Agenda Item: **3E-2**

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date:	July 19, 2011	[X] []	Consent Ordinance	==== [[]]	Regular Public Hearing
Submitted By:	Community Service	<u>s</u>				
Submitted For	Human Services Div	<u>ision</u> /				
===========	=======================================		========;	===:	===	

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Amendment No. 1 to the Contract for Provision of Financial Assistance with The Center for Family Services of Palm Beach County, Inc. (R2010-1635), increasing the agreement amount by \$50,000 for the period of October 1, 2010, through September 30, 2011, for a new total contract amount not to exceed \$172,514 for emergency shelter services to homeless persons.

Summary: The Division of Human Services is contracting with The Center for Family Services to coordinate emergency after-hours shelter placement, food, transportation and case management until alternate arrangements can be made. The Center for Family Services has confirmed expenditure of the initial contract amount of \$122,514; the additional funds are to ensure that these services are available for the remainder of FY 2011. These are ad valorem funds budgeted for contract services. (Human Services) Countywide (TKF)

Background and Justification: Since 2002, The Center for Family Services of Palm Beach County has provided emergency shelter to homeless persons. The contract was developed as a result of a Board Directive regarding homelessness and accessing services after hours for families. Families are placed through Project REACH, an emergency shelter program for those homeless persons referred after 5 PM. This contract has been renewed annually for the past eight years.

Attachments:

Amendment No. 1

Recommended By	: Claphil	6/17/11
	Department Director	Ďate ⁄
Approved By:	Qu	4/27/11
••••••	Assistant/County Administrator	Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
Capital Expenditures				
Operating Costs	50,000			
External Revenue	<u> </u>		<u> </u>	<u></u>
Program Income (County	/)			<u></u>
In-Kind Match (County)			<u> </u>	
NET FISCAL IMPACT	50,000	·		
# ADDITIONAL FTS POSITIONS (Cumulative)				
Is Item Included In Curre	nt Budaet: Y	′es X		No
Budget Account No.:	•	Dept. 148	Unit <u>1331</u> Program Pe	Obj. <u>3401</u>

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

Departmental Fiscal Review:

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

OFMB G21

B. Legal Sufficiency:

Assistant County

C. Other Department Review:

Department Director

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

211 ract Adminis

This amendment complies with our review requirements.

Amendment 01

AMENDMENT TO CONTRACT FOR PROVISION OF FINANCIAL ASSISTANCE

THIS AMENDMENT TO THE CONTRACT FOR PROVISION OF FINANCIAL ASSISTANCE (R2010- 1635; dated October 19, 2010) made and entered into at West Palm Beach Florida, on this ______ day of ______, 2011 by and between PALM BEACH COUNTY, a political subdivision of the State of Florida hereinafter referred to as "COUNTY" and <u>The Center for Family Services of Palm Beach County</u>, Inc., hereinafter referred to as the AGENCY, a not-for-profit corporation, entitled to do business in the State of Florida, whose address is 4101 Parker Avenue, West Palm Beach, Florida 33405.

WITNESSETH:

WHEREAS, The Center for Family Services has partnered with the County to provide support services for homeless individuals; whereas the need exists to amend the contract.

NOW THEREFORE, the above named parties hereby mutually agree that the Contract entered into on October 19, 2010 is hereby amended as follows:

- I. Article 3 is hereby amended to read, an amount not to exceed <u>One</u> <u>Hundred Seventy – Two Thousand Five Hundred Fourteen (\$172,514)</u>.
- II. Exhibit "A" is hereby replaced by "A-1" attached hereto and made a part thereof.
- III. Exhibit "C" is hereby replaced by "C-1" attached hereto and made a part thereof.

OTHER PROVISIONS

All provisions in the Contract or exhibits to the Contract in conflict with this First Amendment to the Contract shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the same level as specified in the Contract.

Page 1 of 2

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Contract on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

Sharon R. Bock, Clerk & Comptroller

PALM BEACH COUNTY, FLORIDA, a Political Subdivision of the State of Florida

BOARD OF COUNTY COMMISSIONERS

BY:

Karen T. Marcus, Chair

WITNESS:

BY:

Śignature

Clerk & Comptroller

Signature

Vine

59-1084179 AGENCY's Federal ID Number AGENCY:

The Center for Family Services of Palm Beach County, Inc

BY: Dorla Keshe Signature

0.9......

