



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** PARC-Facility and Campus Disaster Preparedness

2. **Senate Sponsor:** Darryl Rouson

3. **Date of Submission:** 12/13/2017

4. **Project/Program Description:**

Hardening & acquisition of emergency preparedness capital infrastructure to ensure asset protection, service delivery and safety to over 600 children and adults with special needs, who live at and/or receive PARC services, and supporting staff during and post severe weather, including hurricane, tornado & other catastrophic events.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?
Executive Office of the Governor

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
	840,000	840,000

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

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	108,220	7.5%
Other	490,789	34.1%
TOTAL	599,009	41.6 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 1,439,009

9. **Previous Year Funding Details:**

- a. Has funding been provided in a previous state budget for this activity? No
- 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?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.



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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:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

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

No

11. Program Performance:

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

Hardening and acquisition of emergency preparedness capital infrastructure to ensure asset protection, service delivery and safety to over 600 children and adults with special needs, who live at and/or receive PARC services. This will ensure the safety of supporting staff during and post severe weather, including hurricane, tornado and other catastrophic events. PARC services, residential campus, and PARC long-term living facilities are all in non-evacuation zones of Pinellas County.

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

Children with disabilities: Children's Early Intervention Services, Art, Music, Physical, Speech and Occupational Therapies, Nursing, Community Outings, Head Start Center, Voluntary Pre-K, After-Care, Family Respite and Support. Safe residence and residential services. Adults with disabilities: Day programs and training that include community engagement, art, music, performing arts, financial literacy, recreation, culinary training toward food-service certifications, gardening/horticulture, behavioral services, and job training and placement. Safe and lovely residences, and residential services. Children & Adults with disabilities: Preparation and service of meals and snacks to those who participate in day programs and for those who live in two on-campus residences.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		



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<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Capital Assets and required engineering including general contractor: Replace a 26,000 sqft 60+ year roof, ensure continuity of power, climate control and through availability of generators, fuel tank for generators, data backup appliance, portable A/C, battery UPS, redundant lines, hot spots, router, and remote control access.	840,000
TOTAL		840,000

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

School readiness, developmental growth, opportunities for independent living and to reach potential, literacy, family support, and job development and placement. Full service day solutions for participants and their families, and community engagement for people with developmental disabilities. Full service solutions that allow families to engage, and also to maintain their own employment, nurturing of self, and other family members providing support that aids in keeping families intact.

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

Adults and children with disabilities - >800.

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



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The safe continuation of services to adults and children with disabilities during a storm event which includes therapy and nursing services. All programs are tracked and graphed and regular meetings are held with individuals and their supports to analyze progress results.

- 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?**

Reversion of funding.

- 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.**

PARC is a 501c3 which owns the facility.

- 13. Requestor Contact Information:**

- a. **Name:** Karen Higgins
- b. **Organization:** Parc, Inc.
- c. **Email:** khiggins@parc-fl.org
- d. **Phone Number:** (727)341-6919

- 14. Recipient Contact Information:**

- a. **Organization:** Parc, Inc.
- b. **County:** Pinellas
- 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:** David Lehman
- e. **E-mail Address:** diehman@parc-fl.org
- f. **Phone Number:** (727)410-0393

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

- a. **Name:** Laura Boehmer
- b. **Firm:** Southern Strategy Group
- c. **Email:** boehmer@sostrategy.com
- d. **Phone Number:** (727)686-0924