

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

One More Child - Single Moms Program

Kelli Stargel

12/14/2021

LFIR # 1851

families together to negative economic factors approach and Provides direct care residential clients a	nd 11-week curriculu	the foster care The prevention practices to pro moms and theil am for non-resid	systen pro moten child dentia	em and therefore avo gram, to include com healthy family funct dren. Services includ al program, life skills	oid the trauma of fan Inmunity education, ui Ioning and economi Ie secure housing, 1	nily separation and utilizes a protective c self sufficiency. 12-month curriculum for
classes, educationa 5. State Agency to re	al classes, and nutriti			n. ent of Children and F	amilies	
State Agency cont	<u>.</u>	Борс	artirio	THE OF CHILDREN AND THE	arrimoo	
6. Amount of the Nor		for Fiscal Yea	ır 202	2-2023		
Type of Funding				Amo	unt	
Operations					380,000	
Fixed Capital Outla	у				0	
Total State Funds	Requested				380,000	
7. Total Project Cost	for Fiscal Year 202	2-2023 (includ	ling n	natching funds ava	ilable for this proje	ect)
Type of Funding				Amount	Percentage	
Total State Funds F	Requested (from que	stion #6)		380,000	43%	
Matching Funds			ı			
Federal				0	0%	
State (excluding the	State (excluding the amount of this request)			0	0%	
Local				0	0%	
Other				500,000	57%	
Total Project Cost	s for Fiscal Year 20	22-2023		880,000	100%	
8. Has this project pr	reviously received	state funding?	?	Yes		
Fiscal Year (yyyy-yy)	Amo Recurring	ount Nonrecurrir	ng	Specific Appropriation #	Vetoed	
2021-22	0		,000	310A	No	
9. Is future funding li	ikely to be requeste			Yes		
a. If yes, indicate nonrecurring amount per year.				380,000		
b. Describe the so	ource of funding that	nt can be used	in lie	eu of state funding.		
Philanthropic.						
10. Has the entity red	questing this projec	ct received any	y fed	eral assistance rela	nted 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.

\$1,919,162 for Paycheck Protection Program (PPP).

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Salary and benefits for Executive Director.	44,530
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Office equipment, supplies and travel.	12,490
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Salaries and benefits for direct care staff.	90,434
Expense/Equipment/Travel/Supplies/ Other	Direct care services for single moms and their children that provides 12-month curriculum for residential clients and 11-week curriculum for nonresidential program, life skills training, job skills training, parenting classes, educational classes, and nutritious meal preparation, including secure housing.	232,546
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	380,000

12. Program Performance

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

Expand and increase residential and non-residential capacity for a prevention centric program that is designed to keep families together to avoid entrance into the foster care system and therefore avoid the trauma of family separation and negative economic impacts to the state. The prevention program, to include community education, utilizes a protective factors approach and trauma informed practices to promote healthy family functioning and economic self sufficiency.

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

Support, counseling, education, case management, vocational skills/educational, residential care.

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

Provide direct care services for single moms and their children. Services include secure housing, 12-month curriculum for residential clients and 11-week curriculum for non-residential program, life skills training, job skills training, parenting classes, educational classes, and nutritious meal preparation.

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

Persons with poor mental health, jobless persons, economically disadvantaged persons, at-risk youth, homeless, preschool students, grade school students, high school students, University/college students, currently or formerly incarcerated persons, victims of crime and struggling single mothers with children. The project is expected to serve 201-400 individuals.

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



Repayment of funds.

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Improve physical health-Bio-Psycho Assessment well being - Plan of Service goals Quality of Life Inventory. Improve mental health-Quality of Life Inventory Protective Factors Survey -Plan of Service Incident Reports. Improve quality of

	acation-Plans of Service Life Skills Training Vocational Counseling Quality of Life Inventory. Improve transportation
	nditions-Individualized Plan of Services goals established at admission, evaluated monthly and at program completion.
Inc	rease/improve economic activity-Plan of Services goals, monthly budget meetings, savings account. Create immediate
job	opportunities-Plan of Services goals, monthly meetings with counseling guidance. Reduce recidivism-Individualized
Pla	in of Services goals established at admission, tracked per incident reporting and data base. Reduce substance abuse-
	n of Service goals, counseling, guidance and supervision via documentation. Divert from Criminal/juvenile justice
Зуз	item.
f W	hat are the suggested penalties that the contracting agency may consider in addition to its standard penalties

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.
	N/Δ

for failing to meet deliverables or performance measures provided for the contract?



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14.	14. Requestor Contact Information						
	a. First Name	Jerry T.		Last Name	Haag		
	b. Organization	One More Child					
	c. E-mail Address	Jerry.Haag@onemorechild.org					
	d. Phone Number	(863)687-8811 Ext .					
15.	15. Recipient Contact Information						
	a. Organization	One More Child					
	b. Municipality and County Statewide						
	c. Organization Type						
	□For Profit Entity						
	☑Non Profit 501(d	2)(3)					
	□Non Profit 501(c	2)(4)					
	□Local Entity						
	□University or Co	niversity or College					
	□Other (please sp	ecify)					
	d. First Name	Melissa		Last Name	Poole		
	e. E-mail Address	Melissa.Poole@onemorechild.org					
	f. Phone Number						
16.	16. Lobbyist Contact Information						
	a. Name	Jon E. Johnson					
	b. Firm Name	Johnson & Blanton					
	c. E-mail Address	cheryl@johnsonblanton.com					
	d. Phone Number	(850)224-1900					