

II. FISCAL IMPACT ANALYSIS

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	<u>65,566</u>	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	<u>(65,566)</u>	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>-0-</u>	* See below	_____	_____	_____

ADDITIONAL FTE POSITIONS (Cumulative)

Is Item Included in Current Budget? Yes _____ No X
 Budget Account No.: Fund: 1003 Dept: 145 Unit: 1455 Object: various
 Program Code: various Program Period: _____

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

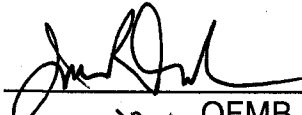
Federal funds through the State of Florida Department of Community Affairs.

C. Departmental Fiscal Review: Tauna Malhotra
8/3/10

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

There is no fiscal impact on this item.



 20/8/10 OFMB VA 2/15/10 PM 7/4/10



 Contract Dev. and Control

B. Legal Sufficiency:



 Assistant County Attorney

C. Other Department Review:

Department Director

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

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

BGEX - 145 - 061610*1655
BGRV - 145 - 061610*0540


FUND (1003) - COMMUNITY ACTION PROGRAM

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/ ENCUMBERED AS OF 06/16/10	REMAINING BALANCE
REVENUE								
145 1455 3168	Fed Grant Indirect - Human Services	890,315	895,741	65,566	0	961,307		
Total Revenue		1,480,715	2,948,047	65,566	0	3,013,613		
EXPENDITURE								
145 1455 3401	Other Contractual Services	67,548	72,974	78,679	0	151,653		
145 1455 8301	Contributions for Individuals	218,015	218,015		13,113	204,902		
Total Expenditures		1,480,715	2,948,047	78,679	13,113	3,013,613		

BUD_BLNK.xl

COMMUNITY SERVICES
INITIATING DEPARTMENT/DIVISION Channell Wilkins
Administration/Budget Department Approval
OFMB Department - Posted

Signatures	Date
	8/3/10
_____	_____
_____	_____

By Board of County Commissioners
At Meeting of _____

Deputy Clerk to the
Board of County Commissioners



MEMORANDUM

Department of
Community Services

Community Action Program
810 Datura Street

West Palm Beach, FL 33401

(561) 355-4792

Fax: (561) 355-4192

www.pbcgov.com



**Palm Beach County
Board of County
Commissioners**

Jeff Koons, Chairman

Burt Aaronson, Vice Chairman

Karen T. Marcus

Shelley Vana

Steven L. Abrams

Jess R. Santamaria

Priscilla A. Taylor


County Administrator

Robert Weisman



"An Equal Opportunity
Affirmative Action Employer"

TO: Burt Aaronson, Chair and the
Board of County Commissioners

FROM: Robert Weisman 
County Administrator

DATE: 6/28/10

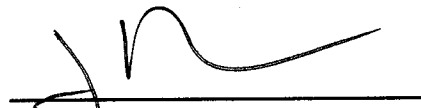
RE: 2009-2010 CSBG budget modification.

Pursuant to PPM#CW-F-003 your signature is needed on the CSBG Grant Modification. This upward budget amendment of \$65,566 will be used to provide self-sufficiency services to low-income families throughout Palm Beach County.

The information was received on 5/24/10 with instructions to return it by 6/21/10. The emergency signature process is being utilized because there is not sufficient time to submit the application through the regular BOCC agenda process. Staff will submit this item at the Board's (8/20/10) Commission Agenda.

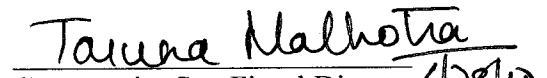
If additional information is needed, please contact James Green at (561) 313-1146.

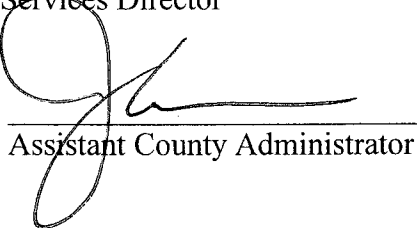

Assistant County Attorney


OFMB

Approved:


Community Services Director


Community Svc Fiscal Director 6/28/10


Assistant County Administrator

**AMENDED ATTACHMENT B-1
CSBG BUDGET SUMMARY**

RECIPIENT: Palm Beach County Community Action Program

Mod No: 1

CONTRACT NO: 10SB-7Q-10-60-01-023

Revenue Sources	Previous Match	Amended Match	Match Percent	Total Amount	NOTES:
1. CSBG Grant Funds Allocated				961,307	- Round all dollar amounts up to the nearest dollar. - Provide a minimum of: 2.00% - Cash Match 20.00% - Total Match - Do not under match. 1.99% Cash Match is unacceptable. - Match amounts must agree with amended totals reflected on the Modification Cover Page.
2. Total Cash Match Amount	179,148	192,261	20.00%		
3. Total In-Kind Match Amount	0	0	0.00%		
4. TOTAL MATCH (line 2 + line 3)			20.00%	192,260	
5. TOTAL FUNDS (line 1 + line 4)				1,153,567	

