

1. Project Title

### The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

Fasterseals Better Together-Improving Autism and Disability Services

**LFIR # 1116** 

	Statewide Through	gh Collaboration	
2. Senate Sponsor	Jim Boyd		
3. Date of Request	11/13/2025		
4. Project/Program D	escription		
proven successes. On behavioral and men programs. We also	Our efforts center on l tal health services, su share technological a aging our collective o	orida are dedicated to sharing, scaling, and expanding innover key priorities such as early autism diagnosis and intervention supported employment and job training, and intensive educated advancements that enhance the diagnosis and treatment of a coutcomes, we work to establish and strengthen best practices	n, comprehensive ion and therapy autism and related

5. State Agency to receive requested funds

Agency for Persons with Disabilities

State Agency contacted?

Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	7,000,000
Fixed Capital Outlay	0
Total State Funds Requested	7,000,000

### 7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	7,000,000	44%
Matching Funds		
Federal	1,000,000	6%
State (excluding the amount of this request)	0	0%
Local	235,584	1%
Other	7,803,237	49%
Total Project Costs for Fiscal Year 2026-2027	16,038,821	100%

8. Has this project previously received state funding? If yes, provide the most recent instance:

Yes

Fiscal Year	Amo	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2025-26	0	5,000,000	241A	No	

<ol><li>Is future-year funding likely to be requested</li></ol>	ely to be requested	y to be	likely	tunaing	year	tuture-	. IS	9.
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Yes

a. If yes, indicate nonrecurring amount per year.

7,000,000

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

Philanthropy and fees for service.



10. Status of Construction

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**LFIR # 1116** 

### **Complete questions 10 and 11 for Fixed Capital Outlay Projects**

a. What is the cu	urrent phase of t	he project?				
Planning	O Design	Construction	O N/A			
b. Is the project	"shovel ready"	(i.e permitted)?				
c. What is the es	stimated start da	ate of construction?				
d. What is the es	stimated comple	etion date of construc	tion?			
e. What funding	stream will be u	sed for ongoing oper	rations a	nd maintenance	of the project?	
		o receive, directly or i			ital outlay fundin	g. Include the

### 12. 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	Administrative Cost Allocation	300,000
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Salaries/Wages; Benefits	2,614,000
Expense/Equipment/Travel/Supplies/ Other	Program Supplies: Training, Rent, Supplies, Travel, Diagnostic Supplies, Educational Supplies, Continuing Education, IT, Telephone/Utilities, Equipment lease/purchase, Maintenance/Repairs, Postage, Bank Fees, Licensure Fees, Subscriptions, Misc.	273,000
Consultants/Contracted Services/Study	Professional Fees (Equine Specialists in Mental Health and Learning, PLAY home consultants, Certified Therapeutic Riding Instructors, fourth year clinical psychologist interns, mental health clinicians, pediatrician, virtual reality consultant) Subcontracted affiliates.	3,813,000
Fixed Capital Construction/Major	or Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	nust equal total from question #6)	7,000,000

### 13. Program Performance

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



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Easterseals affiliates across Florida are dedicated to sharing, scaling, and expanding innovative programs and proven successes in both urban and rural communities. Our efforts focus on critical areas such as early autism diagnosis and intervention, comprehensive behavioral and mental health services, psychological and psychiatric evaluations, supported employment training, and intensive education and therapy programs. Through a strengthened statewide network and improved collective outcomes, we aim to advance best practices in diagnostics, education, specialized therapies, life skills, and employment—empowering individuals with autism and related disabilities to reach their full potential.

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

Each affiliate has a successful client approach appropriate for scaling across affiliates via direct service delivery, virtual services, consultation, technical assistance training, and community education. Together, affiliates will identify capacity gaps and expand local access to diagnostics, early intervention, clinical therapies, supported workforce training, intensive specialized education, and comprehensive behavioral health/mental health services. Easterseals will provide comprehensive family support services including case management and post-diagnostic wrap around services. We will work together with universities and colleges throughout the state to support doctoral psychology programs and therapy programs, providing externships for their students in autism and related disability services.

