



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1328

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Pearl Project's goal is to provide life-changing support to the youngest victims of the opioid crisis. Babies exposed to substances in utero face developmental, physical, and behavioral challenges that can last a lifetime—affecting their ability to thrive at home, in school, and in the community. The Pearl Project will provide evidence-based, trauma-informed trainings and coaching for caregivers and services to children that promote emotional and relational health.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operating	500,000
Fixed Capital Outlay	0
Total State Funds Requested	500,000

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)	500,000	53%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	440,000	47%
Total Project Costs for Fiscal Year 2026-2027	940,000	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2025-26	0	300,000	363	No

9. Is future-year funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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

Complete questions 10 and 11 for Fixed Capital Outlay Projects



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1328

10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction ☐ N/A

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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Director and Supervisor of Program	55,000
Other Salary and Benefits	Administrative support (Registration, Reporting, Communications)	45,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	14 part-time Family Support Specialists at \$25,000 each to implement the programs that yield savings for the State of Florida	350,000
Expense/Equipment/Travel/Supplies/Other	Supplies for training; HIPAA-compliant platform for clients; and software for trainings.	50,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		500,000

13. Program Performance

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

To expand The Pearl Project's evidence-based, trauma-informed trainings and coaching for caregivers and services to children that promote emotional and relational health.

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

Caregivers will be trained in Trust-Based Relational Intervention (TBRI) practices to increase their ability to appropriately respond to a child who has been negatively impacted by substances (including parental substance abuse and prenatal substance exposure). Families will have access to individual coaching and ongoing support to ensure th family is fully supported.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1328

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

Provide caregivers with evidence-based, trauma-informed trainings (virtually and in person) designed to meet the unique needs of children with a history of trauma and impacts of substance abuse. Regular support groups and individual coaching calls will be offered to help with the implementation of new skills. Circle of Security classes will be offered to help caregivers improve attachment with their children.

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

More than 800 parents and caregivers, and dependent and adopted children.

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

Improved mental health: Participants will experience less stress in the home, more connected relationships, leading to improved mental health outcomes. Improve quality of education: Parents will learn to advocate for their children and will be able to help teachers know how to meet their unique needs. This will lead to fewer behavior incidents and improved learning outcomes. Track and report all outcomes.

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?

Return of dispersed funds.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☐ Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- ☐ Yes, Applied



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1328

- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

18. Recipient Contact Information

- a. Organization
- b. Municipality and County

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 Last Name
- e. E-mail Address
- f. Phone Number Ext.

19. Lobbyist Contact Information

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number



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

LFIR # 1328

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