

- 1. Title of Project: Non-Custodial Parent Employment Program
- 2. Senate Sponsor: Darryl Rouson
- **3.** Date of Submission: <u>11/14/2017</u>
- 4. Project/Program Description:

The Non-Custodial Parent Employment Program (NCPEP) assists parents who do not have custody of their children, are unemployed, or underemployed, and are having difficulty meeting their child support obligations, to establish a pattern of child support payments by obtaining and maintaining unsubsidized, competitive employment, to be better parents and help them become self-sufficient.

# 5. State Agency Contacted? Yes

- a. If yes, which state agency? <u>Department of Economic Opportunity</u>
- b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

### 6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
1,916,000		1,916,000

# 7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

# 8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): <u>1,916,000</u>

### 9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? Yes
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)  $\underline{4}$
- c. What is the most recent fiscal year the project was funded?  $\underline{2017-18}$
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?  $\underline{\mbox{No}}$
- e. Complete the following Worksheet.



FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:	1,416,000		1,416,000

### 10. Is future-year funding likely to be requested?

<u>Yes</u>

a. If yes, indicate non-recurring amount per year.

\$500,000.

### **11.** Program Performance:

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

<u>The FY 2018-19 funds will be expended as follows: (a) At least 1,600 clients will be served in Pinellas,</u> <u>Hillsborough, Pasco and Miami-Dade Counties. (b) Standard contract expenses such as: operating costs to</u> <u>include facility rent/lease and to support program activities (mileage, supplies, utilities, etc.); salaries for 30</u> <u>staff: 2 Program Managers (1 Tri-County, 1 Miami-Dade), 4 Team Leaders (1 each at: Pinellas, Pasco,</u> <u>Hillsborough & Miami-Dade Counties), 4 Administrative Assistants (1 per County), 19 Life Coaches (12 Tri-County, 7 Miami) & 1 Director. (c) Supportive Services for client needs (limited), to include transportation, clothing, shoes, driver's license reinstatement, and GED fees, etc.</u>

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

Job development, supervised job search, job placement, case monitoring, educational assessment, educational referrals, vocational assessment, counseling on responsible fatherhood, parenting training, financial literacy training, peer support groups, contingency funds to remove barriers such as: transportation, work attire, vehicle maintenance, personal hygiene, short term trade/skills training: i.e. Construction Trades Helpers, Security Guards, etc. Support service referrals (mediation, substance abuse counseling, etc.)

#### c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☑ Executive Director/Project Head Salary and	Senior Director is responsible for general oversight and	94,608

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coordination of services for	
the program, serves as a	
liaison with the community	
and funders for program and	
will work closely toward	
program growth and fiscal	
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<b>C</b> .	
Within Dude counties.	
QI Specialist ( Responsible for	24,304
conducting internal file review	
to ensure compliance and	
assess quarterly measurement	
outcome achievements.) Grant	
Accountant (Responsible for	
_	
2 Program Managers ( 1 Tri-	1,234,319
County, 1 for Miami)-	
Coordinates and monitors the	
Coaches: (11 Tri-County 6	
Coaches: (11 Tri-County, 6 Miami)Responsible for	
	the program, serves as a liaison with the community and funders for program and will work closely toward 



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	management and support to participants.4 -Team Leaders 1 each at. Pinellas, Hillsborough, Pasco & Miami), Direct day to day support to Life Coaches	
	and services.1-Senior Life Coach. (Miami)4 - Administrative Assistants - 1 per county - Program support.	
☑Expense/Equipment/Travel/Supplies/Other	Operating costs ( mileage, parking, travel, supplies, printing, postage, telephone, Internet, utilities, maintenance, equipment rental/repair, rent, computer licensing, computer supplies, advertising, insurance, employee testing, client needs, indirect cost, career source fee.	537,269
☑Consultants/Contracted Services/Study	Program evaluation, contract workers and contract services	25,500
Fixed Capital Construction/Major Renovation		
□Construction/Renovation/Land/Planning Engineering		
TOTAL		1,916,000

# d. What are the direct services to be provided to citizens by the appropriations project?

<u>Job development, supervised job search, job placement, case monitoring, educational assessments,</u> <u>educational referrals, vocational assessments, counseling on responsible fatherhood, parenting training,</u> <u>financial literacy training, peer support groups, contingency funds for: transportation, work attire, vehicle</u> <u>maintenance, personal hygiene, short term trade/skills training: i.e. Construction trades helpers, security</u> <u>guards, etc. Support service referrals (mediation, substance abuse counseling, etc.).</u>

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



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Low income unemployed or underemployed Non-Custodial parents who are not meeting their child support obligations. The participants must meet: 1. TANF eligibility: The TANF Eligibility Form (AWI WTP 0005(a)) is completed and verified through the Florida System's screens: AIAC (connects NCP with CP), AIAP (connects the NCP with the child), AIID (verifies child is a minor), IQEL (verifies assistance received). 2. Verification of employment (VOE): The employer confirms or signs the internal verification of employment form or a pay stub copy. This VOE is used on initial employment, 90 and 180 days retention, as well as monitoring increases in wages and position upgrades. 3. The child support payments are verified through the County system(www.myfloridacounty.com/child support/index.html) and copies are kept in the file. 4. A copy of any training/certificates are kept in the file.

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

<u>The contractual obligations are: Services Provided – All Counties FY 18-19 – All Counties Client:</u> <u>Enrollments=1,660; 90 days Employment Retention=810; 180 days Employment Retention=540; Upgrade in</u> <u>Position=130; Increase in Wages=324; Child Support Payments=702; Training/Certification=897; Entered</u> <u>Employment=1080. The program's data is recorded in two systems: The state System OSST (One Stop Service</u> <u>Tracking) and Gulf Coast Jewish Family and Community Services' internal system, Avatar. The participants'</u> <u>information and all the backup documentation are scanned into the CareerSource electronic system, Atlas.</u>

- g. 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?
  <u>Suggested penalties to be considered include a repayment of a portion of the funds, proportionate to the shortfall in deliverable.</u>
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity. <u>N/A We do not receive capital outlay funding.</u>

# 13. Requestor Contact Information:

- a. Name: Dr. Sandra E. Braham and CEO
- b. Organization: Gulf Coast Jewish Family and Community Services
- c. Email: <u>Sandra.Braham@gcjfcs.org</u>
- d. Phone Number: (727)479-1865

# 14. Recipient Contact Information:

a. Organization: Gulf Coast Jewish Family and Community Services

**b. County:** Pinellas

# c. Organization Type:

- O For Profit
- ⊙ Non Profit 501(c) (3)
- O Non Profit 501(c) (4)
- O Local Entity
- O University or College



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- O Other (Please specify)
- d. Contact Name: Sylvia Acevedo
- e. E-mail Address: Sylvia.Acevedo@gcfcs.org
- f. Phone Number: (727)479-1858

# 15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: Mark Anderson
- b. Firm: Mark Anderson Consulting
- c. Email: mark@consultanderson.com
- d. Phone Number: (813)205-0658