

1 Project Title

Let's Move 365

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

LFIR # 1958

	2010 111010 000					
2. Senate Sponsor	Bobby Powell					
3. Date of Request	12/12/2023					
4. Project/Program Des	scription					
where there is a high increasing access to and providing suppor residents who are you currently exist or is specified.	Move 365 initiative s to reduce t incidence of residents living with free opportunities for physical act for its managing organization, Eung, old, able and disabled, veteroradic. This initiative is supported to cognize by the Board of Countries.	all of these related conditivity and exercise through Digital Vibez. Through this rans and housing insecured by over 30 of the 39 mu	tions. The goal will be the well established campaign, we will pe and everything in be unicipalities located v	be achieved by d program - Let's Move, rovide activities to between where none within Palm Beach		
5. State Agency to rec	eive requested funds Dep	artment of Health				
State Agency contact	cted? No					
•						
6. Amount of the Nonre	ecurring Request for Fiscal Yea	ar 2024-2025				
Type of Funding		Amo	Amount			
Operations			875,000			
Fixed Capital Outlay			0			
Total State Funds R	equested		875,000			
7. Total Project Cost fo	r Fiscal Year 2024-2025 (includ	ling matching funds ava	nilable for this proje	ect)		
Type of Funding		Amount	Percentage			
Total State Funds Re	quested (from question #6)	875,000	50%			
Matching Funds						
Federal		0	0%			
State (excluding the a	amount of this request)	0	0%			
Local		875,000	50%			
Other		0	0%			
Total Project Costs	for Fiscal Year 2024-2025	1,750,000	100%			
8. Has this project pre-	viously received state funding	? Yes				
Figor Voor	Amount	Specific	Votood			

Fiscal Year	Amo	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2023-24	0	875,000		No	

9. Is fui	ture fun	dina like	elv to be	requested?

No

- a. If yes, indicate nonrecurring amount per year.
- b. Describe the source of funding that can be used in lieu of state funding.

Local funding sources and private donors will be used to fund the program but the program will not be able to expand to serve the numerous residents that are truly in need of these services.

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



11. Status of Construction

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Yes	
If yes, indic	cate the amount of funds received and what the funds were used for.
PPP - \$100	0,000; Staff retention

Complete questions 11 and 12 for Fixed Capital Outlay Projects

	a. What is the current phase of the project?								
	Planning	O Design	Construction	O N/A					
	b. Is the project "	'shovel ready" (i.e permitted)?						
	c. What is the est	timated start da	te of construction?						
	d. What is the es	timated comple	tion date of constru	ction?					
12	2. List the owners relationship bet	of the facility to	receive, directly or rs of the facility and	indirectly	y, any fixed capital o /.	outlay funding. Include th	е		

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	Staff and Personnel Costs	205,000	
Expense/Equipment/Travel/Supplies/Other		0	
Consultants/Contracted Services/Study	Contracted Services	18,000	
Operational Costs: Other			
Salary and Benefits	Project Assistant, Payroll Costs	40,000	
Expense/Equipment/Travel/Supplies/ Other	Monthly Events/Activities, Equipment (computers, printers, ipads, etc.), Supplies (pedometers, promotional materials, tents, tables, printed table covers and signs, journals or exercie cards, incentives, office supplies, etc.), Bus for Community Engagement Activities, Travel/Transportation, Information Technology/Software	520,000	
Consultants/Contracted Services/Study	Training and Development, Consultants, Contracted Services	92,000	
Fixed Capital Construction/Majo	r Renovation:		
Construction/Renovation/Land/ Planning Engineering		0	
Total State Funds Requested (must equal total from question #6) 875,000			

14. Program Performance

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



□For Profit Entity

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The goal of the Let's Move 365 initiative is to reduce the burden of Metabolic Syndrome (MetS) in low income communities where there is a high incidence of residents living with all of these related conditions. The goal will be achieved by increasing access to free opportunities for physical activity and exercise through the well established program - Let's Move, and providing support for its managing organization, Digital Vibez. Through this campaign, we will provide activities to residents who are young, old, able and disabled, veterans and housing insecure and everything in between where none currently exist or is sporadic.

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

Digital Vibez will provide access to free opportunities for physical activity and exercise, nutrition education and healthy behaviors. The organization invites residents to form teams and commit to exercising for at least 30 minutes daily including any physical activities such as dancing, rollerblading, yoga and more. Palm Beach County logged 100,000 minutes in the first year of the program and since then have increased the minutes logged to a record 59 million in 2021.

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

Digital Vibez will provide group led exercises including dancing, yoga, zumba and more throughout Palm Beach County in readily accessible locations such local parks, schools, nursing homes, community centers, municipal centers, aftercare centers and more.

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

Youth and families, low-income communities and all demographics are served by this program. We expect to serve approximately 50,000 people during the span of the calendar year.

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

Online platforms and sign in forms will be used at all events to track participation numbers. Participants will log information to show their participation numbers and progress throughout the course of engaging in the program throughout the year. The expected benefit will be that numbers of Metabolic Syndrome (MetS) diseases in low income communities are reduced. We expect to see participants lower weight measurements at the end of the program than from the beginning, lower hypertensive emergency occurrences and better health outcomes. Reduce the number of adults living in Palm Beach County with sedentary lifestyles. Increase the number of adults with leisure time physical activity. Reduce the number of adults reporting mental health concerns.

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 stat	te funding and possible repa	ayment of fui	nds.
5. Requester Contact	t Information		
a. First Name	Jana	Last Name	Hernandez
b. Organization	Digital Vibez Inc.		
c. E-mail Address	jana@digitalvibez.org		
d. Phone Number	(561)650-5820	Ext.	
6. Recipient Contact	Information		
a. Organization	Digital Vibez Inc.		
b. Municipality and	d County Palm Beach		
c. Organization Tv	pe		



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☑Non Profit 501(c	☑Non Profit 501(c)(3)							
□Non Profit 501(c	□Non Profit 501(c)(4)							
□Local Entity								
□University or Co	□University or College							
□Other (please sp	□Other (please specify)							
d. First Name	Jana	Last Name	Hernandez					
e. E-mail Address	e. E-mail Address jana@digitalvibez.org							
f. Phone Number	(561)650-5820							
17. Lobbyist Contact Information								
a. Name	Christina Romelus							
b. Firm Name	PolitiCALM							
c. E-mail Address	christina@politicalm.com							
d Phone Number	(561)203-9442							