



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Mary Welsh Foundation Therapeutic Home for Girls

2. **Senate Sponsor:** Darryl Rouson

3. **Date of Submission:** 01/09/2018

4. **Project/Program Description:**

The goal is to help six girls recover from their severe sexual abuse and torture through around the clock help and assistance. They will learn to live in a home where they can feel safe, allowing them to become healthy productive members of society.

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?
Department of Children and Families

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
113,710	90,000	203,710

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	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):** 203,710

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?

Yes

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

113,270

11. Program Performance:

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

Therapeutic care for girls who are victims of trafficking and abuse services. Services will be provided 24 hours a day, 7 days a week.

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

These girls will attend virtual classrooms until they can demonstrate healthy social skills for transitioning to traditional classrooms. Treatment plans will include measurable social reconditioning.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Executive Director	50,000
<input checked="" type="checkbox"/> Other Salary and Benefits	Health Insurance	6,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Office furniture \$1,200; Living room furniture \$1,500; TV/Kitchen appliances \$3,500; 6 Bedroom sets and chairs \$3,100; Other expenses \$3,500	12,800



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<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Internet and Air conditioning unit	6,440
Operational Costs		
<input checked="" type="checkbox"/> Salary and Benefits	Full-time cook / part-time cook	33,500
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Medical exam table, dental chair and equipment, 4 computers	4,970
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Prefabricated home with 5 bedrooms. 4 Bedrooms to be used by the girls and the large master to be converted into a medical office for mental healthcounseling, dental and pediatric exams.	90,000
TOTAL		203,710

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

Therapeutic care for girls who are victims of trafficking and abuse, mental, Treatment plans will measure the improvement of the lack of emotional regulation and the reconditioning of behavior and appropriate socialization skills.

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

6 victims of trafficking and abuse. At-risk youth.

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

Therapeutic care for girls who are victims of trafficking and abuse.

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?

Terminate contract.

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.

The Mary Welsh Foundation will own property.



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13. Requestor Contact Information:

- a. **Name:** Robin Foster
- b. **Organization:** Mary Welsh Foundation
- c. **Email:** marywelshfoundation@gmail.com
- d. **Phone Number:** (813)442-7505

14. Recipient Contact Information:

- a. **Organization:** Mary Welsh Foundation
- b. **County:** Hillsborough
- 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:** Robin Foster
- e. **E-mail Address:** marywelshfoundation@gmail.com
- f. **Phone Number:** (813)442-7505

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

- a. **Name:** None
- b. **Firm:** None
- c. **Email:**
- d. **Phone Number:**