



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1722

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

4. Project/Program Description

Expansion of the Diversion program will increase capacity for participants as well as provide a community hub to increase preventive services for at-risk youth and to mitigate negative impacts to the family unit such as parenting classes, parent cafes, family counseling, tutoring, opportunities for vocational /job skills, as well as positive family events and out of school activities.

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

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

| Type of Funding | Amount |
|------------------------------------|----------------|
| Operations | 250,000 |
| Fixed Capital Outlay | 0 |
| Total State Funds Requested | 250,000 |

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|------------------|-------------|
| Total State Funds Requested (from question #6) | 250,000 | 9% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 0 | 0% |
| Local | 0 | 0% |
| Other | 2,550,000 | 91% |
| Total Project Costs for Fiscal Year 2021-2022 | 2,800,000 | 100% |

8. Has this project previously received state funding?

| Fiscal Year (yyyy-yy) | Amount | | Specific Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
| | Recurring | Nonrecurring | | |
| 2020-21 | 0 | 250,000 | 1196 | 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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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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\$1,919,162 for Paycheck Protection Program (PPP), used for payroll expenses

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

| Spending Category | Description | Amount |
|--|---|----------------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | Salary and benefits for 1 Executive Director | 44,530 |
| Other Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/Other | Office equipment, supplies and travel | 6,441 |
| Consultants/Contracted Services/Study | | 0 |
| Operational Costs: Other | | |
| Salary and Benefits | Salaries and benefits for direct care staff. | 102,864 |
| Expense/Equipment/Travel/Supplies/Other | Expenses, travel, supplies for preventive services and other related services for the program | 96,165 |
| Consultants/Contracted Services/Study | | 0 |
| Fixed Capital Construction/Major Renovation: | | |
| Construction/Renovation/Land/Planning Engineering | | 0 |
| Total State Funds Requested (must equal total from question #6) | | 250,000 |

12. Program Performance

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

Expansion of the Diversion program will increase capacity for participants as well as provide a community hub to increase preventive services for at-risk youth and to mitigate negative impacts to the family unit such as parenting classes, parent cafes, family counseling, tutoring, opportunities for vocational /job skills, as well as positive family events and out of school activities.

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

Provide food, clothing and diapers to families in need. Provide family support services, like parenting classes, financial counseling, vocational training and more to bring families to independence. Support a weekend backpack food program for local school children so they will have food for the weekends.

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

Provide food, clothing and diapers to families in need. Provide family support services, like parenting classes, financial counseling, vocational training and more to bring families to independence. Support a weekend backpack program for local schoolchildren so they will have food for the weekends.

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

Persons with poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, the homeless, preschool students, grade school students, high school students, university/college students, current or formerly incarcerated persons, and juvenile diversion participants and their families/caregivers.

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

Create specific immediate job opportunities - individualized service planning goals as evidenced by progress of activities. Reduce recidivism-tracking via Department of Juvenile Justice (DJJ) and Law Enforcement reports and documented internally via database. Divert from criminal/juvenile justice system-tracked via internal documentation of individualized service plans. Family participation-tracking via internal documentation via service planning.



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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?

Repayment of funds.

13. 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.

NA



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14. Requestor Contact Information

a. First Name Last Name
b. Organization
c. E-mail Address
d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name
b. Firm Name
c. E-mail Address
d. Phone Number