# PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Meeting Date: May	4, 2010	[x]	Consent	]	]	Regular	
Department:		[ ]	Ordinance	[	1	Public Hearing	
Submitted By:	Palm Bea	ch County	Sheriff's Office				
Submitted For:	Palm Bea	ch County	Sheriff's Office				

## I. **EXECUTIVE BRIEF**

**Motion and Title: Staff recommends motion to: A) Accept** on behalf of the Palm Beach County Sheriff's Office, a High Intensity Drug Trafficking Area (HIDTA) Program grant in the amount of \$143,269, for the Palm Beach County Multi-Agency Diversion Task Force, for the period of January 1, 2009 through December 31, 2010; **B) Approve** a budget amendment of \$143,269 in the Sheriff's Grant Fund.

**Summary:** On March 15, 2010 the Palm Beach County Sheriff's Office (PBSO) received an award from the Office of National Drug Control Policy. The funds will be used for overtime reimbursement and other expenses associated with the Palm Beach County Multi-Agency Diversion Task Force. There is no match requirement associated with this award. No additional positions are needed and no additional County funds are required. Countywide (DW)

Background and Justification: The HIDTA mission is to reduce drug availability by creating and supporting intelligence-driven task forces aimed at eliminating or reducing domestic drug trafficking and its harmful consequences through enhancement and coordination of drug trafficking control efforts among federal, state and local law enforcement agencies. Although these funds originated from a federal organization no Catalog of Federal Domestic Assistance (CFDA) Number exists for this program, the contract number is G09MI0011A.

# Attachments:

1. Budget Amendment 2. Award Letter	
RECOMMENDED BY:  DEPARTMENT DIRECTOR	DATE
APPROVED BY:  ASSISTANT COUNTY ADMINISTRATOR	5/3/10 DATE

# II. FISCAL IMPACT ANALYSIS

Α.	Five Year Summa	ry of Fiscal	lmpact:					
Fisc	al Years	2010	2011		2012	2013	2014	
-	ital Expenditures rating Costs	0 \$143,269	)					
Prog	rnal Revenues gram Income	(\$143,269	9)					
	unty) ind Match (County)	0						
N	let Fiscal Impact	* 0						
P	Additional FTE Positions nulative)	0						
ls Ite	em Included in Curre	nt Budget:	YES		NO _	X		
Budg	et Account No.: Fund	Ag	ency	Org	·	Object _		
	1	Reporting Ca	ategory					
	High Intensity Drug National Drug Cont additional positions FY 09 Palm Beach Total Program Budg * Although these fu Assistance (CFDA)	rol Policy. Tare needed County Mult get nds originate	There is no nand no add ii-Agency Diversity	natch reitional ( version deral or	equirem County TF rganizat	ent associated funds are requ <u>\$143,269</u> \$143,269	with this award ired.	. No
		<u>III</u>	REVIE	N CON	MENTS	<u> </u>		
A.	OFMB Fiscal and A  * No fiscal  OFME	misact Villy 1	Administra	tion Co	A)~	ts:	ration 4/3	0/)0
В.	Legal Sufficiency:	1112	70					
-	Assistant Co	unty Attorne	5/3/10	) -				
C.	Other Department	Review:						
	Depar	tment Direct	tor	_				

### BOARD OF COUNTY COMMISSIONERS PALM BEACH COUNTY, FLORIDA BUDGET AMENDMENT

Page 1 of 1

FUND 1152 - Sheriff's Grants Fund

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ REMAIL ENCUMBERED BALA
Revenues					,		
FY09 PBC Multi Agenc	cy Diversion TF						
160-2185-6600	Federal Grant - Other Public Safety	0	0	143,269		143,269	
	TOTAL REVENUES	805,938	\$8,173,936	\$143,269	\$0	\$8,317,205	• · · · · · · · · · · · · · · · · · · ·
						•	
<u>Expenditures</u>				•			
FY09 PBC Multi Agenc	y Diversion TF						•
160-2185-9498	Transfer to Sheriff's Grant Fund	0	0	143,269		143,269	
	TOTAL EXPENDITURES	805,938	\$8,173,936	\$143,269	\$0	\$8,317,205	
		Signatures		Date			By Board of County Commission
Palm Beach County Sh	eriff's Office						At Meeting of May 4, 2010
INITIATING DEPARTM	IENT/DIVISION				<u> </u>		
Administration/Budge	et Department Approval						Deputy Clerk to the Board of County Commissioners
OFMB Department - P	osted						

4 Much ment



# EXECUTIVE OFFICE OF THE PRESIDENT OFFICE OF NATIONAL DRUG CONTROL POLICY

Washington, D.C. 20503 March 15, 2010

Mr. George Forman Palm Beach County Sheriff's Office 3228 Gun Club RD West Palm Beach, FL 33406

Dear Mr. Forman:

We are pleased to inform you that your request for funding from the High Intensity Drug Trafficking Areas (HIDTA) Program has been approved, and a grant (Grant Number G09MI0011A) has been awarded in the amount of \$143,269.00. This grant will support initiatives designed to implement the Strategy proposed by the Executive Board of the South Florida High Intensity Drug Trafficking Area (HIDTA) and approved by the Office of National Drug Control Policy (ONDCP).

