

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
Patio furniture (1 couch, 2 chairs, 1 table) for 3rd floor patio to increase leisure and enjoyment of screened in porch. Cost: \$189.04	X	
2 sets of Faux Leather Chairs for 3rd and 4th floor living areas to improve aesthetic and comfort. Cost: \$376.63 pr set, Total: \$753.26	X	
2 lift recliner chairs for 4th floor living room to promote safe and welcoming living environment. Cost: \$498.90 pr chair Total: \$997.80	X	
Themed sensory decor for the end of each family care hallway on 2nd, 3rd, and 4th floors to boost aesthetic appeal and creativity. Cost: \$213.28 pr hallway Total (12 hallway ends) \$2559.40	X	
Aviary for 4th floor living room/patio to promote leisure, connection to nature, sensory input. Cost: \$239.95 pr month. Total: \$2879.4		X
2 Robotic Dogs, 2 robotic cats to enhance sense of care, belonging, comfort, and purpose. Cost per dog: \$179.77 Cost per cat: 128.52. Total: \$617.02 3 MP3 Audio book players for audio sensory input, assistance for those who are sight impaired. Cost Per Item: \$125.99 Total: \$337.97.		X
Various sensory items and tools to increase independence, promote creativity and individuality. Budget: \$332.56. Furniture covers for incontinence needs to increase comfortability and homelike appeal. Budget: \$332.55		X
Total Requested Per Funding Source	\$4499.50	\$4499.50
Total Funding Requested	\$8,999.00	

o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, Alan J. Bukatz (name of representative), have reviewed the Proposed EQUAL 2025-2026 Spending Plan for Rochester Psychiatric Hospital (name of facility), 370-E-022 (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: Alan J. Bukatz

o **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at RPH 370-E-022 (name of facility), 370-E-022 (operating certificate #). 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: Linda O'Connor
 Resident Name: Anne Stratton
 Resident Name: Anne Boni

Resident Signature: Linda O'Connor
 Resident Signature: Anne Stratton
 Resident Signature: Anne Boni

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)