

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Family Support Services of North Florida - Shared Family Care Residential Program

2. Date of Submission: 11/14/2017

3. House Member Sponsor: Clay Yarborough

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 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <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:					280,000	280,000

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? Yes

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.

Financial consequences for failure to meet performance measures/contract standards, and if not resolved within a reasonable period, termination of contract.

6. Requester:

- a. Name: E. Lee Kaywork
- b. Organization: Family Support Services of North Florida, Inc.
- c. Email: Lee.Kaywork@fssnf.org
- d. Phone #: (904)421-5800

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

- a. Name: Larry West
- b. Organization: Family Support Services of North Florida, Inc.
- c. Email: Larry.West@fssnf.org
- d. Phone #: (904)265-8106

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

- a. Name: Georgia McKeown
- b. Firm: GA McKeown & Associates
- c. Email: georgia@gamckeown.com
- d. Phone #: (904)303-1611

9. Organization or Name of entity receiving funds:

- a. Name: Family Support Services of North Florida, Inc.
- b. County (County where funds are to be expended): Duval, Nassau
- c. Service Area (Counties being served by the service(s) provided with funding): Duval, Nassau

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?

To provide exhaustive therapeutic and substance abuse treatment in-home to homeless or potentially homeless families with a substance exposed newborn(s). Goals: Reduce trauma to avoid removal and placement of the child(ren) in out-of-home care; increase substance use intervention/coping skills; enhance parents' ability to create stable/nurturing home environments; enhance the development of positive parent-child interactions; promote child health/development; enhance financial/housing stability

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 type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Finance Grant Accountant and Finance Grant Manager	11,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Voice and Data/Administrative Cost	17,000
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Family Care Program Specialist; Family Preservation Director (10% of time) and Family Preservation Supervisor (10% of time)	69,616
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Direct Client Expenses - aprox. \$133,427 Travel/Recruitment/Supplies/Equipm ent/Mobile Devices - aprox. \$5,557	138,984
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Peer Specialist and on-call crisis	43,400

	stabilization services	
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		280,000

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)

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:

Major Organizational Backing/Support ? In response to the increase in substance exposed newborns in Duval and surrounding counties, the Substance Exposed Newborn Duval County Workgroup convened in early 2017 to identify gaps in services, identify best practices, and develop concrete strategies to reduce this trend. A best practice identified is the Shared Family Care Residential program, currently being piloted in Circuit 4. Letters of support are available from workgroup members.

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:

Documented Study: A March 2015 report released by the Florida Department of Health, and updated in 2017, shows that Northeast Florida has high rates of infants born with Neonatal Abstinence Syndrome (NAS). Nassau (#5), Baker (#7) and Clay (#10) counties all ranked in the top 10 counties with the highest rates in the state, 145-187 percent higher than the state rate. Duval County has the highest number of babies born with NAS than any other county at 450 babies.

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?

In-home treatment model comprised of a Substance Abuse Counselor, Co-occurring Therapist, and therapeutic wrap-around case mgmt. services provided by a Certified Child Welfare Counselor and a paired therapist; Peer Recovery Specialists available 24/7 for emergency/crisis needs; support group and respite care for host families; in-home support to both host and involved families to ensure continued cohesive relationships; sustainable permanent housing; financial support and specialized training.

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

Specialized marketing, recruitment, and training of host homes; on-call emergency/crisis stabilization with peer specialists and program specialist; transition services; enhanced in-home wraparound case management services; support groups; financial support and respite care.

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?

- < 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 checked="" type="checkbox"/> Improve physical health	Ensure children receive medical and specialty care as needed.	Active participation in medical appointments and specialty care as recommended.
<input checked="" type="checkbox"/> Improve mental health	Enhance the development of positive parent-child interactions.	Active participation in parenting training; observations by case management staff, specialists and therapist.
<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 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	Enhance parents' ability to become more financially stable.	Evidence of legal and sufficient income; employment assistance by

		case management.
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Enhance parents' ability to become more financially stable.	Evidence of legal and sufficient income; employment assistance by case management.
<input checked="" type="checkbox"/> Reduce recidivism	Families will receive enhanced in-home wrap around case management services, peer specialist and therapeutic support and 24/7 emergency and crisis services to reduce recidivism by no new verified abuse reports.	No new verified abuse reports; positive assessments.
<input checked="" type="checkbox"/> Reduce substance abuse	Families will receive enhanced in-home wrap around case management services to include a substance abuse counselor, co-occurring therapist and a peer specialist.	Active participation in substance abuse treatment; number of negative drug screens.
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<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 checked="" type="checkbox"/> Other (Please describe): Improve housing stability	Enhance parents' ability to create	Observations by case management,

	stable and nurturing environments.	specialists and therapists; obtain and sustain adequate and stable housing; follow-up surveys with families at 6 and 12 months after service closure.
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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?
1. Amount Requested from the State in this Appropriations Project Request:	280,000	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	280,000	100%	

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

No