists, surveys, trends and/or analyses. (Describe the program that needs the item, not the item)**

Substance use and co-occurring disorders, are a persistent problem for our Nation, the State of Florida, and locally in Pinellas County. The National Survey on Drug Use and Health (NSDUH) reports that among people aged 12 or older in 2023, 59% (or 167.2 million people) were current users of tobacco, alcohol, or illicit drug in the past month. More than 48.5 million people aged 12 or older (or 17.1 percent of the population) met the criteria for having a substance use disorder in the past year.

Per FL Dept. of Health Substance Use Dashboard, fatal and nonfatal overdoses continue to steadily rise in Pinellas County. In 2022, Pinellas County experienced 580 drug overdose deaths. The age-adjusted rate per 100,000 deaths from Drug Overdose in Pinellas County was 61.5, much higher than Florida's rate of 35.9. EMS responded to 15,462 transports of suspected overdoses in 2023. Emergency Department visits are 456 visits through May 2024.

Gulf Coast JFCS offers both Substance Use Prevention and Intervention services in Pinellas County. Prevention and early intervention are key components for identifying and reducing risk factors as well as increasing protective factors in the community. We continue to see an increase in individuals that screen positive for risk factors associated with substance use disorders through single-serve and ongoing community interventions resulting in 90% program capacity.

Our Pinellas County Quick Response Team (QRT), case managers, and peer navigators provide outreach to individuals who recently experienced an overdose, providing naloxone, education, and connecting these individuals to treatment. The QRT has responded to more than 321 individuals referred to the program and distributed more than 500 naloxone kits. A Supported Housing program assists more than 150 Pinellas County residents with substance use disorders or severe, persistent mental illness to obtain and maintain housing in the community.

## D. Project Description

Completed by tess.benham@gcjfcs.org on 8/19/2024 3:41 PM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

### D. Project Description

---

Please provide the following information.

#### **D.1. Describe the Project, what problem it is solving, and how it will improve services being provided by the organization?**

Gulf Coast JFCS is requesting \$8,000 towards the purchase of equipment, installation, and software for a visitor management system for our primary Pinellas direct service and administrative offices located on Icot Blvd. in Clearwater. The agency does not presently have a visitor management system. The current manual check-in consists of paper guest log in sheets and peel/stick handwritten guest badges. This process is inefficient, time-consuming, and prone to errors. It does not always adequately capture and track who is entering and exiting the premises; guest frequently exit without updating the log. Further, our programs and staff often work with vulnerable populations or routinely handle sensitive information.

The absence of a more modern visitor management system poses a number of security, emergency preparedness, compliance, and record-keeping risks for our agency. Without a system to track who is entering and exiting the premises, and to check and verify identification, it becomes difficult to ensure the safety of staff, volunteers, and visitors. Unauthorized individuals could gain access, posing potential security threats. Plus, in the event of an emergency, not having a real-time list of visitors on-site can hinder evacuation efforts and put people at risk.

With a paper system maintaining accurate visitor records manually can be challenging. It can lead to incomplete or inaccurate data, which is problematic for compliance, reporting and funder audits. Many funders require us to maintain detailed visitor logs for regulatory purposes. Failing to do so can result in non-compliance and potential legal issues.

Further, with a system to collect and analyze visitor data, we miss out on valuable insights that could help us improve services and outreach efforts.

Implementing a visitor management system to automate our check-in processes can address these issues, enhancing safety for staff, clients, and visitors.

#### **D.2. How will funds be used to fix to the problem?**

The proposed new visitor management system (Splan) will many of the concerns cited in D.1. The Splan visitor management system is a standalone, iPad kiosk with enclosed printer for badge printing. The kiosk will be wi-fi enabled and support an ID scanner.

The software will include an active directory connector to allow look up of agency staff or programs. Add on features, Single-sign-on (SSO) security, SMS (text messaging) and Outlook integration, will make it easier for staff to sign on and pre-register clients and visitors for appointments and meetings.

Other important add on features for Gulf Coast JFCS diverse and vulnerable client population, is the ability of visitors to select their language of preference when registering as a vendor or visitor; and to scan state identification to conduct a



security check critical to ensure the safety of the vulnerable client populations served by the agency.

