



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2088

1. Project Title
2. Senate Sponsor
3. Date of Request

**4. Project/Program Description**

Exchange Parent Aide provides in-home parent education to families referred by DCF investigators, CBC case management programs, the school system, a variety of social services agencies, probation officers in misdemeanor child abuse and neglect cases and self-referral. Part of a national network of Exchange Club agencies, Parent Aide is provided without cost to any family in need of services and seeks to significantly reduce the number of children placed in out-of-home care by helping parents improve their parenting skills. The average cost of providing 6 - 12 months of in-home services to a family equates to approximately \$1,500 per child per year, while DCF estimates cost per child for one year of foster care is \$105,131. Parent Aide is provided to any family with a child age 18 or younger in the home, meeting weekly for a period of 3 months and bi-weekly for an additional 3 - 9 months, and is the only program in NE Florida which has provided this level intensive services since 1992.

5. State Agency to receive requested funds
- State Agency contacted?

**6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024**

Type of Funding	Amount
Operations	796,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>796,000</b>

**7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	796,000	88%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	107,050	12%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>903,050</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2022-23	0	887,188	315A	No

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.



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The Exchange Clubs of Northeast Florida support the agency with fundraising events and Christmas gifts for every child enrolled in the program, and we seek grants throughout the year. Unfortunately, however, no other major funder provides funding for intensive prevention services in Northeast Florida at this time. We are most grateful for the State of Florida funding we have received over the last 5 years, which has allowed us to expand and meet the consistently high demand for services.

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

Yes

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

We were able to secure CARES and PPP funding which covered 55% of our program expenses during FY21, after our 2020-2021 State funding was vetoed due to COVID. The balance was covered with donations and reserves.

## 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

**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
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Executive Director @ .50 plus benefits.	40,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Contracted accounting services.	10,000
<b>Operational Costs: Other</b>		
Salary and Benefits	One Parent Aide Program Director (65,000), two Sr. Parent Aides (94,000), seven Parent Aides (294,000), one Intake Navigator (42,000), one Program and Technology Assistant (42,000), plus \$350/month Health Reimbursement Account benefits and performance bonuses (55,400), and .0765 FICA/SS/taxes.	635,500
Expense/Equipment/Travel/Supplies/Other	Mileage (44,000), Technology (9,000), Training/conferences (12,000), Occupancy (16,000), Program Materials/Curriculum (9,000), Emergency Funds for families (20,000) and printing (1,500)	110,500



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Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>796,000</b>

#### 14. Program Performance

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

Exchange Parent Aide will provide 6 - 12 months of in-home parent education and case management to 230 families/approximately 550 children in Duval, Clay, Baker and Nassau counties. Our goal is to reduce the number of families who, without assistance, may ultimately lose custody of their child to DCF. For example, in Duval County alone, an average of 1,700 calls per month are accepted by the Abuse Hotline for investigation, even after initial screening diverts many to the Hope Navigator program for assistance with economic issues. Of that 1700, most must be closed without safety plans or court-ordered services, many to be reported again within months. The goal is to provide evidence-based, intensive services to families in an effort to reduce further intervention by DCF and to assist families before their situation worsens and the children must be removed. Only Healthy Families provides similar services, but only for expectant moms and families with newborns less than 3 months of age.

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

Once enrolled, the parents will meet weekly for 60-90 minutes with their Parent Aide who will provide evidence-based Nurturing Parenting Program curriculum based specifically on the needs assessments of each individual family. Parents complete pre- and post-tests to determine areas of strength, a thorough family assessment, a safety assessment, and other initial evaluation forms. To graduate from Parent Aide, the parent must complete 18-30 hours (based on the needs of each family) of instruction provided in the family home, achieve 2 of 3 goals established by each parent, and show an improvement in pre and post-test AAPI scores indicating improvement in five critical areas of parenting. After graduation, DCF checks each graduate for future abuse reports and have confirmed that 97% of graduates have no confirmed incident of abuse/neglect within 12 months of graduation.

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

We will provide a minimum of 6-12 months of Parent Aide in-home prevention services to approximately 230 families/550 children in Duval, Clay, Baker and Nassau counties, referred to the program by DCF Investigators, CBC contract providers case management programs, law enforcement, public schools, an array of community agencies and by self-referral. Services entail weekly 60-90 minute visits for the first three months and bi-weekly for an additional 3 - 9 months thereafter. Using the Nurturing Parenting Program curriculum, parents will complete a minimum of 18 hours of curriculum, set individual and family goals, complete pre and post assessments and must complete the entirety of the course for graduation. Graduates are checked by DCF monthly and 97% have no further incident of confirmed abuse or neglect within 12 months of graduation, an outcome which exceeds all DCF standard outcome requirements for such programs.

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

Any family in Duval, Clay, Baker or Nassau county with at least one child under the age of 18 is eligible for our voluntary Parent Aide services. With this funding, we will serve 230 families which equates to approximately 550 children, at a cost of approximately \$1,447 per child annually. Of the 550 children served, preventing just 2 percent from entering foster care will save the State of Florida valuable resources and prevent the trauma experienced by a child when removed from their parents' home. There are no qualifying factors which must be met, all parents who wish to improve their parenting skills are welcome to enter the program. We average 35 - 45 referrals each month and approximately half will welcome the opportunity to learn new behaviors and deter further intervention from DCF or law enforcement.

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



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Parent Aide graduates will not have another confirmed DCF report within 12 months of case closure from our program, while the children remain safely in the family home. Parents will have a better understanding of their children's developmental stages, age-appropriate discipline and many other areas which impact parenting, such as: the effect of domestic violence on a child's developing brain, the impact of substance abuse in the home, and the long-term effect of child abuse and neglect. Our primary goal is to keep children out of foster care and safely at home in a loving, nurturing and healthy environment, and to assist parents learn the skills necessary to accommodate this goal. In order to determine success of the program, our DCF contract stipulates that a minimum of 95% of all graduates will not re-abuse or neglect their children, an outcome that we have consistently exceeded for over 30 years.

**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?**

DCF has always included a stipulation that failure to meet goals will result in a reduction or funding. This has never occurred as we have always met our goals.

**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
- 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**



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d. Phone Number