

1. Project Title

## The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

Senior Services Modernization Project

**LFIR # 1448** 

-	nonrecurring amou	nt per year.	ieu of state funding.		
9	•				
	مدموريوم مماري المرا	d?	No		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
Fiscal Year	Amo	ount	Specific	Vetoed	
. Has this project pr			No		
	s for Fiscal Year 20	24-2025	400,000	100%	
Other			0	0%	
Local	amount of this requ	(31)	0	0%	
Federal State (excluding the	amount of this requ	est)	0	0% 0%	
Matching Funds				00/	
	Requested (from que	stion #6)	400,000	100%	
Type of Funding			Amount	Percentage	
Total Project Cost	for Fiscal Year 2024	4-2025 (including	matching funds avail	able for this projec	t)
Total State Funds Requested				400,000	
Fixed Capital Outlay				400,000	
Operations				0	
Type of Funding			Amou	int	
Amount of the Non	recurring Request	for Fiscal Year 20	24-2025		
State Agency conta	acted? Yes				
State Agency to re	•	nds Departm	ent of Elder Affairs		
promoting intergene	erational connections	and a higher stan	dard of living for senior	rs in Pasco County.	Community,
evolving needs, pro attract more seniors belonging. Additiona	moting social interacts to engage in these ally, it can even strer	ction, and supporting centers, thereby rengthen the local ec	on by providing updated ng physical and mental educing social isolation onomy through increas to the overall vibrancy	well-being. This mod and loneliness, and sed patronage of loca	dernization car fostering a ser al businesses.
The modernization	of Pasco County's S	Senior Centers offe	rs a host of significant	benefits to the comm	nunity. Firstly, i
Project/Program D	escription				
Date of Request	11/08/2023				



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Yes	

11. Status of Construction

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

Home Delivered Meals for Pasco County Seniors. The funding was administered by the Area Agency on Aging.

### Complete questions 11 and 12 for Fixed Capital Outlay Projects

	a. what is the current phase of the project?					
	<ul><li>Planning</li></ul>	O Design	Construction	O N/A		
	b. Is the project	No				
c. What is the estimated start date of construction?					10/1/2025	

d. What is the estimated completion date of construction? 9/30/2026

12. List 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.

Pasco County Government, through the Board of County Commissioners.

#### 13. 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		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering	The funding for these senior center renovations will be allocated thoughtfully to ensure the best outcomes for the aging population. This will include: Infrastructure and Facility Upgrades, technology integration, and community spaces. These infrastructure upgrades will enhance health and wellness programming, as well as safety and security for Pasco County Seniors.	400,000			
Total State Funds Requested (m	ust equal total from question #6)	400,000			

#### 14. Program Performance

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



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The funds requested for the project will modernize the infrastructure of all senior centers in Pasco County, Florida, with the specific goal of enhancing the quality of life and well-being of the county's aging population. This modernization aims to create accessible, vibrant, and technologically-equipped spaces that foster community engagement, health, and social connection among seniors.

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

Facility renovations and Technology upgrades to enhance Health & wellness programs, Social activities, Nutritional services, Outreach programs, Community engagement, Safety enhancements, and Sustainability initiatives.

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

Enhance Health & wellness programs, Social activities, Nutritional services, Outreach programs, Community engagement, and Safety enhancements.

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

Elderly persons; persons with poor mental health; persons with poor physical health. Approximately 800 individuals will be served annually.

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

Facility upgrades that will allow for the introduction of regular mindfulness meditation sessions can significantly improve mental health among seniors, reducing stress and enhancing overall well-being in the modernized senior center. Measure mental health improvement through pre- and post-program surveys assessing stress levels, mood, and overall mental well-being, alongside tracking participation and feedback from seniors.

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?

Failure to meet deliverables could result in reduced funding for future projects. This serves as a long-term consequence of non-performance, encouraging PCSS to prioritize meeting its obligations to the aging population of Pasco County.

15. Requester Contact	Informat	ion	_		
a. First Name	Nikki		Last Name	Hayes	
b. Organization	Feeding	Pasco's Elderly			
c. E-mail Address	nikki@di	gitallightbridge.co	om		
d. Phone Number	(813)999	-3777	Ext.		
16. Recipient Contact Information					
a. Organization	Feeding Pasco's Elderly				
b. Municipality and County Pasco					
c. Organization Type					
□For Profit Entity					
☑Non Profit 501(c)(3)					
□Non Profit 501(c)(4)					
□Local Entity					



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□University or Co	□University or College						
□Other (please sp	pecify)						
d. First Name	Nikki	Last Name	Hayes				
e. E-mail Address	nikki@digitallightbridge.co	om					
f. Phone Number	(813)999-3777						
17. Lobbyist Contact I	nformation						
a. Name	Shawn Foster						
b. Firm Name	Sunrise Consulting Group	)					
c. E-mail Address	foster@scgroup.us						
d. Phone Number	(727)808-4131						