BUDGET CATEGORY (CSBG FUNDS ONLY)	CSBG FUNDS		MATCH FUNDS		TOTAL MODIFIED BUDGET (Col C+D+E)
	Previously Approved Budget	Amended CSBG Budget	Amended Cash Match	Amended In-Kind Match	
6. TOTAL CSBG FUNDS ALLOCATED	895,741	961,307	192,261		1,153,568
ADMINISTRATIVE EXPENSES					
7. RECIPIENT ADMINISTRATIVE EXPENSE Salaries, Rent, Utilities, Travel, Other	133,050	140,699	34,792	0	175,491
8. SUBRECIPIENT ADMINISTRATIVE EXPENSE Salaries, Rent, Utilities, Travel, Other	0	0	0	0	0
9. TOTAL ADMINISTRATIVE EXPENSES (Line 7 + Line 8)	133,050	140,699	34,792	0	175,491
10. ADMINISTRATIVE EXPENSE PERCENT (Line 9 divided by Line 1)	13.84%	14.64%	Total CSBG Administrative Percent Cannot Exceed 15% of the Total CSBG Allocation		
PROGRAMMATIC EXPENSES					
11. RECIPIENT DIRECT CLIENT ASSISTANCE	612,166	670,083	126,878	0	796,961
12. RECIPIENT OTHER EXPENSE Salaries, Rent, Utilities, Travel, Other	150,525	150,525	30,590	0	181,115
13. TOTAL RECIPIENT PROGRAM EXPENSE (Line 10 + Line 11)	762,691	820,608	157,468	0	978,076
14. SUBRECIPIENT DIRECT CLIENT ASSISTANCE	0	0	0	0	0
15. SUBRECIPIENT OTHER EXPENSE Salaries, Rent, Utilities, Travel, Other	0	0	0	0	0
16. TOTAL SUBRECIPIENT PROGRAM EXPENSE (Line 13 + Line 14)	0	0	0	0	0
17. TOTAL PROGRAM EXPENSE (Line 12 + Line 15)	762,691	820,608	157,468	0	978,076
18. SECONDARY ADMINISTRATIVE EXPENSE (Recipient Only)	0	0	Cannot Exceed 15% of the Total CSBG Allocation		0
19. GRAND TOTAL ALL EXPENSE * (Line 9 + Line 17 + Line 18)	895,741	961,307	192,260	0	1,153,567

* THESE AMOUNTS MUST AGREE WITH LINE 6 ABOVE.


3. All provisions of the Agreement being modified and any attachments thereto in conflict with this Modification shall be and are hereby changed to conform with this Modification, effective as of the date of the last execution of this Modification by both parties.
4. All provisions not in conflict with this Modification remain in full force and effect, and are to be performed at the level specified in the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this document as of the dates set out herein.

RECIPIENT PALM BEACH COUNTY

STATE OF FLORIDA

DEPARTMENT OF COMMUNITY AFFAIRS



(Type Legal Name of Recipient)

By: _____

By: _____

Burt Aaronson, Chair

Janice Browning, Director

(Type Name and Title Here)

Division of Housing and Community

Board of County Commissioners

Development

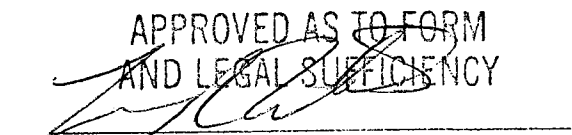
Date: _____

Date: _____

59-60000785

Federal Identification Number

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY



COUNTY ATTORNEY

AMENDED ATTACHMENT B-3
CSBG BUDGET DETAIL

5/24/2010

RECIPIENT: Palm Beach County Community Action Program

LINE ITEM NO.	OBJ. NO. (direct client assist.)	EXPENDITURE DETAIL <small>all line items up to dollars - do not use cents and decimals in</small>	DOLLARS CHARGED TO CONTRACT			
			CSBG FUNDS	CASH* MATCH	IN-KIND* MATCH	TOTAL
6	NA	Administration Expenses: Personell costs set out below includes Salary, FICA at 6.2%, Medicare@ 1.45%, Retirement @ 10.85%, health insurance at 9,700/year and Workers Compensation at \$377/year. Pay period costs were computed by dividing annual costs by 26.80 % of CSGB salaries are paid by the CSBG grant; 20% is paid from the County Cash match.				
		TBH-Community Action Coordinator 100%	62,264	15,556	0	77,830
		Program Secretary 100%	49,330	12,333		61,663
		Travel (Travel & per diem for Program Coordinator to attend 6 FACA meetings; assumes car travel to 3 meetings, plane travel to 3)	1,783	446		2,229
		Personal vehicle mileage reimbursement 5,000 miles at \$0.55	2,200	550		2,750
		Postage \$20 per month	192	48		240
		Rent/Office Equipment Copier, fax@\$225/month	2,160	540		2,700
		Rent/Storage Space Document storage @ \$50/month	480	120		600
		Casualty Self Insurance County self-insurance pool	1,680	420		2,100
		Office Supplies 12 months @ 100/month	960	240		1,200
		Contractual Meliora Partners (T&TA)	12,000	3,000		15,000
		Other Consultant (Design S. S. program)	7,649	1,530		9,179
		Total Administration	140,699	34,792		175,491

*EXPLAIN SOURCES OF CASH AND IN-KIND MATCH

**AMENDED ATTACHMENT B-3
CSBG BUDGET DETAIL**

5/24/2010

RECIPIENT: Palm Beach County Community Action Program

LINE ITEM NO.	OBJ. NO. (direct client assist.)	EXPENDITURE DETAIL d line items up to dollars - do not use cents and decimals in t	DOLLARS CHARGED TO CONTRACT			
			CSBG FUNDS	CASH* MATCH	IN-KIND* MATCH	TOTAL
10		Program Expense-Direct Client				
		Senior Community Action Specialist 4 persons, 10/09 through 3/10 50% X \$11,645 X 26 pay periods	121,109	30,277		151,386
		Community Action Specialist 12 persons, 10/09 through 9/10 50% X \$25,492 X 26 pay periods	269,792	67,448		337,240
		Total Direct Client Personnel Expense	390,901	97,725		488,626
		Direct Client - Non Personnel				
	6.2B	Water bill assistance Shut-off prevention	110,000			11,000
	6.2L	Bus Passes 1 day passes on Palm Tran	5,000			5,000
	6.2C	Rent Payment Eviction prevention	45,000			45,000
	1.2	Removal of barriers to employment low cost fixes to facilitate return to employment	61,266	3,734		65,000
		Contractual Service				
		Untited way(gleaning)		5,000		5,000
		Cros Ministries (gleaning)		8,836		8,836
	Vendor	New Beginnings (S.S. program)	30,000	6,000		36,000
		Community Agcy(S.S program)	15,000	3,000		18,000
		Other agency (S.S. program)	12,916	2583		15499
		Direct Client Services (Non-personnel)	279,182	29,153		308,335
		Direct Client Services (Personnel)	390,901	97,725		488,626
		Total Direct Client	670,083	126,878		796,961

