

Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: Design and Construct a Children's Medical Services (CMS) Child Protection Team (CPT) Clinic in Clay County
2. Date of Submission: 12/28/2015
3. House Member Sponsor(s): W. Cummings

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
- 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? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget (Will equal non-vetoed amounts provided in Column A)	INCREASED or NEW Recurring Requested	TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year)	Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:					0	250,000	250,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:
- f. New Recurring Funding Requested for FY 16-17 will be used for:

5. Requester:

- a. Name: Randell Alexander M.D., Ph.D.
- b. Organization: Chair - Florida Chapter- American Academy of Pediatrics (FC-AAP)

- c. Email: ralexander@abuset.net
- d. Phone #: [\(904\)633-0190](tel:9046330190)

6. Organization or Name of Entity Receiving Funds:

- a. Name: [Wolfson Children's Hospital/Baptist Medical Center](#)
- b. County (County where funds are to be expended) [Clay](#)
- c. Service Area (Counties being served by the service(s) provided with funding) [Clay, Duval](#)

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

Project/Program Description:

These funds are allocated to Wolfson Children's Hospital- Jacksonville/Baptist Health, Inc. ? to design and construct a Children's Medical Services (CMS) Child Protection Team (CPT) clinic in Clay County according to a facility design plan approved by the involved CMS child protection team staff. The advantages of having Wolfson Children's Hospital- Jacksonville/Baptist Health Inc., to design and construct such a child protection team facility in Clay County include: Would become an integral component of a soon-to-be constructed companion building near the present Clay County Wolfson Children's Hospital medical facility; Would be in close proximity to the present pediatric emergency room with its cadre of health professional; No need to acquire site space- which could be very costly; Off-street parking would be provided at no additional cost; Maintenance costs of such a child protection team clinic would be minimal compared to lease costs, and the project would proceed expeditiously- as a private sector initiative- rather than being encompassed in the state building bureaucracy.

New Nonrecurring Funding Requested for FY 16-17 will be used for:

Fixed Capital Construction- Planning and Architectural Fees for Child Protection Teams (CPT) Clinic Facilities in Clay County

This would be a state-of-the-art modern facility that would be the model for the entire state of Florida, and indeed the nation. Estimated costs of the planning, design and construction documents- \$250,000 for the proposed construction. There will be 25 specific rooms with an identified purpose for each. These 25 rooms and associated hallway space will total about 4000 sq. feet. Construction cost is estimated to be \$400/sq. foot-totaling \$1,600,000. Cost- project oversight/contingency items total \$160,000. Cost- Equipment, furnishings, and IT installation totaling \$250,000. Overall total estimated building costs \$2,260,000.

Expected program and benefit results associated with requested funds:

The center size to accommodate growth and ensure onsite service provisions: Both forensic and specialized interviews, and medical examinations- all in the same location; Psychological assessments; Individual Therapy; Victim advocacy; Co-location availability for staff of community partners (law enforcement & DCF) limiting their travel time and associated expenses; Applied research in child abuse and prevention initiatives; Space and facilities to support rotation of medical students/residents for education in all facers of child abuse; Accessibility to additional medical services at Clay County Wolfson Children's Hospital-eliminating multiple sites for families to receive services; Partner with DCF staff for access (computer lines/terminals) allowing families to apply for needed/recommended services (Medicaid, Electronic Banker transfer) as recommended for the child's health; Access for information and referrals for services at the Wolfson facility, Early Steps (Developmental assessments, occupational, physical and speech therapy as recommended by CPT medical providers); A functional resource closet offering clothes to replace these secured for evidence and a place for snacks and juice given to children with medicines-paid by non-state funds; Educational site for abused/neglected children with such clinical entities as diabetes and obesity; Case management to follow children requiring abuse-related treatment and care.

Who will benefit from receipt of State funds:

The children in Northeast Florida involved in child abuse/neglect cases and their families

Specific measures to document performance data for the project:

Track increase in case load with time opposed to previous site of operation; would be a model operation and site that could be used as a prototype for other CPT units in the state; yearly patient/family satisfaction surveys before and after facility completion; track number of children from other counties served in this facility because of superior resources.

Reason for multi-year project requiring funding from the state for more than one year:

Will require construction and equipment costs if planning money are approved

"In-Kind" description of support:

? Mr. Michael Aubin, Hospital President of Wolfson Children's Hospital has agreed to build on to a projected hospital addition to their present facility in Clay County to house a child protection team unit.

? Since the state would fund this project by awarding such monies to Wolfson Children's Hospital, the Child Protection Team (CPT) would not need to absorb expensive rental costs, but would be able to budget only for utilities and maintenance.

? Estimated size of clinic facility is 4,000 sq. ft. at projected cost of \$400 sq. ft. = 1.6 million

Contingency allotment (10% of overall projected costs) = \$160,000

Planning Documents and architectural fees = \$250,000

Equipment, furnishings, and IT installation = \$250,000

Total \$2,260,000

? The initial in-kind contribution to this project from WCH is \$410,000. This is the direct cost to WCH for the cost of the overall buildings infrastructure.

Additional in-kind contributions are:

1. Building maintenance
2. Grounds maintenance
3. Maintenance of parking facilities and utilization of such assigned parking spaces by CPT staff at no cost
4. Building security costs; and
5. Forgoing the receipt of rental costs
- ? The center size to accommodate growth and ensure onsite service provisions:
 1. Both forensic and specialized interviews
 2. Medical Examinations
 3. Psychological assessments
 4. Therapy
 5. Victim advocacy
 6. Co-location availability for staff of community partners (law enforcement & DCF) limiting their travel time and associated expenses
 7. Research in child abuse prevention initiatives
 8. Space and facilities to support rotation of medical students/residents for education in all facets of child abuse.
 9. Accessibility to additional medical services at Clay County Wolfson Children's Hospital- eliminating multiple sites for families to receive services
 10. Partner with DCF staff for access (computer lines/terminals) allowing families to apply for needed/recommended services (Medicaid, Electronic Bank Transfer) as recommended for the child's health
 11. Access for information and referrals for services at the Wolfson facility, Early Steps (Developmental assessments, occupational, physical and speech therapy as recommended by CPT medical providers)
 12. A functional resource closet offering clothes to replace these secured for evidence. Place for snacks and juice given to children with medicines-paid by non-state funds.
 13. Educational site for children with such clinical entities as diabetes and obesity
 14. Case management to follow children requiring abuse-related treatment and care

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

Federal: 0

State: 0 (Excluding the requested Total Amount in #4d, Column G)

Local: 0

Other: 410,000

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

Yes