Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: <u>Heart Gallery of Florida - Child Finder Project Director</u>

2. Date of Submission: 11/14/2017

3. House Member Sponsor: Shevrin Jones

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

a. Has funding been provided in a previous state budget for this activity? No If answer to 4a is ?No? skip 4b and 4c and proceed to 4d, Col. E

- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- d. Complete the following Project Request Worksheet to develop your request:

| FY: | Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.) | | | Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.) | | |
|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Column: | Α | В | С | D | E | F |
| Funds Description: | Prior Year Recurring Funds | Prior Year Nonrecurring Funds | Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B) | Recurring Base Budget (Will equal non- vetoed amounts provided in Column A) | Additional Nonrecurring Request | TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.) |
| Input Amounts: | | | | | 1,050,000 | 1,050,000 |

- 5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? 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? Department of Children and Families
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? $\underline{\text{No}}$
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

n/a

| 6. Requester: a. Name: Yvette DuBose b. Organization: Heart Gallery of Florida (Consortium of 14 Heart Galleries across the State) c. Email: yvette@heartgalleryofbroward.org d. Phone #: (954)918-3008 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7. Contact for questions about specific technical or financial details about the project: a. Name: <u>Yvette DuBose</u> b. Organization: <u>Heart Gallery of Florida (Consortium of 14 Heart Galleries across the State)</u> c. Email: <u>yvette@heartgalleryofbroward.org</u> d. Phone #: (954)918-3008 |
| 8. Is there a registered lobbyist working to secure funding for this project? a. Name: <u>Karen Skyers</u> b. Firm: <u>Becker & Poliakoff</u> c. Email: <u>kskyers@bplegal.com</u> d. Phone #: (813)527-3900 |
| 9. Organization or Name of entity receiving funds: a. Name: <u>Heart Gallery of Florida</u> b. County (County where funds are to be expended): <u>Broward</u> c. Service Area (Counties being served by the service(s) provided with funding): <u>Brevard, Broward, Citrus, Duval, Hernando, Hillsborough</u> |
| 10. What type of organization is the entity that will receive the funds? (Select one) O For Profit Non Profit 501(c) (3) O Non Profit 501(c) (4) O Local Government O University or College O Other (Please describe) |

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

Funds would enhance the functioning of the organization by the hiring of a project director to facilitate event operations, marketing and also technology enhancement.

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

| Spending Category | Description | Nonrecurring (Should equal 4d, Col. E) Enter ?0? if request is zero for the category |
|---------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------|
| Administrative Costs: | | |
| ☑a. Executive Director/Project Head Salary and Benefits | Project Director | 490,000 |
| □b. Other Salary and Benefits | | |
| □c. Expense/Equipment/Travel/Supplies/Other | | |
| □d. Consultants/Contracted Services/Study | | |
| Operational Costs: | | |
| ☐e. Salaries and Benefits | | |
| ☑f. Expenses/Equipment/Travel/Supplies/Other | Technology Feature for Program Function | 350,000 |
| ☑g. Consultants/Contracted Services/Study | Marketing/ Webinar | 210,000 |
| Fixed Capital Construction/Major Renovation: | | |
| □h. Construction/Renovation/Land/Planning Engineering | | |
| TOTAL | | 1,050,000 |

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

| 14. | Is the project request an information technology project? No |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Is there any documented show of support for the requested project in the community including public hearings, letters of support, major ranizational backing, or other expressions of support? Yes |
| | 15a. Please Describe: The Child Finder technology program has received support from the community and advocates familiar with the program. |
| 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. What are the activities and services that will be provided to meet the purpose of the funds? The Child Finder tracker system is promoted within the advocate community to recruit track and match families with witing children in foster care, lessening the burden on the state to house children in group homes and in general care. |
| | 17b. Describe the direct services to be provided to the citizens by the funding requested. The direct services will be the building of families and improvement in tracking which is done manually currentl. This service will allow the provider, the prosepective parent and approved advocates to access the matching and tracking system. |
| | 17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups."). 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 |
| ☐General (The majority of the funds will benefit no specific group) |
| □Other (Please describe) |
| 17d. How many in the target population are expected to be served? |
| O< 25 |
| O25-50 |
| ⊙ 51-100 |
| O101-200 |
| O201-400 |
| O401-800 |
| O>800 |

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

| Benefit or Outcome | Provide a specific measure of the benefit or outcome | Describe the method for measuring level of benefit |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| ☑Improve physical health | Young children that enter into foster care due to abuse are known to have developmental issues, per Pediatric Journal. | When a child is adopted from foster care it improves their outlook on life, Pediatric Journal. |
| ☑Improve mental health | Children adopted from foster care experience a higher rate of cultural enrichment than those that remain in care | ACF outcomes study. |
| □Enrich cultural experience | | |

| □Improve agricultural production/promotion/education | | |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| □Improve quality of education | | |
| □Enhance/preserve/improve environmental or fish and wildlife quality | | |
| □Protect the general public from harm (environmental, criminal, etc.) | | |
| □Improve transportation conditions | | |
| □Increase or improve economic activity | | |
| □Increase tourism | | |
| □Create specific immediate job opportunities | | |
| ☑Enhance specific individual?s economic self sufficiency | After adoption from foster, outcomes of improved sufficiency are increased. | Adopt U.S kids advocacy group. |
| ☑Reduce recidivism | Adopting in many cases breaks the cycle of the child becoming apart of the system (juvenile justice) providing permanency and love. | National Council for Adoption. |
| □Reduce substance abuse | | |
| □Divert from Criminal/Juvenile justice system | | |
| □Improve wastewater management | | |
| □Improve stormwater management | | |
| □Improve groundwater quality | | |
| □Improve drinking water quality | | |

| ☐Improve surface water quality | | |
|-------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------|
| ☑Other (Please describe): Create stronger communities | Strong families create strong communities. | Outcomes measured by study of children in care and parents not contributing to society, Children's Bureau. |

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

| Type of Funding | Amount | Percent of Total | Are the other sources of funds guaranteed in writing? |
|------------------------------------------------------------------------------|-----------|------------------|-------------------------------------------------------|
| Amount Requested from the State in this Appropriations Project Request: | 1,050,000 | 100.0% | N/A |
| Project Request: | | | |
| 2. Federal: | 0 | 0.0% | No |
| 3. State: (Excluding the requested Total Amount in #4d, Column F) | 0 | 0.0% | No |
| 4. Local: | 0 | 0.0% | No |
| 5. Other: | 0 | 0.0% | No |
| TOTAL | 1,050,000 | 100% | |

20. Is this a multi-year project requiring funding from the state for more than one year? No