

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Debbie Mayfield

11/08/2021

## The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

Funding requested is to provide operational support for two programs supporting homeless and at-risk of homelessness veterans in Brevard County. The first program is a street outreach program (called Search and Rescue) where personnel

Homeless Veteran Housing Assistance and Prevention - Brevard

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go out into the street housing, or prevent housing programs to becoming homeles veteran supportive	ets of our community t at-risk veteran famil to get them off the st s by securing financi housing program wh erans and their depe	to locate, engiles from losing reets; and 2) plant assistance to ich has a capa	age, a hous rever o pay acity to	and assist homeles sing. Focus of this it at-risk veterans for housing costs and provide emergen	s veterans and program is to: 1 acing imminent provide stabilit	their dep ) place un loss of he y. The se	pendents gensheltered ousing from econd progr	et into clients in n ram is our
5. State Agency to re	eceive requested fu	<b>nds</b> Dep	artme	ent of Children and	Families			
State Agency cont	tacted? No	•						
6. Amount of the Nor		for Fiscal Yea	ar 202	22-2023				
Type of Funding				Am	ount			
Operations					20	0,000		
Fixed Capital Outla	ıy					0		
<b>Total State Funds</b>	Requested				20	0,000		
7. Total Project Cost	for Fiscal Year 202	2-2023 (includ	ling r	-	_		)	
Type of Funding	Decree et al /france euro	-ti #C)		Amount 200,000	Percentag			
	Total State Funds Requested (from question #6)				)	41%		
Matching Funds Federal						0%		
	e amount of this requ	iost)			)	0%		
Local	e amount of this requ	iest)			)	0%		
Other				293,000		59%		
	ts for Fiscal Year 20	122-2023		493,000		100%		
8. Has this project p	reviously received :	state funding?	?	Yes		100 78		
Fiscal Year (yyyy-yy)	Amo			Specific Appropriation #	Vetoed			
	Recurring 0	Nonrecurri		352	) No			
2020-21	l 0	150	0,000	302	2  No			
9. Is future funding I	ikely to be requeste	ed?		No				
a. If yes, indicate	nonrecurring amou	nt per year.						
b. Describe the so	ource of funding that	nt can be used	l in li	eu of state fundin	g.			
Donations from In United Way Grant Tenants.	dividuals and Corpor Funding, Foundation	ations, Fundra Grant Funding	ising g, and	Event Sponsorship d Program Fees fro	s and Fees, m Housing			



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10. Has the entity requesting	g this pro	ject received an	y federal assistance	related to the COVID-19	pandemic?
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If yes, indicate the amount of funds received and what the funds were used for.

Paycheck Protection Program (PPP) in the amount of \$28,192 was received for payroll expenses over the period 5/4/2020 to 10/15/2020. PPP Round 2 for \$28,192 was received for payroll and operational expenses over the period 2/26/2021 to 08/12/2021.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Programs Director (Responsible for both Outreach and Housing Program): \$43,218, 75% in Outreach, 25% in Housing. Data Entry (Responsible for data input into HUD Case Management System HMIS) and screening prevention clients: \$30,891, 100% in outreach. Outreach Program Assistant (Conducts/ Organizes Outreach Activities): \$35,000. Housing Manager (Manages client cases and properties): \$40,891.	200,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	200,000

### 12. Program Performance

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

The ultimate goal of the program is to rapidly get homeless veterans off the streets and into a supportive housing program, and keep at-risk veterans in their homes helping them secure funding needed to stay housed and restructure their finances to stabilize their lives. Since 2011 when the State first started partnering with this agency, these programs have driven an outstanding 75% reduction in the total homeless veteran population in Brevard County according to the Brevard Homeless Coalition's Bi-annual Point in Time Count; far exceeding the reduction rate of any of the neighboring counties in the State.

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

Primary activities and services include: executing consistent street level outreach throughout Brevard to locate and assist unsheltered homeless veterans and get them into supportive housing programs, locating and assisting veterans facing imminent loss of housing obtain the financial assistance needed (directly through this program or through partner agencies) to prevent homelessness, and operation of a supportive housing program for homeless veterans centered on returning them to self-sufficiency.

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



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Street Outreach, Case Management, and Emergency/Transitional/Permanent Supportive Housing for Homeless, At-Risk, and Low Income Veterans and their Families.

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

Target population for both programs are homeless, at-risk, and low income veterans and their dependents located primarily in Brevard County and adjacent counties. Search and Rescue: Assists approximately 300 clients annually. Housing Program: Assists approximately 25 clients annually.

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

he consensus cost to local/state governments throughout Florida for 1 homeless person to remain homeless for 1 year is \$31,065, which comprises of costs to law enforcement agencies, emergency rooms, jails, public works, etc...over the course of a year. The cost to house in a transitional facility averages \$7,000 annually per person. In 2018 39 veterans and 50 dependents were found in Brevard unsheltered during our biannual count, representing a annual cost of \$2.76M annually to taxpayers. Minimum ROI is calculated as followed: 150,000 requested from state, 25 clients from streets to our housing program alone reduces burden to tax payers \$601,625 per year, resulting in a minimum ROI for the state of 301%. Every client we assist get into housing or stay in their housing only increases ROI. In 20-21 we assisted nearly 295 clients get into housing or remain in their housing.

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?

During our 2020-21 grant cycle, among several other performance measures, the agency was required to assist a minimum amount of clients monthly. If the agency failed to meet the minimum target, the amount submitted for reimbursement is deducted at a rate proportionate to the percentage of the missed target amount. The agency believes this is the penalty the contract agency should apply to this request as well. It should be noted, that at no time during the 2020-21 grant period did the agency receive a penalty.

relationship between the owners of the facility and the entity.
N/A

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the

NI/A		
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N/A		



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14	. Requestor Contact	Informat	ion					
	a. First Name	George		Last Name	Taylor			
	b. Organization	National '	National Veterans Homeless Support, Inc.					
	c. E-mail Address	georgejr@	georgejr@nvhs.org					
	d. Phone Number	(321)208	-7562	Ext.				
15	15. Recipient Contact Information							
	a. Organization	National '	Veterans Homele	ess Support,	Inc.			
	b. Municipality and	l County	Brevard					
	c. Organization Ty	ре						
	□For Profit Entity							
	☑Non Profit 501(c	2)(3)						
	□Non Profit 501(c	c)(4)						
	□Local Entity							
	□University or Co	or College						
	□Other (please specify)							
	d. First Name	George		Last Name	Taylor			
	e. E-mail Address	georgejr@	nvhs.org					
	f. Phone Number							
16	16. Lobbyist Contact Information							
	a. Name	None						
	b. Firm Name	None						
	c. E-mail Address							
	d. Phone Number							