

LFIR # 2466

1. F	Project Title	Integrated Care	and Coordination	on for Y	outh (ICCY)				
2. 8	Senate Sponsor	Ed Hooper							
3. C	Date of Request	02/22/2023							
4. F	Project/Program De	escription							
ii v a p a r	ncludes a Chrysalis with Juvenile Probate any mental health corograms and services needed. The goaleduce the likelihoodeduce t	Health Master's levition Officers in their oncerns, engage the ces in the communities are to prevent yo	vel clinician, ser offices. The cling e youth in treatry, provide train outh who struggle chaviors manife	ving as nician is ment ar ing and e with sting are	s both a therapist a s available to imme nd/or assist with lin d support to JPOs, behavioral health is nd the need for dee	and system navigate ediately assess the king the youth to ot and appear in court ssues from slipping eper end services s	ate. This integration or, working side by side youth and determine her needed treatment twith the youth and JPO through the cracks, uch as residential care, ssues.		
5. S	State Agency to re	ceive requested fu	inds Depa	artment	t of Juvenile Justice	e			
S	tate Agency conta	acted? Yes							
6. A	mount of the Non	recurring Request	for Fiscal Yea	r 2023-	-2024				
1	Type of Funding				Amo	unt			
	Operations				-	507,000			
F	ixed Capital Outlay	/			0				
7	Total State Funds Requested				507,000				
	otal otate i unus i	Nequesteu				307,000			
_		•				·	•		
_		or Fiscal Year 202	3-2024 (includ	ing ma	atching funds ava	·	•		
7. T		•	3-2024 (includ	ing ma	atching funds ava	·	•		
7. T	otal Project Cost f	•		ing ma		ilable for this proj	•		
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7. T	otal Project Cost f  Type of Funding  Total State Funds R	or Fiscal Year 202		ing ma	Amount	ilable for this proj	•		
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7. T	otal Project Cost f Type of Funding Total State Funds R Matching Funds Tederal State (excluding the	or Fiscal Year 202 equested (from que	estion #6)	ing ma	Amount 507,000 0 0	Percentage 100% 0% 0%	•		
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7. T	otal Project Cost for Funding Fotal State Funds Referred State (excluding the Local Other	equested (from que amount of this requested)	estion #6)  uest)  023-2024  state funding?	Y	Amount 507,000 0 0 0 507,000	Percentage 100% 0% 0% 0% 0%	•		
7. T  1  1  1  1  1  1  1  8. H	otal Project Cost for Funding Total State Funds Report Funds Federal State (excluding the Local Dither Total Project Costs Has this project professors	equested (from que amount of this requested Year 20 eviously received Amo	pestion #6)  Destion #6)  Destion #6)  Destion #6)  Destion #6)  Destion #6)	Y	Amount 507,000 0 0 0 0 507,000 // es Specific	Percentage 100% 0% 0% 0% 0% 100%	•		
7. T  1  1  1  1  1  1  8. H	otal Project Cost for Funding Fotal State Funds Research State (excluding the Local Other Fotal Project Costs Has this project professor (yyyy-yy)	equested (from que amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20	estion #6)  D23-2024  State funding?  Dunt  Nonrecurrir  350	y ng ,000	Amount 507,000  0 0 0 507,000  /es Specific Appropriation #	Percentage 100% 0% 0% 0% 100%	•		
7. T  1  1  1  1  1  1  1  1  1  1  1  1  1	otal Project Cost for Funding Fotal State Funds Research State (excluding the Local Other Fotal Project Costs Fiscal Year (yyyy-yy) Figure 1 (yyyy-yy) Figure 1 (yyyy-yy) Figure 2022-23	equested (from que amount of this requested (from que) amount of this requested (from	estion #6)  D23-2024  State funding?  Dunt  Nonrecurrir  350	y ng ,000	Amount 507,000  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Percentage 100% 0% 0% 0% 100%	•		
7. T  1  1  1  1  1  1  1  1  1  1  1  1  1	otal Project Cost for Funding Fotal State Funds Research State (excluding the local Dither Fotal Project Costs Fiscal Year (yyyy-yy) Figure 122-23 For future funding lifts at the service of the service	equested (from que amount of this requested (from que) amount of	estion #6)  D23-2024  State funding?  Dunt  Nonrecurrir  350  ed?  Int per year.	y ,000	Amount 507,000  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Percentage 100% 0% 0% 0% 0% 100%	•		



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11. Status of Construction

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

We received \$6,115,500 from PPP (Paycheck Protection Program). Funds went to the allowable CARES Act expenditures for payroll.

