

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS**

AGENDA ITEM SUMMARY

Meeting Date: April 20, 2010 Consent Regular
 Ordinance Public Hearing

Department
 Submitted By: Community Services

Submitted For: Division of Senior Services

I. EXECUTIVE BRIEF


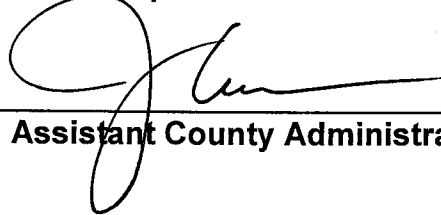
Motion and Title: Staff recommends motion to approve: Amendment No. 001 to Standard Agreement No. IC009-9500 (R2009-1258) for the Community Care for the Elderly (CCE) Program with the Area Agency on Aging (AAA) of Palm Beach/Treasure Coast, Inc. for the period July 1, 2009 through June 30, 2010, increasing the agreement amount by \$30,000 for a new total not-to-exceed the amount of \$1,055,370.

Summary: This amendment will increase client services by \$30,000 and required County funds by \$3,333. County funds are currently in the budget. In area south of Hypoluxo Road, the Volen Center provides CCE services from AAA. (DOSS) Countywide except for portions of Districts 3, 4, 5, and 7 south of Hypoluxo Road (TKF)

Background and Justification: The Division of Senior Services (DOSS) provides a broad spectrum of services to the senior population under the CCE program. As additional funding is granted by the AAA, amendments are needed to reflect the change in the various service categories affected. Additional referrals will be made to other community resources as determined by the needs of the senior population. DOSS is responsible for creating referrals to the contracted vendors and managing the spending authority for the program. The CCE program provides community-based services to assist elders 60+ who are at risk of nursing home placement, to live in the least restrictive environment suitable to meet their needs.

Attachments:

CCE Amendment No. 001

Recommended by:		3/26/10 Date
Department Director		
Approved By:		4/7/10 Date
Assistant County Administrator		

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>33,333</u>	_____	_____	_____	_____
External Revenue	<u>(30,000)</u>	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>3,333</u>	_____	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	<u>-0-</u>	<u>-0-</u>	_____	_____	_____

Is Item Included in Current Budget: Yes X No _____
 Budget Account No.: Fund 1006 Dept 144 Unit 1443 Obj. Vari.
 Program Code Vari.

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

State funds through the Department of Elder Affairs and County funds. Previous resolution for Standard Agreement is R2009-1258. Required funding is available in the current budget.

Departmental Fiscal Review: Taruna Malhotra
3/26/10

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

[Signature] 4/5/2010
 VA 3/29/10 OFMB JB 4/1
 3/29/10

[Signature] 4/5/10
 Contract Administration

B. Legal Sufficiency:

[Signature]
 Assistant County Attorney

This amendment complies with our review requirements.

C. Other Department Review:

 Department Director

This AMENDMENT, entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "AGENCY", and Palm Beach County Board of County Commissioners hereinafter referred to as the "PROVIDER", amends agreement # IC009-9500.

The purpose of this amendment is to: 1) increase the agreement amount by \$30,000.00 and to 2) revise ATTACHMENT II, COMMUNITY CARE FOR THE ELDERLY PROGRAM BUDGET SUMMARY.

1) Section D. of the agreement is hereby amended to read:

D. Agreement Amount

The agency agrees to pay for contracted services according to the statement of work, ATTACHMENT I of this agreement in an amount not to exceed \$1,055,370.00 subject to the Availability of funds. Any costs or services paid for under any other agreement or from any other source are not eligible for payment under this agreement. The provider agrees to utilize the approved rate sheet, ATTACHMENT III for contracted services the agency agrees to pay for.

Funding Allocation				
Program Title	Year	Funding Sources	CFDA	Amount
Community Care for the Elderly (CCE)	2009	General Revenue	65.010	\$1,055,370.00
TOTAL AGREEMENT AMOUNT:				\$1,055,370.00

2) ATTACHMENT II, COMMUNITY CARE FOR THE ELDERLY PROGRAM BUDGET SUMMARY is hereby replaced with revised ATTACHMENT II, COMMUNITY CARE FOR THE ELDERLY PROGRAM BUDGET SUMMARY attached hereto.

This amendment shall be effective on the last date that the amendment has been 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 with 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 of its attachments are hereby made a part of this agreement.