Other key features include:

- With a Digital Check-In/Check-Out, visitors can sign in and out using a digital kiosk or mobile app, streamlining the process and reducing the need for manual entry.
- Visitor Badges: The system can print visitor badges with names, photos, and visit details. The badges will automatically expire and cannot be re-used.
- Programs can pre-register clients and guests online, speeding up the check-in process and allowing the organization to prepare for their arrival.
- A detailed visitor log is maintained by the system, including their check-in/check-out times, purpose of visit, and who they are visiting. This is useful for record-keeping and compliance.
- Emergency Alerts: In case of an emergency, the system can send alerts to all visitors and staff, providing instructions and ensuring everyone's safety.
- System-generated visitor reports and analytics can help us understand visitor trends and improve their services.

These features not only enhance security and efficiency but also help create a welcoming and professional environment for visitors.

## E. Budget

Completed by tess.benham@gcjfcs.org on 8/20/2024 9:19 AM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

### E. Budget

---

Please provide the following information.

#### E.1. Total Project Budget

\$16,603.00

#### E.2. Amount of County Funding Request

\$0.00

---

### Documentation

---



#### Project Budget Narrative with estimates/bids **\*Required**

Gulf Coast JFCS Visitor Management System Summary and Quotes.pdf

Project Budget Gulf Coast JFCS Final.pdf

## F. Required Documents

Completed by tess.benham@gcjfcs.org on 8/20/2024 10:50 AM

Case Id: 16921

Name: Gulf Coast Jewish Family and Community

Address: \*No Address Assigned

---

### F. Required Documents

---

Please upload the following documents.

---

#### Documentation

---



**Proof of 501(c)(3) status \*Required**

GCJFCS\_IRS Determination Letter.pdf



**W-9 with legal name which matches that of applicant name \*Required**

GCJFCS W9 2023.pdf



**Current DCF 397 State Licenses or Registrations \*Required**

Gulf Coast JFCS 2024 DCF SUD Licenses.pdf



**Project Budget Narrative with estimates/bids \*Required**

Gulf Coast JFCS Visitor Management System Summary and Quotes.pdf

Project Budget Gulf Coast JFCS Final.pdf



**Please sign and upload E-Verify form found [here](#) (will be required if you are awarded funds, must be completed before funding award period)**

FY23 HS E-Verify Affidavit for JAG-TF notarized.pdf

E-Verify Registration Proof.pdf

## Submit

Completed by tess.benham@gcjfcs.org on 8/20/2024 4:58 PM

**Case Id:** 16921

**Name:** Gulf Coast Jewish Family and Community

**Address:** \*No Address Assigned

---

## Certification

---

**Once an application is submitted, it can only be "Re-opened" by an Administrator.**

**By clicking submit, I certify that I am an authorized representative of the proposing agency and the information contained in this application is true and accurate to the best of my knowledge and due diligence.**

**I also understand that applications are limited to one per organization, and if more than one application is submitted by my organization, only the first will be considered for funding.**

### Authorized Representative Signature

tess.benham@gcjfcs.org

**Electronically signed by tess.benham@gcjfcs.org on 8/20/2024 4:58 PM**

### Date Submitted

08/20/2024

## Program Description

Completed by hcalhoun@pemhs.org on 8/8/2024 11:36 AM

Case Id: 16918

Name: PEMHS, Inc.

Address: \*No Address Assigned

---

### Program Description

---

Please provide the following information.



## Alcohol and Drug Abuse Trust Fund Grant FY 2024-2025

Pinellas County Board  
of County  
Commissioners  
Human Services  
440 Court St, 2nd Floor  
Clearwater, FL 33756

**Pinellas County and the Substance Abuse Advisory Board (SAAB) are pleased to announce the solicitation of applications for the Alcohol and Drug Abuse Trust Fund award. Funding for the upcoming 24-25 fiscal year is \$35,000.00. The Alcohol and Drug Abuse Trust Fund is generated from court fees in accordance with Sections 938.13 and 893.165 of the Florida Statutes.**

### Eligible Applicants

Applicants must be nonprofit organizations that provide alcohol and/or drug abuse treatment and/or prevention programs and have at least one client-accessible office or service location within Pinellas County. To be eligible for an award your organization must be licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and you must provide a copy of said license with your application.

### Use of Funds

Award funds must be used for one-time-only, non-recurring expenditures such as equipment, special projects, training, renovations, and formalized prevention activities. Awards cannot be used for food and beverage reimbursements.

Drug and Alcohol Abuse Trust Fund Grant awards will range from \$1,000.00 to \$10,000.00. The project period for these awards is October 1, 2024 – September 30, 2025.

