



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1015

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Palm Beach County (PBC) in collaboration with the Florida Department of Corrections (FDC) and community-based reentry partners facilitate the successful reintegration of reentry participants returning to PBC. The Regional and State Transitional Offender Reentry (RESTORE) Initiative, established in 2011, is a comprehensive model for reentry designed to reduce recidivism by identifying needs, providing targeted evidence-based programs, and coordinating pre- and post-release services to assist individuals transitioning from incarceration to the community. The project will focus on 1) pre-release case management and skill building for people housed at the Sago Palm Reentry Center in Pahokee, FL; 2) post-release case management currently provided by two contracted community service providers; 3) supportive services (job placement, access to drug-free housing, transitional jobs, work boots/supplies, etc.) to ensure a successful transition to their community after they are released.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

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

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	500,000	34%
Matching Funds		
Federal	121,292	8%
State (excluding the amount of this request)	240,228	16%
Local	622,687	42%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	1,484,207	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2025-26	0	500,000	719A	No

9. Is future-year funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction ☐ N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. List 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.

12. 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		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Palm Beach County in collaboration with the Florida Department of Corrections and contracted services from community-based re-entry partners facilitate the successful reintegration of re-entry participants returning to Palm Beach County. The Regional and State Transitional Offender Reentry Initiative, established in 2011, is a comprehensive model for re-entry designed to reduce recidivism.	500,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		500,000

13. Program Performance

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



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

In order to meet our intended purpose, all re-entry staff will be sufficiently trained in the following areas: motivational interviewing, cognitive behavioral interventions, LS/CMI assessment, amongst others. In addition, staff will meet monthly with County staff to discuss relevant data, progress, resources, and barriers as well as provide any additional trainings.

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

Individuals housed or released from FDC facilities will receive case management and support services. Prior to any services being delivered, coordinators will administer the LS/CMI assessment to determine their risk, needs, and protective factors which will guide their plan of care which may include transitional jobs, housing assistance, basic needs, employment, identification and more.

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

The target population for this Program will be active inmates housed at Sago Palm Reentry Center and recently released inmates from the Florida Department of Corrections institution/facility convicted in and returning to Palm Beach County, Florida. The RESTORE will target 400+ medium to high-risk people, as determined by the Level of Service Case Management Inventory (LS/CMI) Scores from completed risk assessments to provide re-entry services which support successful reintegration into the community. This population will consist of people being released from FDC, and people who may or may not be under the supervision of the Department.

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

The expected benefit is an increase in public safety, a safer community, cost savings on a local and state level, continued reduction in recidivism and an overall improvement in the quality of life for those returning to our community. Outcomes will be measured by capturing data regarding rearrests, reconviction and return to FDC rates. Data collection and analysis will be evaluated on a regular basis to ensure adequate oversight and compliance. Programming will also be monitored in person as well as through regular review of case notes and data entered into our shared database system.

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 in the contract?

Financial penalties have been incorporated into our contract with the FDC for failure to meet deliverables.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☐ Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):



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15. Has the entity applied for or received federal assistance for this project?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name	Nicole	Last Name	Bishop
b. Organization	Palm Beach County		
c. E-mail Address	nbishop@pbc.gov		
d. Phone Number	(561)355-1723	Ext.	

18. Recipient Contact Information

a. Organization	Palm Beach County
b. Municipality and County	Palm Beach
c. Organization Type	
☐ For Profit Entity	
☐ Non Profit 501(c)(3)	
☐ Non Profit 501(c)(4)	



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☒ Local Entity

☐ University or College

☐ Other (please specify)

d. First Name Last Name

e. E-mail Address

f. Phone Number Ext.

19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.