

LFIR # 3209

. Project Title	City of Hallandale Beach Mental Health VPK, K-8 Wrap Around Services Program
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2. Senate Sponsor Jason Pizzo

**3. Date of Request** 12/28/2023

#### 4. Project/Program Description

The City of Hallandale Beach Mental Health VPK, K-8 Wrap Around Services Program provides critically needed counseling and mental health support services for students in grades Voluntary Pre-Kindergarten (VPK) Wrap Around and Kindergarten-8th. The program targets 82.14% low to moderate income persons and allows for families categorized as Asset Limited, Income Constrained, Employed (ALICE), who depend on affordable and/or subsidized childcare, the ability to work. The Licensed Childcare Facility serves approximately 48.57% single-family female head of households.

5. State Agency to receive requested funds

Department of Education

State Agency contacted? No

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	254,436
Fixed Capital Outlay	0
Total State Funds Requested	254,436

#### 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)	254,436	42%	
Matching Funds			
Federal	94,000	15%	
State (excluding the amount of this request)	0	0%	
Local	265,600	43%	
Other	0	0%	
Total Project Costs for Fiscal Year 2024-2025	614,036	100%	

#### 8. Has this project previously received state funding? No

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

#### 9. Is future funding likely to be requested?

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a. If yes, indicate nonrecurring amount per year.

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

The agency will attempt to secure other grant funding sources if state funding is not awarded.

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

Yes

Yes

254,436



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

Funds in the amount described were received for childcare services associated with salaries, fringes, salary bonuses, and program operation costs during COVID-19 Pandemic: \$13,800 \$18,000 ELC Summer Booster Grant, \$19,500 ELC V CRRSA Grant, \$48,594 ELC VI CRRSA Grant, \$82,803.69 ELC ARPA Stabilization Sub-grant.

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

#### **11. Status of Construction**

a. What is the current phase of the project?

O Planning	🔘 Design	Construction
	Design	

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List 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/A

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

Spending Category	Description	Amount	
Administrative Costs:			
Executive Director/Project Head Salary and Benefits		0	
Other Salary and Benefits	1 FT Youth Programs Coordinator, 1 FT Social Worker II, 1 FT Senior Office Assistant Receptionist.	254,436	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study		0	
Operational Costs: Other		·	
Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
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)	254,436	

#### 14. Program Performance

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



The City of Hallandale Beach Mental Health VPK, K-8 Wrap Around Services Program will provide critically needed counseling and mental health support services for students in VPK Wrap Around and K-8. The program targets 82.14% low to moderate income persons and allows for families categorized as Asset Limited, Income Constrained, Employed (ALICE), who depend on affordable and/or subsidized childcare the ability to work. The Licensed Childcare Facility serves 48.57% single-family female head of households. These services will improve the physical and mental health, promote education, and protect program participants from public harm to include child abuse/neglect and juvenile delinquency as well as improve economic activities and promote individuals' economic self-sufficiency.

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

The program will provide year-round mental health, counseling and enrichment programming from 1:30-6:00 PM daily on school days and 8AM-6:00 PM on non-school days to very low-income to moderate students in grades VPK Wrap Around and Kindergarten to 8th. Services include homework assistance, tutoring, performing arts, cultural enrichment, physical education, field trips, nutritional meals, counseling, referrals and connection to resources, transportation from area schools to the facility, parent engagement and resources.

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

The program will provide year-round services to include mental health, counseling and enrichment programming from 1:30-6:00 PM daily on school days and 8AM-6:00 PM on non-school days to very low-income to moderate students in grades VPK Wrap Around and Kindergarten to 8th. Services will include homework assistance, tutoring, performing arts, cultural enrichment, physical education, field trips, nutritional meals, counseling, referrals and connection to resources, transportation from area schools to the facility, parent engagement and resources. Social Worker, Youth Programs Coordinator/State of Florida Licensed Mental Health Counselor and partner agencies will provide direct program, mental health, counseling (individual and/or group) services to program participants and their families.

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

The City of Hallandale Beach Mental Health VPK, K-8 Wrap Around Services Program will serve approximately 400 unduplicated students in grades VPK Wrap Around and K-8 and their family. The program target population to serve will target 82.14% low to moderate income persons and allows for families categorized as Asset Limited, Income Constrained, Employed (ALICE), who depend on affordable and/or subsidized childcare the ability to work. An estimated 48.57% of students to be served are from single-family female head of households. Fiscal Year 2022-2023 diverse program demographics included 51.43% Hispanic, 40% Black, 5.36% White/Non Hispanic, 1.07% Asian,1.07% Black & White, and 1.07% Other.

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

# The program benefits and outcomes will improve the physical and mental health of program participants, promote education, and protect program participants from public harm to include child abuse/neglect and juvenile delinquency as well as improve economic activities and promote individuals' economic self-sufficiency. Methodologies used to measure program outcomes will include an increased rate in student participation, increase in school performance, a decreased rate in juvenile crime in the community, and an increased rate of employment among enrolled families.

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?

Failure to meet deliverables or performance measures will result in the agency being placed on a Performance Improvement Plan and/or sanctioned with corrective actions.

#### **15. Requester Contact Information**

a. First Name	Jeremy	Last Name	Earle
b. Organization	City of Hallandale Beach		
c. E-mail Address	jearle@cohb.org		
d. Phone Number	(954)457-3070	Ext.	

16. Recipient Contact Information



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a. Organization	City of Ha				
b. Municipality and	I County	Broward			]
c. Organization Ty	pe				
□For Profit Entity					
□Non Profit 501(c	:)(3)				
□Non Profit 501(c	:)(4)				
☑Local Entity					
□University or Co	llege				
□Other (please sp	becify)				
d. First Name	Jeremy		Last Name	Earle	
e. E-mail Address	jearle@c	ohb.org			
f. Phone Number	(954)457	-3070			
17. Lobbyist Contact I	nformatio	n			
a. Name	Mathew	Forrest			]
b. Firm Name	Ballard F	Partners			
c. E-mail Address	mat@bal	lardpartners.com	1		]
d. Phone Number	(561)253	-3232			]