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PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

Meeting Date: October 16, 2007 Consent Regular
 Ordinance Public Hearing

Department:
Submitted By: Palm Beach County Sheriff's Office
Submitted For: Palm Beach County Sheriff's Office

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve a budget transfer in the amount of \$95,000 from the Law Enforcement Trust Fund (LETf) (1151) to the Palm Beach County Sheriff's Office (PBSO).

Summary: Florida Statute 932.7055 requires that no less than 15% of the LETf's previous year's revenues be used for the support or operation of drug treatment, drug abuse education, drug prevention, crime prevention, safe neighborhood and school resource officer programs of various non-profit organizations. The PBSO's FY 2007 estimated donation requirement is \$173,915. The funds are requested to aid qualified organizations that meet the requirements set forth in F.S. 932.7055. The PBSO's support of these programs exemplifies its strong commitment to the prevention and reduction of crime throughout the communities it serves and its desire to put money back into these communities to support organizations that provide such services. The current State LETf balance is \$906,878. Approval of this request will reduce the State Law Enforcement Trust Fund balance to \$811,878. The PBSO certifies that the use of these funds is in accordance with F.S. 932.7055. Below is a table indicating the organizations the PBSO seeks to fund and the corresponding amount of funding proposed per respective agency. No new positions are needed and no County funds are required. Countywide (DW)

ORGANIZATION	AMOUNT
Alzheimer's Community Care, Inc.	\$10,000
Crime Stoppers of Palm Beach County, Inc.	\$35,000
Gulfstream Council of Boy Scouts of America, Inc.	\$10,000
Junior Achievement of the Palm Beaches, Inc.	\$25,000
211 Palm Beach/Treasure Coast, Inc.	\$15,000
Total Amount of Donations	\$95,000

Background and Justification: The Palm Beach County Sheriff's Office has a long-standing commitment to the reduction of crime and implementation of crime and drug prevention programs within Palm Beach County. Use of LETf requires approval by the Board in accordance with F.S. 932.7055, upon request of the Sheriff. This Statute requires that no less than 15 % of the last fiscal year's revenues be donated or expended for the support or operation of drug treatment, drug abuse education, drug prevention, crime prevention, safe neighborhood or school resource officer programs. The PBSO certifies that the use of these funds is in accordance with F.S. 932.7055.

Attachments:

- Budget Transfer
- LETf Donation Applications (5)

RECOMMENDED BY: _____ DATE: 9/27/07
DEPARTMENT DIRECTOR

APPROVED BY: Shearon B. By DATE: 10/5/07
ASSISTANT COUNTY ADMINISTRATOR

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2007	2008	2009	2010	2011
Capital Expenditures					
Operating Costs	\$95,000				
External Revenues	(\$95,000)				
Program Income (County)					
In-Kind Match (County)	0				
Net Fiscal Impact	0				
# Additional FTE Positions (Cumulative)	0				

Is Item Included in Current Budget: YES _____ NO X

Budget Account No.: Fund 1151 Agency 160 Org _____ Object _____

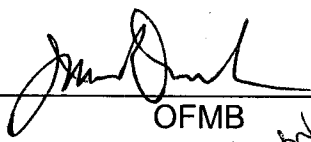
Reporting
Category _____

B. Recommended Sources of Funds / Summary of Fiscal Impact:


The funds are being requested from the State Law Enforcement Trust Fund. No County Funds are required.

III REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:



 OFMB
 10-2-07
 ash
 10-2-07
 VO
 9/28



 Contract Administration
 Done 10/3/07
 10/3/07

B. Legal Sufficiency:



 Assistant County Attorney
 10/4/07

C. Other Department Review:

 Department Director

This summary is not to be used as a basis for payment.

