

Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: CESC - Homelessness Services and Residential Support

2. Date of Submission: 02/07/2017

3. House Member Sponsor: Halsey Beshears

Members Copied: Joseph Abruzzo

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?

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 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2017-18 (Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring.)		
Column:	A	B	C	D	E	F
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)	Additional Nonrecurring Request	TOTAL Nonrecurring Request (Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)
Input Amounts:					1,000,000	1,000,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2017-18? Yes

5a. If yes, which state agency? Department of Children and Families

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency.

6. Requester:

- a. Name: Monique Ellsworth
- b. Organization: CESC, Inc.
- c. Email: monique.ellsworth@cesctlh.org
- d. Phone #: (941)545-0812

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: Monique Ellsworth
- b. Organization: CESC, Inc.
- c. Email: monique.ellsworth@cesctlh.org
- d. Phone #: (941)545-0812

8. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: CESC, Inc.
- b. County (County where funds are to be expended): Leon
- c. Service Area (Counties being served by the service(s) provided with funding): Franklin, Gadsden

10. What type of organization is the entity that will receive the funds? (Select one)

- ☐ For Profit
- ☒ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☐ Local Government
- ☐ University or College
- ☐ Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

These funds will support continued operations of CESC, Inc. and allow for limited expansion of direct services available to the 3,000+ clients served annually. CESC, Inc. operates three cutting edge programs, the Kearney Center, Westgate, and The Dwellings. The Kearney Center is a state-of-art facility that provides comprehensive wraparound services in a one-stop model of care. Westgate and The Dwellings provides low-cost housing opportunities in rooming-house and tiny-house format.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	CESC, Inc. provides direct services to area citizens through case management and emergency shelter to nearly 400 each night and on-site nursing to clients with medical needs daily.	485,380
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	CESC, Inc. receives a great deal of in-kind contributions from area businesses and community members. However, supplemental purchases, including food, are	376,500

	required to meet the needs of the clients.	
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	The safety of the clients served by CESC, Inc. and the community members who volunteer their time is of great importance. For this reason, there is law enforcement on-site seven days a week and a security guard at our entrance.	138,120
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		1,000,000

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

N/A

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

The City of Tallahassee, Leon County and the United Way of the Big Bend all strongly support the operations of CESC, Inc.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

No

17. Will the requested funds be used directly for services to citizens?

Yes

17a. Describe the target population to be served. Select all that apply to the target population:

- ☒ Elderly persons
- ☒ Persons with poor mental health
- ☒ Persons with poor physical health
- ☒ Jobless persons
- ☒ Economically disadvantaged persons
- ☒ At-risk youth
- ☒ Homeless
- ☒ Developmentally disabled
- ☒ Physically disabled
- ☒ Drug users (in health services)
- ☐ Preschool students
- ☐ Grade school students
- ☐ High school students
- ☒ University/college students
- ☒ Currently or formerly incarcerated persons
- ☒ Drug offenders (in criminal Justice)
- ☐ Victims of crime
- ☐ Other (Please describe)

17b. How many in the target population are expected to be served?

- ☐ < 25
- ☐ 25-50
- ☐ 51-100
- ☐ 101-200
- ☐ 201-400
- ☐ 401-800
- ☒ >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input checked="" type="checkbox"/> Improve physical health	CESC, Inc. will provide medical clinic services to persons experiencing	Can provide a monthly report of medications that were provided and

	homelessness by staffing two LPNs 7 days a week and purchasing and dispensing prescription medications.	the number of unique clients who received medical service on-site.
<input checked="" type="checkbox"/> Improve mental health	CESC, Inc. will provide referrals to mental health services that are provided by both our staff, and representatives from partnering agencies.	Provide monthly report on the number of volunteers servings with CESC, Inc.
<input checked="" type="checkbox"/> Enrich cultural experience	The clients served by CESC, Inc. are very diverse. The opportunity for the Tallahassee/Leon community to interact with clients through volunteering at the Kearney Center serves to enrich lives.	Provide monthly report on the number of volunteers serving with CESC., Inc.
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	The clients are offered the opportunity to participate in on-site GED classes offered in conjunction with Leon County School Board. Clients are also offered the opportunity to participate in vocational training.	Provide monthly reports on participation in GED, vocational training or advanced education.
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	CESC, Inc. partners with Big Bend After Re-entry Coalition in directly addressing the needs of individuals recently released from incarceration.	Provide a monthly report on the number of recently incarcerated individuals served through the Kearny Center.
<input checked="" type="checkbox"/> Improve transportation conditions	CESC, Inc. provides monthly bus passes to most of the clients served.	Provide a monthly report on the number of monthly bus passes

	This encourages the use of public transportation and increases ridership on the Star Metro system.	issues.
<input checked="" type="checkbox"/> Increase or improve economic activity	CESC, Inc. provide economic improvements to the community at large by spending the operational budget locally, predominately through payroll spent within the community.	Provide monthly report of payroll expenditures to include the number of individuals placed in housing.
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	CESC, Inc. will enhance the individual economic self-sufficiency of the clients served by referring them to partnering employment agencies as well as engaging them in case management.	Provide monthly report of the number of referrals that are made to partnering agencies.
<input checked="" type="checkbox"/> Reduce recidivism	CESC, Inc. Partners with the Big Bend After Re-Entry Coalition to address the needs of recently incarcerated individuals. The Kearney Center serves as the portal for individuals released.	Provide monthly report of the number of individuals recently incarcerated served at the Kearney Center.
<input checked="" type="checkbox"/> Reduce substance abuse	CESC, Inc. partners with Disc Village to provide on-site care and counseling for individuals who are in need of and request substance abuse assistance.	Provide monthly report of number of individuals who seek and receive substance abuse counseling.
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	CESC, Inc. provides the opportunity for approximately 20 individuals per month to perform court ordered	Provide monthly report on the number of individuals serving through

	service at the Kearney Center.	this program.
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	1,000,000	32.0%	N/A
2. Federal:	77,791	2.5%	Yes
3. State: (Excluding the requested Total Amount in #4d, Column F)	41,400	1.3%	Yes
4. Local:	915,000	29.3%	Yes
5. Other:	1,093,341	35.0%	No
TOTAL	3,127,532	100%	

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

Yes

20a. How much state funding would be requested after 2017-18 over the next 5 years?

0<1M

- ☐ 1-3M
- ☒ >3-10M
- ☐ >10M

20b. How many additional years of state support do you expect to need for this project?

- ☐ 1 year
- ☐ 2 years
- ☐ 3 years
- ☐ 4 years
- ☒ ≥ 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

- ☒ ongoing activity ? no total cost
- ☐ <1M
- ☐ 1-2M
- ☐ >2-3M
- ☐ >3-10M
- ☐ >10M