



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 1008

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The City of Deerfield Beach's N.E. Focal Point Alzheimer's Day Care Center is a community-based service delivery center on the same Campus as the Center for Active Aging and Preschool. The Day Care Center provides in-facility respite, caregiver training and support for individuals and groups, and case management services for families who are caring for a loved one with Alzheimer's disease and other forms of dementia. The program purpose is to provide respite services for caregivers along with mentally and physically stimulating activities and programs for individuals with Alzheimer's disease.

Senior Transportation services provide accessibility to service providers and community resources for seniors who lack access to public transportation and/or are too incapacitated to utilize other transportation. Transportation services are intended to assure the continued mobility of older persons.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	286,705
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>286,705</b>

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	286,705	20%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	188,850	14%
Local	909,387	66%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2022-2023</b>	<b>1,384,942</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2021-22	0	250,000	388	No

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.



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

Yes

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

The City received \$38,202.26 for individual and group counseling services; individual and group health support services, telephone reassurance, caregiver training & support group, and recreation materials. Also, \$25,277.20 for emergency home energy assistance program for the elderly.

#### 11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Project Director - \$10,000 - Alzheimer's Daycare Transportation Manager - Senior Transportation - \$15,000	25,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Day Care Nurse, Case Manager, Recreation Coordinator and Certified Nursing Assistants. \$180,150 - Alzheimer's Daycare Bus Drivers - Senior Transportation - \$35,000	215,150
Expense/Equipment/Travel/Supplies/Other	Medical and health supplies, recreational and programming supplies, travel and training, lease of copier and security equipment.- \$5,000 - Alzheimer's Daycare Bus maintenance and fuel - Senior Transportation - \$41,555 Transportation Vehicles - Wheelchair accessible vehicles (In-Kind \$300,000)	46,555
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>286,705</b>

#### 12. Program Performance

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

Continue to provide family caregivers with in-facility respite day care, case management and caregiver training and support services. The Day Care services allow family members to work while their loved ones with Alzheimer's Disease, Dementia and Memory Loss Disorders are provided with positive and stimulating activities and programs in a safe and secure environment.

Continue to provide seniors with transportation services to Center for Active Aging, medical appointments, social service agency appointments, prescription pick-up and grocery shopping.

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

Activities and services will include senior transportation, respite (relief) day care, case management, caregiver educational and training support programs to assist in coping with and decreasing the burden of caring for a loved one with dementia, Alzheimer's disease and memory loss disorders.

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



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Direct services will include senior transportation, in-facility respite day care services, case management, caregiver training and support services.

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

The target population for the Alzheimer's Day Care is for individuals 18 years old and older who reside in Broward County who have been diagnosed with some form of dementia, Alzheimer's disease, and memory loss disorders. We are anticipating serving at least 30 caregivers and 30 clients for a total of 60 individuals due to the increasing aging population and the number of individuals being diagnosed with dementia and memory loss.

The Senior Transportation Program is available to persons 62 years and older who reside in the City and need transportation. Services are available Monday through Friday 7:30 am to 4:30 pm. The services intend to assist 150-200 seniors with over 11,000 trips a year.

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

The expected benefit and outcome of this project is for the clients to receive both physically and mentally stimulating activities and programs in a loving and nurturing environment by improving their quality of life. These services allow caregivers to be able to continue to work in knowing their loved ones are in a safe and secure environment. The services decrease the caregivers' burdens and stress as they learn to cope with caring for their loved one and receive a break through the respite and caregiver training and support services. Regular communication with the caregivers, periodic satisfaction surveys, suggestion boxes, and length of stay, will determine if the intended outcomes have been met.

The benefit of the Senior Transportation service to allow seniors to attend activities at the Center for Active Aging, attend medical appointments, service agency appointments, prescription pick-ups and grocery shopping. Services allow seniors to remain mobile.

**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?**

A suggested penalty would be a decrease in funding if deliverables and performance measures are not met.

**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.**

The City of Deerfield Beach Center for Active Aging owns the facility and has been administering the program for 40 years.



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#### 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