



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1253

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

Highridge Family Center is a 3 month, Monday through Friday, trauma-informed residential treatment program for Palm Beach County youth. The county provides services to families with youth ages 11 through 16 years, who are experiencing problems at home, school, with friends, and in the community. Major facility improvements are necessary to comply with COVID safety protocols, as well as for some of the indoor and outdoor recreational areas, and general upgrades to the outdated facility structures.

5. **State Agency to receive requested funds**

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	1,500,000
Total State Funds Requested	1,500,000

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,500,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,500,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2021-2022	3,000,000	100%

8. **Has this project previously received state funding?** No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future funding likely to be requested?** Yes
- a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

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

Yes



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1253

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

Palm Beach County received \$263 million for specific COVID-related expenses.

11. 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/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Renovation of an existing county facility located in West Palm Beach.	1,500,000
Total State Funds Requested (must equal total from question #6)		1,500,000

12. Program Performance

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

Highridge Family Center is a 3 month, Monday through Friday, trauma-informed residential treatment program for Palm Beach County youth. The County provides services to families with youth ages 11 through 16 years, who are experiencing problems at home, school, with friends, and in the community. Major facility improvements are necessary to comply with COVID safety protocols, as well as for some of the indoor and outdoor recreational areas, and general upgrades to the outdated facilities.

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

The facility is a residential setting where program participants stay in a dormitory style "house" of up to 12 youth per dorm. The building contains five dorms comprised of 3 male and 2 female dorms that have twenty-four (24) hour supervision. There are also indoor/outdoor recreational areas and the Palm Beach County School District has an on-site school facility to ensure academic progress while participants are in the program.

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

Highridge offers Trauma-Informed Interventions, Family Therapy, Group Therapy, Individual Therapy, Communication Skills Training, Coping Strategies & Plans, Emotion Regulation Groups, Parent Education Groups, and indoor and outdoor Recreational Activities. There is also a Palm Beach County School on-site. At its core, Highridge promotes safety and recovery from chronic stress and adversity.

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

Highridge Family Center is a three-month, Monday through Friday, trauma-informed residential treatment program for Palm Beach County youth. Services are provided to families with youth ages 11 through 16 years, who are experiencing problems at home, school, with friends, and in the community. Youth on medication(s) are eligible for the program when closely monitored by their prescribing physician.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1253

The Highridge Center will be able to continue to offer high-quality individual and group therapy, and public education for families with youth ages 11 through 16 who are experiencing problems at home, school, with friends, and in the community.

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?

The department's standard contract requirements are adequate.

13. 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.

Palm Beach County owns this facility.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1253

14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify) Local Government

d. First Name Last Name

e. E-mail Address

f. Phone Number

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number