



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2216

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

The Austin Hepburn Senior Mini-Center - City of Hallandale Beach will provide critically needed community-based services to persons aged 60 years plus. The program offers stimulating recreational activities and transportation services to minimize social isolation, depression, loneliness to avoid and/or delay nursing home placement. The program will require approximately \$111,006 in funding for annual services to senior clients/family through the Department of Elder Affairs in a safe secure environment. A Social Worker is available to provide case management services and will complete an initial face to face assessment to evaluate, address, coordinate client's specific needs, complete annual reassessments to identify any changes, evaluate the progress, and/or modify coordination of services, resources and referrals.

5. **State Agency to receive requested funds**
- State Agency contacted?**

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	111,006
Fixed Capital Outlay	0
Total State Funds Requested	111,006

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	111,006	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	111,006	100%

8. **Has this project previously received state funding?**
- If yes, provide the most recent instance:**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2024-25	0	111,006	401	No

9. **Is future-year 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.

The agency will attempt to secure other grant funding sources if state funding is not awarded.



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

12. 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		
Salary and Benefits	2 part-time van drivers, to provide door-to-door round trip pick-up services to client, pharmacy and medical appointments, transportation to/from recreational field trips and community events. 1 part-time office assistant receptionist provides clerical assistance in capturing daily unit of services and client contact services.	72,457
Expense/Equipment/Travel/Supplies/Other	Uniforms and logo shirts (staff/program participants) to identify safety and well-being of clients in and out of the Center while attending stimulating recreation trips, Special Emergency Services Assistant to aid with housing assistance, utility assistance, Rx. Printing and binding, program office supplies, specialized supplies, recreational and educational field trips admission and meals.	23,549
Consultants/Contracted Services/Study	Instructors provide health and wellness seminars and exercise classes to promote a healthy lifestyle. Technological instruction teaches basic computer literacy training and increases social media and Internet use, which stimulates cognitive and psycho-motor skills thus enhancing their daily living. Musicians and special entertainment promotes social engagement and positive interaction. Program promotes multi-cultural awareness activities.	15,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0



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Total State Funds Requested (must equal total from question #6)	111,006
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13. Program Performance

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

Continue to provide critically needed community-based services to persons aged 60 years plus. The program offers stimulating recreational activities and transportation services to minimize social isolation, depression, loneliness to avoid and/or delay nursing home placement. The program will require approximately \$111,006 in funding for annual services to senior clients/family through the Department of Elder Affairs in a safe secure environment.

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

The City, together with the DOEA seeks to offer a year-round Senior Center to people age 60 and older. Clients will have the opportunity to participate in a wide array of recreational activities to address loneliness, isolation, increased depression, anxiety, reduced nutrition, and community engagement. Elder friendly transportation will be provided with enhanced support amenities for older adults.

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

Direct Services will include-recreation activities: classes, educational forums, games, music enrichment, fitness activities, arts and crafts, technology, birthday and holiday celebrations. Developing client enrichment activities. Transportation activities: field trips to museums, health fairs, botanical gardens, parks, movies, shopping, sightseeing, excursions, concerts, medical appointments.

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

The program will provide services to approximately 800 unduplicated people ages 60 and older. Current diverse program demographics included 83.8% female, 16.2 % male, 64.3% Hispanic, 14.9% Caucasian, 17% African American, and .6% Asian American, 3.2% Other. Age ranges are as follows: Ages 60-64 9.1%, 65-69 14.9%, 70-74 13%, 75-79-18.2%, 80-84 21.4%, over 85 23.4%. 2% utilize assistive walking devices for mobility, 28.4% live alone and 44.8% serve as head of household.

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

The Austin Hepburn Senior Mini-Center - City of Hallandale Beach will provide improved physical and mental health, provide enriched cultural programing, improve quality of education, transportation, enhance individual's economic self-sufficiency, and provide links to resources through case management services. Methodologies used to measure program outcomes will include the number of program participants, participant surveys, improved levels of education in ESOL and technology, and data reports.

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 City will be paid by the contractor upon satisfactory completion of the tasks and deliverables as specified in the contract upon submittal of required invoice. Failure to meet established deliverables or performance measures will result in non-payment and/or reduction of payment.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):



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15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)



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- Local Entity
- University or College
- Other (please specify)

d. First Name Last Name

e. E-mail Address

f. Phone Number Ext.

19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.