



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 2182

1. **Title of Project:** Florida Children's Initiative (FS 409.147)

2. **Senate Sponsor:** David Simmons

3. **Date of Submission:** 02/14/2019

4. **Project/Program Description:**

To support at-risk children and families in disadvantaged communities in Jacksonville, Orlando, Liberty City, Overtown and Sulphur Springs addressing critical needs using a "cradle to career" strategy.

5. **State Agency to receive requested funds :** Department of Education

State Agency Contacted? No

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	2,500,000
Fixed Capital Outlay	
<b>Total State Funds Requested</b>	<b>2,500,000</b>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	2,500,000	27.5%
Federal		0.0%
State (excluding the amount of this request)		0.0%
Local	6,600,000	72.5%
Other		0.0%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>9,100,000</b>	<b>100.0%</b>

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		
2018-19		600,000		No

9. **Is future-year funding likely to be requested?** Yes

a. If yes, indicate non-recurring amount per year. 1,000,000

10. **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		



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Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	Subcontract with each of the five Florida Children's Initiatives (\$500,000 per site statewide)	2,500,000
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning		
Engineering		
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,500,000</b>

**11. Program Performance:**

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

To improve academic performance, grades, attendance, graduation and increase college enrollment

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

Tutoring, science/math/reading enrichment, monitoring of grades/attendance/behavior; and college prep

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

Tutoring, science/math/reading enrichment, monitoring of grades/attendance/behavior; and college prep

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

At-risk children and families in five of Florida's most disadvantaged neighborhoods recognized by the state

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

Our IMPACT all sites will track at least one measure of program impact in each of three areas: Health, Safety, and Education, % of children attending early learning programs, %/# of children reading at grade level by third grade, %/# of children chronically absent from school, school suspension rate, #/% of youth promoted to the next grade level, #/% of youth who graduate from high school, and #/% of high school graduates who enroll in and attend post-secondary.

**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 in the contract?**

None. Standard penalties are adequate.

**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.**

N/A



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#### 13. Requestor Contact Information:

- a. **Name:** Winnie Heggins
- b. **Organization:** Ounce of Prevention Fund of Florida
- c. **E-mail Address:** wheggins@ounce.org
- d. **Phone Number:** (850)921-4494

#### 14. Recipient Contact Information:

- a. **Organization:** Ounce of Prevention Fund of Florida
- b. **County:** Statewide
- 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:** Winnie Heggins
- e. **E-mail Address:** wheggins@ounce.org
- f. **Phone Number:** (850)921-4494

#### 15. Lobbyist Contact Information

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**