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BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
BUDGET TRANSFER

FUND 1151 LAW ENFORCEMENT TRUST FUND

BCEX 420 100207*52p

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED	REMAINING BALANCE
<u>Expenditures</u>								
<u>Transfers</u>								
160-1690-9498	Trfr to Sheriff Fund 1902	0	698,876	95,000	\$0	\$793,876		
<u>Reserves - New Projects</u>								
160-9900-9908	Reserves - New Projects	299,940	906,878	0	95,000	811,878		
TOTAL FUND				\$95,000	\$95,000			

Palm Beach County Sheriff's Office

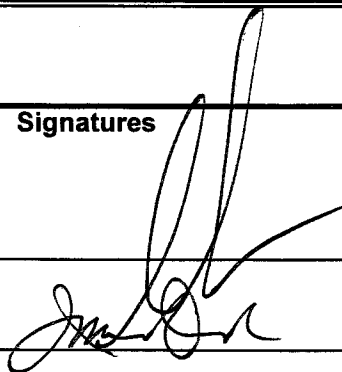

INITIATING DEPARTMENT/DIVISION

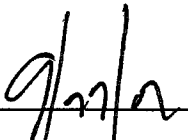
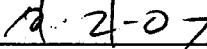
Administration/Budget Department Approval

OFMB Department - Posted

Signatures

Date

By Board of County Commissioners
At Meeting of October 16, 2007

Deputy Clerk to the
Board of County Commissioners

atw
10-2-07



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

GENERAL INFORMATION

❖ **PURPOSE/GUIDELINES OF DONATION**

1. Law Enforcement Trust Fund (LETF) donations are intended to assist agencies and organizations with the following purposes:

- Drug Treatment Program
- Drug Abuse Education
- Drug Prevention
- Crime Prevention
- Safe Neighborhood
- School Resource Officer Program(s)

An agency or organization that wishes to receive such funds shall complete an application accompanied by a written certification, signed by the Executive Director or Fiscal Agent, that the funds will be used for one or more of the authorized purposes as listed above.

2. Pursuant to FSS 932.7055(5)(c), any agency or organization that receives money from a law enforcement trust fund shall provide an accounting for such monies. An "Accounting of Funds" form must be completed and is due 60 days after the earlier of termination of any funding Agreement or upon completion of the activities funded by any LETF donation.
3. Failure to comply with any of the provisions set forth in this application will result in denial of future funding.
4. Inclusion of printed program/organization brochure is optional.
5. In order to establish a clear understanding of the proposed program, applicants shall respond to all questions and complete the current year budget.
6. Each agency is asked to provide a contact person who will be available for further information, follow up and/or interviews.

❖ **FUNDING DECISIONS/APPROVAL**

The Palm Beach County Sheriff's Office has final approval to determine which programs will receive any designated funding. The Palm Beach County Board of County Commissioners must then approve the request prior to donation award.

❖ **AUTHORITY**

The use of LETF as donations is authorized under section 932.7055, Florida State Statutes.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION

1. **Legal name of Organization:**

Alzheimer's Community Care

NAME

2. **Address:**

800 Northpoint Parkway, Suite 101-B

STREET ADDRESS

West Palm Beach, FL 33407

CITY, STATE, ZIP

3. **Executive Director:**

Mary M. Barnes, President and CEO

NAME



SIGNATURE

(561) 683-2700

TELEPHONE NUMBER

maryb@alzcare.org

E-MAIL ADDRESS

Tax ID #: 31-1481653

4. **Fiscal Agent:**

Ken Kaneski, CPA

NAME



SIGNATURE

(561) 683-2700

TELEPHONE NUMBER

kkaneski@alzcare.org

E-MAIL ADDRESS

5. **Date:**

8/6/07

DATE



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Organization Name: Alzheimer's Community Care

LETF Funding Request (MUST match total on Financial Application): \$15,000

1. What service will your organization provide through the use of Law Enforcement Trust Funds?

- School Resource Officers
- Drug Treatment Program
- Crime Prevention
- Safe Neighborhood
- Drug Abuse Education
- Drug Prevention Programs

2. Organization Purpose: To provide specialized, community-based services to individuals with Alzheimer's disease and related dementia disorders, and their caregivers. Our goal is to maintain quality of life after diagnosis and help caregivers care for patients in the community

