

LFIR # 1397

1.	Project Title	Nassau County Youth Alternative to Secured Detention (S.W.E.A.T.)								
2.	Senate Sponsor	Aaron Bean								
3.	Date of Request	02/04/2021								
4.	Project/Program De	escription								
	A youth intervention program that meets the targeted needs of Nassau County Youth by providing effective diversion and intervention programs which include redirection of youth through community service, mentoring and academic assistance prevent juvenile delinquency. Program services will be provided to youth who are identified as at-risk of becoming involved in the juvenile justice system and are between the ages of six and eighteen years.									
5.	State Agency to red	ceive requested fu	n <b>ds</b> Depa	rtmer	nt of Juvenile Justice					
	State Agency conta	acted? Yes								
<b>6.</b> .	Amount of the Non	recurring Request	for Fiscal Yea	ar 202	21-2022					
	Type of Funding				Amo	ount				
	Operations					110,000				
	Fixed Capital Outlay	1				0				
	Total State Funds I	Requested				110,000				
7.	Total Project Cost f	or Fiscal Year 202	1-2022 (includ	ling r	matching funds ava	ilable for this proj	ect)			
	Type of Funding				Amount	Percentage				
	Total State Funds R	equested (from que	stion #6)		110,000	100%				
	Matching Funds	ds			T					
	Federal	ederal			0	0%				
	State (excluding the	amount of this requ	est)		0	0%				
	Local				0	0%				
	Other				0	0%				
	Total Project Costs	s for Fiscal Year 20	21-2022		110,000	100%				
8.	Has this project pro	eviously received s	state funding?	?	Yes					
	Fiscal Year	Amo	unt		Specific	Vetoed				
	(уууу-уу)	Recurring	Nonrecurri	ng	Appropriation #					
	2020-21	0	110	0,000	1196	No				
9. Is future funding likely to be requested?  Yes										
a. If yes, indicate nonrecurring amount per year.					110,000					
b. Describe the source of funding that can be used in lieu of state funding.										
County budget										
				, .			40			
10	Yes Indicate the			-	eral assistance rela		19 pandemic?			



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\$15,300,000 used for small business and mortgage/rental assistance. Local entity assistance for municipality, school board and county. Funds were not eligible or this project request.

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

Spending Category	Description	Amount				
Administrative Costs:						
Executive Director/Project Head Salary and Benefits		0				
Other Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other		0				
Consultants/Contracted Services/Study		0				
Operational Costs: Other						
Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other		0				
Consultants/Contracted Services/Study	Contracted services for administering the SWEAT events and mentoring/tutoring services.	110,000				
Fixed Capital Construction/Majo	r Renovation:					
Construction/Renovation/Land/ Planning Engineering		0				
Total State Funds Requested (must equal total from question #6) 110,000						

### 12. Program Performance

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

For effective diversion and intervention programs which includes redirection of youth through community service, mentoring and academic assistance to prevent juvenile delinquency.

The County will contract directly with a program director, a mentoring and tutoring service provider, and the Nassau County Sheriff's Office for administering community service.

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

Divert from criminal/juvenile justice system - redirection of youth through community service, mentoring and tutoring resulting in behavior improvement through youth intervention.

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

The SWEAT Program is designed to redirect "at-risk" youth by way of community service, mentoring and academic assistance in attempt to reduce juvenile delinquency rates. The SWEAT Program formalizes a mentoring system with the additional ability to hire tutors from the local school system for the youth. It also provides a "sweat" component in which the youth participate in stents of physical labor rather than spending time in detention. The tutoring and mentoring component combined with the "sweat" component, provide the necessary tools to break some of the generational cycles of poverty, dysfunction and lack of education while promoting self-esteem, improving life skills as well as leadership and professional skills and reducing or preventing truancy and substance abuse.

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

At-risk youth. Based on probable at-risk youth numbers in Nassau County we expect to serve between 60-100 at-risk youth.

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

Redirection from ciminal activity and improved behavior.



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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?

Return of appropriated Funds
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.

N/A



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14.	14. Requestor Contact Information							
	a. First Name	Taco		Last Name	Pope			
	b. Organization	Nassau County Board of County Commissioners						
	c. E-mail Address	tpope@nassaucountyfl.com						
	d. Phone Number	(904)530-6010 <b>E</b> x						
15.	Recipient Contact	Informatio	on					
a. Organization  Nassau County Board of County Commissioners								
b. Municipality and County Nassau								
	c. Organization Type							
	□For Profit Entity							
	□Non Profit 501(c)(3)							
	□Non Profit 501(c	ofit 501(c)(4)						
	☑Local Entity							
	□University or Co	r College						
	□Other (please specify)							
	d. First Name	Taco		Last Name	Pope			
	e. E-mail Address	s tpope@nassaucountyfl.com						
	f. Phone Number	(904)530-6010						
16.	16. Lobbyist Contact Information							
	a. Name	Mark W. Anderson						
	b. Firm Name	Mark W. Anderson						
	c. E-mail Address	Mark@ConsultAnderson.com						
	d. Phone Number	(813)205-0658						