

Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: Camillus House ISPA Expansion Funding
2. Date of Submission: 12/28/2015
3. House Member Sponsor(s): Jose Diaz

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
- b. What is the most recent fiscal year the project was funded? 2015-16
- 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 (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget (Will equal non-vetoed amounts provided in Column A)	INCREASED or NEW Recurring Requested	TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year)	Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:	0	200,000	200,000	0	0	200,000	200,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs

5. Requester:

- a. Name: Shed Boren
- b. Organization: Camillus House, Inc.
- c. Email: shed@camillus.org
- d. Phone #: (305)632-6647

6. 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) Broward, Miami-Dade, Monroe

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

Project Description:

The Camillus House Institute of Social and Personal Adjustment (ISPA) Expansion will increase capacity for residential substance abuse treatment services for women at Camillus House in Miami by adding an additional 12 beds to the existing 60 bed program ? making the total bed count for the ISPA program 72. The ISPA program was established at Camillus House in 1988 to serve men suffering for substance abuse and mental illness. The program was formally licensed in 1997, and is now licensed for Outpatient, Day/Night, Residential Levels II and IV, and Aftercare treatment services. The increase of homelessness among women has developed a need for services designed to meet the specific treatment and mental health needs of women living on the streets. This funding request is for year-2 operations of the 12 bed expansion for women.

Purpose of Funding:

The funding requested for this project will support ongoing operational expenses and staffing related to increasing the capacity of Camillus? ISPA program by 12 beds. Specifically, the funding will be used to cover only the incremental costs of adding 12 beds to the program since the larger 60 bed ISPA program operates within the same facility as the 12 beds for women. Thus the \$200,000 requested herein will only be used to offset food costs associated with the 12 women and additional staffing needed to provide specialized services. The program is staffed by licensed mental health professionals including a licensed psychiatrist; licensed psychologist; licensed clinician; and trained residential assistance. It is important to note that Camillus has been able to leverage an additional \$500,000 in Federal funding each year to support this program each year since 2012.

Areas Served:

The ISPA Expansion for women provides services for women who are homeless and suffering from substance abuse and mental health issues throughout all of Miami-Dade County. However, on occasions, persons from other parts of the state also come to Camillus to access these services. No one is turned away due to non-residency in Miami-Dade. Thus, this program is state-wide resource as needed.

Program Outcomes and Goals:

DCF monitors and oversees treatment programs that receive funding from the State of Florida. Thus, the outcomes and goals for these programs must be consistent with standards set throughout the rest of the state. The following figures reflect the goals as established by DCF:

- Adults served with Severe and Persistent Mental Illness (SPMI) must be over 31
- % of adults provided a stable housing environment must be over 90%
- Average number of days worked for pay by program participants will be at least 20
- 99% service events will be recorded in state Mental Health Information system.
- Percent change of adults employed from admission to discharge will be at least 10%
- Adults provided with Substance Abuse treatment will be at least 25
- % of adults who successfully complete substance abuse treatment services will be at least 51%
- % of adults in a stable housing environment at the time of discharge will be at least 94%
- % change in adults arrested 30 days prior to program versus prior to discharge will be 15%

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

Federal: 0

State: 200,000 (Excluding the requested Total Amount in #4d, Column G)

Local: 0

Other: 0

9. Is this a multi-year project requiring funding from the state for more than one year?

Yes