



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 1122

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Approximately 70 families will receive a \$40 a week subsidy for the period of 1 year. Outcome: Access to affordable quality child care services. Methodology: Proof of family income not exceeding 200% of the federal poverty level; at least 1 household member who is employed; or at least 1 educational class; or 1 household member actively seeking employment.

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	250,000
Fixed Capital Outlay	0
Total State Funds Requested	250,000

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)	250,000	29%
Matching Funds		
Federal	249,064	29%
State (excluding the amount of this request)	120,642	14%
Local	0	0%
Other	236,694	28%
Total Project Costs for Fiscal Year 2022-2023	856,400	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2018-19	0	100,000	84	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.

In the event LHANC- Rainbow Intergenerational Child Learning Center does not receive this request, the expense of the service will be passed along to the parents whose children are enrolled in the program as the funds are used as a subsidy for these very parents.

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



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

For 2020, LHANC-Rainbow Intergenerational Child Learning Center received \$16,600 in CARES funding to cover salaries and rent for both facilities, \$10,400 for Little Havana, and \$6,200 for Miami Beach. In 2021, an allocation of \$25,500 in CRRSA Phase V was received for the same purpose, \$15,000 for Little Havana, and \$10,000 for Miami Beach. LAHNC does not anticipate receiving any additional funds of this nature going forward, and into 2022.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Salaries and benefits for the program administrator that oversees the day-to-day operations of the program and supervises the program staff.	15,000
Other Salary and Benefits	Salaries and benefits for the accounting staff assigned to the program.	10,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Salaries and benefits of child day care teachers who provide the direct face-to-face care to the children at the center. Direct care includes educational and recreational activities, assistance in feeding the children, and the overall care of the children at the facility.	67,400
Expense/Equipment/Travel/Supplies/Other	Funds requested will be used to provide a subsidy for children who receive child day care services. Subsidy will be \$40 for 70 children for 52 weeks. A portion of the rent charged by the City of Miami Beach for the Miami Beach location allocated at \$1,000 per month for 12 months.	157,600
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)		250,000

12. Program Performance

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

Funds requested will be used to provide a subsidy for children who receive child day care services. Subsidy will be \$40 for 70 children for 52 weeks. This subsidy is given using the sliding scale fee standards set for by the DOE related to child care services. The subsidies will be provided to those who meet the standards but who otherwise were unable to receive subsidies from other funded subsidy programs for lack of funding.

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

Approximately 70 families will receive a \$40 a week subsidy for the period of 1 year.

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

Direct care includes supervision of 0-5 year old children. Additionally, the center provides the children with educational and recreational activities, assistance in feeding, and the overall care of the children at the facility.

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



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Families who wish to enroll their children aged 0-5 at the LHANC-Rainbow Intergeneration Learning Center at either the Little Havana location or the Miami Beach location.

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

Outcome: Access to affordable quality child care services. Methodology: Proof of family income not exceeding 200% of the federal poverty level; at least 1 household member who is employed; or at least 1 educational class; or 1 household member actively seeking employment.

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?

Not funding the service any further. Although LHANC has always met the goals of the program in previous years funded.

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.

Not Applicable



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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