



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Home Instruction for Parents of Preschool Youngsters (HIPPY)

2. **Senate Sponsor:** Kathleen Passidomo

3. **Date of Submission:** 02/05/2018

4. **Project/Program Description:**

The purpose of the funds being requested is to implement HIPPY (Home Instruction for Parents of Preschool Youngsters), a school readiness model throughout the state of Florida to TANF eligible children who may need some additional help getting ready for school. The goal is to lay the foundation for three, four, and five year old children to enter Kindergarten ready to learn thus reducing the possibility of dropping out of school and becoming dependent upon assistance from the state.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Education

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
2,500,000		2,500,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	1,400,000	35.9%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	1,400,000	35.9 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 3,900,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? Yes

b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 5

c. What is the most recent fiscal year the project was funded? 2017-18



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

d. Were the funds provided in the most recent fiscal year subsequently vetoed? No

e. Complete the following Worksheet.

FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
	Column:	A	B
Funds Description:		Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *
Input Amounts:		1,400,000	
			Total Funds Appropriated (Column A + Column B)
			1,400,000

10. Is future-year funding likely to be requested?

Yes

a. If yes, indicate non-recurring amount per year.

2,500,000

11. Program Performance:

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

The purpose of the funds being requested is to implement HIPPY (Home Instruction for Parents of Preschool Youngsters), a school readiness model, throughout the state of Florida to TANF eligible children who may need some additional help getting ready for school. The goal is to lay the foundation for three, four, and five year old children to enter Kindergarten ready to learn thus reducing the possibility of dropping out of school and becoming dependent upon assistance from the state.

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

Entry level employment opportunities for Home Visitors to conduct weekly one-on-one role play lessons with parents that will be used to teach their children the skills they need for Kindergarten; HIPPY curriculum books and materials; training of staff (i.e. home visitors and HIPPY coordinators); technical assistance and outcome evaluations on parents and children enrolled in the program.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Salary/Benefits of Project Leader will be increased to	12,000



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

	account for the increase in oversight of the additional funding.	
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input checked="" type="checkbox"/> Salary and Benefits	Salary/Benefits of existing staff will be increased to account for the increase in responsibilities of managing additional funding and sub-contractsto serve additional children. Additional staff will be hired to assist with training, technical assistance, program data entry and evaluation activities.	200,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Funds will be used to cover the costs of increased travel and materials for additional trainings, increase in office supplies, postage, telephone, equipment and room rentals, etc.	88,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Funds will be added to existing HIPPY Provider agencies via sub- contracts to serve additional children. Funds will also be provided to Provider agencies that lost funding in2017-2018 and may still have the capacity to offer HIPPY services in their respective counties (Alachua, Bradford, Broward, Gulf, Manatee, Marion, Miami-Dade, Monroe,	2,200,000



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

	Lee, Pinellas, Palm Beach and Sarasota counties)	
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		2,500,000

d. What are the direct services to be provided to citizens by the appropriations project?

HIPPY trains parents to prepare their preschool children for early success in school through an evidenced based school readiness curriculum. HIPPY provides the 30 week HIPPY curriculum , 27 story books, preschool manipulatives, crayons, shapes etc. will be provided to HIPPY parents and HIPPY children.

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

Economically disadvantaged person, developmentally disabled, Preschool students.

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

Improve physical health: Number of fine and gross motor activities delivered to families. Calculate the number of physical activities performed during the year from the data collected from parents by the home visitors. Improve mental health: Number of social/emotional activities. Calculate the number of social emotional activities in the curriculum delivered to families completed by children as reported by parents to the home visitors. Enrich cultural experience: The number of bi lingual students that participate in the HIPPY program. Calculate the number of applications with bi-lingual families. Improve quality of education: HIPPY Children will have a better understanding of foundational early learning concepts related to letters, Colors and Numbers, Shapes and Sizes. More parental involvement in their children's early learning with a specific emphasis on promoting more reading for HIPPY children.

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

None

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

Not Applicable

13. Requestor Contact Information:

- a. Name:** Dabaram Rampersad
- b. Organization:** University of South Florida
- c. Email:** rampersad@usf.edu
- d. Phone Number:** (813)974-2177



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

14. Recipient Contact Information:

a. Organization: University of South Florida

b. County: Hillsborough

c. Organization Type:

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

d. Contact Name: Dabaram Rampersad

e. E-mail Address:

f. Phone Number: (813)974-2177

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: None

b. Firm: None

c. Email:

d. Phone Number: