



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 2056

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Provides home repairs and rehabilitation services to elderly homeowners, such as electrical upgrades, HVAC upgrades, Americans with Disabilities Act (ADA) upgrades, bathroom and kitchen upgrades, improved accessibility, roof repairs or replacement and flooring upgrades.

5. State Agency to receive requested funds

State Agency contacted?  No

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

Type of Funding	Amount
Operations	2,000,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>2,000,000</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)	2,000,000	27%
<b>Matching Funds</b>		
Federal	578,000	8%
State (excluding the amount of this request)	0	0%
Local	4,843,000	65%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2022-2023</b>	<b>7,421,000</b>	<b>100%</b>

8. Has this project previously received state funding?  No

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

9. Is future funding likely to be requested?  Yes

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Grants and local government funding, which are not currently available.

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.



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\$1,419,320,111.50 to provide financial aid to, among others, small businesses, veterans, senior meals, restaurants, hotel workers, first responders, landlords, low-income tenants, nonprofits, and day care centers; county services and also direct distributions to Miami-Dade municipalities.

**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 Manager - responsible for monitoring initial inspections, progress inspections, and final inspections for the clients enrolled in the program.	55,628
Other Salary and Benefits	Construction Renovation Supervisor - responsible for carrying-out initial inspections, progress inspections, and final inspections for clients enrolled in the program. Eligibility Interviewer - responsible for receiving and screening all calls and general public for all homeowners interested in the program.	80,832
Expense/Equipment/Travel/Supplies/Other	Total supplies allocation which includes general office supplies such as paper, pens, and other desk supplies.	1,000
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Benefit costs of direct services. For approximately 40 senior homeowners who reside in Miami-Dade County to have their homes repaired resulting in safe, decent, and sanitary living conditions.	1,862,540
<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>2,000,000</b>

**12. Program Performance**

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

The goal of CAHSD's home repair program is to provide elders with the ability to remain in their homes safely and in their communities thereby preventing institutionalization.

The county seeks to re-establish the SHARP program to meet the need of a minimum of 40 homes in the community at \$50,000 per project, through the \$2,000,000 being requested.

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

If approved low-income seniors will receive home repair services that include electrical upgrades, HVAC upgrades, Americans with Disabilities Act (ADA) upgrades, bathroom upgrades, kitchen upgrades, improved accessibility, and flooring upgrades.

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

Home repair and rehabilitative services to low-income Miami Dade County homeowners including senior homeowners who would otherwise be unable to address the needed home repairs and rehabilitation.

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

Target population is single family home owners of senior age (60 or older) who have deteriorating homes and/or other repair needs. The proposed program will serve approximately 40 senior homeowners (slightly less than \$50,000 per home) who reside in Miami-Dade County.



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

The targeted benefit is to provide critical repairs to the homes of low-income seniors, which will in turn allow for them to remain in their homes, which would reduce the chances of them becoming institutionalized. Secondly, the program is intended to improve neighborhood value and safety by reducing blight and home abandonment. The CAHSD would measure outcome success by end-of-project satisfaction surveys and through annualized follow-up outreach.

**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?**

Miami-Dade County Community Action and Human Services Department has more than 11 years of experience administering home repair programs with a current wait list of approximately 400 low income senior homeowners. The county is confident that it will meet all deliverables if given the aforementioned funding. To that end, due to unforeseen challenges that may arise including increasing costs, a corrective action plan accompanied by finding explanation has been the standard practice.

**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



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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