

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 2492

1. Project Title	Empath Adult Da	ay Center - Vete	erans					
2. Senate Sponsor	Nick DiCeglie							
3. Date of Request	02/27/2023							
4. Project/Program D	escription							
The Empath Adult I County.	Day Center is a Vet	eran-centric pro	gram and t	ne only medic	ally-based adult day	/ center in Pinellas		
5. State Agency to receive requested funds Department of Veterans' Affairs								
State Agency conta	acted? Yes							
6. Amount of the Non	recurring Request	for Fiscal Yea	r 2023-202	4				
Type of Funding				Amount				
Operations					350,000			
Fixed Capital Outlay					0			
Total State Funds	Requested				350,000			
7. Total Project Cost f	or Fiscal Year 202	3-2024 (includ	ing matchi	ng funds ava	ilable for this proj	ect)		
Type of Funding			Am	ount	Percentage			
Total State Funds R	equested (from que	estion #6)		350,000	100%			
Matching Funds								
Federal				0	0%			
State (excluding the amount of this request)				0	0%			
Local				0	0%			
Other				0	0%			
Total Project Costs	s for Fiscal Year 20	023-2024		350,000	100%			
8. Has this project pro	eviously received	state funding?	No					
Fiscal Year (уууу-уу)	Amo Recurring	ount Nonrecurrir	A 10 10 1	Specific opriation #	Vetoed			
9. Is future 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.								
10. Has the entity req	uesting this proje	ct received any	/ federal as	sistance rela	ated to the COVID-	19 pandemic?		
No								
If yes, indicate the	amount of funds	received and v	hat the fu	nds were use	ed for.			



11. Status of Construction

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Complete questions 11 and 12 for Fixed Capital Outlay Projects

	a. What is the current phase of the project?						
	OPlanning	ODesign	Construction				
	b. Is the project	t "shovel ready	" (i.e permitted)?				
	c. What is the estimated start date of construction?						
	d. What is the estimated completion date of construction?						
12			to receive, directly or indirect ners of the facility and the entit		outlay funding. Include the		

13. 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	Personal Care Attendant to accompany the transport of Veterans to/from the Adult Day Center; this person would have the ability to provide supervision to Veterans, assist Veterans with their onboarding and offboarding, report to the Program Director of any changes/concerns in the physical/emotional status of the Veterans being transported	40,000		
Expense/Equipment/Travel/Supplies/ Other	Insurance for one (1) handicapped-accessible vehicle; funding for regular maintenance of the vehicle; funding for gas; wrapping the vehicle in Empath Adult Day Center logo/information; purchase of required safety equipment for the vehicle (slide board, AMBU bag, AED, CPR equipment)	135,000		
Consultants/Contracted Services/Study	Full-time contracted staff member to drive an agency vehicle to provide transportation to/from the Adult Day Center for our Veterans	75,000		
Operational Costs: Other				
Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/ Other	Purchase of a handicapped-accessible transport vehicle to provide our Veterans with transportation to and from the Adult Day Center	100,000		
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)				

14. Program Performance

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



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The Empath Adult Day Center (ADC) in St. Petersburg is specially designed with Veteran community members' needs top of mind and the only medically-based adult day center in Pinellas County. The ability to purchase a handicapped accessible vehicle would provide the Emapth Adult Day Center the ability to transport our Veterans safely to and from the Adult Day Center at no cost to them, thereby removing two main barriers in healthcare access: transportation and cost.

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

The Empath Adult Day Center provides the recreational, psychosocial and medical needs of adults of all ages and provides respite for their caregivers. Our goal is to help our participants remain healthy both physically and mentally so they can continue to live is their homes and have an improved quality of life.

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

Transportation on a handicapped-accessible vehicle to/from the Empath Adult Day Center from/to Veterans' personal residence.

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

The target population: Veterans residing in Pinellas County
The goal is to serve a minimum of 25 individual Veterans/week (1,300 annually)

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

The expected benefit of this project is to increase access to adult day care services for our Veteran community by providing them with a handicapped-accessible vehicle for free transport to/from the Empath Adult Day Center. Day Center staff will track/document the number of riders each day and maintain a spreadsheet with this information.

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 the contract?

Should Empath Adult Day Center fail to meet deliverables or performance measures, the funding will be returned to the State of Florda.

5. Requester Contact Information							
	a. First Name	Jason		Last Name	Pettry		
	b. Organization	Empath Adult Day Center					
	c. E-mail Address	JasonPet	JasonPettry@EmpathHealth.org				
	d. Phone Number	(727)328	-3260	Ext.			
6. Recipient Contact Information							
	a. Organization	tion EmpathHealth					
b. Municipality and County Pinellas							
	c. Organization Type						
	□For Profit Entity						
☑Non Profit 501(c)(3)							
	□Non Profit 501(c)(4)						
	□Local Entity						



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□University or College						
□Other (please sp	□Other (please specify)					
d. First Name	Jason	Last Name	Pettry			
e. E-mail Address	JasonPettry@EmpathHealth.org					
f. Phone Number	(727)328-3260					
17. Lobbyist Contact Information						
a. Name	Patrick E. Bell					
b. Firm Name	Capitol Solutions LLC					

c. E-mail Address | pbell@capitolsolutions.biz

d. Phone Number (850)544-0784