

1. Project Title

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

Maintaining Independence for the Blind

LFIR # 3017

•				
3. Date of Request 01/20/2023				
4. Project/Program Description				
The Lighthouse of Collier intends to serve twenty five independence in their homes. We would utilize a full-till Instructor to provide 1:1 instruction in ADL's (Activities to function independently within their homes. Clients will be given on average anywhere from 3 to 15 Technology training. Length of training depends on serhome.	me equivalent Certified I of Daily Living) and/or A 5 lessons on ADL's (Acti	nstructor and/or an A ssistive Technology t vities of Daily Living)	assistive Technology training to enable clients and/or Assistive	
	artment of Education			
State Agency contacted? No				
6. Amount of the Nonrecurring Request for Fiscal Yea	ır 2023-2024			
Type of Funding	Am	ount		
Operations		150,000		
Fixed Capital Outlay		0		
Total State Funds Requested		150,000		
7 Total Brainst Coat for Finant Year 2022 2024 (includ	ing matching from do ar	silahla far thia wesis	4)	
7. Total Project Cost for Fiscal Year 2023-2024 (includ			=01)	
Type of Funding Total State Funds Requested (from question #6)	Amount 150,000	Percentage 75%		
Total State Funds Reduested (Iforn duestion #6)		/ 370		
•	130,000			
Matching Funds	·			
Matching Funds Federal	C	0%		
Matching Funds Federal State (excluding the amount of this request)	C	0% 0%		
Matching Funds Federal State (excluding the amount of this request) Local	C C	0% 0% 0%		
Matching Funds Federal State (excluding the amount of this request) Local Other	0 0 0 50,000	0% 0% 0% 25%		
Matching Funds Federal State (excluding the amount of this request) Local	C C	0% 0% 0% 25%		
Matching Funds Federal State (excluding the amount of this request) Local Other	50,000 200,000	0% 0% 0% 25%		
Matching Funds Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2023-2024	50,000 200,000 Yes	0% 0% 0% 25%		
Matching Funds Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2023-2024 8. Has this project previously received state funding?	50,000 200,000 Yes	0% 0% 0% 25% 100%		
Matching Funds Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2023-2024 8. Has this project previously received state funding? Fiscal Year (yyyy-yy) Recurring Nonrecurring	50,000 200,000 Yes	0% 0% 0% 25% 100%		
Matching Funds Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2023-2024 8. Has this project previously received state funding? Fiscal Year (yyyy-yy) Recurring Nonrecurring	50,000 200,000 Yes Specific Appropriation #	0% 0% 0% 25% 100%		
Matching Funds Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2023-2024 8. Has this project previously received state funding? Fiscal Year (yyyy-yy) Recurring Nonrecurring 2022-23 0 90	50,000 Yes Specific Appropriation #	0% 0% 0% 25% 100%		
Matching Funds Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2023-2024 8. Has this project previously received state funding? Fiscal Year (yyyy-yy) Recurring Nonrecurring 2022-23 0 90	50,000 Yes Specific Appropriation # (Yes) 150,000	0% 0% 0% 25% 100% Vetoed No		

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



11. Status of Construction

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.,		
Y	es	

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

Payroll Protection Program, to cover payroll and overhead expenses. 2020 PPP was \$75,540 and 2021 PPP was \$93,227. We have also been approved for an ARPA/Collier American Rescue Plan, but no funds have been received to date.

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 e	estimated start	date of construction?			
	d. What is the e	estimated comp	letion date of construction?			
12			to receive, directly or indirec ners of the facility and the ent		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	A Full-time Certified Vision Rehabilitation Therapist (CVRT) or Teacher of the Visually Impaired (TVI) or Certified Orientation and Mobility Instructor (COMS) or OT with certificate in Low Vision Rehabilitation.	90,000		
Other Salary and Benefits	A Full-Time Assistive Technology Instructor	60,000		
Expense/Equipment/Travel/Supplies/ Other		0		
Consultants/Contracted Services/Study		0		
Operational Costs: Other				
Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/Other		0		
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) 150,000				

14. Program Performance

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



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To provide training in home for visually impaired citizens in Collier County with blindness or vision loss, who want to maintain independence in their homes. Training to be provided in ADL's (Activities of Daily Living) and/or Assistive Technology.

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

Educational services in client's homes to help maintain their independence. The majority of training would be in the home but may take place at center.

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

Clients will be given on average anywhere from 3 to 15 lessons on ADL's (Activities of Daily Living) and/or Assistive Technology training. Length of training depends on severity and speed of onset and ability to remain independent in their home.

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

Visually Impaired & Blind Citizens of Collier County and surrounding areas. Approximately 25-45.

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

A Comprehensive Functional Assessment which helps to determine goals is completed with the therapist before lessons are started and after training is complete. Instructor will consider a goal met when a client can master said goal 3 out of 3 times. Overall program success will be based on a minimum of 85% of the participants meeting their individual goals.

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?

	None					
15.	. Requester Contac	t Informat	ion			
	a. First Name	Scott		Last Name	Flagel	
	b. Organization	Lighthous	se of Collier			
	c. E-mail Address	scott@lighthouseofcollier.org				
	d. Phone Number	(239)430	-3934	Ext.	1004	
16.	Recipient Contact	Information	on			
	a. Organization	Lighthouse of Collier				
	b. Municipality and County Collier					
	c. Organization Type					
	□For Profit Entity					
	☑Non Profit 501(c)(3)					
	□Non Profit 501(c)(4)					
	□Local Entity					
	□University or College					
	□Other (please specified)	pecify)				



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d. First Name	Scott	Last Name Flagel		
e. E-mail Address	scott@lighthouseofcollier.org			
f. Phone Number	(239)430-3934			
17. Lobbyist Contact Information				
a. Name	None			
b. Firm Name	None			
c. E-mail Address				
d. Phone Number				