The original and one copy of the Grant Agreement, including certain Special Conditions, are enclosed. By accepting this grant, you assume the administrative and financial responsibilities outlined in the enclosed Grant Conditions, including the timely submission of all financial and programmatic reports, the resolution of audit findings, and the maintenance of a minimum level of cash-on-hand. Should your organization not adhere to these terms and conditions, ONDCP may terminate the grant for cause or take other administrative action.

If you accept this award, please sign both the Grant Agreement and the Grant Conditions and return a copy with an original signature to:

Finance Unit National HIDTA Assistance Center 11200 NW 20<sup>th</sup> Street, Suite 100 Miami, FL 33172 (305) 715-7600

Please keep the original copy of the Grant Agreement and Grant Conditions for your file. If you have any questions pertaining to this grant award, please contact Dan Grayson at (202) 395-6790.

Sincerely,

Arnold R. Moorin

National HIDTA Director

**Enclosure** 

Attachment 2

Executive Office of the President Office of National Drug Control Policy	Grant Ag	Page 1 of 5 reement				
Recipient Name and Address     Mr. George Forman	4. Award Number: G09MI0011A					
Palm Beach County Sheriff's Office 3228 Gun Club RD West Palm Beach, FL 33406	5. Grant Period: From 01/01/09 to 12/31/10					
A. Recipient IRS/Vendor No.: 1596000786A3	6. Date: 03/15/2010	7. Action				
Subrecipient Name and Address	8. Supplement Number	✓ Initial  ✓ Supplemental				
2A. Subrecipient IRS/Vendor No.:	9. Previous Award Amou	nt:				
3. Project Title	10. Amount of This Award:	\$143,269.00				
Multiple Initiatives  12. Special Conditions (check, if applicable)  □ The above Grant is approved subject to such attached 3 pages.	11. Total Award:	\$143,269.00 s are set forth on the				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	ch conditions or limitations as	s are set forth on the				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	ch conditions or limitations as  1-8  RECERENTA	s are set forth on the				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	1-8  RECIPIENT A  15. Typed Name and Title George Forman	s are set forth on the				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	1-8  RECTRIENT A  15. Typed Name and Title George Forman Mr.	s are set forth on the				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	1-8  PRECIPIENT  15. Typed Name and Title George Forman Mr. Palm Beach County She  17. Signature of Authorize	of Authorized Official				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	1-8  RECTPIENT A  15. Typed Name and Title George Forman Mr. Palm Beach County She  17. Signature of Authorize	s are set forth on the  COPTANCE  of Authorized Official				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	1-8  PRECIPIENT  15. Typed Name and Title George Forman Mr. Palm Beach County She  17. Signature of Authorize	of Authorized Official				
<ul> <li>12. Special Conditions (check, if applicable)</li> <li></li></ul>	1-8  RECIPIENT A  15. Typed Name and Title George Forman Mr. Palm Beach County She  17. Signature of Authorize  19. HIDTA AWARD	of Authorized Official				

### **GRANT CONDITIONS**

#### A. General Provisions

- 1. This grant is subject to:
  - OMB Circular A-87 "Cost Principles for State, Local, and Indian Tribal Governments" (or, if applicable, OMB Circular A-21 "Cost Principles for Educational Institutions");
  - OMB Circular A-102 "Grants and Cooperative Agreements with State and Local Governments" (or, if applicable, OMB Circular A-110 "Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals and Other Non-Profit Organizations");
  - OMB Circular A-133 "Audits of States, Local Governments and Non-Profit Institutions";
  - "Government-wide Debarment and Suspension (Non procurement)," codified at 21 CFR § 1401 et. seq.;
  - "Government-wide Requirements for Drug-Free Workplace (Grants)" (codified at 21 CFR § 1401 et. seq.);
  - "New Restrictions on Lobbying" (codified at 18 USC § 1903 and 31 USC § 1352).
  - Nondiscrimination in Federally Assisted Programs and Equal Opportunity Plans requirements are codified at USC, Title VI (42 USC § 2000d et seq.).
  - Immigration and Naturalization Service Employment Eligibility Verification Form (I-9).
- 2. Audits conducted pursuant to OMB Circular A-133, "Audits of State and Local Governments", must be submitted no later than nine (9) months after the close of the grantee's audited fiscal year. A copy of the audit report and management letter must be sent to:

