

# Appropriations Project Request - Fiscal Year 2017-18

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Girl Matters: Continuity of Care Model

2. Date of Submission: 01/19/2017

3. House Member Sponsor: Cord Byrd

Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

a. Has funding been provided in a previous state budget for this activity? Yes

***If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d***

b. What is the most recent fiscal year the project was funded? 2016-17

c. Were the funds provided in the most recent fiscal year subsequently vetoed? No

d. Complete the following Project Request Worksheet to develop your request (Note that column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in column G):

FY:	Input Prior Year Appropriation for this project for FY 2016-17 <i>(If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2017-18 <i>(Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring .)</i>		
	Column:	A	B	C	D	E
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget  <i>(Will equal non-vetoed amounts provided in Column A)</i>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring Request</b>  <i>(Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)</i>
Input Amounts:		375,000	375,000		375,000	375,000

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Department of Juvenile Justice

6. Requester:

- a. Name: Dr. Lawanda Ravoira
- b. Organization: Delores Barr Weaver Policy Center
- c. Email: lravoira@seethegirl.org
- d. Phone #: (904)598-0901

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: Dr. Lawanda Ravoira
- b. Organization: Delores Barr Weaver Policy Center
- c. Email: lravoira@seethegirl.org
- d. Phone #: (904)598-0901

8. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: Dr. Lawanda
- b. Firm: Delores Barr Weaver Policy Center
- c. Email: lravoira@seethegirl.org
- d. Phone #: (904)598-0901

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: Delores Barr Weaver Policy Center
- b. County (County where funds are to be expended): Duval
- c. Service Area (Counties being served by the service(s) provided with funding): Baker, Clay, Duval, Nassau, Saint Johns

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government

- University or College
- Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The Girl Matters: Continuity of Care Model is a research-based, highly effective intervention with documented successful outcomes that improves public safety and save the State an estimated \$831,270 per year for every 30 girls diverted from residential lock-up. The goal of the Continuity of Care Model is to stop the conveyor belt of girls going deeper into the justice system and to shut the revolving door of girls who cycle through the system due to inadequately addressed mental health needs.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Funds will be spent on direct services and general operational support. Please see the attached supporting documentation for the budget narrative. Personnel expenses to include Psychologist (.37FTE, \$30,000), Therapists (2FTE, \$98,407), Mobile Care Managers (1.5FTE, \$51,824), On-site Care Managers (.50FTE, \$23,273),	303,014

	Support Staff (.20FTE, \$26,334), Research/Evaluation Assistant (.10FTE, \$3,250). Fringe Benefits (\$69,926).	
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Operational expenses to include liability insurance (\$2,000), Rent/Telephone (\$21,062), Supplies (\$4,843), Special Needs Support (\$15,110), Travel (\$24,000), Printing (\$4,971).	71,986
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
<b>TOTAL</b>		<b>375,000</b>

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

N/A

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

Letters of support: Melissa Nelson, State Attorney; Sheriff Mike Williams, City of Jacksonville; Hon. V. Norton, Hon. S. Bass, Hon. D. Gooding, Fourth Judicial Circuit of Florida; Robert Mason, Dir. of Juvenile Division, Public Defender; Dr. Vicki Waytowich, Director, Jacksonville System of Care Initiative; Denise Marzullo, CEO, Mental Health America of Northeast Florida; Dr. Christine Cauffield, CEO, LSF Health Systems; Members of The Justice for Girls: Duval County Leadership Council

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

No

17. Will the requested funds be used directly for services to citizens?

Yes

17a. Describe the target population to be served. Select all that apply to the target population:

- Elderly persons
- Persons with poor mental health
- Persons with poor physical health
- Jobless persons
- Economically disadvantaged persons
- At-risk youth
- Homeless
- Developmentally disabled
- Physically disabled
- Drug users (in health services)
- Preschool students
- Grade school students
- High school students
- University/college students
- Currently or formerly incarcerated persons
- Drug offenders (in criminal Justice)
- Victims of crime
- Other (Please describe)

17b. How many in the target population are expected to be served?

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input type="checkbox"/> Improve physical health		
<input checked="" type="checkbox"/> Improve mental health	100% of participants will have access to individualized counseling and therapeutic interventions. 90% of participants will demonstrate improved mental health as evidenced by reduced risk and need scores in the Mental Health Domains of 9.4 (History of suicide ideation), 9.5 (Current suicidal risks) and 9.6 (Mental health problems that currently interfere in working with the Youth) as measured by The Prevention Assessment Tool (PAT) created by the Department of Juvenile Justice.	The Prevention Assessment Tool (PAT) is completed by the service provider using information collected through assessment and interview with the participant and other relevant service providers.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	90% of participants will avoid arrest(s) for new criminal offenses as evidenced by regular Juvenile Justice Information System reports.	The Juvenile Justice Information System is utilized to document participant's criminal status at intake and upon exiting the program with one additional mid-year update for

		participants receiving services for longer than one year. The research team documents each status using a tracking sheet.
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input checked="" type="checkbox"/> Reduce recidivism	90% of participants will avoid arrest(s) for new criminal offenses as evidenced by regular Juvenile Justice Information System reports.	The Juvenile Justice Information System is utilized to document participant's criminal status at intake and upon exiting the program with one additional mid-year update for participants receiving services for longer than one year. The research team documents each status using a tracking sheet.
<input checked="" type="checkbox"/> Reduce substance abuse	90% of participants will demonstrate a reduction in substance abuse as evidenced by decreases in the Alcohol and Drugs Domains of as measured by The Prevention Assessment 8.1 (Youth's alcohol use) and 8.2 (Youth's drug use) as measured by The Prevention Assessment Tool (PAT) created by the Department of Juvenile Justice.	The PAT is completed by the service provider using information collected through assessment and interview with the participant and other relevant service providers.
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	90% of participants will be diverted	The Juvenile Justice Information

	from residential commitment programs and will receive community-based services.	System is utilized to document participant's criminal status at intake and upon exiting the program with one additional mid-year update for participants receiving services for longer than one year. The research team documents the level of advocacy and the status of each participant at risk for commitment using a tracking sheet.
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	375,000	67.2%	N/A
2. Federal:	100,000	17.9%	Yes
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	20,000	3.6%	Yes

5. Other:	63,286	11.3%	Yes
TOTAL	558,286	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

Yes

20a. How much state funding would be requested after 2017-18 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 years
- >= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

- Ongoing activity ? no total cost
- <1M
- 1-2M
- >2-3M
- >3-10M
- >10M