

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

LFIR # 3174

| 1. | 1. Project Title Juvenile Recidivism and Prevention Program | | | | | | | |
|--|---|---------------------------------|--------------------|--------|-----------------------------|-------------------------|-----------------------|--|
| 2. | Senate Sponsor | Darryl Rouson | | | | | | |
| 3. | Date of Request | 10/11/2023 | | | | | | |
| 4. | Project/Program De | escription | | | | | | |
| | Reduce juvenile cri promotes employab | me rules in the targe ility. | et neighborhoo | ds by | / engaging at-risk yo | outh in activities that | teach life skills and | |
| 5. | 5. State Agency to receive requested funds Department of Juvenile Justice | | | | | | | |
| | State Agency conta | acted? Yes | | | | | | |
| 6. | Amount of the Non | recurring Request | for Fiscal Yea | ar 202 | 24-2025 | | | |
| | Type of Funding | | | | Am | | | |
| | Operations | | | | | 1,120,000 | - | |
| | Fixed Capital Outlay | | | | | 0 | | |
| | Total State Funds | Requested | | | | 1,120,000 |] | |
| 7. | Total Project Cost f | or Fiscal Year 202 | 4-2025 (includ | ling ı | matching funds ava | ailable for this proj | ect) | |
| | Type of Funding | | | | Amount | Percentage | _ | |
| | Total State Funds R | equested (from que | stion #6) | | 1,120,000 | 10% | - | |
| | | atching Funds | | | | | 1 | |
| | Federal | | | | 0 | 0% | | |
| | State (excluding the | amount of this requ | iest) | | 0 | 0% | | |
| | Local | | | | 10,300,300 | 90% | | |
| | Other Total Project Costs | s for Fiscal Year 20 |)24-2025 | | 0 11,420,300 | 0% 100% | 1 | |
| | 10.00.1.10,001.000.00 | 7.0. 7.000. 7.00. 20 | | | , | 10070 | 1 | |
| 8. | Has this project pro | eviously received | state funding? | ? | Yes | | - | |
| | Fiscal Year (уууу-уу) | Amo Recurring | ount Nonrecurri | ng | Specific Appropriation # | Vetoed | | |
| | 2023-24 | 0 | | 5,000 | | No | | |
| 9. Is future funding likely to be requested? Yes | | | | | | | _ | |
| a. If yes, indicate nonrecurring amount per year. 1,120,000 | | | | | | | | |
| b. Describe the source of funding that can be used in lieu of state funding. | | | | | | | | |
| Additional dollars can be be fundraised. | | | | | | | | |
| 10 |). Has the entity req | uestina this projec | t received an | v fed | eral assistance rel | ated to the COVID- | 19 pandemic? | |
| 10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic? No | | | | | | | | |
| | If yes, indicate the amount of funds received and what the funds were used for. | | | | | | | |
| | | | | | | |] | |



11. Status of Construction

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Complete questions 11 and 12 for Fixed Capital Outlay Projects

| a. What is the current phase of t | he project? | |
|---|--|-------------|
| Planning Design | ○ Construction | |
| b. Is the project "shovel ready" | (i.e permitted)? | |
| c. What is the estimated start da | te of construction? | |
| d. What is the estimated comple | tion date of construction? | |
| 2. List the owners of the facility to relationship between the owners | o receive, directly or indirectly, any fixed capital outlay funding. rs of the facility and the entity. | Include the |
| . Details on how the requested so | tate funds will be expended Description | Amount |
| Administrative Costs: | The state of the s | |
| Executive Director/Project Head Salary and Benefits | | |
| Other Salary and Benefits | | |
| Expense/Equipment/Travel/Supplies/Other | | (|
| Consultants/Contracted Services/Study | Subcontract with each of the five Florida Children's Initiatives | 1,120,000 |
| Operational Costs: Other | | |
| Salary and Benefits | | (|
| Expense/Equipment/Travel/Supplies/ Other | | (|
| Consultants/Contracted Services/Study | | (|
| ooi vioco/otaay | | |
| Fixed Capital Construction/Majo | r Renovation: | |
| • | r Renovation: | (|

Reduce juvenile crime in the target neighborhoods by engaging at-risk youth in activities that teach life skills and promote employability.

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

Our goal is to intervene early in the lives of at-risk youth and decrease the chance of juvenile arrest and recidivism. We implement national proven programs aimed at reducing the Juvenile crime rate in lower socioeconomic neighborhoods. Some activities include, career exploration, soft skills training, after-school tutoring, conflict resolution, and impulse control.

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



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Direct services include job training, dress for success (work clothing provided), financial literacy courses, college readiness training, conflict resolution training, emotional support courses,

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

201-400 youth are going to be served. People with poor mental health, poor physical health, jobless persons, economically disadvantaged persons, At-risk youth, Homeless youth, grade school students, High school students, University/College student, Currently or formerly incarcerated persons, Drug offenders (in criminal Justice), victims of crime

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

All of these benefits will be measured by one of the following:

Reduce juvenile arrest rates shown by arrest rates; improve sense of community safety done by community survey; increase youth employment and positive youth activities shown by sign in sheet and pay stubs; decrease in truant behavior shown by school attendance.

Direct services include job training, dress for success (work clothing provided), financial literacy courses, college readiness training, conflict resolution training, emotional support courses.

The amount of youth employed.

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 penalties | Standard penalties are adequate. | | | | | | |
|--------------------------------------|--------------------------------------|-----------------|------------|---------|--|--|--|
| 15. Requester Contact | : Informati | on | | | | | |
| a. First Name | Winifred | | Last Name | Heggins | | | |
| b. Organization | Ounce of | Prevention fund | of Florida | | | | |
| c. E-mail Address | wheggins@ounce.org | | | | | | |
| d. Phone Number | (850)933-2846 Ext. | | | | | | |
| 16. Recipient Contact Information | | | | | | | |
| a. Organization | Organization The Ounce of Prevention | | | | | | |
| b. Municipality and County Statewide | | | | | | | |
| c. Organization Type | | | | | | | |
| □For Profit Entity | □For Profit Entity | | | | | | |
| ☑Non Profit 501(c | ☑Non Profit 501(c)(3) | | | | | | |
| □Non Profit 501(c | □Non Profit 501(c)(4) | | | | | | |
| □Local Entity | □Local Entity | | | | | | |
| □University or Co | □University or College | | | | | | |
| □Other (please sp | □Other (please specify) | | | | | | |
| d. First Name | Winifred | | Last Name | Heggins | | | |
| e. E-mail Address | wheggins | @ounce.org | | | | | |



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| t. Phone Number | (850)933-2846 | | | | | |
|----------------------------------|----------------------|--|--|--|--|--|
| 17. Lobbyist Contact Information | | | | | | |
| a. Name | Yolanda Cash Jackson | | | | | |

b. Firm Name Becker & Poliakoff PA

c. E-mail Address yjackson@beckerlawyers.com

d. Phone Number (954)985-4132