### Application Review Process

The SAAB will review and score each application to make funding recommendations. Recommendations will then be presented to the Board of County Commissioners for final approval.

### Alcohol and Drug Abuse Trust Fund Online Application Instructions

Printed By: Maggie Miles on 8/21/2024

Please read the application instructions in their entirety before beginning or applying for funding. Organizations and agencies may only submit one project proposal. Submission of multiple project applications by a single organization will not be accepted.

- **Budget Narrative:** Be aware that the application field will not allow you to copy and paste a table or spreadsheet into the application. Include any additional Budget Narrative to explain the breakdown of how you arrived at that dollar amount.
  - To accommodate tables and spreadsheets you may submit a detailed budget as an attachment in the Budget section, it does allow you to attach multiple files. This is where you would attach bids and estimates.
  - The SAAB has stated they would prefer if multiple bids /estimates are submitted for purchases/ projects if possible. If needing to use a particular vendor, please explain.
- Organizations must attach information regarding their non-profit status and Chapter 397 of the Florida Statutes licenses.
- Be sure to complete all fields and be as thorough as possible.

### **All Grant Award Recipients Must:**

- Attend the SAAB meetings and present written and oral reports as required.
- Submit to a monitoring visit by the County.
- Agree to request in writing, any changes in scope and obtain approval from the SAAB.
- Agree to complete the funded project and expend all awarded funds during the grant funding period

### **Application Timeline**

- Application Opens Wednesday August 7th, 2024.
- Question and Answer Period Closes: Wednesday, August 14th at 4:00pm. Responses will be posted by Friday, August 16th at link: [Human Services Department – Pinellas County](#)
- Application Closes Wednesday, August 21st, 2024, at 4:00pm.
- SAAB Review and Recommendation Meeting Tuesday, August 28th, 2024.
- Board of County Commissioners Recommendation Approval on or about Tuesday, October 15th, 2024. The submission deadline for all applications is **August 21st at 4:00pm (no exceptions)**. Please allow time for submission and technological challenges, as late applications will not be accepted.

### **Scoring Criteria**

Please see attached Scoring Matrix [here](#) which will be used by reviewers to score application

## Eligibility

Completed by hcalhoun@pemhs.org on 8/8/2024 11:36 AM

**Case Id:** 16918

**Name:** PEMHS, Inc.

**Address:** \*No Address Assigned

---

## Eligibility

---

Please provide the following information.

**1. Is the applicant a non-profit organization licensed as a substance abuse treatment provider under Chapter 397 of the Florida Statutes and have at least one client-accessible office or service location within Pinellas County?**

Yes

**2. Does the applicant agree to the terms and conditions of the [FY25 Funding Agreement?](#)**

Yes

## A. Agency Information

Completed by hcalhoun@pemhs.org on 8/8/2024 2:40 PM

Case Id: 16918

Name: PEMHS, Inc.

Address: \*No Address Assigned

---

### A. Agency Information

---

Please provide the following information.

#### LEGAL AGENCY INFORMATION (FOR CONTRACT)

**A.1. Organization Name**

Personal Enrichment through Mental Health Services, Inc.  
(PEMHS)

**A.2. DBA (if applicable)**

**A.3. Legal Address**

11254 58th St. N Pinellas Park, FL 33782

#### PROJECT INFORMATION

**A.4. Project Title**

Digital Empowerment for Crisis Response: Funding for  
Desktop Computers

**A.5. Physical Program Address**

11254 58th St. N Pinellas Park, FL 33782

**A.6. Program Manager First Name**

Karen

**A.7. Program Manager Last Name**

Rogari

**A.8. Program Manager Title**

Director of Behavioral Health Services

**A.9. Program Manager Email**

krogari@pemhs.org

**A.10. Program Manager Phone Number**

(727) 509-1312

**A.11. Total Amount Requested**

\$5,203.86

#### APPLICATION CONTACT INFORMATION

**A.15. First Name**

Helena

**A.16. Last Name**

Von Otto

**A.17. Contact Person/Title**

Marketing and Development Director

**A.18. Contact Email**

hvonotto@pemhs.org

**A.19. Telephone**

7272601125

**A.20. Executive Officer First Name**

Maxine

**A.21. Executive Officer Last Name**

Booker

**A.22. Executive Officer Title**

CEO & President

**A.23. Executive Officer Email**

mbooker@pemhs.org

**A.24. Executive Officer Phone Number**

(727) 362-4395



**A.12. Taxpayer/Employer ID**

593153549

**A.13. Unique Entity Identifier (UEI- Federal SAM.GOV  
Number) Optional**

JFQBD654LSV7

**A.14. Date of incorporation in Florida**

09/29/1981

## B. Organization Profile

Completed by hcalhoun@pemhs.org on 8/8/2024 11:53 AM

**Case Id:** 16918

**Name:** PEMHS, Inc.

**Address:** \*No Address Assigned

---

### B. Organization Profile

---

Please provide the following information.

