1. **Title of Project:** Casa Familia Village Pilot Program
2. **Senate Sponsor:** Anitere Flores
3. **Date of Submission:** 02/12/2019
4. **Project/Program Description:**
   Establish a "best practice" demonstration program to develop permanent supportive housing to serve individuals with intellectual and developmental disabilities (IDD). The program will also address federal mandates to transition individuals with IDD, from facility-based settings to community based settings, while providing vocational, educational, and recreational enrichment, inclusion, and opportunities to enhance connectedness, integration, and self sufficiency within the community.
5. **State Agency to receive requested funds:** Department of Economic Opportunity
6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td>236,800</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td>312,000</td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td>548,800</td>
</tr>
</tbody>
</table>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>548,800</td>
<td>91.65%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>50,000</td>
<td>8.35%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td>598,800</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Fiscal Year (yyyy-yy)</th>
<th>Recurring</th>
<th>Amount</th>
<th>NonRecurring</th>
<th>Specific Appropriation #</th>
<th>Vetoed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018-19</td>
<td>250,000</td>
<td>2216</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9. **Is future-year funding likely to be requested?** No
10. **Details on how the requested state funds will be expended**

<table>
<thead>
<tr>
<th>Spending Category Administrative Costs:</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director/Project Head Salary and Benefits</td>
<td>Project lead salary and benefits</td>
<td>72,800</td>
</tr>
</tbody>
</table>
Benefits
Other Salary and Benefits
Expense/Equipment/Travel/Supplies/Other
Consultants/Contracted Services/Study

Operational Costs:
Salary and Benefits
Expense/Equipment/Travel/Supplies/Other
Consultants/Contracted Services/Study

Fixed Capital Construction/Major Renovation:
Construction/Renovation/Land/Planning Engineering

Total State Funds Requested (must equal total from question #6)

11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?
   Establish a "best practice" demonstration program for permanent supportive housing serving individuals with intellectual and developmental disabilities (IDD) that addresses federal mandates to transition individuals with IDD, from facility-based settings to community based settings, while providing vocational, educational, and recreational enrichment, inclusion, and opportunities to enhance connectedness, integration, and self sufficiency within the community.

b. What are the activities and services that will be provided to meet the intended purpose of these funds?
   Research and development of "best practices" programs and services for an affordable housing project that serves individuals with intellectual and developmental disabilities.

c. What are the direct services to be provided to citizens by the appropriations project?
   Establish a "best practice" program for permanent supportive housing serving individuals with IDD that addresses the need for vocational and educational enrichment, inclusion, and opportunities to enhance connectedness, integration, and self sufficiency within the community.

d. Who is the target population served by this project? How many individuals are expected to be served?
   Economically disadvantaged individuals with IDD and those specifically who are at an economic disadvantage and are at risk of living in institutional settings and/or homelessness.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
   This project will develop an affordable housing option for those with IDD for whom tenancy would otherwise be outside their financial reach. Additionally, this project will develop best practices strategies to ensure individuals are connected to the resources and services they need to become productive members of the workforce. Meaningful inclusion will enhance participants to gain understanding and acceptance by potential
employers and social support systems. Further, in a traditional supported living setting, staff would not be available at all times for general safety or health related emergencies. In contrast, the project will design and implement staffing needs based on best practices for this special population.

**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 in the contract?**

Reimbursement of funds to the state.

**12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.**

Casa Familia, Inc.

**13. Requestor Contact Information:**

- **Name:** Deborah Lawrence
- **Organization:** Casa Familia, Inc.
- **E-mail Address:** dlawrence@casafamiliainc.org
- **Phone Number:** (954)605-8789

**14. Recipient Contact Information:**

- **Organization:** Casa Familia, Inc.
- **County:** Miami-Dade
- **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify)
- **Contact Name:** Deborah Lawrence
- **E-mail Address:** dlawrence@casafamiliainc.org
- **Phone Number:** (954)605-8789

**15. Lobbyist Contact Information**

- **Name:** Ronald L. Book
- **Firm Name:** Ronald L. Book, P.A.
- **E-mail Address:** rana@rlbookpa.com
- **Phone Number:** (850)224-3427