

1. Project Title Tampa Crossroads' Career Center- Training and Employment Services

2. Senate Sponsor Janet Cruz

3. Date of Request 12/20/2021

4. Project/Program Description

Tampa Crossroads requests \$190,000 to expand the capacity and reach of its Career Center, which assists people of working age who have barriers to employment overcome such barriers and obtain permanent and satisfactory employment. The program is based out of Hillsborough County and serves individuals in Hillsborough County as well as the surrounding counties. Individuals who are referred to the program would receive employment-related assessments, develop an employment plan to include all services and support needed to obtain and maintain employment, participate in training related to desired employment industries as well as training related to barriers to employment, and would receive all services necessary to identify, secure, and maintain employment through working with an assigned employment specialist. Tampa Crossroads is currently a vendor for Vocational Rehabilitation and is internationally accredited through CARF for job development and employment support.

5. State Agency to receive requested funds

Agency for Persons with Disabilities

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	190,000
Fixed Capital Outlay	0
Total State Funds Requested	190,000

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	190,000	24%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	600,000	76%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2022-2023	790,000	100%

8. Has this project previously received state funding? No

Fiscal Year	Amount		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		

9. Is future funding likely to be requested?

Yes 190,000

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Tampa Crossroads will apply for Federal, State, and Local grants to support this project as applicable.



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.

Tampa Crossroads received \$100,000 from Hillsborough County, which received funds from the CARES Act. The funds were used for PPE and other equipment needed for the agency to continue providing healthcare services safely while many industries had closed.

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

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits	Partial salary and benefits for Chief Executive Officer	2,000			
Other Salary and Benefits	Partial salary and benefits for Human Resources, Accounting Department (including CFO), Director of Clinical Services and Quality Improvement, and Director of Programs and Services and Workforce Development	6,000			
Expense/Equipment/Travel/Supplies/ Other	Travel/Supplies/ Advertising and marketing, insurance, postage, and finance charges				
Consultants/Contracted Services/Study	CARF Accreditation and Surveying	4,700			
Operational Costs: Other					
Salary and Benefits Salary and benefits of Training Staff and Employment Specialist hir under this funding, partial salary for Program Manager, Assistant Program Manager, and current Training Staff, Employment Specialists, and Support Staff		160,000			
Expense/Equipment/Travel/Supplies/ Other Phone, computers, equipment, office supplies, travel and gas free employees within the Career Center		12,400			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (m	ust equal total from question #6)	190,000			

12. Program Performance

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

Tampa Crossroads' Career Center is internationally accredited through CARF for Job Development and Employment Support. Funds being requested would expand current services beyond our current population of people with disabilities to also include legal history of lack of work history. We would provide the same services we do currently, including employability skills training, self-advocacy, on-the-job training, and supported employment, and we would expand our reach into nearby counties.

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

Employment services are offered to everyone entering the program and the job search is catered to their specific interests, creating opportunity for long-term careers through permanent job placement. Through employment, we aim to reduce unemployment within the community, promote self-sufficiency, reduce recidivism within the criminal justice system, and eliminate homelessness.

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



Direct services include training, placement, and case management. Training is in the form of a variety of pre-employment training courses. Placement services are offered through analyzing the individual's abilities, experience, skills, limitations, and goals, and using that information to create an employment plan. Then work begins on completing the plan and securing and maintaining employment.

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

The target population to be served includes the following: Individuals who are unemployed or underemployed, individuals of working age with disabilities. These may or may not include individuals with mental health conditions, substance use conditions, physical health complications, or individuals involved in the criminal justice system. We expect to serve 100 individuals annually.

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

be measured?

The following outcomes will be measured through collecting data from employment plans as well as incorporating data into Tampa Crossroads' annual Performance Measurement and Management Plan: 1) Symptoms of mental health will be improved as reported by 80% of program participants; 2) Placement rate will be at or above 77%, meaning at least 77% of people referred to the program are placed into permanent employment, increasing their economic self-sufficiency; 3) A successful closure rate at or above 90%, meaning at least 90% of people exited from the program are exited with permanent employment; 4) Individuals with substance use conditions will be enrolled in Tampa Crossroads' Behavioral Wellness Center for treatment and will have a 75% success rate; 5) 80% of individuals enrolled in the program will not be arrested/re-arrested.

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?

Financial penalties would be warranted; the state would be reimbursed or funds withheld if deliverables or performance measurements are not met.

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.

Tampa Crossroads, Inc. has no owners. Our CEO is designated through the State of Florida as Registered Agent and the organization has oversight performed by a Board of Directors, where none of the Directors have any share in ownership.



LFIR # 2017

14. Requestor Contact Information

	a. First Name	Gwendolyn		Last Name	Green		
	b. Organization	Tampa Crossroads, Inc.					
	c. E-mail Address	ggreen@tampacrossroads.com					
	d. Phone Number	(813)238-	-8557	Ext. 202			
15.	15. Recipient Contact Information						
	a. Organization	Tampa Crossroads, Inc.					
	b. Municipality and	Municipality and County Statewide					
	c. Organization Type						
	□For Profit Entity						
	☑Non Profit 501(c)(3)						
	□Non Profit 501(c	Non Profit 501(c)(4)					
	□Local Entity	ILocal Entity					
	□University or Co	Jniversity or College					
	□Other (please specify)						
	d. First Name	Gwendoly	/n	Last Name	Green		
	e. E-mail Address						
	f. Phone Number						
16.	16. Lobbyist Contact Information						
	a. Name	None					
	b. Firm Name						
	c. E-mail Address	s					
	d. Phone Number						