

1. Project Title

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

Tri-County Child Welfare Collaborative

LFIR # 3287

2.	Senate Sponsor	Shevrin Jones					
3.	Date of Request	3/10/2025					
4.	Project/Program D	escription					
	Beach counties, pro our communities, w we remove barriers	ild Welfare Collaborative oviding case manageme e fill critical gaps when to stability, improve chill and expand this work, e	ent, advocacy, a other agencies l ld welfare coord	nd essential resource lack funding or capaci lination, and ensure b	 As one of the onl ty. By working with etter long-term outo 	ly service providers in judges and CBC staff.	
5.	State Agency to re	ceive requested funds	Departm	ent of Children and Fa	amilies		
	State Agency conta	acted? No					
c			Figure Voca 20	2E 2026			
Ο.		recurring Request for	riscal fear 20	25-2026		1	
	Type of Funding			Amo			
	Operating				1,000,000		
	Fixed Capital Outlay			0			
	Total State Funds	Requested			1,000,000		
7.	Total Project Cost	for Fiscal Year 2025-20	026 (including	matching funds ava	ilable for this proje	ect)	
	Type of Funding			Amount	Percentage		
	Total State Funds Requested (from question #6)			1,000,000	74%		
Matching Funds							
	Federal			0	0%		
	State (excluding the	amount of this request)	0	0%		
	Local			0	0%		
	Other			350,000	26%		
	Total Project Cost	s for Fiscal Year 2025-	-2026	1,350,000	100%		
8.		eviously received stat most recent instance:	•	No			
	Fiscal Year Amount			Specific	Vetoed		
	(уууу-уу)	Recurring N	Nonrecurring	Appropriation #			
9.	-	ing likely to be reques		No		l	
		nonrecurring amount p	•				
	b. Describe the so	urce of funding that ca	an be used in I	ieu of state funding.			



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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					
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/ Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs					
Salary and Benefits	Salary support for Case Managers/Navigators, Program Manager, and Support Staff to provide case management, resource linkage, and program coordination, ensuring stability and support for foster children and caregivers.	500,000			
Expense/Equipment/Travel/Supplies/ Other	Program-Related Costs (Essential and Normalcy Needs, Training, Technology, Supplies, Community Outreach & Collaboration, Transportation, and Coalition Building)	500,000			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (m	Total State Funds Requested (must equal total from question #6) 1,000,000				

13. Program Performance

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

The Tri-County Child Welfare Collaborative ensures children in foster care, families, and caregivers in Miami-Dade, Broward, and Palm Beach counties have access to critical resources, case management, and advocacy. Navigators provide immediate support, service coordination, and resource linkage when other agencies lack funding. By filling these gaps, the program removes barriers, enhances stability, strengthens child welfare coordination, and promotes better long-term outcomes for vulnerable youth.



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

The Tri-County Child Welfare Collaborative provides case management, essential resources, and advocacy for foster children in Miami-Dade, Broward, and Palm Beach counties. Navigators will work with judges and CBC staff to ensure children receive necessary services, help families navigate systems, and provide immediate resources like clothing, school supplies, and emergency aid when other agencies lack funding. By removing barriers, strengthening caregiver support, and improving child welfare coordination, this initiative enhances stability and ensures better long-term outcomes.

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

The Tri-County Child Welfare Collaborative will provide direct services to children in foster care and families, including: Case Management & Advocacy: Navigators will work with judges and CBC staff to ensure children receive essential services, Service Navigation: Helping families access programs, reducing delays in care, Immediate Resources: Providing resources and emergency assistance when other agencies lack funding, and Collaboration & Reporting: Partnering with stakeholders to track progress and improve child welfare coordination.

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

The Tri-County Child Welfare Collaborative serves children in foster care and their caregivers across Miami-Dade, Broward, and Palm Beach counties. The program prioritizes children with open and active dependency court cases who require immediate support, case management, and resource navigation. It is expected to serve at least 500 children and families annually, ensuring they receive critical services and stability.

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

The Tri-County Child Welfare Collaborative will enhance stability for foster children by ensuring timely access to essential resources, case management, and advocacy. The program will improve service access by reducing delays, strengthening coordination among judges, CBC staff, and service providers, and filling critical resource gaps when other agencies lack funding. Outcomes will be measured through service tracking, timeliness metrics, caregiver and child impact surveys, stakeholder feedback, and data analysis to monitor trends in accessibility, resource distribution, and overall program impact.

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 without notification of good reason will result in financial penalties as described in the ontract.					
4. 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):					
5. H	as the entity applied for or received federal assistance for this project?					
	Yes, Applied					
	Yes, Received					



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□ No							
	o opply						
☐ No, but intends t							
a. If yes, provide th	e FEMA project worksheet ID#:						
h Provide the total	project cost listed on the FEMA project worksheet:						
b. I Tovide the total	project cost listed on the 1 Lina project worksheet.						
16. Has the entity app	blied for or received state assistance for this project (other than this request)?						
☐ Yes, Applied							
☐ Yes, Received							
□ No							
□ No, but intends t	o apply						
	e program and state agency (ex. Local Government Emergency Bridge Loan, Department of						
Commerce):							
17. Requester Contac	t Information						
a. First Name	Erica Last Name Herman						
b. Organization	Voices for Children						
c. E-mail Address	erica@voicesbroward.org						
d. Phone Number	(954)367-9185 Ext.						
18. Recipient Contact	Information						
a. Organization	Voices for Children						
b. Municipality and County Broward							
c. Organization Type							
□For Profit Entity							
☑Non Profit 501(c)(3)							
□Non Profit 501(c)(4)							
□Local Entity							
□University or College							
☐Other (please s							



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d. First Name	Erica	Last Name	Herman		
e. E-mail Address	erica@voicesbroward.org				
f. Phone Number	(954)367-9185	Ext.			
19. Lobbyist Contact Information					
a. Name	Amy C. Bisceglia				
b. Firm Name	Shumaker Advisors Florida, LLC				
c. E-mail Address	amybisceglia@icloud.com				
d. Phone Number	(813)361-4805				

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