#### **Complete questions 11 and 12 for Fixed Capital Outlay Projects**

a. What is the o	current phase o	f the project?	
Planning	ODesign	Construction	
b. Is the projec	t "shovel ready	" (i.e permitted)?	
c. What is the	estimated start	date of construction?	
d. What is the	estimated comp	letion date of construction?	
		to receive, directly or indirec ners of the facility and the enti	outlay funding. Include the

#### 13. Details on how the requested state funds will be expended

Spending Category	Category Description			
Administrative Costs:				
Executive Director/Project Head Salary and Benefits				
Other Salary and Benefits	.10 FTE Clinical Director, .25 FTE Contract Manager, .25 Data Support Specialist to ensure clinical quality oversight of the program and ensure all program data is reported in an accurate and timely way to DJJ. Data Support Specialist will also provide data to program staff to ensure outcomes are being achieved.	34,069		
Expense/Equipment/Travel/Supplies/ Other	Insurance and professional fees	11,043		
Consultants/Contracted Services/Study				
Operational Costs: Other				
Salary and Benefits	1 FTE Clinical Supervisor, 6 FTE Therapists and .5 FTE Administrative Assistant.	413,182		
Expense/Equipment/Travel/Supplies/ Other	Rent, staff travel, phone, utilities, office supplies	17,687		
Consultants/Contracted Services/Study		0		
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (m	ust equal total from question #6)	507,000		

#### 14. Program Performance



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

The goals of the project are to prevent youth who struggle with behavioral health issues from slipping through the cracks, reduce the likelihood of more severe behaviors manifesting and the need for deeper end, more expensive services such as residential care, and decrease maladaptive delinquent behaviors by treating the underlying psychological issues.

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

We propose to integrate our clinical services with the Department of Juvenile Justice around the state. This integration includes a Chrysalis Health Master's level clinician, serving as both a therapist and system navigator, working side by side with Juvenile Probation Officers in their offices.

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

The clinician is available to immediately assess the youth and determine any mental health concerns, engage the youth in treatment and/or assist with linking the youth to other needed treatment programs and services in the community, provide training and support to JPOs, and appear in court with the youth and JPO as needed. Services include a comprehensive assessment, treatment plan, therapy or linkage to an appropriate behavioral health service provider, case management, training/support for Juvenile Probation Officers, and appearance in court if needed.

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

The target population are DJJ youth who have an identified or suspected mental health or substance abuse problem. Approximately 150 kids will be served annually.

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

The following benefits and outcomes for this project are: 1) Youth will demonstrate an improvement in their mental health symptoms; measure is an evidenced based assessment tool (like the DLA-20 or CFARS) that determines improvement in symptoms. 2)100% of youth released from the program will not receive Offense During Service (ODS); measure is the percentage of youth released from the program that shall not receive ODS shall be at or above the last Comprehensive Accountability Report (CAR) of similarly classified services (greater or lesser depending on the measure) 3)90% of youth will not receive any additional charges while in the program. Measure is this percentage is calculated by dividing the number of youth that did not recidivate by the total number of youth that completed program services. Recidivism is defined as a new offense that occurs within 12 months of program completion that results in an adjudication, adjudication withheld, or an adult conviction.

## 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?

Initially a Corrective action plan. If not corrected additional penalties could include partial to total loss of funding.

15. Requester Contact Information						
a. First Name	Leslie	Last Name	Lynch			
b. Organization	The Chrysalis Center, Inc., D/B/A Chrysalis Health  Ilynch@chrysalishealth.com					
c. E-mail Address						
d. Phone Number	(954)415-2952	Ext.				
16. Recipient Contact	Information					
a. Organization	The Chrysalis Center, Inc. Health	., D/B/A Chry	rsalis			
b. Municipality and	d County Broward					



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☑For Profit Entity	☑For Profit Entity				
□Non Profit 501(c	□Non Profit 501(c)(3)				
□Non Profit 501(c	□Non Profit 501(c)(4)				
□Local Entity	□Local Entity				
□University or Co	□University or College				
□Other (please sp	□Other (please specify)				
d. First Name	Leslie	Last Name	Lynch		
e. E-mail Address	e. E-mail Address Ilynch@chrysalishealth.com				
f. Phone Number	f. Phone Number (954)415-2952				
17. Lobbyist Contact Information					
a. Name	Eric Prutsman				
b. Firm Name					
c. E-mail Address					
d. Phone Number					