3. Provide a brief summary of program's activities/services to be funded: Alzheimer's Community Care is requesting funding to help support the Alzheimer's 24-Hour Crisis Line (800 394-1771). The Crisis Line serves all of Palm Beach County and is staffed by registered nurses who specialize in dementia. There is a nurse on call 24 hours per day, 7 days per week. 60% of Alzheimer's patients are at risk for wandering. As the result of their disease, they become disoriented in familiar surroundings and are unable to get home. This is a very dangerous situation, as they are unable to take care of themselves. Other situations that may arise with dementia patients are reports of shoplifting, erratic driving or domestic assault. In each of these cases, chances are that law enforcement will be called. The 24-Hour Crisis Line connects law enforcement with a nurse specializing in dementia who can help to intervene in the crisis and help to avoid an inappropriate Baker Act or incarceration. In addition, Alzheimer's Community Care provides quarterly education in dementia and dementia-specific crisis intervention to the Crisis Intervention Team (CIT) to assist first responders in working with individuals with possible dementia.

4. What results are you committed to achieving? 1) Respond to all crisis calls from the Palm Beach County Sheriff's Office within 15 minutes, and assist deputies by providing crisis intervention services via telephone or at the scene. 2) Provide quarterly dementia training for CIT.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: 7 /01 / 07 To: 6 /30 / 08

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$20,000	\$12,000	60%
2.	Employee Benefits/Payroll Taxes	\$2,000	\$1,200	60%
3.	Professional Fees	\$	\$	%
4.	Occupancy/Utilities	\$	\$	%
5.	Telephone	\$600	\$	%
6.	Postage/Shipping	\$200	\$	%
7.	Printing & Publications	\$2,500	\$	%
8.	Supplies	\$500	\$	%
9.	Travel	\$500	\$	%
10.	Meetings	\$	\$	%
11.	Miscellaneous Expenses	\$2,400	\$1,800	75%
	Total Expenses	\$28,700	\$15,000	52%



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Budget Narrative

**Provide detailed description for each expense listed on the Financial Application.
You may attach additional sheets if necessary.**

Salaries (list employees and individual compensation): Family Nurse Consultants: 7 registered nurses rotate on-call responsibilities for the 24-Hour Crisis Line (average salary \$43,100). Each is paid an additional \$2.00 per hour for their on-call time and \$28.00 per hour for crisis work. The Education Program Manager prepares for and provides quarterly CIT Training in Palm Beach County. (Full salary \$37,131)

Professional Fees (list vendor and type of service provided): _____

Occupancy/Utilities (list utilities): _____

Telephone (provide telephone numbers): A portion of each nurse's cell phone bill to cover the time they are on-call for the crisis line.

Printing & Publications (list type of material): Law enforcement Quick Reference Guides and Roll Call Training Videos, available at no charge to all law enforcement officers.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Supplies (list supplies/equipment): General office supplies

Travel (individuals traveling, destination and purpose): Local travel at .44 per mile for registered nurses responding to a crisis, and the Education Program Manager providing quarterly CIT Training.

Meetings (attendees, purpose, items needed for meeting): _____

Miscellaneous Expense (specify items): \$200 per month is paid to the 211 Elder Crisis Line to answer crisis calls during evenings and weekends. They contact the registered nurse on-call, who responds within 15 minutes.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION CERTIFICATION

I hereby certify that any LETF funds received will be used for the authorized purpose as indicated on Page 3 of this application. Additionally, I certify that the agency requesting the funds is a not-for-profit agency or organization, which has been held to be tax exempt under the provisions of s. 501 of the Internal Revenue Code, and is registered as a Non Profit organization with the State of Florida, Department of State, Division of Corporations.

Mary M. Barnes
Name (please print)

President/CEO
Title (please print)

Mary M. Barnes
Signature

8/6/07
Date

NOTARY SECTION:

State of Florida

County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 6th day of August, 2007 by Mary M. Barnes (name of individual) as President/CEO (title) of Alzheimer's Community Care, Inc. (name of organization/ agency), who is personally known to me or who produced _____ as identification.

Julie Sylvester
Notary Public

My Commission Expires:

