



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1257

1. **Title of Project:** Harry Chapin Food Bank of Southwest Florida Care & Share Supplemental Food Program for Seniors
2. **Senate Sponsor:** Kathleen Passidomo
3. **Date of Submission:** 02/04/2019

4. **Project/Program Description:**

Harry Chapin Food Bank of Southwest Florida, Care & Share Supplemental Food Program for Seniors. This program supplements the diets of 2,300 low-income, hungry seniors in Charlotte, Collier, and Lee counties with nutritious, easy-to-prepare food. Seniors receive food kits containing canned fruits and vegetables, protein, grains, cereal, and other food each month. Fresh produce and other perishable food is added as available to supplement the kits and assure high levels of nutritious content. The Food Bank has a dedicated team of trained staff and volunteers who prepare the food kits and distribute them to seniors through a network of partner agencies.

5. **State Agency to receive requested funds :** Department of Agriculture and Consumer Services
State Agency Contacted? Yes

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

Type of Funding	Amount
Operations	670,000
Fixed Capital Outlay	130,000
Total State Funds Requested	800,000

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)	800,000	59.59%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	542,616	40.41%
Total Project Costs for Fiscal Year 2019-2020	1,342,616	100.0%

8. **Has this project previously received state funding?** Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		
2018-19		800,000		No

9. **Is future-year funding likely to be requested?** Yes
 - a. **If yes, indicate non-recurring amount per year.** 800,000



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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits	portion of the salary of manager	12,498
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits	Portion of wages/salary of warehouse handler, driver, program administrator, clerk	63,249
Expense/Equipment/Travel/Supplies/Other	Food, supplemental produce, food kit supplies, warehousing, transportation and distribution, misc	594,253
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	refrigerated box truck, truck wrap, pallet jack	130,000
Total State Funds Requested (must equal total from question #6)		800,000

11. Program Performance:

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

Feeding at least 2,300 low-income vulnerable seniors with a supplementary kit of groceries once a month, in Lee, Charlotte and Collier Counties

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

Kits will be distributed each month to enrolled seniors. Food and kit materials will be sourced, kits will be built, stored, transported and distributed at local sites across the target counties. Senior applicants will be screened, and a roster maintained.

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

At least 2,300 low-income vulnerable seniors will receive a free kit of nutritious groceries, distributed at a convenient local distribution point, once per month.

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

Low income seniors, at or below 130% of the Federal poverty line. They must be over 60 years of age and live in Lee, Charlotte, or Collier Counties. At least 2,300 seniors will be served each month. Almost 1 in 12 seniors does not have enough food due to limited financial resources, declining health, and loss of mobility.

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



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Financial limitations lead some seniors to eat less, skip meals, purchase inexpensive unhealthy food, and forgo essential medications. Food-insecure seniors are more likely to have poor nutrition and, as a result, experience negative health outcomes. Both food insecurity and improper nutrition add additional public health challenges for the health care system. (See Berkowitz et al., 2017, <http://nfesh.org/wp-content/uploads/health-consequences-of-senior-hunger-in-the-united-states-1999-2014.pdf>). The program will track # of seniors fed, # of kits distributed, # of distribution sites, and kits per site.

- 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?**

None

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.**

Not applicable

13. **Requestor Contact Information:**

- a. **Name:** Richard LeBer
- b. **Organization:** Harry Chapin Food Bank of Southwest Florida
- c. **E-mail Address:** rleber@harrychapinfoodbank.org
- d. **Phone Number:** (239)285-5688

14. **Recipient Contact Information:**

- a. **Organization:** Harry Chapin Food Bank of Southwest Florida
- b. **County:** Lee
- 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:** Richard LeBer
- e. **E-mail Address:** rleber@harrychapinfoodbank.org
- f. **Phone Number:** (239)285-5688

15. **Lobbyist Contact Information**

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**