



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1417

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Neighborhood received a \$2 million appropriation last year. Construction costs, materials, staffing and supply chain shortages has increased costs by \$1 million to complete the project. This will allow Neighborhood to have a home site to serve all of Pinellas County.

As funding for direct care services is reverting to levels seen in 2019, it is imperative to reduce or eliminate all fixed costs associated with providing services. A new location to serve all of Pinellas County, with minimal costs to operate is the best way we can make up the short-fall in funding. At present, there are over 1,250 seniors on a waitlist for a home delivered meal, or other similar services Neighborhood provides.

5. State Agency to receive requested funds

State Agency contacted? Yes

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	1,000,000
Total State Funds Requested	1,000,000

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)	1,000,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	1,000,000	100%

8. Has this project previously received state funding? Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2022-23	0	2,000,000	403A	No

9. Is future funding likely to be requested? No

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 requesting this project received any federal assistance related to the COVID-19 pandemic?



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Yes

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

Rescue funding for \$300,000 for Home Delivered Meals

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

Planning Design Construction

b. Is the project "shovel ready" (i.e permitted)?

No

c. What is the estimated start date of construction?

01/01/2024

d. What is the estimated completion date of construction?

12/31/2024

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.

The facility is owned by the 501(c)3, non-profit, Neighborly Care Network. Currently Neighborly owns 2 other facilities in Pinellas County and operates in 9 other locations.

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		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Will go 100% to construction/renovation and/or securing land	1,000,000
Total State Funds Requested (must equal total from question #6)		1,000,000

14. Program Performance

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

Neighborly received a \$2 million appropriation last year. Construction costs, materials, staffing and supply chain shortages has increased cost by \$1 million to complete the project. This will allow Neighborly to have a home site to serve all of Pinellas County.



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

Adult day care services, fitness, cognitive experiences, nutrition, education, home delivered meals, volunteer opportunities.

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

Will support all existing services, including meal delivery, senior transportation and adult day care, and allow expansion by reducing facility long-term costs.

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

Pinellas County residents over the age of 60, most often socially isolated, with health issues related to poor nutrition.

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

Improved health outcomes, improved quality of life with consumer and care givers, increased numbers of volunteers and improved satisfaction, increased number of home delivered meals.

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?

Funds will be returned if project is not completed.

15. Requester Contact Information

a. First Name **Last Name**
b. Organization
c. E-mail Address
d. Phone Number **Ext.**

16. 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)
- Local Entity
- University or College
- Other (please specify)

d. First Name **Last Name**
e. E-mail Address
f. Phone Number



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17. Lobbyist Contact Information

a. Name	<input type="text" value="Anita Berry"/>
b. Firm Name	<input type="text"/>
c. E-mail Address	<input type="text"/>
d. Phone Number	<input type="text"/>