

LFIR # 1714

1. Project Title	Miami-Dade County Public So	chools- Mental Health Pilo	t K-3 Screener	
2. Senate Sponsor	Shevrin Jones			
3. Date of Request	2/26/2025			
4. Project/Program De	escription			
a prevention measu difficulties. The project administering the so	cal Health Pilot Program will utilize re aiming to efficiently and accura ect will include professional develor ereener, interpreting results, and co or students and families to address	ately identify students (K- lopment sessions for scho developing targeted interv	 at risk of behavioration otherwise of the staff to enhance p 	al, emotional, or social proficiency in
5. State Agency to re-	ceive requested funds De	partment of Education		
State Agency conta	acted? No			
				
6. Amount of the Non	recurring Request for Fiscal Ye	ear 2025-2026		1
Type of Funding		An	ount	
Operating			400,000	
Fixed Capital Outlay			0	
Total State Funds	Requested		400,000	
7. Total Project Cost f	or Fiscal Year 2025-2026 (inclu	ding matching funds av	ailable for this proj	ect)
				-
Type of Funding		Amount	Percentage	
Total State Funds R	equested (from question #6)	Amount 400,000		
	equested (from question #6)		76%	
Total State Funds R Matching Funds Federal		400,000	76%	
Total State Funds R Matching Funds Federal State (excluding the	equested (from question #6) amount of this request)	400,000	76% 0 0% 0 2%	
Total State Funds R Matching Funds Federal State (excluding the Local		12,000	76% 0 0% 0 2% 0 0%	
Total State Funds R Matching Funds Federal State (excluding the		400,000	76% 0 0% 0 2% 0 0%	
Total State Funds R Matching Funds Federal State (excluding the Local Other		12,000	76% 0 0% 0 2% 0 0% 0 22%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pro	amount of this request)	12,000 115,200 527,200	76% 0 0% 0 2% 0 0% 0 22%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profit yes, provide the	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance: Amount	400,000 12,000 115,200 527,200 No	76% 0 0% 0 2% 0 0% 0 22%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profit yes, provide the	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance:	400,000 12,000 115,200 527,200 No	76% 0 0% 0 2% 0 0% 0 22% 0 100%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profit yes, provide the	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance: Amount	400,000 12,000 115,200 527,200 No	76% 0 0% 0 2% 0 0% 0 22% 0 100%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profif yes, provide the Fiscal Year (уууу-уу)	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance: Amount	400,000 12,000 115,200 527,200 No	76% 0 0% 0 2% 0 0% 0 22% 0 100%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profit yes, provide the Fiscal Year (уууу-уу) 9. Is future-year fundi	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance: Amount Recurring Nonrecurr	400,000 12,000 115,200 527,200 Specific Appropriation #	76% 0 0% 0 2% 0 0% 0 22% 0 100%	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profit yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year funding a. If yes, indicate new process.	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance: Amount Recurring Nonrecurring likely to be requested?	400,000 12,000 115,200 527,200 Specific Appropriation # Yes 00	76% 0 0% 0 2% 0 0% 0 22% 0 100% Vetoed	
Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profit yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year funding a. If yes, indicate new process.	amount of this request) s for Fiscal Year 2025-2026 eviously received state funding most recent instance: Amount Recurring Nonrecurring likely to be requested? conrecurring amount per year.	400,000 12,000 115,200 527,200 Specific Appropriation # Yes 00	76% 0 0% 0 2% 0 0% 0 22% 0 100% Vetoed	



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The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

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a. What is the cu		he project?				
Planning	Design	Construction	O N/A			
b. Is the project	"shovel ready" (i.e permitted)?				
c. What is the es	stimated start da	te of construction?				
d. What is the es	stimated comple	tion date of constru	ction?			
e. What funding	stream will be u	sed for ongoing ope	rations a	nd maintenand	e of the projec	et?
		o receive, directly or rs of the facility and			oital outlay fun	ding. Include the

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	School support staff to collect and gather student data. Provide access to supplementary resources for students and their families. Includes fringes and benefits.	134,000
Expense/Equipment/Travel/Supplies/ Other	Pearson BASC-3 BESS Screener (\$2.50 per student, 65,000 K-3 students)	162,500
Consultants/Contracted Services/Study	Professional Development (3 school site members per school - administration, teacher, counselor), 20 Professional Development Sessions for the District	103,500
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	400,000

13. Program Performance

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

The funds requested are intended to use the BASC-3 BESS (Behavioral and Emotional Screening System) as a prevention measure to efficiently and accurately identify students (K-3) who may be at risk for developing or already experiencing significant behavioral, emotional, or social difficulties. The professional development will enhance staff knowledge and proficiency in utilizing the assessment instrument, gathering data, and providing students and families with supplementary resources.

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



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The project directly benefits educators, parents, and students who are involved in a child's education and well-being. The information obtained from the BASC-3 BESS can be used to prioritize students for further assessment, guide intervention planning to develop targeted interventions, and track a student's progress over time and evaluate the effectiveness of the interventions.

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

The screening will be used as a prevention measure to efficiently and accurately identify students (K-3) who may be at risk for developing or already experiencing significant behavioral, emotional, or social difficulties. Professional development and training for staff will enhance knowledge and proficiency in utilizing the assessment instrument, gathering data, and providing resources to families.

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

This initiative will benefit over 800 K-3 students in Miami-Dade by improving early identification, as well as teachers/administrators/counselors who will be receiving professional development and training.

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

The project aims to improve mental health outcomes for K-3 students by using the BASC-3 BESS to identify and address behavioral, emotional, and social challenges early, enabling timely and targeted interventions. Outcomes will be measured through data reports tracking the Behavioral and Emotional Risk Index, teacher and parent feedback on behavioral changes, and progress monitoring to evaluate the effectiveness of interventions.

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? Denial of future funds. 14. Is this project related to mitigation, response, or recovery from a natural disaster? No 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 infastructure) b. Name of the natural disaster (or Executive Order # for events not under a federal declaration): 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#:

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



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16. Has the entity app	lied for o	received state	assistance t	or this projec	t (other tha	n this request)?	
☐ Yes, Applied							
☐ Yes, Received							
□ No							
☐ No, but intends to	o apply						
a. If yes, specify the Commerce):	e progran	n and state ager	acy (ex. Loca	al Governmen	t Emergenc	y Bridge Loan, De	partment of
17. Requester Contact	Informat	ion					
a. First Name	Jose		Last Name	Dotres			
b. Organization	Miami-Da	ade County Publi	c Schools				
c. E-mail Address	JDotres@	dadeschools.ne	t				
d. Phone Number	(305)995	-1206	Ext.				
18. Recipient Contact	Informati	on					
a. Organization	Miami-Da	ade County Publi	c Schools		7		
b. Municipality and	d County	Miami-Dade					
c. Organization Ty	ре						
□For Profit Entity							
□Non Profit 501(d	:)(3)						
□Non Profit 501(d	:)(4)						
□Local Entity							
□University or Co	llege						
☑Other (please sp	pecify) Scl	nool Board of Mia	ami-Dade Co	unty			
d. First Name	Tabitha		Last Name	Fazzino			
e. E-mail Address	TFazzino	@dadeschools.r	net				
f. Phone Number	(305)995	-1206	Ext.				
19. Lobbyist Contact I	nformatio	n					
a. Name	Yolanda	Cash Jackson					
b. Firm Name	Becker 8	k Poliakoff PA					
c. E-mail Address	yjackson	@beckerlawyers	.com				



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d. Phone Number	(954)985-4132

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