



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 2548

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

4. Project/Program Description

Our program data for the past two years shows nearly 100% retention among foster parents through active wraparound support mechanisms, and a decrease in incarceration and increase in stable housing among male foster youth aging out of the system. We will use the funds to expand the service area for these programs but also expand programming to offer concierge workforce development coaching and assistance. This program expansion will allow us to make significant headway in connecting our young men in particular to financial self-sustainability through increased employability and self-confidence. This will bolster our initiatives that last year saw a Return on Investment of over 400% through legislative investment.

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	499,247
Fixed Capital Outlay	0
Total State Funds Requested	499,247

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)	499,247	0%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	759,431	100%
Total Project Costs for Fiscal Year 2024-2025	1,258,678	100%

8. **Has this project previously received state funding?**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	500,000	315	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.

We do have fee-for-service contracts with local CBCs as well as private funding we depend upon to supplement services.



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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.

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		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Direct care staff to expand the service area and concierge workforce development staff to assist young men in self-sufficiency.	314,737
Expense/Equipment/Travel/Supplies/Other	Recruitment of male volunteers, customized wrap around supports for foster families, life skills and field training support for foster youth and aged-out youth, goals set and met incentives, program certification, travel, office supplies, rent, utilities, insurance.	144,510
Consultants/Contracted Services/Study	Life and leadership skills training, on the job training, employment opportunities and income generating activities, trauma-informed care training, group intensives.	40,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		499,247

14. Program Performance

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



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To increase retention of foster parents and decrease negligent behavior of male youths in out-of-home care and those who have aged out of the system of care. Foster parents enrolled in our wraparound support program renew at nearly 100% year over year, reducing the burden of recruitment. Young men and male youths in our programs are more likely to enroll in school, avoid incarceration, find stable housing, and address mental health needs than their peers nationwide. In particular, we desire to expand not only numerically and geographically, but expand programming to offer concierge workforce development coaching and assistance, a huge need for young men 18+ who have no family or support system.

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

Research continues to show that the single biggest factor in seeing a young male succeed in life is to have a father figure of some kind. We will expand our mentoring and coaching initiative to provide males impacted by fatherlessness personalized coaching plans that equip them to enter adulthood successfully, secure stable housing, improve mental health, and experience less incarceration. We have seen a great need for a concierge workforce development initiative that connects young men with on-the-job training that can turn into careers. We will reach more foster families through providing wraparound support services such as respite care, clothes, beds, meals and home projects.

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

Staff will recruit, train, and coordinate male volunteers to provide foster families with wraparound support services, as well as recruit and train mentors to serve as positive, consistent, male role models for those impacted by trauma from foster care. Expanding our efforts in concierge workforce development will enable these young men, with the help of a mentor and coach, find satisfying, long-term stability in employment. Leadership training, on the job training, mentorship, coaching, life skills training (among others) will be provided to trauma-impacted youth and young adults. Foster families will be heard, validated, and served by our staff and volunteer networks.

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

Our primary target market are youth directly impacted by foster care, mostly in out-of-home care or those who have aged-out of the system of care. We will also target foster parents, relative and non-relative care givers, biological parents seeking services to avoid the loss of their children to the dependency system, and those who are jobless or homeless due to the inadequate services received in transitioning from dependency to adulthood.

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

Foster parents and relative/non-relative caregivers will report more manageable lives, less stress, and increased retention; at-risk youth will report an increase in life skills, an increased likelihood of obtaining stable housing, decreased likelihood of engaging in illegal activity, and an increased likelihood of enrolling in school or finding employment, all of which contribute to make communities safer. Concierge workforce development coaching will create new avenues of connecting to stable employment for more young men and provide an additional avenue to meet qualifying events for those in Extended Foster Care. Surveys completed will measure the program's efficacy.

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?

Unless otherwise stated or without good merit, failure to meet deliverables will result in financial penalties and/or reduction in allocations as described in contract.

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



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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

d. Phone Number