#### **B.1. Describe the mission and purpose of the organization.**

Personal Enrichment through Mental Health Services (PEMHS) functions as part of a community system of care and has been committed to providing care in crisis since 1981. Our dedicated staff and comprehensive range of programs and services are designed to meet the needs of children, adults, and families to build strong communities. PEMHS is a private, 501(c)(3) non-profit behavioral health care organization located in Pinellas County, Florida. Programs include a 24-hour suicide hotline, emergency screening, crisis intervention services, inpatient services for adults and children, and community-based programs. PEMHS understands that high-quality services are necessary to obtain the best outcome for individuals and families facing behavioral health issues. PEMHS is licensed by the Florida Department of Children and Families and by the Florida Agency for Health Care Administration. PEMHS is also certified by the American Association of Suicidology and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF). PEMHS currently provides services in two locations. Our main campus is centrally located on 5.8 acres at 11254 58th Street North in Pinellas Park. This location provides several services including a 60-bed Crisis Stabilization Unit (CSU) with 45 beds for adults and 15 beds for children, the Mobile Crisis Response Team (MCRT), Pinellas Integrated Care Alliance (PIC), IMPACT Team Continuing Care Services, and other community-based wellness programs. PEMHS administrative offices, an on-site pharmacy, training space, and associated support and maintenance functions are also situated at this location. Crisis and emergency services operate 24 hours, 7 days a week. Palm Way Campus, located at 1614 Palm Way, Largo, is the community and family services location. Programs include System Navigation (SN), CAT Team, and The Behavioral Health Network (BNet). There is a community training room, a small food pantry and large clothes, a small appliance, and a children's toys closet. This location is open Monday through Friday from 8 a.m. to 4 p.m. JARF Pinellas County provides alcohol and substance abuse detoxification services for youth under 18 years of age in a secure environment. JARF is a Marchman Act Receiving Facility. Early intervention is one of the best ways to help your child live drug-free. The JARF is designed to provide quality, comprehensive care and assessment for youths, ages 13 through 17, who are in need of assessment and stabilization due to substance abuse impairment. Services are offered via a multidisciplinary team of professionals dedicated to providing person-centered services that support self-determination, recovery, and resilience for those challenged with mental health disorders. The length of stay, 3-5 days, is determined by how long it takes to complete a full and accurate assessment, stabilize for withdrawal and behavioral symptoms and to arrange after-care planning.

## C. Community Needs

Completed by hcalhoun@pemhs.org on 8/9/2024 1:19 PM

Case Id: 16918

Name: PEMHS, Inc.

Address: \*No Address Assigned

---

### C. Community Needs

---

Please provide the following information.

**C.1 Clearly identify the problem to be addressed through the program that is requesting project funding. Provide supporting statistics or data specific to Pinellas County such as needs assessments, interviews, waiting lists, surveys, trends and/or analyses. (Describe the program that needs the item, not the item)**

The problem we seek to address through our JARF program is the alarming rate of substance abuse among youth in Pinellas County, which poses significant challenges for individuals, families, and the community. Substance abuse among adolescents is a growing concern, as it leads to a myriad of issues including delinquency, mental health disorders, and engagement with the juvenile justice system. In Pinellas County, statistics reveal a disturbing trend: according to recent reports, approximately 11.5% of adolescents have engaged in substance use, with a marked increase in the use of alcohol and drugs such as opioids and marijuana. Our Juvenile Addiction Receiving Facility (JARF) is the only facility of its kind in Pinellas County, highlighting the urgent need for resources dedicated to this high-risk population. The facility provides essential alcohol and substance abuse detoxification services for youth aged 13-17. The community's call for action is clear: there is a pressing need for a highly therapeutic environment where youth can receive competent, safe care and a holistic approach to rehabilitation. Our program aims to provide such an environment, focusing on comprehensive assessment, stabilization, and aftercare planning. By enhancing our facilities and technology, we can reduce waiting times and increase the number of youths receiving timely, effective treatment. Our commitment is to improve the lives of these young individuals and, in turn, build a healthier, safer community for all residents of Pinellas County.

