

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

LFIR # 2773

kely to be requested? conrecurring amount per year. urce of funding that can be used	Yes 500,000 d in lieu of state funding.		
kely to be requested?	500,000		
kely to be requested?			
_	Yes		
Recurring Nomecum			
Recurring Nonrecurri			
Recurring Nonrecurri	ng Appropriation#		
Amount	Specific Appropriation #	Vetoed	
eviously received state funding	? No		
		100 /8	
s for Fiscal Voar 2024-2025			
amount of this request)			
	0	0%	
equested (from question #6)	500,000	3%	
or Fiscal Year 2024-2025 (includ)
•			
		0	
		500,000	
	Amou	ınt	
recurring Request for Fiscal Yea	ar 2024-2025		
	ditilient of Lider Alidirs		
JCS to supplement home care ho	urs for those individuals wh	ose current needs are	e unmet.
s, respite services, transportation, essment is provided by a JCS case	and chore services to 30 lo e manager or a homecare	ow-income, high-risk, f agency registered nur	frail older adult se in consultati
escription			
01/03/2024			
Bryan Avila			
	s, respite services, transportation, essment is provided by a JCS castermine their home care needs. So JCS to supplement home care how ceive requested funds acted? No recurring Request for Fiscal Year Requested for Fiscal Year 2024-2025 (included amount of this request) s for Fiscal Year 2024-2025	Services (JCS) will provide comprehensive homecare services, respite services, transportation, and chore services to 30 lot essment is provided by a JCS case manager or a homecare atermine their home care needs. Services are coordinated and JCS to supplement home care hours for those individuals who ceive requested funds The partment of Elder Affairs The partment of E	Services (JCS) will provide comprehensive homecare services which include persis, respite services, transportation, and chore services to 30 low-income, high-risk, residence in the services of the services are coordinated and closely monitored by JCS to supplement home care needs. Services are coordinated and closely monitored by JCS to supplement home care hours for those individuals whose current needs are ceive requested funds Department of Elder Affairs acted? No recurring Request for Fiscal Year 2024-2025 Amount 500,000 Requested 500,000 for Fiscal Year 2024-2025 (including matching funds available for this project) Requested (from question #6) Sound O amount O Requested (from question #6) 18,883,184 97% 18,883,184 97% 19,383,184 100%



11. Status of Construction

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

CARES Act -\$105,843.53 - supportive services and counseling to seniors. CARES Act - \$166,230.87 - nutrition services/meals to seniors. Families First COVID-19 C1 - \$85,327.10 - nutrition services/meals to seniors. Families First COVID-19 C2 - \$300,033.75 - nutrition services/meals to seniors. CCAA - \$231,393.82 - nutrition services/meals to seniors. ARP C1- \$94,192.44 - nutrition services/meals to seniors. ARP C2 - \$257,746.12 - nutrition services/meals to seniors.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

8	a. What is the cu	rrent phase of t	he project?			
	Planning	O Design	Construction	O N/A		
k	o. Is the project '	"shovel ready" (i.e permitted)?			
c	c. What is the es	timated start da	te of construction?			
C	d. What is the es	timated comple	tion date of constru	ction?		
12.			o receive, directly or rs of the facility and		outlay funding. Include	the

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	Administrative costs	50,000		
Expense/Equipment/Travel/Supplies/Other		0		
Consultants/Contracted Services/Study	Hourly services for homecare 30 clients at 12 hours per week 26/hour	450,000		
Operational Costs: Other				
Salary and Benefits		0		
Expense/Equipment/Travel/Supplies/Other		0		
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)				

14. Program Performance

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



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JCS will provide comprehensive homecare services which include personal care, homemaker services, respite services,

transportation, and chore services to 30 low-income, high-risk, frail older adults. b. What activities and services will be provided to meet the intended purpose of these funds?

JCS will provide comprehensive homecare services which include personal care, homemaker services, respite services,

transportation, and chore services to 30 low-income, high-risk, frail older adults.
c. What direct services will be provided to citizens by the appropriation project?
See above.

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

The project will directly benefit vulnerable seniors who are 60+ years old. 30total senior clients will be served by Jewish Community Services of South Florida, Inc.

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

A comprehensive assessment is provided by a case manager or a homecare agency registered nurse in consultation with the client to determine their home care needs. Services are coordinated and closely monitored by case managers. Funding will enable JCS to supplement home care hours for those individuals whose current needs are unmet.

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?

Corrective action plans may be required for noncompliance, nonperformance, or unacceptable performance. Financial penalties may be imposed for failures to implement or to make acceptable progress on such corrective action plans. Increments of penalty imposition shall apply and shall be based upon the severity of the noncompliance, nonperformance, or unacceptable performance that generated the need for corrective action plan.

15. Requester Contact	t Informati	on			
a. First Name	Miriam		Last Name	Singer	
b. Organization	Jewish C	Jewish Community Services of South Florida, Inc.			
c. E-mail Address	Msinger@	Msinger@jcsfl.org			
d. Phone Number	(305)403	-6568	Ext.		
16. Recipient Contact Information					
a. Organization	Jewish Community Services of South Florida, Inc.				
b. Municipality and County Miami-Dade					
c. Organization Ty	ре				
□For Profit Entity					
☑Non Profit 501(c)(3)					
□Non Profit 501(d	c)(4)				
□Local Entity					
□University or Co	llege				



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□Other (please specify)

d. Phone Number (305)935-1866

d. First Name	Marcella	Last Name	Cruz		
e. E-mail Address	mcruz@jcsfl.org				
f. Phone Number	(305)403-6588				
17. Lobbyist Contact Information					
a. Name	Ronald L. Book				
b. Firm Name	Ronald L. Book PA				
c. E-mail Address	ron@rlbookpa.com				