**AMENDED ATTACHMENT B-3
CSBG BUDGET DETAIL**

5/24/2010

RECIPIENT: Palm Beach County Community Action Program

LINE ITEM NO.	OBJ. NO. (direct client assist.)	EXPENDITURE DETAIL <small>and line items up to dollars - do not use cents and decimals in t</small>	DOLLARS CHARGED TO CONTRACT			
			CSBG FUNDS	CASH* MATCH	IN-KIND* MATCH	TOTAL
		Utilities-waste disposal Boynton Beach center	320	80		400
		Rent/Office equipment Copiers	2,400	600		3,000
		Rent/Building Boynton Beach Center	4,800	1,200		6,000
		Maintenance-grounds County properties	2,880	720		3,600
		Repair/Maintenance-building County properties 12 months @ \$300/month	5,280	1,320		6,600
		Repair/Maintenance-vehicles Van in Glades	672	168		840
		Repair/Maintenance-data process equip.	144	36		180
		Print Materials	4,000	1,000		5,000
		Registration Fees FACA, ROMA, CAP, CAPLAW, Fam Dev.	2,720	680		3,400
		Office Supplies	2,400	600		3,000
		Office Furniture and Equipment	816	204		1,020
		Contractual Meliora Partners (T & TA)	15,000			15,000
		Collaborative funding with community partenrs	13,163			13,163
		Non Personnel Other Program Expense	72,339	11,044		83,382
		Personnel Other Program Expense	78,186	19,546		97,732
		Total Other Program Expense	150,525	30,590		181,114

AMENDED ATTACHMENT B-3
CSBG BUDGET DETAIL

5/24/2010

RECIPIENT: Palm Beach County Community Action Program

LINE ITEM NO.	OBJ. NO. (direct client assist.)	EXPENDITURE DETAIL <small>(add line items up to dollars - do not use cents and decimals in total)</small>	DOLLARS CHARGED TO CONTRACT			
			CSBG FUNDS	CASH* MATCH	IN-KIND* MATCH	TOTAL
11		Other Program Expense				
		Senior Community Action Specialist 4 persons, 10/09 through 3/10 10% X \$11,645 X 13 pay periods	24,223	6,056		30,279
		Community Action Specialist 12 persons through 3/10 10% X 8,658 X 26 pay periods	53,962	13,491		67,453
		Total Other Program Personnel Expense	78,186	19,546		97,732
		Other Program Expenses				
		Janitorial Services 810 Datura Street	2,968	742		3,709
		Travel and Per Diem Family Development training 3 persons for 2 day training	800	200		1,000
		Annual FACA conference 6 staff, 4 adv board; 3 days	5,600	1,400		7,000
		Travel-Mileage CAP Specialists (14) In area: 6,000@ \$.55/mile	2,800	700		3,500
		Communications (County) Offices in county buildings	3,040	760		3,800
		Communications/Commercial-Toll Boynton Beach commercial phone line	120	30		150
		Postage	576	144		720
		Utilities-Electric Boynton Beach Center	1,200	300		1,500
		Utilities-water Boynton Beach Center	640	160		800

AMENDED ATTACHMENT A - RECIPIENT INFORMATION

FEDERAL FISCAL YEAR: 2010 CONTRACT PERIOD: October 1, 2009 to September 30, 2010

1. RECIPIENT: Palm Beach County Community Action Program

2. COUNTIES TO BE SERVED WITH THESE FUNDS: 1 X 2 _____ 3 _____
4 _____ 5 _____ 7 _____ 8 _____ 9 _____ 10 _____

3. GENERAL ADMINISTRATIVE INFORMATION

A. Agency Head (Executive Director or Chief Department Administrator)

Name: Channell Wilkins Title: Director of PBC Community Svcs. Dept.
Street Address: 810 Datura Street County: Palm Beach County
City: West Palm Beach, Fl Zip Code: 33401
Telephone (561) 355-4727 Fax (561) 242-7336 E-Mail: cwilkins@pbcgov.org

MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

Address: _____
City: _____, Fl Zip Code: _____

B. Chief Elected Official for Local Governments or President/Chair of Board for Nonprofits
(Home or business address other than agency address.)

Name: Burt Aaronson Title: Chair PBC Board of County Commissioners
Street Address: 301 N. Olive Ave Ste. 1201 County: Palm Beach County
City: West Palm Beach, Fl Zip Code: 33401
Telephone (561) 355-2205 Fax () _____ E-Mail: baaronso@pbcgov.org

C. FOR PUBLIC AGENCIES: Chair of Community Action Board
(Home or business address other than agency address.)

Name: Yvette Coursey Title: Chairman of PBC Community Action Advisory Board
Street Address: P.O. Box 3823 County: Palm Beach County
City: West Palm Beach, Fl Zip Code: 33402
Telephone (561) 863-8569 Fax (561) 659-6421 E-mail cotomassociates@juno.com

D. RECIPIENT CONTACT PERSON/PROGRAM COORDINATOR

Name: James Green Title: Program Coordinator
Street Address: 810 Datura Street County: Palm Beach County
City: West Palm Beach, Fl Zip Code: 33401
Telephone (561) 313-1146 Fax (561) 242-7336 E-mail jgreen1@pbcgov.org

E. WARRANT OFFICER (OFFICIAL TO RECEIVE STATE WARRANT)

Name: _____ Title: _____
Address: _____ (Street address)
City: _____, Fl Zip Code: _____
Telephone () _____ Fax () _____ E-Mail: _____

F. FINANCIAL CONTACT PERSON

Name: Taruna Malhotra Title: Assistant Director
Address: 810 Datura Street (Street address)
City: West Palm Beach, Fl Zip Code: 33401
Telephone (561) 355-4716 Fax (561) 355-4192 E-Mail: Tmalholtr@pbcgov.org

G. PERSON(S) AUTHORIZED TO SIGN FISCAL REPORTS

1. Name: _____ Title: _____
2. Name: _____ Title: _____

4. SUB-RECIPIENT INFORMATION

These funds will be transferred to one or more Sub-Recipients: Yes X No _____
For each Sub-Recipient, attach a copy of Attachment B-2, Sub-Recipient Information

