

LFIR # 1892

1.	Project Title	Tiny Talkers Initiative		
2.	Senate Sponsor	Keith Truenow		
3.	Date of Request	2/10/2025		
4.	Project/Program Des	cription		
	with diagnostic screen speech disorder, rece speech-language initia	tive aims to provide an ac lings, evaluations and trea ptive and expressive lang ative leverages community	dditional 600 Duval County 2 - 5 year olds, located a atments (as needed) of speech/language disorders i uage disorder, stuttering/disfluency, and apraxia. Ouy partnerships with preschools, which allow us to util convenient for them and their caregivers.	ncluding: oral motor ur early intervention
5.	State Agency to rece	ive requested funds	Department of Education	
	State Agency contac	ted? No		

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

Type of Funding	Amount
Operating	350,000
Fixed Capital Outlay	0
Total State Funds Requested	350,000

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)	350,000	47%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	387,610	53%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	737,610	100%

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

Fiscal Year	Amo	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2024-25	0	350,000	80	Nο	

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

Yes

Yes

a. If yes, indicate nonrecurring amount per year.

350,000

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

We currently receive the City of Jacksonville, Kid's Hope Alliance grant funding for \$387,610. The requested funds will allow us to continue to maximize our impact on preschoolers in the county.



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

	"shovel ready" (stimated start da	(i.e permitted)? In the of construction?		
		etion date of construc	tion?	
. What funding	stream will be u	ised for ongoing oper	ations and mainten	ance of the project?

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	Speech-Language Pathology Lead-Salary and Benefits Speech-Language Pathology Assistant-Salary and Benefits	312,000				
Expense/Equipment/Travel/Supplies/ Other	Assessment and therapy materials, mileage, educational materials for parents, caregivers, and childcare facility staff.	38,000				
Consultants/Contracted Services/Study		0				
Fixed Capital Construction/Major Renovation:						
Construction/Renovation/Land/ Planning Engineering		0				
Total State Funds Requested (m	Fotal State Funds Requested (must equal total from question #6) 350,000					

13. Program Performance

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



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Continuation of the Tiny Talkers Initiative, which aims to provide 600 Duval County 2 - 5 year olds, located at 30 more preschools, with diagnostic screenings, evaluations and treatments (as needed) of speech/language disorders including: oral motor speech disorder, receptive and expressive language disorder, stuttering/disfluency, and apraxia. Our early intervention speech-language initiative leverages community partnerships with preschools, which allow us to utilize their space so we can serve the children in the place that's most convenient for them and their caregivers. The top reasons provided by underserved populations for not seeking needed healthcare services are lack of time, transportation concerns, lack of insurance or insurance coverage, and high healthcare costs. Our Tiny Talkers Program addresses all of these concerns.

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

Provide speech-language screenings, evaluations and treatment (if needed) to children identified as most in need of speech-language support and provide educational materials to parents, caregivers and childcare facility staff to identify children with speech-language deficits, understand the importance of evaluating and treating it and support the work done in therapy sessions, with clinicians.

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

Provide speech-language screenings, evaluations and treatments (if needed) to preschool aged children identified as most in need of speech-language development so they may enter elementary school with identical communication skills as their same aged peers.

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

600 Duval County 2 - 5 year olds

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

Improve quality of education:

For every child entering into therapy, a unique set of goals is set based on standardized testing. Progress is monitored and recorded on each of those goals. Goals are updated accordingly. Preschool Language Scales, Fifth Edition (PLS-5) or other standardized age-appropriate assessments are used to identify any deficits and develop an individual plan for each child. The PLS-5 provides a comprehensive development language assessment for children from ages birth to 7. It assesses nine major areas of auditory comprehension and expressive communication and is the industry standard.

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?

Our organization is requesting service-based funding determined by the number of preschoolers that are screened for speech/language disorders within a 12 month period. If we fail to meet and comply with the activities/deliverables established or to make appropriate progress and they are not resolved within two weeks of a written request for correction, the contract manager may withhold payment proportionate to the deficient service or performance until the deficiency is cured or a reduced payment by the rate established under this contract proportionate to the deficient service or performance.

14. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. If	f 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. N	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
15. Ha	as the entity applied for or received federal assistance for this project?



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☐ Yes, Applied				
☐ Yes, Received				
□ No				
☐ No, but intends t	o apply			
a. If yes, provide th	e FEMA project workshe	et ID#:		
, , ,				
b. Provide the total	project cost listed on th	e FEMA proj	ect worksheet:	
16. Has the entity app	lied for or received state	assistance f	for this project (othe	r than this request)?
☐ Yes, Applied				
☐ Yes, Received				
□ No				
☐ No, but intends t	o apply			
Commerce):		ncy (ex. Loca	al Government Emer	gency Bridge Loan, Department of
17. Requester Contact a. First Name	Chandra	Last Name	Manning	
b. Organization	Jacksonville Speech & H			
_	cmanning@shcjax.org	caring oction		
d. Phone Number		Ext.		
18. Recipient Contact	Information			
a. Organization	Jacksonville Speech & H	earing Center		
b. Municipality and	d County Duval			
c. Organization Ty	pe			
□For Profit Entity				
☑Non Profit 501(d	c)(3)			
□Non Profit 501(d	c)(4)			
□Local Entity				



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□University or Co	□University or College				
□Other (please specify)					
d. First Name Chandra Last Name Manning					
e. E-mail Address	Address cmanning@shcjax.org				
f. Phone Number	(904)518-3783 Ext.				
19. Lobbyist Contact Information					
a. Name	William Travis Cummings				
b. Firm Name	Oak Strategies LLC				
c. E-mail Address	travis@oak-strategies.com				
d. Phone Number	er (904)376-5189				

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