

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

346

AGENDA ITEM SUMMARY

Meeting Date: March 9, 2010

Consent
 Ordinance

Regular
 Public Hearing

Department: Facilities Development & Operations

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: a second amendment to the agreement (R2004-0095) with Bethesda Memorial Hospital (Hospital) allowing for interoperable communications through the countywide and EMS common groups of the County's 800MHz Radio System.

Summary: The Agreement which provides the terms and conditions under which the Hospital can program into its radios and utilize the countywide and EMS common talk groups for certain types of inter-agency communications expired on January 13, 2010. The agreement provides for three (3) – three (3) year renewals but renewals require approval by both parties. The Hospital has approved a renewal to extend the term of the agreement until January 12, 2013. The renewal now requires Board approval. The terms of the agreement are standard and have been offered to hospitals and other EMS providers. There are no charges associated with this agreement. The Hospital is required to pay all costs associated with subscriber units and to comply with the established operating procedures for the System. The Agreement may be terminated by either party, with or without cause. (ESS) Countywide (JM)

Background and Justification: The Agreement which provides the terms and conditions under which the Hospital can program into its radios and utilize the countywide and EMS common talk groups for certain types of inter-agency communications expired on January 13, 2010. The agreement provided for three (3) – three (3) year renewals but renewals require approval by both parties. The Hospital has approved a renewal to extend the term of the agreement until January 12, 2013. The renewal now requires Board approval.

Attachment:

Second Amendment

Recommended by:

Annex Wolf
Department Director

2/17/10
Date

Approved by:

Robert Weir
County Administrator

3/1/10
Date

I. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Year	2010	2011	2012	2013	2014
Capital Expenditures	\$0	0	0	0	0
Operating Costs	0	0	0	0	0
External Revenues	0	0	0	0	0
Program Income (County)	0	0	0	0	0
In-Kind Match (County)	0	0	0	0	0
NET FISCAL IMPACT	*	0	0	0	0
# Additional FTE Positions (Cumulative)	—	—	—	—	—

Is Item Included in Current Budget? Yes ___ No ___

Budget Account No:

Reporting Category _____

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

C. Departmental Fiscal Review: _____

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development & Control Comments:

** No fiscal impact for allowing communications through the common groups.*

[Signature]
OFMB

2/25/10
2/25/10

[Signature]
Contract Dev. and Control

A. Legal Sufficiency.

[Signature]
Assistant County Attorney

3/1/10

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 R2004-0095, dated January 13, 2004 and as previously amended by R2006-0982 is made as of _____, by and between Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as the County, and Bethesda Memorial Hospital, a corporation licensed to do business in the State of Florida ("Hospital") with a federal tax id number of 59-2447554.

In consideration of the mutual promises contained herein, the County and Hospital agree as follows:

1. The term of Agreement R2004-0095, as amended by R2006-0982 expires on January 13, 2010, and shall be extended to January 12, 2013.
2. All other terms of Agreement R2004-0095 remain unmodified and in full force and effect.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Amendment on behalf of the County and Hospital has hereunto set its hand the day and year above written.

**SHARON R. BOCK,
CLERK & COMPTROLLER**

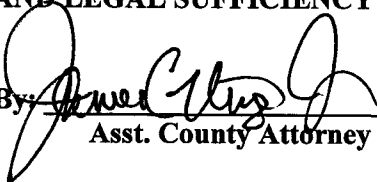
**PALM BEACH COUNTY, FLORIDA BY ITS
BOARD OF COUNTY COMMISSIONERS**

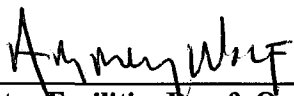
By: _____
Deputy Clerk

By: _____
Burt Aaronson, Chair

**APPROVED AS TO FORM
AND LEGAL SUFFICIENCY**

**APPROVED AS TO TERMS
AND CONDITIONS**

By: 
Asst. County Attorney

By: 
Director Facilities Dev & Operations

ATTEST:

HOSPITAL:

By: 
Witness

By: 
Robert Hill, Chief Executive Officer 


Name of Witness (Print or Type)