

1.

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

LFIR # 1727

Forty Carrots Family Center, Child and Family Mental Health and Parenting Education

2. Senate Sponsor Joe Gruters

3. Date of Request 2/12/2025

4. Project/Program Description

Expand access to prevention and early intervention services that Forty Carrots Family Center provides for children, adolescents, and families in west central Florida through mental health and parenting education programs. Services support families and children throughout the community and are offered in-house and partner locations reaching the most at-risk families and helping families break cycles of child abuse and neglect by developing healthy coping skills, increasing parental knowledge, addressing/preventing trauma.

5. State Agency to receive requested funds

Department of Children and Families

State Agency contacted? No

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

Type of Funding	Amount
Operating	500,000
Fixed Capital Outlay	0
Total State Funds Requested	500,000

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)	500,000	33%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	0	0%	
Other	1,000,000	67%	
Total Project Costs for Fiscal Year 2025-2026	1,500,000	100%	

8. Has this project previously received state funding? If yes, provide the most recent instance:

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

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

No

No

a. If yes, indicate nonrecurring amount per year.

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



Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Const a. What is the cu		he project?			
O Planning	O Design	Construction	💽 N/A		
b. Is the project	•	,	[
		te of construction?	ction?		
e. What funding	stream will be u	ised for ongoing ope	rations ar	nd maintenand	ce 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	Salaries and benefits for full time equivalents, to include licensed mental health professionals and parenting educators.	430,000		
Expense/Equipment/Travel/Supplies/ Other	Includes staff training, travel and equipment and supplies as well as new vehicle for staff to use for travel to provide services to clients at domestic violence shelters, homeless shelters and community partner locations in Sarasota and Manatee counties.	70,000		
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)500,000				

13. Program Performance

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



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Sustaining the expanded access to prevention, early intervention, and treatment services for children, adolescents and families through mental health and parenting education programs. Services support families and children throughout the community and are offered in-house and at partner locations reaching the most at-risk families and helping families break cycles of child abuse and neglect by developing healthy coping skills, increasing parental knowledge and addressing and preventing trauma.

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

FCFC will provide prevention, intervention and treatment services for families, children and adolescents in need of mental health therapy and parenting education. Services are accessible to all at our center and at partner locations throughout the community, ensuring an expansive reach to meet the needs of families and eliminating barriers to vital psychoeducation and treatment.

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

Mental health support and treatment for children, adolescents and adults will be provided as individual or family sessions or as group counseling, in person or via a telehealth platform. Direct services will include play-based and discussionbased parenting education groups in-house and at various locations such as public libraries, long-term recovery facilities, homeless shelters and schools.

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

FCFC serves more than 5,500 clients per year. The target population includes persons with poor mental health, jobless persons, economically disadvantaged persons, at-risk youth, homeless, preschool students, grade school students, high school students and victims of crime.

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

be measured?

Progress in mental health is measured by the reduction of symptoms (depression, anxiety, anger) and increases in selfesteem as measured by evidence based assessments. Parenting Education measures success using an Outcomes Measurement model that quantifies clients' growth in 6 Protective Factors that mitigate or eliminate risk of abuse and increase the well-being of children and families. Mental health outcomes are individualized using evidence-based tools, i.e. Beck Youth Inventory, Strengths & Difficulties Questionnaire. Results from clients, parents and teachers. Parenting education outcomes are assessed with self-reporting tool reflective of Protective Factors, the foundation of the Strengthening Families Approach, including how behavior has changed as a result of services.

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?

Failure to meet deliverables outlined in this request would result in the return of 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



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🗆 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:

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	Michelle	Last Name	Kapreilian
b. Organization	Forty Carrots Family Center		
c. E-mail Address	michelle.kapreilian@forty	carrots.com	
d. Phone Number	(941)365-7716	Ext.	

18. Recipient Contact Information

a. Organization Forty Carrots Family Center

b. Municipality and County Sarasota

c. Organization Type

□For Profit Entity

☑Non Profit 501(c)(3)

□Non Profit 501(c)(4)

□Local Entity

□University or College

□Other (please specify)



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d. First Name	Diane	Last Name	O'Driscoll	
e. E-mail Address	diane.odriscoll@fortycarrots.com			
f. Phone Number	(941)365-7716	Ext.		
19. Lobbyist Contact Information				
a. Name	David A. Shepp			
b. Firm Name	The Southern Group			
c. E-mail Address	shepp@thesoutherngroup	o.com		
d. Phone Number	(850)671-4401			

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