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

Autism Early Interventions (Parent-Child Interaction Therapy, Play Project, Autism Navigator)
Behavioral Health-Psychology, Psychiatry for children with autism and other disabilities
Diagnostics using eye gaze technology
Therapies-Speech, Occupational, Physical, Behavioral, Equine
STRIVE - vocational skills towards industry-recognized certifications in hospitality and healthcare
Life skills training focusing on employment goals and workforce readiness
Virtual Reality - digital simulation training in social skills and simulated work environments
K-12 specialized education programs
Case management and family support

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

Each Florida Easterseals' target populations are (1) children and adults with autism and other developmental disabilities that reside in Florida, as well as their families/caregivers, (2) Local businesses and industries who rely on a qualified, dependable workforce, and (3) Members of the local community who benefit from an inclusive and diverse society. Up to 8000+ children and adults with autism and/or related disabilities are expected to be served directly through our collaborative efforts.

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

More children and adults with autism and related disabilities will benefit by our collective sharing of innovative programming in key areas that impact independence and early developmental skills (1) autism early diagnosis and cost-effective interventions that result in increased functional levels, (2) vocational skills training that respects the person's own choices and leads to industry-recognized certifications for increased independence and employability, (3) employment skills to improve management/communication, financial/service, self management adaptive skills; (4) comprehensive behavioral/mental health therapeutic and educational services that reduce maladaptive behaviors, learning disabilities and improve overall independence and self-esteem. In-depth performance measures across multiple programs will include data collection/analysis, diagnostic testing, treatment plans, job placements, retention, skills improvement, case management notes, and improved economic status.

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 in the contract?

Since we are proposing a direct service	es contract, we would expect n	ot to be paid until the monthly	reporting of
performance levels met the contract ex	pectation.		. 0

14. Is this project related to mitigation	, response, or recovery from a natural disaster?	No

- a. If Yes, what phase best describes the project?
- Mitigation (reducing or eliminating potential loss of life or property)



# The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

**LFIR # 1116** 

	Response (ad	dressing the immediate and short-term effects of a natural disaster)
	Recovery (ass	sisting communities return to normal operations, including rebuilding damaged infastructure)
b. N	• •	ural disaster (or Executive Order # for events not under a federal declaration):
15. Has	s the entity app	olied for or received federal assistance for this project?
	Yes, Applied	
	Yes, Received	
<b>□</b> N	No	
<b>□</b> N	No, but intends t	to apply
a. If	yes, provide th	ne FEMA project worksheet ID#:
b. Pı	rovide the total	I project cost listed on the FEMA project worksheet:
16. Has	s the entity app	olied for or received state assistance for this project (other than this request)?
	Yes, Applied	
	Yes, Received	
<b>1</b>	No	
<b>□</b> N	No, but intends t	to apply
a. If Com	yes, specify th nmerce):	ne program and state agency (ex. Local Government Emergency Bridge Loan, Department o
	quester Contac	
	irst Name	Tom Last Name Waters
	Organization	Easterseals Southwest Florida
c. E	-mail Address	twaters@easterseals-swfl.org
d. P	Phone Number	(941)355-7637 <b>Ext.</b> 435
18. Rec	ipient Contact	Information
	Organization	Easterseals Southwest Florida
b. N	/lunicipality and	d County Manatee
c. O	rganization Ty	уре



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**LFIR # 1116** 

□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	Nicole	Last Name	Murby			
e. E-mail Address nmurby@easterseals-swfl.org						
f. Phone Number	(941)355-7637	Ext.				
19. Lobbyist Contact Information						
a. Name	a. Name Nicole Kelly					
b. Firm Name	The Southern Group					
c. E-mail Address	kelly@thesoutherngroup.o	com				
d. Phone Number	(850)671-4401					

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.