



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1420

1. Title of Project: Easter Seals Capital Improvement Project

2. Senate Sponsor: Anitere Flores

3. Date of Submission: 01/22/2019

4. Project/Program Description:

Easterseals South Florida (ESSF) is a 501 c(3) that has been a leading provider of disability services since its founding in Miami, Florida, in 1942. ESSF is requesting funding to support the replacement of its 32-year old HVAC system and to complete upgrades within its facility located in Miami. The facility houses an adult day care for adults with Alzheimer’s disease and other memory disorders as well as the agency’s administrative offices. The instability of the current HVAC system sometimes leads to unexpected closings due to the frailty of the adults participating in our program.

5. State Agency to receive requested funds : Department of Elder Affairs

State Agency Contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	
Fixed Capital Outlay	650,000
Total State Funds Requested	650,000

7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	650,000	68.42%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	250,000	26.32%
Other	50,000	5.26%
Total Project Costs for Fiscal Year 2019-2020	950,000	100.0%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

9. Is future-year funding likely to be requested? No

10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		



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Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Capital improvements to the facility; replacing 30+ years old HVAC system and facility upgrades	650,000
Total State Funds Requested (must equal total from question #6)		650,000

11. Program Performance:

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

Replacing the internal HVAC and its infrastructure, installation of an energy management system and the renovation of interior spaces have reached a crucial juncture for the organization. Due to the advanced age of the existing HVAC system, unforeseen outages and costs to respond to these issues are increasing in frequency. A total replacement of the HVAC system and facility upgrades will enable the agency to better meet the needs of those we serve and will eliminate HVAC outages which are disruptive to program services.

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

The Center will continue to provide adult day care for adults living with Alzheimer’s disease and other memory disorders serving clients twelve hours a day, six days per week. Currently, more than 110 families are being served in the adult day care center.

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

Adult day care services and caregiver support are provided to relieve families’ care-giving burden for their loved one living with Alzheimer’s disease and dementia. The day care provides evidence-based programming that is shown to ameliorate the symptoms of dementia. Program participation replaces the social isolation that often precedes family members’ seeking out social services. Program supports and therapeutic activities are designed to stimulate cognitive engagement and physical activit

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

110 adults will receive adult day care services and 110 families will receive care-giving respite.

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

The following program outcomes are measured for the Adult Day Care: % of clients who remain living in the community: Target >90%; % of family caregivers who report decreased feelings of burden (using the Zarit’s questionnaire): Target: >80%; % of family caregivers who report services provided by Easter Seals have



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maintained or improved their ability to continue providing care: Target: >90%; % of program participants who maintain or improve their health goals: Target: > 90%; and % of participants without access to community resources being linked to community services including Medicaid, transportation, and home delivered meals: Target >85%.

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 in the contract?

The agency agrees the funds required to support the project would be reimbursed based on actual spending to support the actual expenses incurred. In the unanticipated case that funds are expended but the project not completed, remaining funds would not be disbursed until project is completed.

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.

Easter Seals South Florida is a 501c3 non profit organization and is therefore self-owned. A Board of Directors oversees operations.

13. Requestor Contact Information:

- a. **Name:** Loreen Chant
- b. **Organization:** Easter Seals South Florida
- c. **E-mail Address:** lchant@sfl.easterseals.com
- d. **Phone Number:** (305)547-4757

14. Recipient Contact Information:

- a. **Organization:** Easter Seals South Florida
- b. **County:** Miami-Dade
- 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:** Loreen Chant
- e. **E-mail Address:** lchant@sfl.easterseals.com
- f. **Phone Number:** (305)547-4757

15. Lobbyist Contact Information

- a. **Name:** David Caserta
- b. **Firm Name:** David Caserta Government Relations Inc



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