## D. Project Description

Completed by hcalhoun@pemhs.org on 8/9/2024 1:21 PM

**Case Id:** 16918

**Name:** PEMHS, Inc.

**Address:** \*No Address Assigned

---

### D. Project Description

---

Please provide the following information.

#### **D.1. Describe the Project, what problem it is solving, and how it will improve services being provided by the organization?**

The Juvenile Addiction Receiving Facility (JARF) and Crisis Stabilization Services at PEMHS are seeking to acquire new desktop computers to enhance our operational efficiency and service delivery. This project will replace outdated equipment with modern systems, ensuring that our staff can provide timely and effective care to children, adolescents, and families in crisis. Our current technology is outdated, leading to disruptions and inefficiencies that could hinder our ability to provide critical services. These issues are particularly detrimental in high-pressure environments like JARF and Crisis Stabilization, where rapid response and precise data handling are essential. The current systems struggle with slow processing speeds and frequent technical issues, which might impact our ability to perform accurate assessments, maintain comprehensive records, and coordinate care effectively. Investing in modern technology ensures that our facilities are well-equipped to adapt to future demands and integrate new tools and innovations. This adaptability is key to continuing to meet the evolving needs of our community. By acquiring new desktop computers, PEMHS will strengthen its ability to provide effective, timely, and coordinated care through the JARF and Crisis Stabilization Services, ultimately leading to better outcomes for the youth and families we serve.

#### **D.2. How will funds be used to fix to the problem?**

New desktop computers will enhance the speed and reliability of our operations, allowing staff to complete assessments and documentation more quickly and accurately. This improvement will directly translate into more effective interventions and support for clients in crisis. Up-to-date technology will improve our data management capabilities, ensuring that sensitive information is stored securely and accessed efficiently. This is crucial for maintaining confidentiality and ensuring that treatment plans are based on the most accurate and current data available. Modern computers will facilitate better communication both within our teams and with external partners. This includes seamless video conferencing, faster email exchanges, and improved collaboration tools, all of which are essential for coordinating care and responding swiftly to emergencies.

## E. Budget

Completed by hcalhoun@pemhs.org on 8/8/2024 2:41 PM

**Case Id:** 16918

**Name:** PEMHS, Inc.

**Address:** \*No Address Assigned

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### E. Budget

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Please provide the following information.

#### E.1. Total ProjectBudget

\$5,203.86

#### E.2. Amount of County Funding Request

\$0.00

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### Documentation

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**Project Budget Narrative with estimates/bids \*Required**

Budget & Budget Narrative 2024.pdf

PEMHS\_Dell\_OptPlex7020\_SFF\_qty5\_073024\_grant.pdf

## F. Required Documents

Completed by hcalhoun@pemhs.org on 8/9/2024 1:21 PM

Case Id: 16918

Name: PEMHS, Inc.

Address: \*No Address Assigned

---

### F. Required Documents

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Please upload the following documents.

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#### Documentation

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**Proof of 501(c)(3) status \*Required**

IRS Tax ID.pdf



**W-9 with legal name which matches that of applicant name \*Required**

W-9 2024.pdf



**Current DCF 397 State Licenses or Registrations \*Required**

4-19-2024 Addictions Receiving Facility Certificate.pdf



**Project Budget Narrative with estimates/bids \*Required**

Budget & Budget Narrative 2024.pdf

PEMHS\_Dell\_OptPlex7020\_SFF\_qty5\_073024\_grant.pdf



**Please sign and upload E-Verify form found [here](#) (will be required if you are awarded funds, must be completed before funding award period)**

E-Verify.pdf

My Company Profile \_ E-Verify.pdf

## Submit

Completed by hcalhoun@pemhs.org on 8/9/2024 1:21 PM

**Case Id:** 16918

**Name:** PEMHS, Inc.

**Address:** \*No Address Assigned

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## Certification

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**Once an application is submitted, it can only be "Re-opened" by an Administrator.**

**By clicking submit, I certify that I am an authorized representative of the proposing agency and the information contained in this application is true and accurate to the best of my knowledge and due diligence.**

**I also understand that applications are limited to one per organization, and if more than one application is submitted by my organization, only the first will be considered for funding.**

### Authorized Representative Signature

Helena Von Otto

*Electronically signed by hcalhoun@pemhs.org on 8/9/2024 1:21 PM*

### Date Submitted

08/09/2024

