



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1865

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

4. Project/Program Description

The project addresses the mental health challenges of individuals with special needs and their parents/caregivers. We will provide pro-active, coordinated case management which will help families navigate a complex system of care, including access to mental health, medical, educational and therapeutic services, many of which have been suspended or curtailed as a result of the pandemic, as well as provide counseling and emotional supportive services. Respite, parent support, and social engagement for children, teens, and adults with special needs provide for a comprehensive approach to tackling and improving the mental health of families who have children with disabilities. Additionally, a crisis line in tandem with comprehensive supportive services will prevent a difficult situation from becoming a life-threatening one.

We offer services to families throughout Miami Dade County serving diverse populations, and providing services across the spectrum of disabilities and demographics.

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	289,000
Fixed Capital Outlay	0
Total State Funds Requested	289,000

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)	289,000	25%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	859,350	75%
Total Project Costs for Fiscal Year 2021-2022	1,148,350	100%

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2020-21	0	350,000	251A	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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Sources include support from local foundations, corporate partnerships, institutional funders, and individual donors.

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.

Paycheck Protection Program loan, in the amount of \$29,128.10, which covered staff salaries and operational 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		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	100% of funds will be used for personnel to operate critical LifeLine and support services for the elderly, people with disabilities, and those with mental health challenges. Personnel include a social worker, BCBA's (Board Certified Behavioral Therapist), RBT's (Registered Behavioral Technician), and other professional service providers.	289,000
Expense/Equipment/Travel/Supplies/Other		0
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)		289,000

12. Program Performance

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

The project addresses the mental health challenges of individuals with special needs and their parents/caregivers. Pro-active, coordinated case management will help families navigate a complex system of care, including access to mental health, medical, educational and therapeutic, many of which have been suspended or curtailed as a result of the pandemic, as well as provide counseling and crisis support to prevent a challenging situation for the entire familial unit from becoming a life threatening one.

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

Case-management and intensive intervention services to aid families at-risk or in crisis who are raising a child with special needs. A social worker will assess the needs of families on a case-by-case basis, and formulate and implement a personalized case management plan which will increase access to life-saving resources and provide expert navigation through complex situations, all while providing counseling and emotional support. Respite, parent support groups and social engagement for children, teens and adults with autism, Down syndrome, and other disabilities will be provided as well.

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



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Case-management focusing on child and parent/caregiver expanded access to and expert navigation with mental health, therapies, appropriate educational environment, basic sustenance, legal aid, and medical care, with the overarching goal of empowering families to overcome extreme hardships and obstacles. A crisis line will be promoted so families always have a LifeLine, and we will work with partners to market this. Respite, parent support groups as well as social, recreational and cultural activities will be provided for children, teens and adults with disabilities.

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

The target population includes elderly persons, persons with poor mental health, persons with poor physical health, the developmentally disabled, physically disabled, high school students, and Jewish community members.

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

1. Improved mental health for individuals with special needs and their parents/givers, as measured by improved self-esteem, coping skills; existence and use of support network; reduced isolation and feelings of helplessness; empowerment to seek help in an emergency; self-advocacy skills; participation in mental health services and support groups; improved subjective appraisal. Attainment of outcome measured through periodic surveys and observation by program staff.
2. Enrich cultural experience, as measured by Improved inter-connectivity, comfort of exercising beliefs, increased participation in cultural and communal activities, safe access to services and programs for congregants. Attainment of outcome measured through periodic surveys and observation by program staff.

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?

Loss of funding

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.

n/a



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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