



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Holocaust Survivor Assistance

2. **Senate Sponsor:** Kevin Rader

3. **Date of Submission:** 11/20/2017

4. **Project/Program Description:**

Through the Holocaust Survivor Assistance Program, Ruth & Norman Rales Jewish Family Services (JFS) provides survivors with homecare and personal care services so that they safely can age in their homes and remain independent.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Elder Affairs

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
250,000		250,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	3,001,231	92.3%
TOTAL	3,001,231	92.3 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 3,251,231

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? Yes

b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 5

c. What is the most recent fiscal year the project was funded? 2017-18

d. Were the funds provided in the most recent fiscal year subsequently vetoed? No

e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:	92,946		92,946

10. Is future-year funding likely to be requested?

Yes

a. If yes, indicate non-recurring amount per year.

250,000

11. Program Performance:

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

JFS currently provides 335 Holocaust Survivors with the care and assistance they need so that they are able to remain safely at home without having to relocate to residential or institutional care. Approximately three quarters of Holocaust survivors are over age 85, with a majority in their upper 90s, and two thirds of Holocaust survivors live alone with little or no family to help care for them. As victims of terror and torture, Holocaust survivors have special needs to safely age in place in their homes. While institutionalized settings are beneficial for some older Americans, they can have an adverse and even traumatic effect on Holocaust survivors. Funds will enable JFS to continue to provide vital services to the hundreds of Holocaust survivors in our community so that they may safely remain in their homes.

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

Holocaust Survivors will be provided with homecare and personal care services.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		



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<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Personal Care/Homecare	250,000
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		250,000

d. What are the direct services to be provided to citizens by the appropriations project?

Personal Care and Homecare Services

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

350 Holocaust Survivors

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

Through providing homecare and personal care services, Holocaust Survivors realize an improved quality of life and health, and are able to age in their homes, rather than having to move to residential or institutional care. Data on the effective quality of services is evaluated through quarterly direct client contact and case management records. Quantitative data is submitted by the Director of Holocaust Survivor Assistance Programs to the Fiscal Grants Coordinator to track units of service and expenditures.

g. 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?

The standard penalties are sufficient.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

N/A

13. Requestor Contact Information:

a. Name: Danielle Hartman

b. Organization: Ruth & Norman Rales Jewish Family Services, Inc.



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- c. **Email:** DanielleH@ralesjfs.org
- d. **Phone Number:** (561)852-3343

14. Recipient Contact Information:

- a. **Organization:** Ruth & Norman Rales Jewish Family Services, Inc.
- b. **County:** Palm Beach
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** Danielle Hartman
- e. **E-mail Address:** DanielleH@ralesjfs.org
- f. **Phone Number:** (561)852-3343

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

- a. **Name:** Bernie Friedman
- b. **Firm:** Becker & Poliakoff, PA
- c. **Email:** bfriedman@bplegal.com
- d. **Phone Number:** (954)985-4180