5. AUDIT: Recipient Fiscal Year: _____ to _____
Audit is due nine months from the end of the recipient's fiscal year:

**CSBG
AMENDED ATTACHMENT B-2
SUB-RECIPIENT INFORMATION**
(Complete this page for each sub-recipient)

RECIPIENT: Palm Beach County Board of County Commissioners**SUB-RECIPIENT INFORMATION:**NAME OF ENTITY: Community Action ProgramMAILING ADDRESS: 810 Datura Street FL ZIPCODE 33401

STREET ADDRESS (IF DIFFERENT): _____, FL ZIPCODE _____

CONTACT PERSON'S NAME AND TITLE: James Green Program CoordinatorTELEPHONE: (561) 355-4727 FAX: (561) - 242-7336

NOTE: The following line items (7, 13, 14 and 15) must correspond to Attachment B-1, Budget Summary. If there is more than one sub-recipient, it is the Recipient's responsibility to ensure that the total of all sub-recipient budgets add correctly. Expenditures must be detailed in Attachment B-3.

CSBG FUNDED PROGRAMS ONLY EXPENSE CATEGORY	(A) CSBG FUNDS	(B) CASH MATCH	(C) IN-KIND MATCH	(D) TOTAL
SUB-RECIPIENT ADMINISTRATIVE EXPENSES:				
7. SUB-RECIPIENT EXPENSES (Salaries + Fringe, Rent, Utilities, Travel, Other)	133,050	140,699	34,792	175,491
SUB-RECIPIENT PROGRAM EXPENSES:				
13. SUB-RECIPIENT DIRECT CLIENT ASSISTANCE EXPENSES	762,691	820,609	157,468	978,077
14. SUB-RECIPIENT OTHER PROGRAM EXPENSES (Salaries + Fringe, Rent, Utilities, Travel, etc)	0	0	0	0
15. SUBTOTAL SUB-RECIPIENT PROGRAM EXPENSES (Line 13 + Line 14)	0	0	0	0
TOTAL EXPENSES: (Line 7 + Line 15)	895,741	961,308	192,260	1,153,568

The Recipient must have a written agreement with all subcontractors. The agreement must meet the requirements of Section 14 of this agreement. A copy of the unsigned agreement with the subcontractor must be forwarded to the Department for review and approval along with this agreement. See OMB Circular A-133.210, Sub-recipient Vendor Determination, for further clarification.

CONTRACT NO: 10SB-7Q-10-60-01-023

MODIFICATION NO: 002

MODIFICATION OF AGREEMENT
BETWEEN
FLORIDA DEPARTMENT OF COMMUNITY AFFAIRS
AND
Palm Beach County Board of County Commissioners

This Modification is made and entered into by and between the State of Florida, Department of Community Affairs, ("the Department"), and the Palm Beach County Board of County Commissioners, ("Recipient") to modify DCA Contract Number 10SB-7Q-10-60-01-023 ("the Agreement").

WHEREAS, the Department and the Recipient have entered into the Agreement, pursuant to which the Department has provided a sub-grant of \$ 895,741 to the Recipient; and

NOW, THEREFORE, in consideration of the mutual promises of the parties contained herein, the parties agree as follows:

1. Paragraph (17)(a) Funding Consideration, is hereby modified to read as follows:

(a) This is a cost-reimbursement Agreement. The Recipient shall be reimbursed for costs incurred in the satisfactory performance of work hereunder in an amount not to exceed \$961,307, subject to the availability of funds and appropriate budget authority. The Recipient is authorized to incur costs in an amount not to exceed \$652,099 until further notification is received by the Department. As funds and budget authority are available, changes to the costs the Recipient may incur will be accomplished by notice from the Department to the Recipient, in the form of certified mail, return receipt requested, to the Recipient's contact person identified in Attachment A, Recipient Information. The terms of the Agreement shall be considered to have been modified to allow the Recipient to incur additional costs upon the Recipient's receipt of the written notice from the Department.

This revised contract amount includes:

A. \$ 895,741	Current CSBG Allocation (FY 2009-2010)
B. \$ 42,808	Carryover Funds (FY 2008-2009)
C. \$ <u>22,758</u>	Base Increase (FY 2009-2010)
D. \$ 961,307	Total (Amended CSBG Allocation)

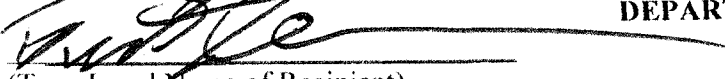
2. If applicable, Attachment A, Recipient Information, Attachment B-1, Budget Summary, Attachment B-2, Sub-Recipient Information, Attachment B-3, Budget Detail, Attachment B-4, Secondary Administration and Attachment C, Scope of Work/Workplan are hereby deleted in their entirety and replaced with Amended Attachment A, Recipient Information, Amended Attachment B-1, Budget Summary, Amended Attachment B-2, Sub-Recipient Information, Amended Attachment B-3, Budget Detail, Amended Attachment B-4, Secondary Administration and Amended Attachment C, Scope of Work/Workplan are attached hereto and incorporated herein by reference.

3. All provisions of the Agreement being modified and any attachments thereto in conflict with this Modification shall be and are hereby changed to conform with this Modification, effective as of the date of the last execution of this Modification by both parties.
4. All provisions not in conflict with this Modification remain in full force and effect, and are to be performed at the level specified in the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this document as of the dates set out herein.

RECIPIENT PALM BEACH COUNTY

**STATE OF FLORIDA
DEPARTMENT OF COMMUNITY AFFAIRS**


(Type Legal Name of Recipient)

By: _____

By: _____

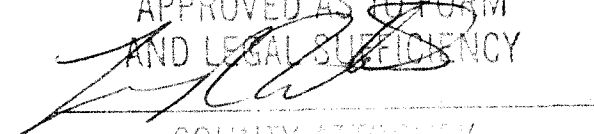
Burt Aaronson, Chair
(Type Name and Title Here)
Board of County Commissioners

Janice Browning, Director
Division of Housing and Community
Development

Date: _____

Date: _____

59-60000785
Federal Identification Number

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

COUNTY ATTORNEY

**FY 2009-2010 CSBG WORKPLAN SUMMARY WORKSHEET
INSTRUCTIONS**

Purpose: To provide the recipient with a side by side view of the agency's current 2009-2010 Contract Workplan Proposed Units Expected To Be Achieved, the Amended Units Expected To Be Achieved and the percentage of deviation between the two.

Note: The NPIs have been abbreviated to save space on the form. Refer to your contract workplan for the full wording of the NPIs.

**DO NOT ADD OR DELETE ANY LINES OR COLUMNS IN THE SUMMARY. DO NOT RE-FORMAT ANY ROW, COLUMN OR CELL.
Columns E, F and G will automatically fill once columns C and D are completed.**

I. Heading

Fill in the Recipient's full legal name, the DCA Contract Number, the contact person's name and his/her telephone number (including area code and extension) and email address. The date is an Excel command and should fill itself in. If it does not, add the date the worksheet is completed.

II. Column(s)

1. Column C: Enter the data from the most recent version of your Attachment C - Scope of Work/Workplan - the one that incorporates all amendments and corrections that have been made to date.
2. Column D: Enter the amended 2009-2010 Contract Workplan Proposed Units Expected to be Achieved in this column.
3. Column E: A percentage will be calculated as you complete Column D.
4. Column F: This column will indicate the results of the modification. Once columns C and D are completed the words "increase" or "decrease" will appear for the line item.
5. Column G: Compare to the percentage shown in column E. If the percent shown is 80% or more, up to 120%, there is no message. If the percent shown is less than 80% or more than 120%, the message "Explanation Required" or "Required" will appear. Please enter the explanation on a separate page listed by the NPI number. The tab below named "Explanations" has been provided for this purpose if you wish to use it.
6. Note that NPIs 2.1, 2.2, and 5-Table 2 and Table 3 have been divided into two parts. Complete both parts. The sub-headings used in these cases and their meaning are as follows: \$\$\$ = Dollars; Proj = Projects or Initiatives; Oppor = Opportunities; % = Percent or Percentage; Staff = employee(s) of the Recipient; Hrs = Hours.
7. NPI 4.1 N and Table 4 C have been provided with extra lines for "other" items. If this is insufficient space, put your list of 'other' items on the Explanations page in order by the NPI number. On the NPI line, put "see Explanations, 4.1 N" or words to that effect.
8. Except for Table 1, none of the tables in NPI 5 are included in the IS Survey. They are included here (and in the contract workplan) to demonstrate improvement in the agency's operations, equipment, staff training, etc. Please **DO COMPLETE** this information in columns C and D.

III. Sources for data requested in Columns C and G.

- C. Workplan of the current 2010 CSBG contract. If the contract has been modified, use the most recent approved data.
- D. To assist you in making the best possible projections, use the most recent quarterly FOCAS Report (probably 2nd quarter) of the current 2010 CSBG contract. That will show your progress to date.

IV. Printing

Print the Workplan Summary (see tab WPS below) on letter size paper in the landscape orientation. **DO NOT CHANGE THE PAGE BREAKS.** The Workplan Summary consists of 5 pages. Be sure to add a printed copy of your explanations, notes, and comments.

V. Submitting

An electronic copy of the modification is not required. Prepare the hard copy into one 'package' that is submitted to DCA.

2009-2010 CSBG AMENDED ATTACHMENT C - SCOPE OF WORK / WORKPLAN

RECIPIENT: Palm Beach County Community Action Program

CONTACT: James Green
 PHONE: 561-355-4727 FAX: 561-242-7336
 EMAIL: jgreen1@pbcgov.org

DCA CONTRACT No: 10SB-70-10-60-01-023

Date: July 14, 2010

A	B	C	D	E	F	G				
NPI	OUTCOME	CURRENT 2009-2010 Contract Proposed Units Expected To Be Achieved	AMENDED 2009-2010 Contract Proposed Units Expected To Be Achieved	Percent of Deviation based on Modification (D / C = E) (Do not Alter Formulas)	Results of Modification (Do not Alter Formulas)	Based on the "Under 80% and Over 120% (Do not Alter Formulas)				
1.1 Employment										
A	Unemployed and obtained a job	50	5	10.0%	Decreased	Explanation Required				
B	Maintained employment for at least 90 days	25	5	20.0%	Decreased	Explanation Required				
C	Employed and obtained an increase in employment income									
D	Achieved "living wage" employment and benefits									
1.2 Employment Supports										
A	Obtained pre-employment skills/competencies required for employment & received certificate/diploma	0	35		Increased	Explanation Required				
B	Completed ABE/GED and received certification or diploma	0	1		Increased	Explanation Required				
C	Completed post-secondary education program and obtained certificate or diploma									
D	Enrolled children in "before" or "after" school, program(s) in order to obtain or maintain employment	25	25	0%	No Change					
E	Obtained care for child or dependent in order for parent/caregiver to acquire or maintain employment	35	35	0%	No Change					
F	Obtain access to reliable transportation or driver's license in order to acquire or maintain employment	65	30	46.2%	Decreased	Explanation Required				
G	Obtained health care services for themselves or a family member in support of employment stability	15	15	0%	No Change					
H	Obtained safe and affordable housing in support of employment stability	25	5	20.0%	Decreased	Explanation Required				
I	Obtained food assistance in support of employment stability	100	100	0%	No Change					
J	Obtained non-emergency LIHEAP energy assistance	100	10,000	10000.0%	Increased	Explanation Required				
K	Obtained non-emergency WX energy assistance		5			Explanation Required				
L	Obtained other non-emergency energy assistance (State/local/private energy programs. Do Not include LIHEAP or WX)	55	55	0%	No Change					
M	Obtained identification or work permit documentation for employment (social security card, work permit, etc.)									
1.3 Economic Asset Enhancement and Utilization										
Enhancement		Proposed	Proposed	Percent	Change	Explanation				
1	Number in tax preparation programs who identify any type of Federal or State tax credit.	0	329		Increased	Explanation Required				
2	Participants obtaining court-ordered child support & expected annual aggregate dollars.									
3	Number enrolled in telephone lifeline and/or energy discounts with agency assistance.	100	100	0%	No Change					
Utilization										
1	Participants demonstrating ability to complete and maintain a budget for over 90 days	75	15	20.0%	Decreased	Explanation Required				
2	Participants opening an Individual Development Account (IDA) or other savings account	0	15		Increased	Explanation Required				
3	Participants who increased their savings through IDA or other savings account									
B	Of participants in a community action asset development program (IDA or other savings):									
4	a) Number capitalizing a small business due to accumulated savings									
	b) Number pursuing post-secondary education due to savings									
	c) Number purchasing a home due to accumulated savings									
	d) Number purchasing other assets with accumulated savings									
2.1 Community Improvement and Revitalization										
		Proj	Oppor	Proj	Oppor	% Proj	% Oppor	Status	Status	Explanation
A	Jobs created, or saved, from reduction or elimination in the community									
B	Accessible living wage jobs created or saved from reduction or elimination in the community									
C	Safe and affordable housing units created in the community									
D	Safe and affordable housing units in the community preserved or improved through community action									
E	Accessible and affordable health care services/facilities for low-income people created/maintained									
F	Accessible safe & affordable child care/child development placement opportunities created/maintained									
G	Accessible before/after school program placement opportunities for low-income families created/maintained.									
H	Accessible new/preserved/expanded transportation resources available to low-income people									
I	Accessible new/preserved/increased educational & training placement opportunities for low-income people									
2.2 Community Quality of Life and Assets										
		Proj	Oppor	Proj	Oppor	% Proj	% Oppor	Status	Status	Explanation
A	Increase in community assets due to a change in law/regulation/policy, resulting in better quality of life									
B	Increase availability/preservation of community facilities (schools libraries, community centers, etc.)									
C	Increase in the availability or preservation of community services to improve public health and safety									
D	Increase in the availability or preservation of commercial services within low-income neighborhoods									
E	Increase or preservation of neighborhood quality-of-life resources									

