

The Florida Senate Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1375

1. Project Title	Ounce of Prevention - Juvenile Recidivism and Prevention Program					
2. Senate Sponsor	Darryl Rouson					
3. Date of Request	02/02/2023					
4. Project/Program Des	scription					
Reduce juvenile crim promote employability	e rules in the target neighb	orhoods by	engaging at-risk yo	uth in activities that	teach life skills and	
5. State Agency to rece	eive requested funds	Departme	ent of Juvenile Justic	9		
State Agency contact	ted? Yes					
6. Amount of the Nonre	ecurring Request for Fisca	al Year 202	23-2024			
Type of Funding			Amo	l		
Operations				975,000	ı	
Fixed Capital Outlay	ed Capital Outlay 0			l		
Total State Funds R	equested			975,000		
7. Total Project Cost fo	r Fiscal Year 2023-2024 (i	ncluding r	natching funds ava	ilable for this proje	ect)	
Type of Funding			Amount	Percentage	i	
Total State Funds Re	quested (from question #6)		975,000	9%	l	
Matching Funds					l	
Federal			0	0%	l	
State (excluding the a	State (excluding the amount of this request)		0	0%	l	
Local			9,400,000	91%	l	
Other			0	0%	ſ	
Total Project Costs	for Fiscal Year 2023-2024		10,375,000	100%	ı	
. , .	viously received state fun	ding?	Yes			
Fiscal Year (yyyy-yy)	Amount Recurring Nonre	curring	Specific Appropriation #	Vetoed		
2021-22	0	950,000	1180	No	ı	
9. Is future funding like	ely to be requested?		Yes			
a. If yes, indicate nonrecurring amount per year.			975,000			
b. Describe the sour	rce of funding that can be	used in li	eu of state funding.			
Additional dollars ca	n be fund raised.					
10. Has the entity requ	esting this project receive	ed any fed	eral assistance rela	ted to the COVID-	19 pandemic?	
No						
If yes, indicate the a	amount of funds received	and what	the funds were use	d for.		



11. Status of Construction

a. What is the current phase of the project?

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Complete questions 11 and 12 for Fixed Capital Outlay Projects

OPlanning ODesign	Construction		
b. Is the project "shovel ready"	(i.e permitted)?		
c. What is the estimated start da	ate of construction?		
d. What is the estimated comple	etion date of construction?		
List the owners of the facility t relationship between the owners	o receive, directly or indirecers of the facility and the ent	tly, any fixed capital outlay fundi ity.	ng. Include the
Details on how the requested s	tate funds will be expended	Description	Amount
Administrative Costs:		·	
Executive Director/Project Head Salary and Benefits			
Other Salary and Benefits			
Expense/Equipment/Travel/Supplies/ Other			
Consultants/Contracted Services/Study	Subcontract with each of the five Florida Children's Initiatives (\$195,000 per site statewide)		975,00
Operational Costs: Other			
Salary and Benefits			
Expense/Equipment/Travel/Supplies/ Other			
Consultants/Contracted Services/Study			
Del vices/Ottady			-
Fixed Capital Construction/Majo	or Renovation:		
,	or Renovation:		

14. Program Performance

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

Reduce juvenile crime rules in the target neighborhoods by engaging at-risk youth in activities that teach life skills and promote employability.

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

Our goal is to intervene early in the lives of at-risk youth and decrease the chance of juvenile arrest and recidivism. We implement national proven programs aimed at reducing the Juvenile crime rate in lower socioeconomic neighborhoods. Some activities include, career exploration, soft skills training, after-school tutoring, conflict resolution, and impulse control.

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



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Direct services include job training, dress for success (work clothing provided), financial literacy courses, college readiness training, conflict resolution training, emotional support courses.

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

201-400 youth are going to be served. People with poor mental health, poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, homeless youth, grade school students, high school students, university/college students, currently or formerly incarcerated persons, drug offenders (in Criminal Justice), victims of crime.

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

Enhance specific individual's economic self-sufficiency, reduce recidivism, create specific immediate job opportunities, divert from Criminal/Juvenile Justice System. All of these benefits will be measured by one of the following: reduce juvenile arrest rates shown by arrest rates; improve sense of community safety done by community survey; increase youth employment and positive youth activities shown by sign in sheet and pay stubs; decrease in truant behavior shown by school attendance. Direct services include job training, dress for success (work clothing provided), financial literacy courses, college readiness training, conflict resolution training, emotional support courses, The amount of youth employed.

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?

Standard penaltie	s are adeq	uate.			
15. Requester Contact	t Informati	ion			
a. First Name	Winifred		Last Name	Heggins	
b. Organization	The Ounce of Prevention				
c. E-mail Address	wheggins@ounce.org				
d. Phone Number	(850)933	-2846	Ext.		
16. Recipient Contact	Informatio	on			
a. Organization	The Ound	ce of Prevention			
b. Municipality and	d County	Statewide			
c. Organization Ty	ре				
□For Profit Entity					
☑Non Profit 501(c	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					
□University or Co	llege				
□Other (please sp	pecify)				
d. First Name	Winifred		Last Name	Heggins	
e. E-mail Address	wheggins	@ounce.org			



b. Firm Name

17.

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t. Phone Number	(850)933-2846	
. Lobbyist Contact I	nformation	
a. Name	Yolanda Cash Jackson	

c. E-mail Address yjackson@beckerlawyers.com

Becker & Poliakoff PA

d. Phone Number (954)985-4132