



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1594

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The project equips people who have disabilities and their families with the tools, skills, and knowledge to overcome adversity and live full, productive lives. The care coordination & case management component connects families to vital community resources, targets mental health service gaps, provides a 24/7 crisis line, and builds self-sufficiency. Peer-mentoring and social activities develop social & emotional learning and daily living skills for children and adults.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operations	1,800,000
Fixed Capital Outlay	0
Total State Funds Requested	1,800,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,800,000	49%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	500,000	14%
Other	1,353,966	37%
Total Project Costs for Fiscal Year 2024-2025	3,653,966	100%

8. Has this project previously received state funding?

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

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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

Alternative sources include local government strategic partnerships as well as private donors.

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

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



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Director salary plus benefits dedicated to the project	98,451
Other Salary and Benefits	Other administrative salaries plus benefits dedicated to the project	90,856
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Manage and develop data system, programs, accountants, audit and evaluation	158,076
Operational Costs: Other		
Salary and Benefits	Insurance for staff. Staff direct and manage respite care, social and recreational activities, life skills training, community outreach and involvement, familial support, and mental health services.	185,969
Expense/Equipment/Travel/Supplies/Other	Occupancy, utilities, security, transportation, marketing & outreach, office equipment, field trips, entertainment & workshops, meetings, insurance, supplies, food, and other (subscriptions, conferences, maintenance, cleaning, gifts)	719,017
Consultants/Contracted Services/Study	Providers, therapists, specialists, trainings, and logistics	547,631
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		1,800,000

14. Program Performance

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

The project equips people who have disabilities and their families with the tools, skills, and knowledge to overcome adversity and live full, productive lives. The care coordination & case management component connects families to vital community resources, targets mental health service gaps, provides a 24/7 crisis line, and builds self-sufficiency. Peer-mentoring and social activities develop social & emotional learning and daily living skills for children and adults.



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

Teenage and adult mentors befriend children & adults with disabilities and provide support and encouragement across after-school activities, daily activities, and weekend activities that include athletics & cultural arts.

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

Case management provides counseling, resource referral, and community connections that foster inclusivity and acceptance of individuals with special needs and their families. Funding provides continuation of mental health & crisis line, as well as respite for parents/caregivers.

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

Projected to serve over 800 people. The target population will include, but not limited to, elderly persons, persons with poor mental and physical health, persons with developmental and physical disabilities, economically disadvantaged persons, and all students including grade, high school, and university.

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

Our project improves physical health by increased nutrition, improved physical attributes and condition, and increased daily living skills to promote independent functioning. In addition, our project improves mental health by improving self-esteem, and improving coping skills through reducing isolation and feeling of helplessness. Through this we increase self-advocacy skills and improve the participants sense of belonging. Our project also enriches cultural experiences by improving inter-connectivity, providing safe access for our congregants, and understanding of cultural differences in our community. All are measured by surveys, attendance logs, observations, and data analysis of programs.

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

Penalties to include financial penalties for not meeting deliverables or performance measures.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College



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Other (please specify)

d. First Name Last Name

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number