By signing this agreement, the parties agree that they have read and agree to the entire agreement.

IN WITNESS THEREOF, the parties hereto have caused this 4-page agreement, to be executed by their undersigned officials as duly authorized.

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

Area Agency on Aging of Palm Beach/
Treasure Coast, Inc.

SIGNED
BY: _____
Burt Aaronson, Chair

SIGNED
BY: _____

DATE: _____

NAME: _____

TITLE: _____

SHARON R. BOCK, Clerk and Comptroller

DATE: _____

BY: _____

DATE: _____

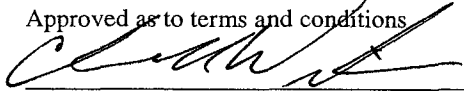
FEDERAL ID NUMBER: 59-6000785

FISCAL YEAR END DATE: _____

Approved as to form and legal sufficiency

Assistant County Attorney

Approved as to terms and conditions



Department Director

ATTACHMENT II
COMMUNITY CARE FOR THE ELDERLY PROGRAM
BUDGET SUMMARY

CCE Client Services	\$850,296.00
CCE Case Management	\$184,567.00
CCE Case Aide	\$20,507.00
Total	\$1,055,370.00

Attestation Statement

Agreement Number IC009-9500

Amendment Number 001

I, Burt Aaronson, Chair, attest that no changes or revisions have been
(Provider representative)

made to the content of the above referenced agreement/contract or amendment
between the Area Agency on Aging of Palm Beach/Treasure Coast and **Palm Beach County Board of
County Commissioners** . 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 affect on the agreement/contract
content.

Signature of Provider Representative

Date

SIMPLIFIED UNIT COST METHODOLOGY
 LINE ITEM BUDGET PROJECTIONS
 BUDGET YEAR: 7/1/09-6/30/10
 BIDDER NAME: Palm Beach County Division of Senior Services

ORIGINAL DATE: 7/1/09
 REVISED DATE: March 4, 2010
 REVISION NUMBER: Revision #001, Amendment #001

III.B. SUPPORTING BUDGET SCHEDULE BY PROGRAM ACTIVITY

*(Indicate all DOE funding sources applicable to your agency)

Funding Source **Mark which one applies:**
 ADI
 CCE X
 HCE

Form Revised July 18, 2003

	(Service Reference)	(1)	(5)	(6)	(14)	(17)	(26)	(30)	(19)	(46)	(58)
DESCRIPTION	TOTAL SERVICES	Adult Day Care	Case Aid	Case Management	Counseling (Mental Health / Screening)	Emergency Alert Response	Home Delivered Meats C2	Housing Improvement	In_Home Services (C,CH,E,H,P,R,SA)	Pest Control (Maintenance)	Specialized Medical Equipment, Services & Supplies
1. Total Budgeted Cash Costs	1,671,481	56,561	88,817	407,474	5,129	29,402	83,664	20,728	754,245	845	224,616
1. (a) Add Inkind Cost											
1. (b) Total Budgeted Costs	1,671,481	56,561	88,817	407,474	5,129	29,402	83,664	20,728	754,245	845	224,616
2. Total Budgeted Units	107,604	3,000	922	4,887	45	24,000	25,550	95	45,625	12	3,468
2.(a) Total Cost Per Unit of Service	N/A	18.85	96.33	83.38	113.99	1.23	3.27	218.19	16.53	70.42	64.77
3. Less USDA	0										
4. Less Cash Match	117,264	3,120	2,279	20,507	325	2,107	6,359	1,667	69,858	33	11,009
5. Less Inkind Match											
6. Less Program Income Used as Match											
Sub-Total Match:	117,264	3,120	2,279	20,507	325	2,107	6,359	1,667	69,858	33	11,009
7. Program Income	42,690										42,690
8. Less Other Non-Matching Cash & Co-payments	456,157	25,361	66,031	202,400	1,879	8,335	20,073	4,061	55,668	512	71,837
9. Adjusted Budgeted Costs	1,055,370	28,080	20,507	184,567	2,925	18,960	57,232	15,000	628,719	300	99,080
10. Adjusted Cost Per Unit of Service	N/A	9.36	22.23	37.77	65.00	0.79	2.24	157.50	13.78	25.00	28.57
12. Estimated Number of UNDUPLICATED Clients	N/A	5	145	350	5	95	60	10	330	1	110