



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 1723

1. Project Title 2. Senate Sponsor 3. Date of Request 

## 4. Project/Program Description

Expand direct services through the safe home for statewide for female child and teens of sex trafficking. Expand direct mobile anti sex-trafficking services to children up to age 24, male and female, in 12 counties (Polk, Orange, Seminole, Lake, Osceola, Sumter, Brevard, Charlotte, Lee, Hendry, Glades and Collier counties). Expand ability to provide prevention and education services to school districts and local schools.

5. State Agency to receive requested funds State Agency contacted? 

## 6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	400,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>400,000</b>

## 7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	400,000	18%
<b>Matching Funds</b>		
Federal	1,462,080	68%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	300,000	14%
<b>Total Project Costs for Fiscal Year 2021-2022</b>	<b>2,162,080</b>	<b>100%</b>

8. Has this project previously received state funding? 

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2020-21	0	400,000	319A	No

9. Is future funding likely to be requested? a. If yes, indicate nonrecurring amount per year. 

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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\$1,919,162 for Paycheck Protection Program (PPP) for payroll expenses.

#### 11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Salary and benefits for 1 Executive Director.	44,530
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Office equipment, supplies, and travel.	6,441
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Salaries and benefits for direct care staff.	94,807
Expense/Equipment/Travel/Supplies/Other	Direct care services for safe home residents, mobile team services, educational campaign and training for schools, and community advocacy and awareness.	245,622
Consultants/Contracted Services/Study	Survivor mentors services per state statute.	8,600
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>400,000</b>

#### 12. Program Performance

##### a. What specific purpose or goal will be achieved by the funds requested?

Expand direct services through the safe home for statewide for female child and teens of sex trafficking. Expand direct mobile anti sex-trafficking services to children up to age 24, male and female, in 12 counties (Polk, Orange, Seminole, Lake, Osceola, Sumter, Brevard, Charlotte, Lee, Hendry, Glades and Collier counties). Expand ability to provide prevention and education services to school districts and local schools.

##### b. What activities and services will be provided to meet the intended purpose of these funds?

Safe Home services for children and teen survivors of sex trafficking, 24 hour mobile crisis intervention services for at risk or identified children, teens and young adult victims of sex trafficking that include counseling, case management and survivor led advocacy and support, as well as prevention and education to various populations to include law enforcement, medical providers, hotel and hospitality industry, community leaders and school districts and educational professionals.

##### c. What direct services will be provided to citizens by the appropriation project?

The Safe Home provides 24 hour residential care infused with trauma-informed based practices, client-centered milieu modalities specific to trauma as related to sex trafficking, the mobile unit provides 24 hours a day, 7 days a week services of case management, advocacy, and clinical counseling with a team of a Clinician, Survivor Advocate and Survivor Mentor, education and awareness trainings for the community.

##### d. Who is the target population served by this project? How many individuals are expected to be served?

Persons with poor mental health, persons with poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, homeless persons, developmentally disabled persons, drug users (in health services), grade school, high school, and university/college students, currently or formerly incarcerated persons, drug offenders (in criminal justice), victims of crime, and community members. More than 800 people will be served.

##### e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?



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The project will improve physical and mental health, enrich cultural experiences, improve quality of education, protect the general public from harm (environmental, criminal, etc.), improve transportation conditions, enhance specific individual's economic self sufficiency, reduce substance abuse, and divert from criminal/juvenile justice system.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?**

Repayment of funds.

**13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

N/A



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#### 14. Requestor Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 15. Recipient Contact Information

a. Organization

b. Municipality and County

#### c. Organization Type

- ☐ For Profit Entity
- ☒ Non Profit 501(c)(3)
- ☐ Non Profit 501(c)(4)
- ☐ Local Entity
- ☐ University or College
- ☐ Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number