

# Appropriations Project Request - Fiscal Year 2020-21

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: The Camillus House Human Trafficking Recovery (Phoenix) Program
2. Date of Submission: 11/08/2019
3. House Member Sponsor: Nicholas Duran  
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<br>for FY 2019-20<br><i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i> |                               |   | Develop New Funds Request<br>for FY 2020-21<br><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<br><br><i>(Recurring plus Nonrecurring: column A + column B)</i> | Recurring Base Budget<br><br><i>(Will equal non-vetoed amounts provided in Column A)</i>                        | <b>Additional Nonrecurring Request</b> | <b>TOTAL Nonrecurring plus Recurring Base Funds</b><br><br><i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i> |
| Input Amounts:     |   | 250,000                       | 250,000   |   | 500,000                                | 500,000   |

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 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.

: As per contract, corrective action plans may be required for noncompliance, nonperformance, or unacceptable performance under this Contract. Penalties may be imposed for failures to implement or to make acceptable progress on such corrective action plans. The increments of penalty imposition that shall apply, unless the Department determines that extenuating circumstances exist, shall be based upon the severity of the noncompliance that generated the need for corrective action plan.

6. Requester:

- a. Name: Hilda Fernandez
- b. Organization: Camillus House, Inc.
- c. Email: hfernandez@camillus.org
- d. Phone #: (305)374-1065

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

- a. Name: Shelley-Anne Glasgow-Wilson
- b. Organization: Camillus House, Inc.
- c. Email: shelleyg@camillus.org
- d. Phone #: (305)374-1065

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: Camillus House, Inc.
- b. County (County where funds are to be expended): 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?

The Camillus House Phoenix Program is designed to concentrate behavioral health and treatment services for adult-aged women who are victims of human trafficking. These individuals are identified and referred by Miami-Dade State Attorney Katherine Fernandez Rundle’s Office (SAO), Homeland Security, police departments and other providers for clients who meet the criteria as victims of domestic and commercial sexual exploitation, labor and other forms of human trafficking.

12. Provide specific details on how funds will be spent. (Select all that apply)

| Spending Category  | Description  | Nonrecurring<br>(Should equal 4d, Col. E) Enter “0” if<br>request is zero for the category |
|--|--|--|
| Administrative Costs:  |  |  |
| <input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits | Director, Behavioral Health Services & Psychologist                                | 25,000   |
| <input type="checkbox"/> b. Other Salary and Benefits                                      |  |  |
| <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                               | 5 FTE equivalent clinical, case management and residential support                 | 350,000  |
| <input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other            | Food, facility costs, life skills, educational/vocational, transportation services | 125,000  |
| <input type="checkbox"/> g. Consultants/Contracted Services/Study                          |  |  |

|   |  |         |
|---|--|---------|
| Fixed Capital Construction/Major Renovation:                                  |  |         |
| <input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering |  |         |
| TOTAL   |  | 500,000 |

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:

Letters of support can be provided from the State Attorney’s Office and the Homeless 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?

No

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?

The Camillus House Phoenix Human Trafficking Recovery Program is the only program of its kind serving adult-aged women who are victims of human trafficking in South Florida. Supportive and clinical services assist victims through several phases including: 1) crisis

intervention and assessment; 2) comprehensive assessment and case management; and 3) social reintegration. The funding requested for this project will support ongoing operational expenses and staffing for the program.

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

The goal of the Program is to support victims of human trafficking in order to prevent chronic homelessness and prevent re-victimization by: 1. Stabilizing victims of human trafficking by providing a safe place to receive care, treatment and services to enable victims to address their trauma and begin recovery. 2. Enhancing self-esteem and vocational skills to make victims of human trafficking less vulnerable to any form of exploitation. 3. Assisting victims of trafficking to obtain 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): Victims of Human Trafficking

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 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 type="checkbox"/> Increase or improve economic activity                                |  |  |
| <input type="checkbox"/> Increase tourism   |  |  |
| <input type="checkbox"/> Create specific immediate job opportunities                          |  |  |
| <input type="checkbox"/> Enhance specific individual's economic self sufficiency              |  |  |
| <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 checked="" type="checkbox"/> Other (Please describe): Improve the well-being of victims of human trafficking and secure permanent housing | A minimum of 3 adult victims of human trafficking will receive Human Trafficking Recovery Program service each month. • 100% of adult victims of human trafficking participating in the Human Trafficking Recovery Program will have a service plan that is updated every 30 days • 70% of adult victims of human trafficking successfully completing treatment in the Human Trafficking Recovery Program will move on to permanent housing upon discharge from the program | The program has minimum performance standards as well as outcomes as agreed contractually with DCF. A minimum of three individuals must be served every month, this is documented through maintenance of a census. All clients have service plan updates every 30 days, these plans are signed by both client and case manager and stored in the Homeless Management Information System. Discharge destination on successful completion is recorded and this measure tracks positive placement into housing. |

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: | 500,000 | 95.2%            | 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:   | 25,000         | 4.8%        | Yes |
| <b>TOTAL</b>  | <b>525,000</b> | <b>100%</b> |     |

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