



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1001

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

4. Project/Program Description

Eagles Haven is a community wellness center created solely and mindfully for the Parkland/Coral Springs community in the aftermath of the tragic shooting at Marjory Stoneman Douglas High School in 2018. The Center offers wellness services, case management, trauma education and crisis intervention/counseling in one relaxing and nurturing setting. Community members are welcome to call or drop in for any supportive service or wellness needs 7 days a week, free of charge.

5. **State Agency to receive requested funds**
- State Agency contacted?**

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	600,000
Fixed Capital Outlay	0
Total State Funds Requested	600,000

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	600,000	53%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	479,000	42%
Other	60,000	5%
Total Project Costs for Fiscal Year 2025-2026	1,139,000	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		
2024-25	0	600,000	377	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



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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	Program Staff (Director, Assistant Director, Clinical Navigators, Admin)	500,000
Expense/Equipment/Travel/Supplies/Other	Office space and supplies, program and wellness supplies	100,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		600,000

13. Program Performance

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

Funding will support programs at Eagles' Haven Wellness Center, which opened in response to the tragic shooting in Parkland, Florida in 2018 that resulted in the death of 17 people. The Center offers support services, wellness classes and crisis support to the continuously grieving community. The goal is for the community to regain a sense of wellness and to be connected to needed support services to assist in their recovery.

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



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Eagles' Haven offers wellness activities, case management, trauma education and crisis intervention to the Parkland community. The center is open to the community 7 days a week. The Eagles' Haven Navigators provide clinical assessment and crisis support while also linking families to needed social or therapeutic services in the community.

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

Wellness Experiences including but not limited to: Pet Therapy, Kickboxing, Exercise classes, Yoga, Tai Chi, Meditation & Mindfulness, Blender Bike Smoothie Making, Drumming Circle, Zumba, Chi Gong, Acupuncture, Aromatherapy, Relaxing with Art, Improv, Open Mic Poetry, Singing, Stretching Classes, Chair Massage, Boot Camp, and Cooking. Navigating Services/Case Management: Our clinicians provide intensive, hands-on, clinical case management which includes a comprehensive care plan and appropriate referrals to needed services to assist the individual and family according to their individual needs.

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

This program targets anyone impacted by the shooting at Marjory Stoneman Douglas High School in Parkland, Florida in 2018. While initially aimed at students, parents and teachers in the Parkland/Coral Springs community, the center has expanded to serve anyone suffering from trauma related to this shooting or other mass violence incidents.

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

The goal of the project is to improve wellness and restore hope to the Parkland community through the provision of wellness activities and support services. Objectives are as follows and are measured by care plan reviews and satisfaction surveys:
 1. 90% of clients will be linked to the appropriate services as determined during assessment and listed on their care plan
 2. 85% of clients will meet the wellness goals listed on their care plan

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?

Standard penalties.

14. Is this project related to mitigation, response, or recovery from a natural disaster? No

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):

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#:



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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 Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

18. 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)

d. First Name Last Name

e. E-mail Address

f. Phone Number Ext.

19. Lobbyist Contact Information



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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.