A	B	C	D	E	F	G	
NPI	OUTCOME	CURRENT 2009-2010 Contract Proposed Units Expected To Be Achieved	AMENDED 2009-2010 Contract Proposed Units Expected To Be Achieved	Percent of Deviation based on Modification (D / C = E) (Do not Alter Formulas)	Results of Modification (Do not Alter Formulas)	Based on the "Under 80% and Over 120% (Do not Alter Formulas)	
2.3 Community Engagement							
A.	Community members mobilized to participate in community revitalization and anti-poverty initiatives	32					
1.	Hours donated by low-income people						
	a) Serve on the CAA Board of Directors	150	150	0%	No Change		
	b) Serve on Head Start Policy Councils						
	c) Serve on Family Center / Parent Councils						
	d) Serve on other CAA Advisory Boards, councils, or committees	50	50	0%	No Change		
	e) Serve on other community advisory or governing boards or committees as a CAA representative	20	20	0%	No Change		
	f) Assist with program activities and logistics						
	g) Participate in advocacy to meet agency and community goals						
	h) Participate in advocacy to influence policies/practices of government and/or private entities	100	100	0%	No Change		
	i) Other CAA clients or low-income persons volunteer with the agency.	100	100	0%	No Change		
	Total volunteer hours from low income people	420	420	0%	No Change		
	2.	Hours donated by non low-income people					
		a) General Public					
		b) CAA non-low-income board members	360	360	0%	No Change	
c) Other non-profit or government agencies							
d) Business Community							
e) Other							
Total volunteer hours from non low-income people	360	360	0%	No Change			
TOTAL number of volunteer hours donated to the agency		780	780	0%	No Change		
2.4 Employment Growth from ARRA Funds							
A.	Jobs created, at least in part, by ARRA funds						
B.	Jobs saved, at least in part, by ARRA funds						
3.1 Civic Investment-The Number of Volunteer Hours Donated to Community Action							
Total number of volunteer hours donated by <i>low-income individuals</i> to Community Action		420	420	0%	No Change		
3.2 Community Empowerment Through Maximum Feasible Participation							
A	Low-income people in formal, decision-making, community organizations, government, boards or councils	5	6	120.0%	Increased		
B	Number of low-income people acquiring businesses in their community as a result of community action	3	3	0%	No Change		
C	Number of low-income people purchasing homes in their community as a result of community action	0	3		Increased	Explanation Required	
D	Low-income people in non-governance community activities/groups created/supported by Comm Action	30	30	0%	No Change		
4.1 Expanding Opportunities Through Community-Wide Partnerships							
A	Non-Profit	8	8	0%	No Change		
B	Faith Based	5	5	0%	No Change		
C	Local Government	7	7	0%	No Change		
D	State Government Entity	3	3	0%	No Change		
E	Federal Government Entity						
F	For-Profit Business or Corporation	3	3	0%	No Change		
G	Consortiums/Collaboration	1	1	0%	No Change		
H	Housing Consortiums/Collaboration						
I	School Districts						
J	Institutions of post secondary education/training						
K	Financial/Banking Institutions						
L	Health Service Institutions						
M	State-wide associations or collaborations						
Others: Please identify:							
N	a)						
	b)						
Total <i>unduplicated</i> number of organizations agency actively works with to expand resources/opportunities							