**EOP/ONDCP** 

Attention: Michael Reles GSD/RDF (202) 395-6608 Anacostia Naval Annex Bldg 410/Door 123 250 Murray Lane, SW Washington, DC 20509 or: mreles@ondcp.eop.gov

- 3. During the award period, grantees are required to submit the Federal Financial Reporting (FFR) report to the Department of Health and Human Services, Division of Payment Management (HHS/DPM). Other reporting requirements are specified in the HIDTA Program Policy and Budget Guidance.
- 4. The recipient gives the awarding agency or the Government Accountability Office, through any authorized representative, access to and the right to examine all paper or electronic records related to the grant.
- 5. Recipients of HIDTA funds are not agents of ONDCP. Accordingly, the HIDTA, its fiscal agent(s), HIDTA employees, HIDTA contractors, as well as state, local, and federal HIDTA participants either on a collective level or on a personal level shall not hold themselves out as being part of, or representing, the Executive Office of the President or ONDCP.

# **B. Special Conditions HIDTA Grants**

The following special conditions are incorporated into each award document.

- 1. This grant is awarded for the initiative(s) named above. Variation from the description of activities approved by ONDCP and/or from the budget attached to this letter must comply with the reprogramming requirements as set forth in ONDCP's HIDTA Program Policy and Budget Guidance.
- 2. This award is subject to the requirements in ONDCP's HIDTA Program Policy and Budget Guidance.
- 3. No HIDTA funds shall be used to supplant state or local funds that would otherwise be made available for the same purposes.
- 4. The requirements of 28 CFR Part 23, which pertain to information collection and management of criminal intelligence systems, shall apply to any such systems supported by this award.
- 5. Special accounting and control procedures must govern the use and handling of HIDTA Program funds for confidential expenditures; i.e. the purchase of information, evidence, and services for undercover operations. Those procedures are described in Section 6-12 of the HIDTA Program Policy and Budget Guidance.
- 6. The grant recipient agrees to account for and use program income in accordance with the "Common Rule" and the HIDTA Program Policy and Budget Guidance. Asset forfeiture proceeds generated by the HIDTA-funded initiatives shall not be considered as program income earned by HIDTA grantees.

- 7. Property acquired with these HIDTA grant funds is to be used for activities of the South Florida HIDTA. If your agency acquires property with these funds and then ceases to participate in the HIDTA, you should make this equipment available to the HIDTA's Executive Board for use by other HIDTA participants.
- 8. All law enforcement entities that receive funds from this grant must report all methamphetamine laboratory seizure data to the National Clandestine Laboratory Database/National Seizure System at the El Paso Intelligence Center.

## C. Payment Basis

- 1. A request for Advance or Reimbursement shall be made using the HHS/DPM system (www.dpm.psc.gov). Copies of invoices or payroll registers must accompany the payment confirmation number to provide documentation for the reimbursement request. Requests for advances must be accompanied by details specifying the need for the advance. Documentation of how the advance was spent must be submitted within 21 days before another advance or reimbursement will be approved.
- 2. The HIDTAs, or their respective grantees, must utilize the HIDTA program Financial Management System's (FMS) Disbursement module each time they submit a disbursement request to the NHAC. Requests for payment in the DPM system will not be approved unless the required disbursements have been entered into the FMS. Payments will be made via Electronic Fund Transfer to the award recipient's bank account. The bank must be FDIC insured. The account must be interest bearing.
- 3. Except for interest earned on advances of funds exempt under the Intergovernmental Cooperation Act (31 U.S.C. 6501 et seq.) and the Indian Self-Determination Act (23 U.S.C. 450), grantees and subgrantees shall promptly, but at least quarterly, remit interest earned on advances to HHS/DPM. When submitting your checks, please provide a detailed explanation which should include: reason for check (remittance of interest earned on HIDTA advance payments), check number, grantee name, grant number, interest period covered, and contact name and number.

Ms. Janet Fowler
Division of Payment Management
Department of Health and Human Services
5600 Fishers Lane - Room 11-33
11th Floor - Head House Wing
Rockville, MD 20857

4. The grantee or subgrantee may keep interest amounts up to \$100 per year for administrative purposes.

Grant G09MI0011A Page 5 of 5

Date:

3/24/0

RECIPIENT	ACCEPTANCE.	OF CDANT	CONDITIONS
	ACCELLANCE	AFT TIKANI	CAUNIDI I ICINA

Signature:

Name:

George Forman

Agency:

Palm Beach County Sheriff's Office