Dorla Leslie AGENCY's Signatory Name Typed

Executive Director AGENCY's Signatory Title Typed

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

Tammy K. Fields Assistant County Attorney APPROVED AS TO TERMS AND CONDITIONS Department of Community Services

z. Bv: < Channell Wilkins

Director, Community Services

Page 2 of 2

SCOPE OF WORK

BACKGROUND INFORMATION:

This contract is being developed as a result of a Board Directive regarding homelessness and accessing information after hours for families.

DESCRIPTION OF EMERGENCY SHELTER WITH THE CENTER FOR FAMILY SERVICES OF PALM BEACH COUNTY, INC. AS OUTLINEDIN EXHIBIT B:

Emergency Shelter and Support Services will be provided to homeless individuals/families. These individuals/families will be placed through Project REACH, an Emergency Shelter Program for the Center for Family Services of Palm Beach County. Priority will be given to those homeless families referred after 5 PM or on weekends. The services to be provided are outlined in the proposal (Exhibit B). The total amount available for Emergency Shelter and Support Services is not to exceed \$172,514.

STANDARDS OF CARE:

The provider must comply with the Standards of Care related to emergency shelter. (Exhibit F)

DELIVERABLES:

Deliverable 1: 100% of the households served will be assessed by use of the local Continuum of Care Universal Assessment upon the first face to face contact with the Program Reach Case Manager which will be entered into CMIS.

Demonstration: At the time of on-site program monitoring, a copy of the Universal Assessment will be available for review in the client file.

Deliverable 2: 100% of the households served will have an initial Client Plan of Action and a review of the actions identified on the plan every 30 days.

Demonstration: At the time of on-site program monitoring, the Client Plans will be contained in individual case records and available for review.

Deliverable 3: 70% of the households served will be referred for HPRP assistance within ten days of entering the program.

Demonstration: At the time of on-site program monitoring, the HPRP referral documentation will be available in the client file for review.

Deliverable 4: 50% of the households served will exit the program in 30 days or less.

Demonstration: At the time of on-site program monitoring, completed discharge summaries demonstrating the length of stay will be available in the client file for review.

Deliverable 5: 100% of households remaining in shelter over 30 days will have a completed Universal Assessment upon exit which will be entered into CMIS.

Demonstration: At the time of on-site program monitoring, a copy of the exit Universal Assessment will be available for review in the client file.

MONITORING / REPORTING:

A monthly desk audit by the County will be completed to determine programmatic and fiscal compliance.

Monitoring of Emergency Shelter will be completed by the County annually.

SCHEDULE FOR PAYMENTS/BILLING:

By the 10th of each month the following must be submitted for payment:

- 1. Monthly Expenditure Report (Exhibit D)
 - 2. Monthly Allocation Worksheet (Exhibit C-1)
 - 3. Exhibit E must be submitted on agency letterhead certifying all expenses.

All invoice billings for services relative to this agreement must be submitted to Human Services by **September 30, 2011**.

SCHEDULE FOR PAYMENT AND UNITS OF SERVICES

Agency: Center for Family Services Program: Emergency Assistance Program

Definition of a Unit of Service for Emergency Shelter	Number of Units of Service	Cost Per Unit of Service
A unit of service is defined as Emergency Assistance that includes days in Hotel/Motel Placement, Case Management and Data Entry into CMIS, Food Vouchers, and Bus Passes for clients placed in emergency shelter.	3450.28	\$50
TOTAL FINANCIAL ASSISTANCE		\$172,514

Unit Cost expenses shall mean the actual expenses as authorized by the COUNTY pursuant to this contract, and reasonably incurred by The Center for Family Services directly in connection with The Center for Family Services performance of its duties and Scope of Work pursuant to this Contact.

The following must be available during on-site program monitoring: Hotel/Motel Invoices for clients placed and copies of cancelled checks verifying payment. Copies of all Bus Passes and Food Vouchers purchased along with proof of purchase. Bus Pass and Food Voucher Logs with client initials and date of receipt of bus pass and food voucher.