A	B	C		D		E		F		G
NPI	OUTCOME	CURRENT 2009-2010 Contract Proposed Units Expected To Be Achieved		AMENDED 2009-2010 Contract Proposed Units Expected To Be Achieved		Percent of Deviation based on Modification (D / C = E)		Results of Modification		Based on the "Under 80% and Over 120%"
						(Do not Alter Formulas)		(Do not Alter Formulas)		(Do not Alter Formulas)
5 Agencies Leverage External Resources to Increase Their Capacity to Serve										
Table 1 Broadening the Resource Base										
A	Community Services Block Grant		895,741		961,307		107.3%		Increased	
B	Federal Government Resources other than CSBG		4,889,921		4,394,090		89.9%		Decreased	
C	State Resources (Non-federal, state-appropriated funds)									
D	Local Government Resources		654,148		667,261		102.0%		Increased	
E	Private Sector Resources		331,260		331,260		0%		No Change	
TOTAL	NON-CSBG RESOURCES (Federal+State+Local Government+Private Sector)		5,875,329		5,392,611		91.8%		Decreased	
TOTAL	CSBG Funds		895,741		961,307		107.3%		Increased	
TOTAL	AGENCY BUDGET		6,771,070		6,353,918		93.8%		Decreased	
Table 2 Agency Increase Staff Capacity to Achieve Results Through Training										
A.	Staff who work with customers in self-sufficiency program receive training specific to case management									
B.	Staff who work with self-sufficiency customer programs receive training specific to family development	1	4	1	4	0%	0%	No Change	No Change	
C.	Staff who work with grants/contract management receive training to expand/update/upgrade their skills									
D.	Fiscal staff attend training on OMB Circular or audit compliance									
E.	Fiscal staff receive accounting or data collection or management training.									
F.	Program staff receive data collection or management training	15	90	15	90	0%	0%	No Change	No Change	
G.	Staff or management receive ROMA training from a certified TOMA trainer.	23	69	23	70	0%	101.4%	No Change	Increased	
H.	Other training received by staff or management.	23	92	23	92	0%	0%	No Change	No Change	
TOTAL	Staff and Management Training (Totals for A through H above.)	62	255	62	256	0%	100.4%	No Change	Increased	
J.	Board members receive training related to their roles and responsibilities.	15	120	15	120	0%	0%	No Change	No Change	
K.	Board members receive ROMA training from a certified ROMA trainer.	15	45	15	45	0%	0%	No Change	No Change	
L.	Other training received by CAA Board members	15	30	15	30	0%	0%	No Change	No Change	
TOTAL	BOARD MEMBER TRAINING (Total of J through L.)	45	195	45	195	0%	0%	No Change	No Change	
Table 3 5.1 AGENCY DEVELOPMENT - Agency Increases Its Capacity to Achieve Results Through Training										
A.	Number of C-CAPs	1		1		0%		No Change		
B.	Number of Certified ROMA Trainers	1		1		0%		No Change		
C.	Number of certified Family Development Trainers									
D.	Number of Certified Child Development Trainers									
E.	Agency staff obtained other credential that increase their capacity to achieve results (explain in narrative)	1		1		0%		No Change		
<i>The numbers below will automatically fill once you have completed Goal 5 table 2</i>										
F.	Number of staff and management attending trainings	62		62		0%		No Change		
G.	Number of board members attending trainings	45		45		0%		No Change		
H.	Hours of staff and management trainings		255		256		100.4%		Increased	
I.	Hours of board members in training		195		195		0%		No Change	
Table 4 Agency Increases Ability to Measure and Track Clients' Progress Toward Self-Sufficiency. Indicate with an "X" the ONE statement in A and B that BEST describes your organization.										
Client Intake Process										
A.	1. A common in-take process and common ID# is used for all clients		X						Explanation Required	
	2. A common in-take process and common ID# is used for some clients									
	3. A separate in-take process and/or separate ID# is used for each program administered									
Client/Customer Measure Progress toward Achievement of Self-Sufficiency										
B.	1. Agency utilizes a databases for all clients for use in intake and assessment and provision of services		X		X		0%		No Change	
	2. Agency utilizes databases for some clients for use in intake and assessment and provision of services									
	3. Agency uses database for all client intake/assessment/provision of services & outcome measurement									
	4. Agency uses database for some client intake/assessment/service provision & outcome measurement									
Computer programs used to manage client information and track client progress										
C.	1. Custom design database-Palm Beach County ISS		X		X		0%		No Change	
	2.									
	3.									
	4.									
	5.									

A	B	C	D	E	F	G
NPI	OUTCOME	CURRENT 2009-2010 Contract Proposed Units Expected To Be Achieved	AMENDED 2009-2010 Contract Proposed Units Expected To Be Achieved	Percent of Deviation based on Modification (D / C = E) (Do not Alter Formulas)	Results of Modification (Do not Alter Formulas)	Based on the "Under 80% and Over 120% (Do not Alter Formulas)
Table 6 Agency Organizes & Operates Programs, Services and Activities Toward accomplishing Family and Community Outcomes. (Answer Yes or No for each.)						
	Agency has the capacity to report client/customer progress toward self-sufficiency					
A	1. Agency can report outcomes that measure progress without use of an outcome scale.	NO	NO	0%	No Change	
	2. Agency utilizes outcome scales to measure client movement toward self-sufficiency	YES	YES	0%	No Change	
	3. Agency has capacity to derive unit cost statistics: cost/service delivered or cost of service per client	NO	NO	0%	No Change	
	4. Agency has capacity to derive unit cost statistics for effectiveness: cost per outcome delivered	NO	NO	0%	No Change	
	Agency has provided ROMA training within the past 2 years by a certified ROMA trainer					
B	1. At least half of the Agency board has received ROMA training	YES	NO	#VALUE!	Decreased	#VALUE!
	2. Agency management staff has received ROMA training	YES	YES	0%	No Change	
	3. Agency supervisory staff has received ROMA training	YES	NO	#VALUE!	Decreased	#VALUE!
	4. Agency line staff has received ROMA training	YES	NO	#VALUE!	Decreased	#VALUE!
	Agency programs achieved accreditation demonstrating they meet or exceed nationally recognized standards					
C	1. Early childhood care and education sites receive NAEYC or other recognized forms of accreditation	NA	NA	0%	No Change	
	2. Programs achieve other form of recognized accreditation.	NA	NA	0%	No Change	
	Agency is implementing ROMA tools and management practices					
D	1. Agency has adopted and implemented logic models for key programs and activities	NO	YES	#VALUE!	Increased	#VALUE!
	2. Agency programs and activities are evaluated using ROMA principals	YES	YES	0%	No Change	
	3. FOCAS & IS Survey reports are provided to, reviewed & discussed with board members at least quarterly.	YES	YES	0%	No Change	
6.1 Independent Living						
A	Senior Citizens (55 years old or older)	1,000	1,000	0%	No Change	
	Total Individuals with Disabilities	750	750	0%	No Change	
B	1. Ages 0-17					
	2. Ages 18 - 54	0	250		Increased	Explanation Required
	3. Ages 55 and Over	0	500		Increased	Explanation Required
6.2 Emergency Assistance						
A.	Emergency Food	1,200	1,200	0%	No Change	
B.	Emergency Fuel or Utility payments (including LIHEAP or other public or private funding source)	15,000	15,000	0%	No Change	
C.	Emergency Rent or Mortgage Assistance	130	25	19.2%	Decreased	Explanation Required
D.	Emergency Car or Home Repair (i.e. structural, appliance, heating system, etc.)					
E.	Emergency Temporary Shelter					
F.	Emergency Medical Care	1	1	0%	No Change	
G.	Emergency Protection from Violence					
H.	Emergency Legal Assistance					
I.	Emergency Transportation	300	300	0%	No Change	
J.	Emergency Disaster Relief					
K.	Emergency Clothing	1,000	1,000	0%	No Change	
L.	Provide translation assistance in order for person to receive emergency services					
6.3 Child and Family Development						
Infant and Child						
A	1) Infants and children obtain age appropriate immunizations, medical and dental care					
	2) Infants and children health and physical development are improved as a result of adequate nutrition					
	3) Children participate in pre-school activities to develop school readiness skills.					
	4) Children participating in pre-school activities are developmentally ready for Kindergarten or 1st Grade					
Youth						
B	1) Youth improve physical health and development					
	2) Youth improve social/emotional development					
	3) Youth avoid risk-taking behavior for a defined period of time					
	4) Youth have reduced involvement with criminal justice system	0	15		Increased	Explanation Required
	5) Youth increase academic, athletic or social skills by participating in before or after school programs					
Adult						
C	1) Parents and other adults learn and exhibit improved parenting skills					
	2) Parents and other adults learn and exhibit improved family functioning skills	0	5		Increased	Explanation Required

