

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS**

AGENDA ITEM SUMMARY

Meeting Date: January 12, 2010 **(X) Consent** **() Regular**
() Ordinance **() Public Hearing**

Department

Submitted By: Community Services

Submitted For: Division of Senior Services

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Amendment No. 001 to Standard Agreement No. IP009-9500 (R2009-0745) for the Emergency Home Energy Assistance Program (EHEAP) with the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. (AAA) for the period January 1, 2009, through March 31, 2010, increasing the agreement amount by \$11,691 for a new total not-to-exceed amount of \$179,214.

Summary: This amendment will increase the spending authority by \$9,897 and outreach by \$1,794 for a total of \$11,691. In the area south of Hypoluxo Road, Mae Volen Senior Center Inc. currently provides EHEAP services under a similar agreement from the AAA. (DOSS) Countywide except for portions of Districts 3, 4, 5, and 7 south of Hypoluxo Road (TKF)

Background and Justification: EHEAP is a home energy assistance program funded by the U.S. Department of Health and Human Services by way of the AAA. The program operates in accordance with the guidelines of the Low Income Home Energy Assistance Program (LIHEAP) State Plan. The EHEAP program is administered by the DOSS staff, specifically to the elderly population. Eligible households may be provided with one (1) benefit per season up to \$600 per benefit, not-to-exceed two (2) benefits per fiscal year.

Attachments:

Amendment No. 001

Recommended By: Chad Wil 12/16/09
Department Director Date

Approved By:  Assistant County Administrator Date _____

II. FISCAL ANALYSIS IMPACT

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
Capital Expenditures	_____	_____	_____	_____	
Operating Costs	<u>11,691</u>	_____	_____	_____	_____
External Revenue	<u>(11,691)</u>	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>-0-</u>	_____	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget: Yes X No
Budget Account No.: Fund 1006 Dept. 144 Unit. 1483 Obj. Var.
Program Code Var.

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

Federal funds through the Department of Elder Affairs.

Departmental Fiscal Review: Taruna Malhotra
12/16/09

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

OFMB Fiscal and/or Contract Administration Comments:
no additional funding required as funding available in FY2010 budget

B. Legal Sufficiency:

_____ Jm Rml 12-22-09
10/22/09 OFMB WA 12/22/09
12/24/09 10M
12-7809

_____ Jm - J. Javelant 12/22/09
Contract Administration

_____ [Signature] 12-22-09
Insert compliance with

B. Legal Sufficiency:

Legal Sufficiency: *10*
[Signature]
12/29/09
Cammy
Assistant County Attorney
Field

**This amendment complies with
our review requirements.**

C. Other Department Review:

Department Director

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

This AMENDMENT, entered into between the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Agency on Aging" and the Palm Beach County Board of County Commissioners Division of Senior Services hereinafter referred to as the "Provider", amends Agreement No. IP009-9500.

The purpose of this amendment is to increase the total amount of the agreement by \$11,691.00 and to add agreement language relating to consumer outreach.

Section II is amended to read:

A. Agreement Amount

To pay for service in accordance with the PROGRAM PROVISIONS of this agreement in an amount not to exceed \$179,214.00, subject to the availability of funds.

C. Source of Funds:

The costs of services paid under any other agreement or from any other source are not eligible for reimbursement under this agreement. The funds awarded to the provider pursuant to this agreement are in the state grants and aids appropriations and consist of the following:

Program Title	Year	Funding Source	CFDA#	Fund Amounts
Emergency Home Energy Assistance	2009-2010	U.S. Dept. of Health and Human Services	93.568	\$179,214.00
TOTAL FUNDS CONTAINED IN THIS AGREEMENT:				\$179,214.00

Section III.A.VI. is added to read:

VI. Outreach will be billed by the provider per event, at the rate of \$200.00 per half day event and \$400.00 per whole day event. Provider must submit the Outreach Form, **Attachment XX** and include Outreach reimbursement on the monthly invoice.

ATTACHMENT I, Budget Summary, is hereby replaced with the revised Budget Summary, attached hereto.

This amendment shall be effective on the last date that the amendment is signed by both parties.

All provisions in the agreement and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the agreement.

This amendment and all its attachments are hereby made a part of the agreement.

IN WITNESS THEREOF, the parties hereto have caused this 5 page agreement to be executed by their undersigned officials as duly authorized.

PROVIDER: PALM BEACH COUNTY,
Palm Beach/FLORIDA, A Political
Subdivision of the State of Florida

Area Agency on Aging of
Treasure Coast, Inc.

SIGNED
BY: _____

NAME: Burt Aaronson

TITLE: Chair

DATE: _____

SIGNED
BY: _____

NAME: _____

TITLE: _____

DATE: _____

SHARON R. BOCK, Clerk

BY: _____

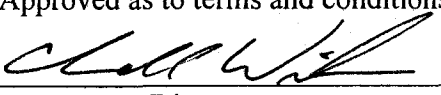
DATE: _____

FEDERAL ID NUMBER: 59-6000785

FISCAL YEAR END DATE: _____

Approved as to form and legal sufficiency

Assistant County Attorney

Approved as to terms and conditions


Department Director

ATTACHMENT I

EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM

BUDGET SUMMARY

1.	Spending Authority	\$168,404.00
2.	Outreach	\$10,810.00
4.	Total	\$179,214.00
5.	Projected minimum number of Consumers to be served:	280

NOTE: Eligible households may be provided with one benefit per season up to and not to exceed six hundred dollars per benefit. The minimum number of consumers may reflect multiple duplicated consumers if a consumer receives a benefit in both seasons.

ATTACHMENT XX

EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM



Area Agency on Aging
Palm Beach/Treasure Coast, Inc.
Your Aging Resource Center

ATTACHMENT XX

OUTREACH FORM

PROVIDER NAME : _____

DATE OF EVENT: _____

STAFF PARTICIPANT: _____

NUMBER OF ATTENDEES: _____

ATTACH DOCUMENT(S)
BELOW (IE. Flyers,) :

Attestation Statement

Agreement Number IP009-9500

Amendment Number 001

I, Burt Aaronson, Chair, provider representative for Palm Beach County Board of County Commissioners Division of Senior Services attest that no changes or revisions have been made to the content of the above referenced agreement or amendment between the Area Agency of Palm Beach Treasure Coast, Inc. and Palm Beach County Board of County Commissioners Division of Senior Services. The only exception to this statement would be for changes in page formatting, due to the differences in electronic data processing media, which has no effect on the agreement content.

Signature of Provider Representative

Date