

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Hands of Mercy Everywhere, Inc.-Bellevue Lakeside Hospitality Program
2. Date of Submission: 07/19/2019
3. House Member Sponsor: Stan McClain
Members Copied: Brett Hage, Charlie Stone

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, Col. E
- b. What is the most recent fiscal year the project was funded? 2019-20
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? Yes
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
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>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:		100,000	100,000		951,000	951,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? 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 Education
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? 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.
The Department of Education will have penalties in place for failure to deliver or performance measures to be implemented.

6. Requester:

- a. Name: Diane Schofield
- b. Organization: Hands of Mercy Everywhere, Inc./Bellevue Lakeside Hospitality Program
- c. Email: diane@handsofmercyeverywhere.org
- d. Phone #: (352)454-0830

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Diane Schofield
- b. Organization: Hands of Mercy Everywhere, Inc./Bellevue Lakeside Hospitality Program
- c. Email: diane@handsofmercyeverywhere.org
- d. Phone #: (352)454-0830

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

9. Organization or Name of entity receiving funds:

- a. Name: Hands of Mercy Everywhere, Inc.
- b. County (County where funds are to be expended): Marion
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

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 Belleview Lakeside Hospitality Program targets at risk teens and pregnant teens from the Department of Children and Families that need structure of a good home life coupled with learning life skills, along with hospitality skills applicable to the restaurant and lodging industry. The goal is for each teen and teen mother to graduate high school and/or earn their GED to become immediately employable with a higher earning potential and career path which will allow them to be providers.

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:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Executive Director: Oversee Program, application reviews, media,community support, monitor security, contract reviews, dean of students and behaviors, background checks, HR.	60,000
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Finance Officer: Payroll, and other financial Maintenance & Security: Inside and outside Banquet Manager: Booking the events.	100,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Commercial kitchen set-up, dishes, pots, glassware, tables, chairs, linens.	65,000
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Accountants Legal	30,000
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Instructors and Life Coaches Chef Technology Mental Health Counselor	210,000

	(Part Time)	
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Utilities Food Costs Training	24,000
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Repairs & Maintenance	12,000
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Renovation of the Belleview Community Center to mimic that of a hotel banquet room and food preparation area. Renovations to include the addition of a commercial kitchen, addition of central heating and air conditioning, refinish the wood floors, (2) bathrooms to meet code requirements, addition of office space, addition of storage space, outside handicap ramps and decking, and additional parking.	450,000
TOTAL		951,000

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)

For Profit

Non Profit 501(c) (3)

Non Profit 501(c) (4)

Local Government (e.g., police, fire or local government buildings, local roads, etc.)

State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

Other (Please describe)

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:

Positive remarks and vocal support from members of the Marion County Legislative Delegation: Representative McClain & Senator Baxley especially. Letters of Support from: Lucy Docampo, John Cooper, Christine Dobkowski.

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

Yes

16a. Please Describe:

DCF Kids in Foster Care and Independent Living needing strong vocational training.

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?

Life Skills, Job Training, mental health support, DJJ support, Aging out of foster care support group. Renovate Belleview Community Center, Offer community center as a training in hospitality and other vocational trades to teens dropping out of school or barely passing.

17b. Describe the direct services to be provided to the citizens by the funding requested.

A hands on hospitality educational program which provides youth and young adults age 16-24 with a (3) month hands on curriculum and job training which prepares them for internship and employment in the hospitality field.

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): Children in foster care or those who have aged out of the foster care system.

17d. 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 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
<input type="checkbox"/> Improve physical health		
<input checked="" type="checkbox"/> Improve mental health	Students' final mental health assessment score will be at least 25% higher than the score they received at admission.	Students will be given a scored mental health assessment upon admission and at the completion of the program.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		

<input checked="" type="checkbox"/> Improve quality of education	95% of enrolled students will obtain their GED or be on track to graduate high school or obtain their driver's license before program completion.	The Education Coordinator will be available before and after class to assist students with their outside educational needs.
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	BLHP will enroll at least (12) students and Belleview Lakeside will schedule at least (3) events within (6) months of BLHP implementation. Belleview Lakeside will employ at least (2) BLHP students at each event.	Along with the implementation of the BLHP, HOME will also open Belleview Lakeside, a full service meeting & banquet facility. Eligible students and graduates of BLHP will be employed by Belleview Lakeside to perform the skills they acquired while attending BLHP. BLHP and Belleview Lakeside will draw people to Belleview and Marion County that may not otherwise visit the area, this will result in an increase in economic activity for BLHP and Belleview Lakeside but also for the local retailers.
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Belleview Lakeside will schedule at least (3) events within (6) months of BLHP implementation and employ at least (2) BLHP students at each event.	Along with the implementation of the BLHP, HOME will also open Belleview Lakeside, a full service meeting and banquet facility. Eligible students and graduates of BLHP will be employed by Belleview Lakeside

		to perform the skills they acquired will attending BLHP.
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	At least 75% of eligible students* will be employed or be participating in a relevant internship within 180 days of BLHP enrollment which will aid in grooming them for employment in the community. *Eligible students are those with an attendance rate of 95% and a passing grade point average.	75% of eligible students of the BLHP will either be employed or participating in an internship within 180 days of enrollment. BLHP will assist students with employment or internship with Belleview Lakeside or one of it's partners. Students may also seek employment or internship on their own; BLHP will act as a reference.
<input checked="" type="checkbox"/> Reduce recidivism	Employed teen agers are less likely to commit a crime and make better choices when well supervised.	Quarterly arrest reports will be conducted.
<input checked="" type="checkbox"/> Reduce substance abuse	All students/employees/interns must pass a drug test and complete drug and alcohol substance abuse training classes.	Random drug screens will be given.
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	95% of actively enrolled* BLHP students will not be arrested. *Actively enrolled students are those that have not been discharged and have an attendance rating of 95%.	While actively enrolled in BLHP, students will not be arrested. Students will be required to report an arrest to the Hospitality Education Coordinator (HEC) immediately. The HEC will also check the Internet for arrest records of students on a monthly basis. Community Service hours will be supported.
<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 2020-21 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?
1. Amount Requested from the State in this Appropriations Project Request:	951,000	100.0%	N/A
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	951,000	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 2020-21 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
- 1-3M
- >3-10M
- >10M