A NPI	B OUTCOME	C CURRENT 2009-2010 Contract Proposed Units Expected To Be Achieved	D AMENDED 2009-2010 Contract Proposed Units Expected To Be Achieved	E Percent of Deviation based on Modification (D / C = E) (Do not Alter Formulas)	F Results of Modification (Do not Alter Formulas)	G Based on the "Under 80% and Over 120%" (Do not Alter Formulas)
6.4 Family Supports						
A.	Enrolled children in before or after school programs					
B.	Obtained care for child or other dependent					
C.	Obtained access to reliable transportation and/or driver's license					
D.	Obtained health care services for themselves or a family member					
E.	Obtained safe and affordable housing					
F.	Obtained food assistance					
G.	Obtained non-emergency LIHEAP energy assistance					
H.	Obtained non-emergency WX energy assistance					
I.	Obtained other non-emergency energy assistance (State/local/private energy program. Do NOT include LIHEAP)					
6.5 Service Counts						
A.	Food Boxes	16,000	12,225	76.4%	Decreased	Explanation Required
B.	Pounds of Food	170,000	250	0.1%	Decreased	Explanation Required
C.	Units of Clothing	1,000	715	71.5%	Decreased	Explanation Required
D.	Rides Provided	1,000	100	10.0%	Decreased	Explanation Required
E.	Information and Referral Calls	120,000	58,000	48.3%	Decreased	Explanation Required

ALL EXPLANATION / NOTES / COMMENTS MUST BE PLACED ON THE EXPLANATION TAB LISTED BY NPI!

AMENDED CSBG MODIFICATION OF WORKPLAN

NPI	EXPLANATIONS
1.1A	Employment efforts and resources were put into the CSBG ARRA program. CSBG ARRA surpassed its target as well as the target set for CSBG. There is a contradiction between the numbers reported on the 1st and 2nd quarterly FOCUS report and the targets set in the ammended workplan. Program administrators believe that because the Case Manager made an error at the Point of Service, these numbers were filtered to CSBG rather than the CSBG ARRA workplan. We are currently working to resolve this issue.
1.1B	The program will help the 5 individuals that will obtain a job via CSBG maintain employment for 90 days. This number is proportionate to the target set in NPI 1.1A
1.2A	These numbers are not being filtered correctly in our automated system. Program Administrator is working with ISS to resolve this issue. These numbers should be included in the CSBG ARRA report. The CSBG program will be providing training for approximately 35 individuals to learn apprenticeship skills that will enable them to gain employment and become more self-sufficient.
1.2B	No target was set for this subobjective. The agency has achieved one to date.
1.2F	The program will reserve these resources for self sufficiency clients only. The program plans to serve 30 self sufficiency clients by September 31, 2010.
1.2H	The agency anticipates serving an additional 5 people in this category through our self-sufficiency program between June-September 2010.
1.2J	DCA provided Program Administrators more information about how to calculate this information. This program anticipates serving over 10,000 individuals (approximately 3200 households) during the LIHEAP grant cycle.
1.2K	Community Action plans to provide Wx assistance to approximately 5 households
1.3A1	There were no targets set for this subobjective, however, this agency prepared taxes for approximately 329 applicants who were eligible for CSBG services.
1.3B2	Working with 15 families to help them establish bank/savings accounts to aid in their self-sufficiency.
1.3B1	Case managers did not have sufficient training on how to document this target correctly. This agency will work with approximately 15 self-sufficiency clients to ensure their able to maintain a budget for 90 days, however, due to time constraints, the 90 days may end after this grant period. This goal was decreased because the agencie's self sufficiency program is being revamped.
3.2C	Community Action plans to assist at least 3 families in the purchase of their own home before September 31, 2010 through the improved self sufficiency program.
6.1B2	The same target was set on the original workplan, however, it was not recorded correctly.
6.1B3	The same target was set on the original workplan, however, it was nor recorded correctly.

AMENDED CSBG MODIFICATION OF WORKPLAN

NPI	EXPLANATIONS