



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1254

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The requested funding will provide adult and/or emancipated minors who are survivors of human trafficking with emergency housing (in the form of hotels), transitional housing, and access to wrap around services including, but not limited to, legal assistance, dental care, internal medical care, and behavioral healthcare.

5. **State Agency to receive requested funds**

**State Agency contacted?**

6. **Amount of the Nonrecurring Request for Fiscal Year 2023-2024**

Type of Funding	Amount
Operations	865,259
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>865,259</b>

7. **Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	865,259	83%
<b>Matching Funds</b>		
Federal	166,000	16%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	10,000	1%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>1,041,259</b>	<b>100%</b>

8. **Has this project previously received state funding?**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2022-23	0	500,000	1304A	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.**

Our agency currently has a federal grant through the Department of Justice, guaranteed through April of 2024. Our agency is seeking a renewal of that funding as well funding from other funding sources.

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1254

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

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

- Planning   
  Design   
  Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List 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.

### 13. 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		0
Other Salary and Benefits	Program budget would cover 15% of our Accounting Manager's salary and benefits for a total of \$12,851.80. Program budget would also cover 100% of a part time bookkeeper at \$20 per hour for 20 hours per week, for a total of \$4,800 for the year. These positions would be responsible for time sheets, payroll data, purchasing, paying invoices, record keeping and all other accounting related functions.	17,652
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Program budget would include the salaries and benefits of our two full time case managers for a total of \$110,591.13. These positions are essential to the success and execution of the program. These two positions are responsible for providing the case work management to all program clients, performing client intakes, crisis management, and all administrative work related to the program.	110,591



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## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1254

Expense/Equipment/Travel/Supplies/Other	<ul style="list-style-type: none"> <li>- Rent for 20 units at \$1,300 per apartment for 12 months, total of \$312,000</li> <li>- Water and sewage for 20 units at \$100 per month for 12 months, total of \$24,000</li> <li>- Internet for 20 units at \$70 per month for 12 months, total of \$16,800</li> <li>- Curbside garbage pickup for 20 units at \$17 per month for 12 months, total of \$4,080</li> <li>- Electricity for 20 units at \$190 per month for 12 months, total of \$45,600</li> <li>- Renters Insurance for 20 units at \$200 per year, total of \$4,000</li> <li>- Staff Mileage at \$0.65 for 10</li> </ul>	537,480
Consultants/Contracted Services/Study	<ul style="list-style-type: none"> <li>- Security camera subscriptions at \$200 per year per unit at 20 units, total of \$4,000</li> <li>- Legal services at \$200 per session, est 6 per month for current or new clients for 12 months, total of \$14,400</li> <li>- Behavioral health and counseling services at \$250 per session, estimated 40 sessions will be performed for new and or existing clients per month for 12 months, total of \$120,000</li> <li>- Housekeeping services for 20 units at \$250, total of \$5,000</li> <li>- pest control for 20 units at \$50 per month for 12 mo</li> </ul>	199,536
<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>865,259</b>

#### 14. Program Performance

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

The purpose of obtaining funds provided by this grant is for United Way of Pasco County to be able to continue to provide survivors of human trafficking throughout the state of Florida services without interruption to current program clients and expand the program reach to keep up with the demand. The funds requested would be used to continue to provide housing and wrap around services such as intensive behavioral health therapy, legal assistance, healthcare, and dental care.

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

To execute this statewide initiative, our Case Managers will accept request for emergency hotel stays for no more than 7 nights, from law enforcement agencies and or anti-trafficking agencies that are a part of Voices for Florida Open Door program. Our agency will lease 1-3 bedroom housing units in the UWPC name. There will be at least one housing unit located in each of the following counties: Pasco, Pinellas, and Hillsborough. These housing units will serve as safe and healthy living environments for up to 12 months. While trafficking clients and their dependents are being housed in our units, our Case Manager and Victims Advocate will offer counseling, case management, crisis intervention, and access to wrap around services.

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

Survivors of human trafficking require a variety of wrap around services in order to regain a healthy and self-sufficient life. To assist our clients in our program, we will offer our clients access to many kinds of wrap around services. Our agency has a well-established relationship with a dental clinic, legal aid, mental health therapist, and health clinics. We also partner with agencies that provide services such as education, job placement, substance abuse recovery, and over 100 other direct services. Because the majority of our clients do not have their own transportation, we will provide our clients with access to public transportation through the use of bus passes and ride shares.

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

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The target population served by this project are adult men, adult women, and emancipated minors in the State of Florida. Since April 2021, our program has served 80 trafficking survivors. Whether that be in providing long term housing assistance, wrap around services, temporary hotel stays, or all three. We currently serve 30 clients; 24 in long term housing assistance and wrap around services, 6 just wrap around services. We project at least another 34 clients to participate in long term housing assistance as well as wrap around services by the end of the year. Since January of 2022, we have provided over 550 services to clients and project at least another 630 services provided by end of the year. Since January of 2022, we have provided 40 clients with emergency hotel stays, at least another 60 projected for 2023. Since January 2022, we have received 130 client referrals and project at least another 180 for 2023.

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

Clients in our program have access to many benefits such as obtaining their GEDs, acquiring employment, crisis intervention, sobriety, healthcare, legal assistance, mental health therapy and safe stable housing.

While clients are in the program, Case Workers check in with clients on a monthly basis at minimum. When clients exist the program the Case Workers will check in with clients once per month and will provide wrap around services for a minimum of 3 months and no more than 12 months after exiting the traditional housing program. Program has provided over 800 services to over 70 homeless survivors of human trafficking since April 2021. Since April 2021, 32 survivors have received long term housing assistance from this program, which initially was only expected to house 12 survivors. Since June 2022, the program has provided over 30 7-day emergency hotel accommodations for homeless Human Trafficking survivors. Since July of 2022, there have been over 70 emergency responses.

**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?**

As an agency that has managed multiple local, state, and federal grants we would do everything in our power to not have a penalty. However, should an event as such arise our agency would return the appropriate amount of funding.

**15. Requester Contact Information**

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

**16. 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



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## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1254

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number