

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

All Star Children's Foundation, Inc.

Joe Gruters

11/08/2021

LFIR # 1955

| | innovation, science, and research center parents and children professionals, in ad- authorization that th | r, along with 6 single n on campus receive dition to other servic e funding provided t ncluding all overhea | SCF's Campus -family foster h comprehensiv es more specifi o All Star shall | of H ome: e sup cally be fo | lope and Healing inc s, a clubhouse, two pportive mental heal described below. It or all legitimate expe | ludes a pediatric me playgrounds, and otl th services from a te is the intention of thi nses incurred by All | ental health treatment her amenities. Foster eam of trauma-informed is appropriation Star as authorized by | |
|--|---|---|---|---|--|--|--|--|
| 5. | State Agency to re | ceive requested fu | nds Depa | rtme | ent of Children and F | amilies | | |
| | State Agency conta | acted? Yes | | | | | | |
| 6. / | Amount of the Non | recurring Request | for Fiscal Yea | r 202 | 22-2023 | | | |
| | Type of Funding | | | | Amount 1,250,000 | | | |
| | Operations | | | | | | | |
| | Fixed Capital Outlay | У | | | | 0 | | |
| | Total State Funds | Requested | | | | 1,250,000 | | |
| 7. | Total Project Cost t | for Fiscal Year 2022 | 2-2023 (includi | ing n | | | ect) | |
| | Type of Funding | | | | Amount | Percentage | | |
| | | Requested (from que | stion #6) | | 1,250,000 | 38% | | |
| Matching Funds | | | | | | | | |
| | Federal | | | | 0 | 0% | | |
| | • | amount of this requ | est) | | 0 | 0% | | |
| | Local | | | | 1,000,000 | 31% | | |
| | Other | | | | 1,000,000 31% | | | |
| | Total Project Costs | s for Fiscal Year 20 | 22-2023 | | 3,250,000 | 100% | | |
| 8. | Has this project pr | eviously received s | state funding? | | Yes | | | |
| | Fiscal Year | Amount | | | Specific | Vetoed | | |
| | (уууу-уу) | Recurring | Nonrecurrin | _ | Appropriation # | | | |
| | 2021-22 | 0 | 250, | 000 | 310A | No | | |
| 9. | 9. Is future funding likely to be requested? | | | [| No | | | |
| 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.

\$142,262 Payroll Protection Program Loan received 04/28/2020 and \$254,075 Payroll Protection Program Loan received 07/14/2021. Funds were used to cover payroll expenses.

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

| Spending Category | Description | Amount |
|---|---|-----------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | Chief Program Director Clinical Director Clinical Specialty Services Director Campus Director | 400,000 |
| Other Salary and Benefits | Chief Financial Officer Chief Development Officer Accountant Administrative Assistant | 200,000 |
| Expense/Equipment/Travel/Supplies/ Other | Utilities Repairs & Maintenance Office/Computer Supplies Cleaning & Maintenance Insurance | 200,000 |
| Consultants/Contracted Services/Study | Legal and Professional Fees | 20,000 |
| Operational Costs: Other | | |
| Salary and Benefits | Clinicians Campus Caretaker Campus Case Manager Education Program Specialist Campus Coordinator | 300,000 |
| Expense/Equipment/Travel/Supplies/ Other | Workshops/Conferences Professional Memberships/Licensures Foster Parent Recruitment/Marketing Enrichment Training | 95,000 |
| Consultants/Contracted Services/Study | Psychiatric Services Speech Therapy Services Occupational Therapy Services Psychological Services | 35,000 |
| Fixed Capital Construction/Majo | r Renovation: | |
| Construction/Renovation/Land/ Planning Engineering | | 0 |
| Total State Funds Requested (m | ust equal total from question #6) | 1,250,000 |

12. Program Performance

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

All Star Children's Foundation (ASCF) is committed to demonstrating the impact of comprehensive, family-centered, and science-backed interventions for children and families impacted by intergenerational trauma and family separation. Receiving these funds will allow us to continue offering evidence-based, trauma-informed services and supports to children and families with child welfare involvement by covering a portion of our overall operating budget for FY 2022-2023.

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



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Major program activities and strategies used by All Star to create lasting change among children and families involved in the foster care system include: foster parent training and coaching, foster parent support services, evidence-based clinical services, enrichment programs, trauma-informed systems engagement and collaboration, and a focus on biological family engagement.

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

Foster parents, biological parents, and community providers/stakeholders receive psychoeducation about trauma and its impact on children, as well as training and coaching in trauma-informed parenting and adult-child interaction strategies. Foster parents receive daily support services through volunteers and clinical staff to assist in household management, self-care, biological parent engagement, and parenting. Children in foster care receive comprehensive assessment, multidisciplinary teaming, frequent case reviews, and mental health intervention by a team of licensed mental health professionals with advanced training in evidence-based, and trauma-informed intervention. Children are provided enrichment and tutoring opportunities based on their interests and needs. Biological families are empowered to engage in their child(ren)'s care through participation in mental health services, appointments, and enhanced visitation opportunities.

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

Direct services are provided to licensed foster parents, children placed in out-of-home foster care settings and their biological families, and community providers and stakeholders who work directly with children in foster care [e.g., child welfare case managers, teachers, Guardian Ad Litem (GAL) volunteers, etc.]. We expect to serve approximately 30 children and their biological and foster families over the project year.

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

Expected outcomes among children include reduction in trauma symptoms and behavior problems, improved mental health and well-being, and increased social support. Among foster parents, we expect reduced parenting stress, increased use of trauma-informed parenting skills, and reduced turnover in the foster parenting role. Outcomes will be assessed through pre- and post-assessment parent- and child self-report measures of child mental health functioning, perceived social support, and parenting stress.

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?

Penalties have already been established in our existing contract.

| 13. | . The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. In | clude the |
|-----|---|-----------|
| | relationship between the owners of the facility and the entity. | |

| I N/A | | |
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| 14. | 14. Requestor Contact Information | | | | | | | |
|-----|-----------------------------------|--------------------------------------|------------------|-------------|--------------|--|--|--|
| | a. First Name | Dennis | | Last Name | McGillicuddy | | | |
| | b. Organization | All Star Children's Foundation, Inc. | | | | | | |
| | c. E-mail Address | dennis@a | dennis@ascf.care | | | | | |
| | d. Phone Number | (941)217 | -6503 | Ext. | | | | |
| 15. | Recipient Contact | Informatio | on | | | | | |
| | a. Organization | All Star C | hildren's Founda | ition, Inc. | | | | |
| | b. Municipality and | l County | Sarasota | | | | | |
| | c. Organization Type | | | | | | | |
| | □For Profit Entity | □For Profit Entity | | | | | | |
| | ☑Non Profit 501(c | Profit 501(c)(3) | | | | | | |
| | □Non Profit 501(c | on Profit 501(c)(4) | | | | | | |
| | □Local Entity | □Local Entity | | | | | | |
| | □University or College | | | | | | | |
| | □Other (please specify) | | | | | | | |
| | | | | | | | | |
| | d. First Name | Michelle | | Last Name | Andrews | | | |
| | e. E-mail Address | michellea@ascf.care | | | | | | |
| | f. Phone Number | e Number | | | | | | |
| 16. | 16. Lobbyist Contact Information | | | | | | | |
| | a. Name | Jerald S. Paul | | | | | | |
| | b. Firm Name | Capitol Energy Florida | | | | | | |
| | c. E-mail Address | jpaul@capitolenergy.net | | | | | | |
| | d. Phone Number | (850)386-5267 | | | | | | |