



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1059

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

4. **Project/Program Description**

MACtown's Life Skills Services (ADT - Adult Day Training) will provide services to students with Autism and Intellectual Disabilities in the Miami-Dade schools who are aging out and graduating with a "special diploma" (age 22+) and who are currently on the Medicaid Waiver waitlist. The Life Skills Services (ADT) would be offered 5 days a week for 6 hours per day and include vocational and pre-vocational training, activities of daily living, communication, socialization, and community access.
This will enable family members to continue to be employed and not give up their jobs to provide daytime care for their loved ones.

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

6. **Amount of the Nonrecurring Request for Fiscal Year 2021-2022**

Type of Funding	Amount
Operations	300,000
Fixed Capital Outlay	0
Total State Funds Requested	300,000

7. **Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	300,000	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 2021-2022	300,000	100%

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

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

9. **Is future 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.**
-

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1059

Yes

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

\$1.8 million PPP Loan for staff wages, benefits and COVID mitigation and to cover significant revenue decrease due to COVID.

11. 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	The funds will be used to expand MACtown's services to provide Life Skills Training Services (ADT - Adult Day Training) to intellectually disabled students who are aging out and graduating with a "special diploma" (age 22+) and are currently on the Medicaid Waiver waitlist. Services will be offered 5 days/week for 6 hours/day, enabling family members to continue to be employed and not give up their jobs to provide daytime care for their loved ones.	300,000
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)		300,000

12. Program Performance

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

To further the independence of students with autism a developmental disabilities who are aging out of the Miami Dade County Public School System and are currently on the MedWaiver Waiting List. This goal will be accomplished by providing specialized educational and vocational skills that can enable them to find employment, be self sufficient and successfully integrate into their local community.

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

MACtown's Life Skills Services Program (ADT) Adult Day Training will provide personalized gym, customized work areas for daily living skills, hospitality, culinary arts, technology, retail, shipping, and packaging. Individuals participating in these programs will also have an opportunity to demonstrate their skills outside of the classroom, ensuring they become valuable contributing members of their communities.

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

The funds will be used to provide individualized services such as pre-vocational and vocational training, activities of daily living, communication, socialization, and community access. Services would be offered 5 days a week for 6 hours per day, which enables their family members and caretakers to continue to be employed and not have to give up their jobs in order to provide daytime care for their loved ones.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1059

Students with Autism and Intellectual Disabilities of the Miami-Dade school system who are aging out and graduating with a "special diploma" (age 22+) and who are currently on the Medicaid Waiver waitlist and do not have services.

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

Each individual will be able to meet and reach their goals as set forth in their IEP (Individualized Education Plan). Data will be collected as part of each individual's Person Centered Plan. MACtown will track the rates of program completion, job placement and the individuals ability to demonstrate proficiency in their daily living skills.

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?

Revocation of funds

13. 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.

N/A



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1059

14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number