

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

LFIR # 1353

1. Project Title City of South Miami Senior Programming & Activities

2. Senate Sponsor Alexis Calatayud

3. Date of Request 02/06/2023

4. Project/Program Description

Citywide Senior Programming and Activity Services is designed to provide a wide variety of services such as counseling and support groups, information and referral, health and wellness activities, recreational and social programs, home lunch delivery, computer classes, outings, and more for senior adults, 55 years of age and older in our area.

5. State Agency to receive requested funds

Department of Elder Affairs

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	180,000
Fixed Capital Outlay	0
Total State Funds Requested	180,000

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	180,000	55%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	147,000	45%	
Other	0	0%	
Total Project Costs for Fiscal Year 2023-2024	327,000	100%	

8. Has this project previously received state funding? No

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

9. Is future funding likely to be requested?

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150,000	

Yes

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

N/A

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

Yes

If yes, indicate the amount of funds received and what the funds were used for.



5,965,668 from capital improvements and premium/hazard from ARPA, CARES

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

OPlanning ODesign OConstruction

- b. Is the project "shovel ready" (i.e permitted)?
- c. What is the estimated start date of construction?
- d. What is the estimated completion date of construction?
- 12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

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		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	Contractor fees, materials and supplies, counseling and support groups, information and referral, health and wellness activities, recreational and social programs, home lunch delivery, computer classes, outings.	180,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	180,000

14. Program Performance

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

The goal s to provide a variety of comprehensive programs that will improve the overall quality of life to senior citizens in our community.

Research shows older adults who participate in senior programs can learn to manage and delay the onset of chronic disease and experience measurable improvements in their physical, social, spiritual, emotional, mental, and economic well-being.



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

Older senior adults will have access to water aerobics, walking clubs, multiple group exercise classes, pickleball, trips and tours, computer classes, art classes, book clubs, weekend senior meals program, bingo and more.

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

Direct services include water aerobics, walking clubs, multiple group exercise classes, pickleball, trips and tours, computer classes, art classes, special interest clubs, weekend senior meals program, bingo and more.

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

Adult seniors 55 years or older. Roughly, a minimum of 500 older adults are expected to be served.

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

Through this project, we expect to improve and maintain quality of life, enhance overall physical and mental health, and provide a renewed sense of purpose for the seniors participating in our programs. Outcomes will be measured by program participation/attendance and surveys at the conclusion of specific program sessions.

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?

The City will enforce all agreements, including liquidated damages for unsatisfactory performance levels. Furthermore, suggested penalties for a program failing to meet the expectations and needs of the contracting agency and/or target population include: a written program improvement plan, meeting between program director and contractor, or re-evaluating the interest of local seniors.

15. Requester Contact Information

a. First Name	Genaro	Last Name Iglesias
b. Organization	City of South Miami	
c. E-mail Address	CIglesias@southmiamifl.g	gov, citymanager@southmiamifl.gov
d. Phone Number	(305)668-2510	Ext.

16. Recipient Contact Information

a. Organization	City of South Miami	

b. Municipality and County Miami-Dade

c. Organization Type

□For Profit Entity

□Non Profit 501(c)(3)

□Non Profit 501(c)(4)

☑Local Entity

□University or College

□Other (please specify)



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d. First Name	Genaro	Last Name	Iglesias	
e. E-mail Address	Clglesias@southmiamifl.g	JOV		
f. Phone Number	(305)668-2510			
7. Lobbyist Contact Information				
a Namo	Max Steven Losper			

17.

a. Name	Max Steven Losner
b. Firm Name	Becker & Poliakoff PA
c. E-mail Address	mlosner@beckerlawyers.com

d. Phone Number (305)878-2090