Agenda Item #: 3E-25

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: October 19, 2010 (X) 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. IZ009-9500 (R2009-1259) for the Alzheimer's Disease Initiative (ADI) Program with the Area Agency on Aging (AAA) of Palm Beach/Treasure Coast, Inc. for the period July 1 2009 through October 1, 2010, increasing the agreement amount by \$10,667.80 for a new total not-to-exceed amount of \$241,477.80.							
Summary: The Division of Senior Services has received additional funds from AAA to provide services to seniors. As a result, this amendment will increase client services by \$10,667.80 In area south of Hypoluxo Road, the Mae Volen Center provides ADI services from AAA (DOSS) Countywide except for portions of Districts 3, 4, 5, and 7 south of Hypoluxo Road (TKF)							
Background and Justification: ADI ensures that persons afflicted with Alzheimer's disease and other dementia related disorders are provided services to help them remain independent DOSS, a designated Lead Agency for State funded services, is responsible for contracting with vendors to provide In-Home and Facility Based Respite services.							
Attachments:							
ADI Amendment No. 001							
Recommended by: Commended by: 9/36/18 9/36/18 Department Director Date							
Approved By: Assistant County Administrator Date							

II. FISCAL ANALYSIS IMPACT

Α.	Five Year Summar	ry of Fiscal In	npact:					
Fiscal	Years	<u>2011</u>	2012	<u>2013</u>	<u>2014</u>	<u>2015</u>		
Opera Extern Progra	al Expenditures iting Costs nal Revenue am Income (County) d Match (County)	10,667.80 (10,667.80)						
NET F	FISCAL IMPACT	0				. '		
	# ADDITIONAL FTE POSITIONS (Cumulative)							
	n Included in Current et Account No.: Fun Pro		Yes <u>></u> Dept <u>144</u> <u>′ari.</u>		bj. <u>Vari.</u>			
B.	B. Recommended Sources of Funds/Summary of Fiscal Impact: Department of Elder Affairs State funds and County funds. Previous resolution for Standard Agreement is R2009-1259. Required funding is available in the current budget.							
Departmental Fiscal Review: Taruna Halhoha 9/29/10 III. REVIEW COMMENTS								
Α.	A. OFMB Fiscal and/or Contract Administration Comments: January January							
B.	Legal Sufficiency:	10/15	1/0	This an our revi	nendment complie iew requirements.	s with		
	Assistant Count		·					
C.	Other Department F							

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

This AMENDMENT, entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "agency", and <u>Palm Beach County Board of County Commissioners</u>, hereinafter referred to as the "provider", amends agreement # <u>IZ009-9500</u>.

The purpose of this amendment is to: 1) increase the agreement amount by \$10,667.80 and to 2) revise ATTACHMENT II, ALZHEIMER'S DISEASE INITIATVE PROGRAM BUDGET SUMMARY.

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

A. Agreement Amount:

To pay for services according to the conditions of <u>ATTACHMENT II</u> in an amount not to exceed \$241,477.80, subject to the availability of funds.

2) Section II.C. of the agreement is hereby amended to read:

C. Source of Funds:

The costs of services paid under any other agreement or from any other source are not eligible for reimbursement under this agreement. The funds awarded to the recipient pursuant to this agreement are in the state grants and aids appropriations and consist of the following:

Program Title	Year	Funding Source	CSFA#	Fund Amounts	
Alzheimer's Disease Initiative	2010	General Revenue/Tobacco Settlement Trust Funds	65.004	\$241,477.80	
TOTAL FUNDS CONTAINED IN THIS AGREEMENT:				\$241,477.80	
•					

3) ATTTACHMENT II, ALZHEIMER'S DISEASE INITIATVE PROGRAM BUDGET SUMMARY is hereby replaced with revised ATTTACHMENT II, ALZHEIMER'S DISEASE 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.

IN WITNESS WHEREOF, the parties hereto have caused this 4-page amendment to be executed by their officials there unto duly authorized.

	PALM BEACH COUNTY, FLORIDA, a Political Subdivision of the State of Florida
IGNED Y:	
RINT	

AREA AGENCY ON AGING OF PALM BEACH TREASURE COAST, INC.

SIGNED		SI	GNED	
BY:		B.	Y :	
PRINT	D	PI	RINT	
NAME:	Burt Aaronson	N.	AME:	
TITLE:	Chair	ויד	mr.	
11122.	Citair	. 11	ITLE:	
DATE:		D.	ATE:	
SIGNED				
BY:				
PRINT				
NAME:	Sharon R. Bock			
		•		
TITLE:	Clerk and Comptroller			
DATE:				
Dille.				
FEDERAL				
ID	50 6000795			
NUMBER:	59-6000785			
FISCAL	,			
YEAR	·			
END				
(MM/DD):				
Approved	as to form and legal sufficiency			
Assistant	County Attorney			
Anneoused	as to terms and conditions			
Approved	as to terms and conditions			
Departme	nt Director			
,				

ATTACHMENT II

ALZHEIMER'S DISEASE INITIATIVE PROGRAM

BUDGET SUMMARY

ADI Case Management	\$16,157.00
ADI Services	\$225,320.80
Total	\$241,477.80

Attestation Statement

Agreement Number IZ009-9500

Amendment Number 001

Ι,	Burt Aaronson, Chair	, provider representative for Palm Beach
County Board or	f County Commissioners, attest	that no changes or revisions have been made to
the content of th	e above referenced agreement or	amendment between the Area Agency of Palm
Beach Treasure	Coast, Inc. and Palm Beach Cou	anty Board of County Commissioners. The only
exception to this	s statement would be for change	es in page formatting, due to the differences in
electronic data p	rocessing media, which has no e	ffect on the agreement content.
Signature	e 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: September 13, 2010

REVISION NUMBER: Amendment #001, Revision #002

III.B. SUPPORTING BUDGET SCHEDULE BY PROGRAM ACTIVITY

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

Funding Source ADI

Mark which one applies:

CCE HCE

Form Revised July 18, 2003	(Service Reference)	(6)	(52)	(53)
DESCRIPTION	TOTAL SERVICES	Case Management	Respite (Facility Based)	Respite (In- Home)
Total Budgeted Cash Costs	294,167.43	23,680	26,737.43	243,750
(a) Add Inkind Cost (b) Total Budgeted Costs	294,167.43	23,680	26,737.43	243,750
2. Total Budgeted Units	15,492	284	1,418	13,790
2.(a) Total Cost Per Unit of Service	N/A	83.38	18.86	17.68
3. Less USDA	0.00			
4. Less Cash Match	26,831.22	1,193	1,475.22	24,163
5. Less Inkind Match				
Less Program Income Used as Match				·
Sub-Total Match:	26,831.22	1,193	1,475.22	24,163
7. Program Income	5,513.00	5,513		
Less Other Non-Matching Cash & Co-payments	20,345.41	6,238	11,985.21	2,122
Adjusted Budgeted Costs	241,477.80	10,736	13,277.00	217,465
10. Adjusted Cost Per Unit of Service	N/A	37.77	9.36	15.77
12. Estimated Number of UNDUPLICATED Clients	N/A	25	10	25