

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Inclusive Transition and Employment Management (ITEM) Program
2. Date of Submission: 11/09/2019
3. House Member Sponsor: Ray Rodrigues
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, 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? No
- 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:	750,000	750,000	1,500,000	750,000	750,000	1,500,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? Yes
 - 5a. If yes, which state agency? Department of Education
 - 5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?
 - 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.
Possible future funding adjustment

6. Requester:

- a. Name: Mary Partin
- b. Organization: The Dan Marino Foundation, Inc.
- c. Email: mpartin@danmarinofoundation.org
- d. Phone #: (954)368-6013

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

- a. Name: Betsy Christy
- b. Organization: The Dan Marino Foundation, Inc.
- c. Email: bchristy@danmarinofoundation.org
- d. Phone #: (954)368-6016

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

- a. Name: Robert Schneck
- b. Firm: Legis Group
- c. Email: rob@legisgroupfl.com
- d. Phone #: (352)585-7338

9. Organization or Name of entity receiving funds:

- a. Name: The Dan Marino Foundation, Inc.
- b. County (County where funds are to be expended): Broward, Miami-Dade
- 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?

People with autism or other disabilities are capable of employment but are underemployed (83% unemployment-4 times the national average). ITEM provides these participants with the opportunity to earn industry certifications in Technology and Hospitality with wraparound services including employability and social skills, internships, and intensive career coaching. ITEM is licensed by the DOE Commission for Independent Education; Past Participants improved their employment rate from 17% to 70%.

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	Staff Accountant - 75%, HR Coordinator - 75%	35,714
<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	Academic Director (1), Academic Managers (2), Career Manager (1), Career Services Director (1), Campus Instructors (10), Student Support (1), Student Admissions (2), Job Coaches (8), Employment Specialists (4), plus Payroll Taxes and Employee Benefits	673,886
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Mileage, Staff Training, Security Screening, Conferences, Academic Costs/Curriculum and Supplies	40,400

<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		750,000

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:

Program has the support of the Florida Department of Education, Div. of Vocational Rehabilitation (DATE-11/14/19); Broward Legislative Delegation (DATE-8/27/19); Miami-Dade County Commission (DATE-10/16/19); Agreements with Florida International University, Miami-Dade and Broward County Public Schools Superintendent Offices, University of Southern California Institute of Creative Technologies, Google, Shake-A-Leg, Miami-Dade, and The ABLE Trust.

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:

Federal and University studies; US Department of Education-Transition of Students with Disabilities to Post Secondary Education, Vanderbilt University- Preparing Students with Disabilities for School to Work Transition Post School Life, Princeton University-Transition, A Developmental Perspective for Adults with Developmental and Intellectual Disabilities

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?

As part of the programs, students complete 760 clock hours comprised of 150 clock hours of preparation toward industry certification through hands-on coursework, 300 clock hours in core courses that provide preparation for employment, business etiquette, and independent living and 310 hours of internship. At completion of courses and internships, students continue to benefit from ongoing career supports including intensive job exploration and coaching, as well as benefits counseling.

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

supports to students with disabilities according to national industry standards and licensing requirements toward the goal of passing certification exams; Adapt instruction time needed, modify teaching methods and materials geared to individual learning styles of students, and increase hands-on experiential learning through labs on employer worksites; Infuse virtual and mixed reality technology to enhance learning and natural supports Provide necessary social and self-advocacy skills, employment

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 type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	Participants will respond positively and heighten cultural awareness through collaborations with theaters, museums, and libraries to enhance knowledge and appreciation of diverse offerings within the community.	Attendance at events and community/social outings; Annual satisfaction surveys completed by all participants.
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Attendance/Program Completion - 80% of enrolled participants will complete the program; Certification Exam Passage - 80% of Participants	Measurement tools include certification passage rate, grades, progress notes, and job development logs all collected on a learning

	will earn Industry Certifications in either Technology or Hospitality.	management system (LMS). Satisfaction surveys will be completed by students, families, and employers, and a database maintained with the results. ViTA includes a secure network for capturing, storing, and reviewing data to drive research and evolve the system to adapt to user 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	Through internships and financial literacy courses, participants learn the value of a balanced budget based on future earnings. Participants who are employed become consumers adding to economy.	Successful completion of internships and class assignments and testing.
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Placement - 60% of participants will obtain employment within six months of program completion thereby empowering them toward their goal of independence and adding to the consumer base.	Employment placement percentage as reported to the Department of Education Commission for Independent Education.
<input type="checkbox"/> Reduce recidivism		

<input type="checkbox"/> Reduce substance abuse		
<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 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:	750,000	37.6%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	750,000	37.6%	Yes
4. Local:	0	0.0%	No
5. Other:	492,932	24.7%	Yes
TOTAL	1,992,932	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