

EQUAL 2025-2026 Proposed Spending Plan

Summary Budget

This form must be used by applicants to provide a detailed budget justification. For each line item provide a full description of the item, justification of the need for the item as it relates to the resident priorities identified, and explanation of how costs were determined. *Additional pages may be added but must all conform to this format and include the Resident Council Representative Approval or Resident Petition in Support.*

Budget Line Items	Capital Improvement Project Funds Requested	Local Assistance Project Funds Requested
Target or Stop & Shop gift cards - resident request to purchase clothing and household supplies. \$100 x 45 residents. Residents have been counseled that these cards cannot be used for items such as alcohol, tobacco, or firearms. Stores chosen by residents for proximity and accessibility.		\$4,500
Household items & supplies and prescriptions & medical supplies: resident request above and beyond regulatory requirements, such as additional cleaning supplies, toilet brushes, soaps, etc... Prescriptions and medical supplies. items/costs/copays residents need that aren't covered by their insurance. Paid directly to provider as needed. Based on past need/spending trends.		\$750
Recreational activities on & off site and transportation: includes supplies, admission, decorations, etc... and transportation for activities and for residents as needed for appts, errands		\$6,000
Food and related equipment & supplies: specialty food items for congregate and in-home consumption, including food & supplies for emergencies/natural disasters beyond regulatory obligations. Morning coffee/tea, upgraded lunch items (like ribs, shrimp, fresh fruits, pizza), juice Lactaid, emergency food bags, Lunch bags & containers, etc...		\$9,512.50
Total Requested Per Funding Source		\$20,762.50
Total Funding Requested	\$41,525.00	

- o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, _____ (name of representative), have reviewed the Proposed EQUAL 2025-2026 Spending Plan for _____ (name of facility), _____ (operating certificate #), and agree that the proposed use of these funds is consistent with the priorities of SSI/SSP/SN residents' priorities.

Resident Council Representative Signature: _____

- o **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at Cumberland Gardens NY Foundation Bldg # 331-S-003 #). We have reviewed the Proposed EQUAL 2025-2026 Spending Plan and agree that the proposed use of funds is consistent with our priorities.

Resident Name: _____ Resident Signature: _____
 Resident Name: _____ Resident Signature: _____
 Resident Name: _____ Resident Signature: _____

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)

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Budget Line Items	Capital Improvement Project Funds Requested	Local Assistance Project Funds Requested
Air Conditioners, Apartment furniture, and small appliances and fixtures: To purchase, install/remove A/Cs in individual EHP apartments as needed. For "upgraded" and higher quality furniture such as: double and queen sized beds, additional dressers/bureaus, additional lamps, sofas, love seats, larger tables, additional chairs, recliners, etc.... For small in-home appliances, fixtures, and accessories (e.g. microwaves, toasters, nightlights, lamps, curtains, rugs, mats, bedbug covers, etc.... These items are superior to and in addition to the regulatory required furnishings	\$16,798.50	
Window Cleaning: \$13 per window, 128 windows in EHP apartments. Inside and outside of windows. The program provides housekeeping services that include cleaning of the inside of apartment windows, but we are unable to access the outside of the apartment windows of the 7 story building – that service must be outsourced to be provided, and is an enhancement above and beyond regulatory required program services. Window cleaning is not included in regular building maintenance.	\$1,664	
Carpet Washing: as needed, \$115 per resident apartment. Based on past needs and spending trends. The regulated housekeeping of the facility provides for regular vacuuming in resident apartments. Carpet washing is above and beyond regular provided housekeeping and will address carpet staining beyond normal use, (often from the high prevalence of resident use of wheelchairs/walkers/canes), and to reduce allergens. This is a deep cleaning, beyond the capabilities of program staff, and must be outsourced and paid for. It is superior too and not supplanting regulated housekeeping.	\$2,300	
Total Requested Per Funding Source	\$20,762.50	
Total Funding Requested	\$41,525	

o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, _____ (name of representative), have reviewed the Proposed EQUAL 2025-2026 Spending Plan for _____ (name of facility), _____ (operating certificate #), and agree that the proposed use of these funds is consistent with the priorities of SSI/SSP/SN residents' priorities.

Resident Council Representative Signature: _____

o **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at Cumberland Gardens NY Foundation Emp #6 (331-S-003). We have reviewed the Proposed EQUAL 2025-2026 Spending Plan and agree that the proposed use of funds is consistent with our priorities.

Resident Name: _____ Resident Signature: _____
 Resident Name: See Attached Resident Signature: _____
 Resident Name: _____ Resident Signature: _____

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)