

LFIR # 1872

Date of Request	12/05/2019							
Project/Program	-							
-	tion for Children with Hearing Loss rices to children birth to three, with as.	_		_	_			
State Agency to	receive requested funds tacted? • Yes O No		artment of Hea	lth				
	onrecurring Request for F	iscal	Year 2020-202	21				
Type of Fundin	9			5.000				
Operations			87	5,000				
Fixed Capital Ou	ıtlav							
Total State Fun	•		87	5,000				
Total State Fun	•	21 (inc		5,000	nds ava	ilable	for this pro	oject)
Total State Fun	ds Requested	21 (inc		5,000	nds ava		for this pro	oject)
Total State Fun otal Project Cos Type of Funding Total State Fund	ds Requested st for Fiscal Year 2020-202 g s Requested (from question		cluding match	5,000	Percer		for this pro	oject)
Total State Fun Total Project Cos Type of Funding Total State Fund Matching Funds	ds Requested st for Fiscal Year 2020-202 g s Requested (from question		cluding match	5,000 ning fu 75000	Percer	ntage	for this pr	oject)
Total State Fundation Type of Funding Total State Fundation Matching Funds Federal	ds Requested et for Fiscal Year 2020-202 g ls Requested (from questions	n #6)	cluding match	5,000 ning fu 75000	Percer	0 %	for this pr	oject)
Total State Fundation Total Project Cos Type of Funding Total State Fundation Matching Funds Federal State (excluding	ds Requested st for Fiscal Year 2020-202 g s Requested (from question	n #6)	cluding match	5,000 ning fu 75000 00	Percer	0 %	for this pro	oject)
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875,000

If yes, indicate nonrecurring amount per year.



LFIR # 1872

10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Project Head will oversee grant activities throughout Florida with collaborative partners as well as provide direct services. A significant portion of this individual's time and a commensurate portion of salary will be assigned to this program.	20,000
Other Salary and Benefits	Staff will compile data, coordinate services for families, schedule appointments, assist with enrollment, and reports.	10,000
Expense/Equipment/ Travel/Supplies/Other	Supplies required include office supplies, workshop materials, and printing supplies as well as travel among grant sites throughout Florida.	5,000
Consultants/Contracted Services/Study	Consultants and contracted staff are required to compile and review outcome data.	5,000
Operational Costs: Oth	ner	
Salary and Benefits	The program will require early intervention faculty and OAE trained screeners and therapists including speech-language pathologists, teachers of the deaf, and audiologists with listening and spoken language expertise to provide direct services to infants, toddlers, and their families.	815,000
Expense/Equipment/ Travel/Supplies/Other	To provide services to children in rural areas, funding is required for providers to travel to meet with families and other providers who are working with the families. In addition, natural environment services require providers to travel to meet the needs of families to provide services. Supplies required include early intervention, therapy, and hearing screening materials.	20,000
Consultants/Contracted Services/Study		
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning Engineering		
Total State Funds Re	equested (must equal total from question #6)	875,000



LFIR # 1872

1	1		Pro	gram	Perf	orm	ance
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	What specific purpose or goal will be achieved by the funds requested?
	The goal of the program is to expand access to audiology services and screenings in rural and underserved areas, and to provide local access to high-quality auditory-oral early intervention services for children who are deaf ages birth to three who reside in the State of Florida to facilitate the development of foundational listening and spoken language skills so that every child with hearing loss has the opportunity to learn, listen, and talk.
).	What activities and services will be provided to meet the intended purpose of these funds?
	Activities and services that will be provided for eligible children will include hearing screenings, evaluations, auditory-verbal and LSLS therapy, parent-infant and toddler groups, and tele-therapy, as well as parent/professional training and mentoring about listening and spoken language development and technology such as cochlear implants and hearing aids.
) .	What direct services will be provided to citizens by the appropriation project?
	Direct services will be provided by audiologists, hearing screeners SLP's and highly qualified Listening and Spoken Language Specialists to children with hearing loss ages birth to three in individual and small group listening and spoken language sessions, toddler groups, tele-therapy sessions, hearing screenings, evaluations, and parent/professional training and coaching sessions.
	Who is the target population served by this project? How many individuals are expected to be served?
	Up to 900 children who are deaf or hard of hearing ages birth to three whose families want an auditory oral approach to learning.
.	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
	The program will provide families of infants and toddlers with hearing loss access to auditory oral intervention programs. Services will be offered throughout Florida, including rural and underserved areas, so that these children will have the opportunity to begin to learn listening and spoken language skills as soon as their hearing loss is identified. Formal evaluations will be used to document progress IFSP goals and progress in auditory, speech, and language development. Parent surveys will be used to evaluate the overall program. Key components of the program are the mentoring and training of professionals working with children with hearing loss as well as parent coaching so that the parents will become the primary facilitators of their child's auditory, speech, and language development.
	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?
	We will experience a loss of funding.



LFIR # 1872

No	o fixed capital outla	y.					
Re	equestor Contact	t Information					
а.	First Name	Terri	Last Name	Fisk			
٥.	Organization	Florida Coalition for Spoken Lang	uage Options	S			
Э.	E-mail Address	tfisk@deafkidscan.org					
d.	Phone Number	(706)941-2194	Ext.				
Re	ecipient Contact	Information					
а.	Organization	Sertoma Speech & Hearing Foun	dation of Flor	rida, Inc.			
ο.	Municipality and	County Statewide					
Э.	Organization Typ	pe					
	O For-profit E	ntity					
	Non-Profit 5	501(c) (3)					
	O Non-Profit 5	501(c) (4)					
	Cocal Entity	1					
	University of the control of the	ity or College					
	Other (please specify)						
d.	First Name	Debra	Last Name	e Golinski			
Э.	E-mail Address	debra@familyhearinghelp.org					
	Phone Number						
Lo	obbyist Contact I	nformation					
a.	Name	Theresa Bulger					
b.	Firm Name	Florida Coalition for Spoken Language Options					
c.	E-mail Address	bulger12@yahoo.com					
d	Phone Number	(904)8809063	Ext.				