1. **Title of Project:** Hendry County Sheriff’s Office - Child Protective Investigations
2. **Senate Sponsor:** Kathleen Passidomo
3. **Date of Submission:** 01/08/2019
4. **Project/Program Description:**
   To transfer responsibilities of child protective investigations from the Department of Children and Families to the Hendry County Sheriff’s Office for Hendry and Glades Counties.
5. **State Agency to receive requested funds:** Department of Children and Families

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td>1,125,746</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td></td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td><strong>1,125,746</strong></td>
</tr>
</tbody>
</table>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>1,125,746</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td><strong>1,125,746</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

8. **Has this project previously received state funding?** No

8. **Details on how the requested state funds will be expended**

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative Costs:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Executive Director/Project Head Salary and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
11. Program Performance:

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

To transfer the responsibilities of Child Protective Investigations from the Department of Children and Families to the Hendry County Sheriff’s Office.

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

Hendry County Sheriff’s Office will assume responsibilities of Child Protective Services under the umbrella of a State of Florida Accredited law enforcement agency. This transfer of responsibilities will provide the citizens of Hendry and Glades County a greater amount of accountability and transparency in child protective investigations.

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

To investigate and protect children from abuse, neglect, and abandonment. The Hendry County Sheriff's Office will continue to educate the general public on issues of abuse, neglect and abandonment, and to improve physical and mental health within our communities.

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

The target population consists of the residents of Hendry and Glades Counties which consists of a combined population of over fifty-thousand (50,000) residents.

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

The expected outcome and or benefit is to have greater accountability when it comes to child protection and reduce the amount of abuse, neglect, and abandonment through education, investigation and community outreach programs. The Hendry County Sheriff’s Office will be transparent and will maintain quality assurance set out and agreed upon by the Department and Hendry County Sheriff's Office.

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 in the contract?
Denial of future 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.

N/A

13. Requestor Contact Information:
   a. **Name:** Steve Whidden
   b. **Organization:** Hendry County Sheriff's Office
   c. **E-mail Address:** swhidden@hendrysheriff.org
   d. **Phone Number:** (863)674-5603 Ext. 5600

14. Recipient Contact Information:
   a. **Organization:** Hendry County Sheriff's Office
   b. **County:** Glades, Hendry
   c. **Organization Type:**
      - For Profit
      - Non Profit 501(c) (3)
      - Non Profit 501(c) (4)
      - Local Entity
      - University or College
      - Other (Please specify) Government
   d. **Contact Name:** Michael Rowan
   e. **E-mail Address:** mrowan@hendrysheriff.org
   f. **Phone Number:** (863)674-5600

15. Lobbyist Contact Information
   a. **Name:** None
   b. **Firm Name:** None
   c. **E-mail Address:**
   d. **Phone Number:**