



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1605

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

With a 5-year goal of licensing 1k homes and impacting 7k children, A Door of Hope (ADH) will recruit and license 250+ foster families (additional 30 in FY26) to provide safe and loving homes for nearly 1K children in one of the highest need regions. ADH's innovative model of licensing and providing mental health services to families in crisis increases the retention rate of foster parents and decreases traumatic disruptions. Parents will be trained in Trust-Based Relational Intervention practices.

5. State Agency to receive requested funds

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	800,000
Fixed Capital Outlay	0
Total State Funds Requested	800,000

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	800,000	22%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	1,700,000	49%
Local	0	0%
Other	1,000,000	29%
Total Project Costs for Fiscal Year 2025-2026	3,500,000	100%

8. Has this project previously received state funding? Yes

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2024-25	0	350,000	318A	No

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

a. If yes, indicate nonrecurring amount per year.

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

Private and local funds.

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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Fiscal Year 2025-2026

LFIR # 1605

10. 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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

12. 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		
Salary and Benefits	Salary for the TBRI Practitioner® / Therapeutic & Education Coordinator to provide additional crisis intervention services, \$50k; Recruitment, training, and licensing personnel to facilitate orientation sessions, foster parent training classes, home visits, home studies, and support leading to placement, \$200k	250,000
Expense/Equipment/Travel/Supplies/Other	Activities and materials to support maintaining 300+ foster homes and recruiting new foster families to serve nearly 1K foster youth annually in 11 counties.	50,000
Consultants/Contracted Services/Study	Contracted mental, physical, emotional, and behavioral services such as individual counseling, family and marriage counseling, play and art therapy, equine and occupational therapy, speech and physical therapy, trauma-responsive parent coaching, etc. for foster parents and dependent children.	500,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		800,000

13. Program Performance

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



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

ADH will recruit, train, license, and support foster families to meet the needs of the State in their 11-county area. Families licensed through A Door of Hope are retained 3x longer than the State's average, benefiting Florida's children and communities, saving the State important resources, and demonstrates a high ROI.

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

For those being served by ADH, they will receive wraparound services, continued support, and ongoing access to critical mental health services to be successful foster parents. Citizens and the State will see a savings through extended retention rates and less disruptions.

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

Potential and licensed foster parents in ADH's service area; dependent children; and those that interact with foster parents and children, including educators and law enforcement. Greater than 800 individuals.

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

Improved mental health, a decrease of placement disruptions and negative interactions with the system, such as law enforcement, and improved foster parent retention rates. Improvements in behavioral incidents can be expected when Trust-Based Relational Intervention (TBRI), is implemented. ADH will track and report metrics to the State.

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?

Increased monitoring and reporting requirements.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

Hurricanes Helene and Milton

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:



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Fiscal Year 2025-2026

LFIR # 1605

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. 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 **Ext.**

19. Lobbyist Contact Information



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Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1605

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.