



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1252

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The requested funding will provide trauma-informed services for survivors of child abuse and sexual violence and non-offending family members and support them through the investigation and healing process, as well as survivors of human trafficking (HT) or those at risk of HT. Staff will work to link survivors with needed intervention services and assist in navigating through the investigation/prosecution phase, assistance with completing documentation including crime victim compensation and attending MDT meetings. Services include needs assessment; victim advocacy and accompaniment; intensive case coordination; life skills training; and referrals for housing; mental health services; medical/dental care; legal services; and education assistance.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	587,081
Fixed Capital Outlay	0
Total State Funds Requested	587,081

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	587,081	35%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,074,247	65%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	1,661,328	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2024-25	0	501,500		No

9. Is future-year 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.



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction ☐ N/A

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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

12. 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		
Salary and Benefits	-One full-time Human Services Coordinator -Four full-time Behavioral Health Clinicians -One full-time Office Support Specialist	580,173
Expense/Equipment/Travel/Supplies/Other	Office supplies, cellphone, other equipment	6,908
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		587,081

13. Program Performance

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

Provide trauma-informed services to survivors of child abuse, human trafficking and sexual violence. Staff will work to link survivors with needed intervention services; assist in navigating through the investigation/prosecution phase; provide assistance with completing documentation including crime victim compensation; and attend MDT meetings. The goal is to ameliorate the impact of the trauma and assist in the healing process. By providing these support services, survivors are more likely to participate in the criminal justice process thus impacting public safety.



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

Survivors of sexual violence, human trafficking or child abuse will receive crisis intervention services to assess and address immediate emotional and physical needs and safety. They will also receive information and referrals to needed and/or specialized services and resources; and advocacy by acting on behalf of survivors or providing significant assistance to help them access services. Other services include Human Trafficking Assessments, accompaniment, education/outreach, and multi-disciplinary meetings.

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

Citizens of Broward County who are survivors of sexual violence, human trafficking or child abuse will receive the following through NJCC:

1. Crisis intervention services to address and assess immediate emotional and physical needs and safety.
2. Information and referrals to needed and/or specialized services and resources and;
3. Advocacy and accompaniment to meet the needs of survivors.

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

The Advocacy Program will provide direct services for up to 540 survivors of sexual assault and child abuse and direct intensive services to 40 Human Trafficking survivors as well provide 12 community outreach presentations. The program seeks to empower individuals at risk of human trafficking, survivors of HT, child abuse and sexual assault, and county residents to be aware, get involved, and report these horrifying incidents so the offender may be fully prosecuted. Finally, they provide a comprehensive array of direct and intensive intervention services to survivors in order for them to maneuver through the criminal justice system and everyday life.

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

This funding will provide needed services to survivors of child abuse, sexual violence, and human trafficking to ensure they are supported through the healing and prosecution process and enhance public safety.

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?

NJCC fully intends to meet deliverables to provide treatment to the community. Broward County has a rigorous internal audit control utilizing the schedule of expenditures of federal and state awards requirements, and a fiscal system in place to ensure the proper expenditure of all project revenues. In addition, Broward County employs experienced and qualified employees to provide oversight of grant funds through vetted internal processes and procedures.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☐ Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No



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☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

☐ Yes, Applied

☐ Yes, Received

☐ No

☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

18. 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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e. E-mail Address

f. Phone Number Ext.

19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.