



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1114

1. **Title of Project:** Urban Communities Child Welfare Initiative

2. **Senate Sponsor:** Dennis Baxley

3. **Date of Submission:** 01/18/2019

4. **Project/Program Description:**

Foster Care Home Capacity Development & Direct Services for Youth Aging out of Foster Care.

5. **State Agency to receive requested funds :** Department of Children and Families

State Agency Contacted? Yes

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

Type of Funding	Amount
Operations	422,500
Fixed Capital Outlay	
Total State Funds Requested	422,500

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

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	422,500	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	422,500	100.0%

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

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

9. **Is future-year funding likely to be requested?** Yes

a. If yes, indicate non-recurring amount per year. \$422,500

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Executive Director responsible for organizational leadership, as well as long range strategic plan development and implementation	50,000



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	in concurrence with agency's mission of quality services.	
Other Salary and Benefits	Supervisory support leadership will provide direct supervision of direct service staff inclusive of clerical support that will perform office admin duties.	75,000
Expense/Equipment/Travel/Supplies/Other	Appropriation resources will be utilized for expense equipment, travel and supplies critical to accomplishing essential service delivery in the administration of achieving measurable outcomes.	7,500
Consultants/Contracted Services/Study	Appropriation funding will be utilized in the administration and fidelity of contracted services as a cost effective alternative to the expending limited resources in administering the mandatory state regulatory contract obligations.	40,000
Operational Costs:		
Salary and Benefits	In an effort to maximize limited resources if appropriation request is approved, none of the funds will be utilized for salary or benefits.	0
Expense/Equipment/Travel/Supplies/Other	Appropriation resources will be utilized for expense equipment, travel and supplies critical to accomplishing essential service delivery in the administration of achieving measurable outcomes.	175,000
Consultants/Contracted Services/Study	Appropriation funding will be utilized in the category of contracted services as a cost effective alternative to expending limited resources in the delivery of human resources services, thus increasing the number of recipient services.	75,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		422,500

11. Program Performance:

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

The specific measurable goals will be to increase foster care home capacity in urban communities and to improve outcomes of teenage children aging out of the child welfare system which will provide improved interventions to prevent delinquency involvement of dependent youth residing in a high prevalence of slum & blighted communities.

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

Community development capacity of eligible foster homes and community based capacity to provide supports of job development, mentoring, internships, delinquency interventions and a respite judicial bridge for "Lock Out" dependency/delinquency cases for youth aging out of child welfare.

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



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Services will include direct and collateral youth case load management, interventions and preventive support as well as foster care home capacity development. Educational and counseling services will be administered based upon individual needs assessment as well as foster case asset and risk management reviews.

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

The target population are dependent youth ages 15 to 18 years old. 150 youth will be served annually.

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

The measurable outcome benefit will be assessed based on an analysis of increased foster care capacity, aggregated grades, behavior and attendance, job readiness and training outcomes.

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?

Graduated prorated contract reduction amount based on factors directly related to provider deliverables performance.

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:** Rod Love
- b. **Organization:** Florida Economic Consortium, Inc.
- c. **E-mail Address:** comsg@comsg.net
- d. **Phone Number:** (407)925-1077

14. Recipient Contact Information:

- a. **Organization:** Florida Economic Consortium, Inc.
- b. **County:** Orange
- 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:** Rod Love
- e. **E-mail Address:** comsg@comsg.net
- f. **Phone Number:** (407)925-1077



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15. Lobbyist Contact Information

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