

# 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: Low Income Prevention Care
2. Date of Submission: 03/01/2016
3. House Member Sponsor(s): Daphne Campbell

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No  
*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?
- 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 <i>(If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2016-17 <i>(If no new Recurring or Nonrecurring funding is requested, enter zeros.)</i>			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: Column A + Column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A )</i>	<b>INCREASED or NEW Recurring Requested</b>	<b>TOTAL Nonrecurring Requested</b> <i>(Nonrecurring is one time funding &amp; must be re-requested every year)</i>	<b>Total Funds Requested Over Base Funding</b> <i>(Recurring plus Nonrecurring: Column E + Column F)</i>
Input Amounts:					0	250,000	250,000

- 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: Amina Dubuisson
- b. Organization: Haitian American Nurses Association of Florida, Inc (HANA)
- c. Email: info@hanaofflorida.org
- d. Phone #: (305)609-7498

6. Organization or Name of Entity Receiving Funds:

- a. Name: Haitian American Nurses of Florida, Inc (HANA)
- b. County (County where funds are to be expended) Broward, Miami-Dade
- c. Service Area (Counties being served by the service(s) provided with funding) Broward, Miami-Dade

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.)

The requested funds will be used to address heart disease education and awareness of heart disease where individuals go red in the United States, 1 in 4 women dies from heart disease. In fact, coronary heart disease- the most common type of heart disease and is the first killer of both men and women in the United States. Also to teach or educate prevention on Hypertension, Cholesterol, Nutrition and Physical Activity. Due to the overwhelming concerns of the Zika Virus in the global community, HANA felt the urgency to educate low income families and urban areas about the virus in order for them to serve as Health Ambassadors to their families and the community for this virus. HANA will be the tools for education of chronic diseases such as diabetes, breast cancer, HIV-Aids and Hepatitis Virus etc via media, TV and Radio. HANA will also develop education materials on breast cancer tailored to the population they serve culturally and distribute language appropriate as educational tools to prevent certain diseases within our communities to improve population health and also global healthcare outcomes.

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

Federal: 0

State: 0 (Excluding the requested Total Amount in #4d, Column G)

Local: 0

Other: 250,000

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

No