



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 1669

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

To Build a State of The Art "Commercial Culinary Kitchen" for the purpose of training adults with Autism and other unique abilities. Approximately 1,250 sq. ft., ADA compliant, with professional equipment, inclusive of commercial dish washing and drying machines, and multiple food preparation and prepping machinery. This will allow our agency to continue to operate ADE, Inc. acclaimed Culinary Arts Program, which has been operating for over 8 years. Including Baking/Restaurant Maintenance/Employability Skills Training, providing adults with Autism and Developmental Disabilities a path of future employment in respective fields. This funding has a direct correlation to education and employment.

5. **State Agency to receive requested funds**

**State Agency contacted?**

6. **Amount of the Nonrecurring Request for Fiscal Year 2022-2023**

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	350,000
<b>Total State Funds Requested</b>	<b>350,000</b>

7. **Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	350,000	70%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	150,000	30%
<b>Total Project Costs for Fiscal Year 2022-2023</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.**

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



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Yes

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

Yes, our agency received \$311,000 PPP funds. ADE, Inc, in business for 47 years offering services to Adults with Developmental Disabilities, suffered severe losses through Covid, we downsided over 35% of our staff, and closed two of our centers. All the PPP funds was used for retaining valuable staff.

**11. 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	CEO, Administration % of project= \$,4,000 COO, Administration % of project= \$2,000	6,000
Other Salary and Benefits	Fiscal Department % of project related fiscal responsibilities= \$ 8,000	8,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Environmental Study = \$10,000 Building permit and Impact Fees= \$25,000	35,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Overall estimated project cost @ \$400 per square feet	301,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>350,000</b>

**12. Program Performance**

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

Our goal is to build a State of the Art Commercial Training Kitchen to operate our existing culinary program, which is presently operating out of a kitchen we have out-grown, and is no longer reflective of commercial equipment universally used. ADE's acclaimed Culinary Training Program has been operational since 2012. This exemplary program provides Culinary Training, Baking-Restaurant Maintenance Skills, and Employment Training to Adults with Autism and Developmental Disabilities. The special appropriation will enhance the knowledge in the field for hundreds of students to come, and will provide a path to Employment.

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

Our Total Appropriation request is \$350,000 for the 2022 budget year, it will be a ONE TIME ASK. These funds will afford the Construction of a 1,250 sq. ft., State of the Art "Commercial Training Kitchen", ADA compliant, to train adults with Autism and other unique abilities. The knowledge gained in Culinary Arts, Baking, and Restaurant Maintenance will empower our students, creating a path towards economic self-sufficiency, and a better quality of life for our consumers with unique abilities.

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



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The Construction of a New Commercial Training Kitchen for adults with Autism, and other disabilities, will enhance the quality of training, and knowledge in the field in areas such as: Culinary Arts, Baking, and Restaurant Maintenance, will include Recruitment and Skills Assessment, Employment Training. Examples: Measurements, Food Groups, Kitchen Equipment and Tools, Healthy Eating Principles, Cooking on a Budget, Grocery Shopping in Bulk, Food Storage Methods, Kitchen Safety and Cleanliness, Refrigerate and Freeze Food Rules, and multiple other related skills. Chef Instructors, will guide our students in preparation of dishes that are integrated into our curriculum by Themes, such as: Foods of the World, Food prepared for Special Occasions, Savory vs. Sweet, the South Florida melting pot dishes, Quick 15/30 minute meals, Sandwich and Salad Prep, Breakfast/Lunch/Dinner Favorites, etc. Employability Skills are incorporated in the curriculum.

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

The students/consumers will be 21 and older, with Autism and or other developmental disabilities, 90% of consumers are from low income homes.

The Culinary Arts Program will serve a minimum of 30 adults with developmental disabilities, with the necessary abilities and behaviors to be able to manage a high risk kitchen environment.

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

The Culinary Program trains our special population in multiple areas within the culinary field. Covering from a sophisticated to a more remedial curriculum, so all individual levels of consumers may benefit from these courses. This will create a path towards economic self-sufficiency in the field of Culinary Services to all consumers, comprising from chef assistant to restaurant maintenance.

ADE will be monitoring the progress via assessment data taken 3 times a week, and a Monthly Summary, as well as developing the goals yearly in the Individual Program Plan for both Culinary and Silver Program. Monitored by The Agency for Persons with Disabilities. Other General Services: Educational Coordination, Case Management, Crisis Management, and Transportation.

**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?**

ADE, Inc. commits to presenting DOE with clear outcomes and quantifiable deliverable goals and objectives that clearly define our services commitment to the programs that will be funded by this Special Appropriation. Should ADE not be able to fully comply with its target goals we will accept penalty by reduction of funding, quantifiable to the percentage of the unmet goal. ADE also commits to spend all funds allotted. We have a history of not allowing lapse of funding. We realize how valuable this funding is, and it is our objective to use it to the maximum in order to serve the needs of the vulnerable population we serve, Adults with Autism and Developmental Disabilities.

**13. 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.**

The Association for the Development of the Exceptional



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#### 14. Requestor Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 15. Recipient Contact Information

a. Organization

b. Municipality and County

#### 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

#### 16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number