1. **Title of Project:** Outward Bound
2. **Senate Sponsor:** Audrey Gibson
3. **Date of Submission:** 12/12/2017
4. **Project/Program Description:**
   Outward Bound
5. **State Agency Contacted?** Yes
   a. If yes, which state agency? Department of Juvenile Justice
   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:**

<table>
<thead>
<tr>
<th>Amount Requested for Operations</th>
<th>Amount Requested for Fixed Capital Outlay</th>
<th>Total Amount of Requested State Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>266,000</td>
<td></td>
<td>266,000</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>0</strong></td>
<td><strong>0.0%</strong></td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 266,000

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)
   c. What is the most recent fiscal year the project was funded? 2017-18
   d. Were the funds provided in the most recent fiscal year subsequently vetoed? No
   e. Complete the following Worksheet.

<table>
<thead>
<tr>
<th>FY</th>
<th>Input Prior FY Appropriation for this project for FY 2017-18</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>2017-18</strong></td>
</tr>
</tbody>
</table>
The Florida Senate
Local Funding Initiative Request - Fiscal Year 2018-2019

(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)

<table>
<thead>
<tr>
<th>Column:</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
<td>Prior Year Nonrecurring Funds *</td>
<td>Total Funds Appropriated (Column A + Column B)</td>
</tr>
<tr>
<td>Input Amounts:</td>
<td>200,000</td>
<td>200,000</td>
<td></td>
</tr>
</tbody>
</table>

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

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

$266,000.00

11. Program Performance:

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

The funds will be spent to continue the additional follow-up services for youth in the Outward Bound FINS program, which is a Department of Juvenile Justice prevention program. The funding will allow us to continue extending the follow up services from 20 days to six months and provide additional home visits, school visits, referral services, and support to students and families to ensure that youth remain crime-free.

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

FINS-community programs are broken into two components: Wilderness Expedition and Transition Component. Together, through the use of evidence-based model, youth and family focus on: Individualized & family goal planning, Behavior intervention & management (includes pro-social and life skills focus), Non-therapeutic individual, group, peer and family counseling, School interventions, Family mediations. Youth participate in an intense 20-day wilderness expedition focused on and promoting success-oriented skill-building and mastery in a wilderness setting. This is followed by an intensive minimum 10 week transition to focus on home and school issues. Families can be served up to six months based on need.

c. How will the funds be expended?

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Costs</td>
<td>Executive Director/Project Head Salary and Benefits</td>
<td>15% of allocation of Director's Salary and Benefits</td>
</tr>
</tbody>
</table>
d. What are the direct services to be provided to citizens by the appropriations project?

Serving the at-risk youth in the Children in Need and Families in Need programs.

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

We expect to serve 165 youth. Target population is 12-17 year old youth at-risk of entering the juvenile justice system (as determined by the DJJ Prevention Assessment tool) from the following counties: Monroe, Miami-Dade, Broward, Palm Beach, Brevard, Seminole, Osceola, Orange, Volusia, Flagler, Lake, Polk, St. Johns, Duval. Services are also provided to the parents/guardians of these youth, which benefit the family as a whole, including younger siblings who likely have similar risk factors.

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

Recidivism rates of the served At-Risk population will decrease. Recidivism will be reported in the annual DJJ Comprehensive Accountability Report.

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?

N/A
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.
   N/A

13. Requestor Contact Information:
   a. Name: Rashawn Brewster
   b. Organization: N Carolina Outward Bound School (Mgting entity name per DJJ)
   c. Email: rbrewster@ncobs.org
   d. Phone Number: (828)239-2161

14. Recipient Contact Information:
   a. Organization: N Carolina Outward Bound School (Mgting entity name per DJJ)
   b. County: Brevard, Broward
   c. Organization Type:
      ○ For Profit
      ○ Non Profit 501(c) (3)
      ○ Non Profit 501(c) (4)
      ○ Local Entity
      ○ University or College
      ○ Other (Please specify)
   d. Contact Name: Rashawn Brewster
   e. E-mail Address: rbrewster@ncobs.org
   f. Phone Number: (828)239-2161

15. If there is a registered lobbyist, fill out the lobbyist information below.
   a. Name: Erin Ballas
   b. Firm: Public Affairs Consultants
   c. Email: erinballas@paconsultants.com
   d. Phone Number: (850)728-6387