

Operations

Fixed Capital Outlay

**Total State Funds Requested** 

## The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

**LFIR # 1323** 

300,000

300,000

1. Project Title	Amigos Care Program		
2. Senate Sponsor	Ana Maria Rodriguez		
3. Date of Request	11/13/2023		
4. Project/Program [	Description		
family needs to bol program provides f	ster protective factors that pr amilies with referrals and coo	amilies and youth individualized care coordination t event child abuse and neglect. Through a wide net ordination of needed services as well as concrete so threat of eviction, termination of utilities, food insec	work of partners, the upports to stabilize
5. State Agency to re	eceive requested funds	Department of Children and Families	
State Agency con	tacted? No		
6. Amount of the Nor	nrecurring Request for Fisc	cal Year 2024-2025	
Type of Funding		Amount	]

### 7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	300,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	300,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	600.000	100%

8. Has this project previously received state funding?

Yes	

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
2023-24	0	200,000	315	No

9. Is future funding likely to be requested?	
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Yes

a. If yes, indicate nonrecurring amount per year.

300,000

b. Describe the source of funding that can be used in lieu of state funding.

The program will continue to operate with grant funds and private foundation funding on a smaller scale. This funding request is to expand an existing program.

10	Has the ent	tity requesting	n this project i	eceived anv	federal assista	nce related to the	e COVID-19 nandem
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Yes	



11. Status of Construction

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

PPP Loan \$121,000. The funds were used to offset fundraising losses due to the pandemic used to cover personnel and overhead costs of the organization not covered by other funding sources.

### Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the c	urrent phase of t	he project?						
Planning	O Design	Construction	O N/A					
b. Is the project	"shovel ready"	(i.e permitted)?		No				
c. What is the es	stimated start da	te of construction?						
d. What is the e	stimated comple	tion date of construc	tion?					
12. List the owner relationship be	s of the facility to etween the owne	o receive, directly or rs of the facility and t	indirectly	, any fixed	capital	outlay fund	ding. Include	the

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	President & CEO - \$195,000 @ 15% = \$29,250 (Salary + Fringe Benefits)	29,250
Other Salary and Benefits	Accounting Coordinator - \$ 68,000 @ 40% = \$27,200 (Salary + Fringe Benefits) Human Resources Generalist - \$60,035 @40% \$24,014 (Salary + Fringe) Records Management Supervisor - \$75,068 @ 33% = \$24,772.44 (Salary + Fringe)	75,986
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Sr. Director of Programs - \$104,000 @ 35% = \$36,400 (Salary + Fringe Benefits)  Director of Family Services - \$97,500 @ 35% = \$34,125 (Salary + Fringe)  Program Coordinator - \$81,900 @ 35% = 28,665 (Salary + Fringe)  Senior Natural Helper - \$60,060 @ 50% \$30,030 (Salary + Fringe)  Success Coach - \$51,975 @50% 25,987.50 (Salary & Fringe)	155,207
Expense/Equipment/Travel/Supplies/ Other	Program Supplies - \$8,557 Other - Family Stabilization Funds for direct assistance \$31,000 - Funds will used as needed to prevent evictions, shut off of utilities, food needs, etc.)	39,557
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	



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Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (mi	ust equal total from question #6)	300,000

### 14. Program Performance

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

The Amigos Care Program will provide at-risk families and youth individualized care coordination that addresses complex family needs to bolster protective factors that prevent child abuse and neglect. Through a wide network of partners, the program provides families with referrals and coordination of needed services as well as concrete supports to stabilize families experiencing a lack of basic needs like threat of eviction, termination of utilities, food insecurity, and job loss.

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

Identified at-risk families residing in Miami-Dade County will work with a Family Success Coach (FSC). Families will be screened and assessed to identify specific areas of need and will work collaboratively with the FSC to develop a care plan to address needs. The FSC will coordinate care within the partner network and will provide emergency assistance to stabilize families when needed.

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

Screening & Assessment, Care Planning, Care Coordination, Family Stabilization Funds during emergencies.

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

The Amigos Care Program will serve at-risk neighborhoods within Miami Dade County: Allapattah, Little Havana, Hialeah, Homestead, and North Miami. In April 2021, "Financial Insecurity in Miami-Dade County" was published to determine which age demographic is most impacted by poverty in Miami-Dade County. According to this study, children between the ages of 0-18 are the most impacted and experience the most severe levels of poverty in the County. The identified neighborhoods all share community risk factors, such as high percentages of children below the poverty line, high crime, and lack of economic opportunity, which negatively influence family stressors. The Amigos Care Program will serve approximately 100 additional families with the requested funding.

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

This intervention will result in the strengthening of Protective Factors to Prevent Child Abuse and Neglect. This will be assessed with pre- and post-test scores on The Parents' Assessment of Protective Factors (PAPF) and the Child and Adolescent Needs and Strengths (CANS). Subscale scores on each of the measures assessing protective factors of parental resilience, social connections, concrete support in times of need, social-emotional competence of children, will show improvement. At least one Success Plan goal will be attained.

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?

Standard contract	t penalties.			
15. Requester Contac	t Information			
a. First Name	Karina	Last Name	Pavone	

b. Organization	Amigos Together For Kids, Inc.			
c. E-mail Address karina@amigosforkids.org				
d. Phone Number	(305)279-1155	Ext.		

### 16. Recipient Contact Information

a. Organization Amigos Together For Kids, Inc.



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b. Municipality and County		Miami-Dade			
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	Karina		Last Name	Pavone	
e. E-mail Address	karina@amigosforkids.org				
f. Phone Number	(305)279-1155				
17. Lobbyist Contact Information					
a. Name	Andreina Figueroa				
b. Firm Name	ADF Consulting LLC				
c. E-mail Address	Adf@adfconsulting.com				
d. Phone Number	(786)586	-7001			