3H-3

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: Febru	ary 2, 2010	[X] Consent	[] Reg	ular lic Hearing		
Department: Facilitie	Department: Facilities Development & Operations					
	a the second sec					
	I. E	XECUTIVE BRIEF				
Motion and Title: Stathe agreement (R2 interoperable commun County's 800MHz Rad	2004-0456) winications through	ith Columbia Ho	spital (Hosp	oital) allowing for		
Summary: The Agree Hospital can program groups for certain type The Hospital has can agreement. As such, The agreement provide approval by both part the agreement until Materms of the agreement providers. There are required to pay all contests of the party, with one of the party.	into its radios oes of inter-agonducted its staff is recommedes for three (ties. The Hosp March 15, 2013 of are standarde no charges costs associated procedures for the standarde of the standar	and utilize the co- ency communication operation in accommending that the (3) – three (3) year pital has approved 3. The renewal not d and have been of associated with the ed with subscribe or the System. The	untywide and ons expires of ordance with Board proceed renewals be a renewal to we requires Board to hospinis agreement units and the Agreement	EMS common talk on March 16, 2010. the terms of the d with the renewal. Let renewals require extend the term of pard approval. The itals and other EMS to comply with the		
Background and Just under which the Hos EMS common talk of agreement provides approval by both part the agreement until M	pital can programments proups for cer for three (3) ties. The Hos	ram into its radios tain types of intel – three (3) year pital has approved	and utilize the and utilize the agency com renewals but a renewal to	ne Countywide and nmunications. The it renewals require extend the term of		
Attachment:						
Second Amendme	ent					

Recommended by:	Department	No F Director	Date			
Approved by:	County Adm	inistrator	Date	1/26/10		

I. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

	Fiscal Year	2010	2011	2012	2013	2014
	Capital Expenditures Operating Costs	\$0 0	0 0	0 0	0 0	0 0
	External Revenues Program Income (County) In-Kind Match (County)	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0
	NET FISCAL IMPACT	W.	0	0	0	0
	# Additional FTE Positions (Cumulative)	_	_		_	
	Is Item Included in Current Budge	t? Yes	_ No _			
	Budget Account No:					
	Reporting Category					
R	Perommended Sources of Fund	le/Summa	n, of Eico	al Impact		

C.	Departmental	Fiscal Review:	

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development No fixed impact to whize the con	ment & Control Comments: mmorr talk groups.
OFMB PROPRING	Contract Dev and Control 1/20/10

A Legal Sufficiency:

| Live | 12/0
| Assistant County Attorney

This amendment complies with our review requirements.

A. Other Department Review:

Department	Director	

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

SECOND AMENDMENT TO INTERLOCAL AGREEMENT

THIS SECOND AMENDMENT to Agreement R200 amended by R2006-1913 is made as of political subdivision of the State of Florida, by and throu referred to as the County, and Columbia Hospital, Inc., Florida ("Hospital") with a federal tax id number of 62-1	, by and between Palm Beach County, a righ its Board of County Commissioners, hereinafter a corporation licensed to do business in the State of
In consideration of the mutual promises contained herein	n, the County and Hospital agree as follows:
1. The term of Agreement R2004-0456, as am and shall be extended to March 15, 2013.	nended by R2006-1913 expires on March 16, 2010,
2. All other terms of Agreement R2004-0456 r	emain unmodified and in full force and effect.
IN WITNESS WHEREOF, the Board of County Command executed this Amendment on behalf of the County a year above written.	nissioners of Palm Beach County, Florida has made nd Hospital has hereunto set its hand the day and
SHARON R. BOCK, CLERK & COMPTROLLER	PALM BEACH COUNTY, FLORIDA BY ITS BOARD OF COUNTY COMMISSIONERS
By: Deputy Clerk	Ву:
Deputy Clerk	Burt Aaronson, Chair
APPROVED AS TO FORM	APPROVED AS TO TERMS
AND LEGAL SUFFICIENCY	AND CONDITIONS
By: Asst. County Attorney	By: Ahm Woff Director Facilities Dev & Operations
ATTEST:	
	HOSPITAL:
By: <u>Bouler Junille</u> Witness	By: Valerie A. Jackson, Chief Executive Officer
Barbara Grimacol	
Name of Witness (Print or Type)	



Health Care Indemnity, Inc.

P.O. Box 555

Nashville, TN 37202-0555 Phone: 615/344-5847

CERTIFICATE OF INSURANCE

DATE: 1/1/2010

COI#: 3641

This is to certify to:

Palm Beach County Electronic Services Division

(Name of Certificate Holder)

Attn: Mark Filla 2633 Vista Pkwy

West Palm Beach

FL 33411-5608

that the described insurance coverages as provided by the indicated policy has been issued to:

Named Insured:

HCA INC AND SUBSIDIARY ORGANIZATIONS

Address:

EXISTING NOW OR HEREAFTER CREATED OR ACCOURED

ONE PARK PLAZA

NASHVILLE, TN 37202-0550

The Policy identified below by a policy number is in force on the date of Certificate issuance. Insurance is afforded only with respect to those coverages for which a specific limit of liability has been entered and is subject to all the terms of the Policy having reference thereto. This Certificate of Insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded under any policy identified herein.

POLICY NO.	POLICY PERIOD
HCI-10110	Eff. 1-1-2010
	Exp. 1-1-2011

TYPE OF INSURANCE	LIMITS OF LIABILITY		
Comprehensive General Liability - Occurrence Form Bodily Injury	\$1,000,000	Each and Every Occurrence	
 Property Damage Products and Completed Operations Personal and Advertising Injury 	\$3,000,000	Aggregate	
Health Care Professional Liability - Occurrence Form		Each and Every Occurrence	
		Aggregate	

SPECIAL CONDITIONS/OTHER THE NAMED INSURED INCLUDES

COLUMBIA HOSPITAL

COID

30923

Palm Beach County Board of County Commissioners, a political subdivision of the State of Florida, its Officers, Employees and Agents are Additional Insureds as respects the General Liability portion of this policy as the Named Insured's interest appears in the agreement with Palm Beach County for Interoperability with EMS Providers through County's 800 MHz Radio System.

Cancellation: Should any of the above described policies be canceled before the expiration date thereof, the issuing company will endeavor to mail ninet written notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.



