



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2947

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Amigos Care Program will provide at-risk families and youth individualized care coordination that addresses complex family needs to bolster protective factors that prevent child abuse and neglect. Through a wide network of partners, the program provides families with referrals and coordination of needed services as well as concrete supports to stabilize families experiencing a lack of basic needs like threat of eviction, termination of utilities, food insecurity, and job loss.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	200,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>200,000</b>

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	200,000	40%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	300,000	60%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>500,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

The program will continue to operate with local funding and with private foundation funding on a smaller scale. This funding request is to expand an existing program to address growing community needs.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



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If yes, indicate the amount of funds received and what the funds were used for.

PPP Loan of \$121,000. The funds were used to offset funding losses due to the pandemic and were used to cover personnel and overhead costs of the organization not covered by other funding sources to ensure continuity of services.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

- Planning   
  Design   
  Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits	Indirect Costs Based on 50% of Direct Salaries X \$49,000	49,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	1 FT Associate Director of Family Services - @ 25% \$21,125 (salary + fringe) 1 FT Family Success Coach - @ 100% \$58,500 (salary + fringe) 1 FT Natural Helper - @ 100% \$52,000 (salary + fringe)	131,625
Expense/Equipment/Travel/Supplies/Other	2 Laptops \$1,600 Travel \$1,000 Program Supplies \$1,000 Other - Family Stabilization Funds for direct assistance \$15,775 - Funds will used as needed to prevent evictions, shut off of utilities, food needs, etc)	19,375
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>200,000</b>

### 14. Program Performance



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

The Amigos Care Program will provide at-risk families and youth individualized care coordination that addresses complex family needs to bolster protective factors that prevent child abuse and neglect. Through a wide network of partners, the program provides families with referrals and coordination of needed services as well as concrete supports to stabilize families experiencing a lack of basic needs like threat of eviction, termination of utilities, food insecurity, and job loss.

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

Identified at-risk families residing in Miami-Dade County will work with a Family Success Coach (FSC). Families will be screened and assessed to identify specific areas of need and will work collaboratively with the FSC to develop a care plan to address needs. The FSC will coordinate care within the partner network and will provide emergency assistance to stabilize families when needed.

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

Screening & Assessment  
 Care Planning  
 Care Coordination  
 Family Stabilization Funds during emergencies

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

The Amigos Care Program will serve at-risk neighborhoods within Miami Dade County: Allapattah, Little Havana, Hialeah, Homestead, and North Miami. In April 2021, "Financial Insecurity in Miami-Dade County" was published to determine which age demographic is most impacted by poverty in Miami-Dade County. According to this study, children between the ages of 0-18 are the most impacted and experience the most severe levels of poverty in the County. The identified neighborhoods all share community risk factors, such as high percentages of children below the poverty line, high crime, and lack of economic opportunity, which negatively influence family stressors. The Amigos Care Program will serve approximately 100 additional families with the requested funding.

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

This intervention will result in the strengthening of Protective Factors to Prevent Child Abuse and Neglect. This will be assessed with pre- and post-test scores on The Parents' Assessment of Protective Factors (PAPF) and the Child and Adolescent Needs and Strengths (CANS). Subscale scores on each of the measures assessing protective factors of parental resilience, social connections, concrete support in times of need, social-emotional competence of children, will show improvement. At least one Success Plan goal will be attained.

**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 the contract?**

Standard contract penalties.

**15. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**16. Recipient Contact Information**

**a. Organization**

**b. Municipality and County**



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#### c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number