

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

w/ADDED ATTACHMENT

AGENDA ITEM SUMMARY

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Meeting Date: September 9, 2014   [X] Consent   [ ] Regular
                                      [ ] Ordinance [ ] Public Hearing
Department
Submitted By:   Community Services
Submitted For:  Human Services Division
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I. EXECUTIVE BRIEF

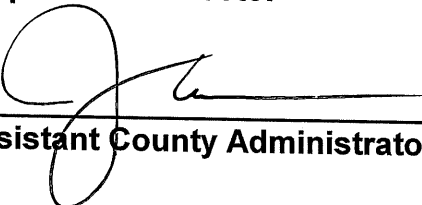
Motion and Title: Staff recommends motion to approve: Amendment No. 01 to Contract for Provision of Services with Vita Nova, Inc. (R2013-1404), for the period October 1, 2013, through September 30, 2014, increasing funding by \$9,604 for a new total contract amount not to exceed \$59,477, to provide emergency shelter and homeless prevention services to individuals and families who are homeless or at risk of homelessness.

Summary: This amendment is necessary to reallocate unspent funds from the Emergency Solutions Grant (ESG) program. ESG service dollars are reviewed throughout the contract year and reallocated to best fit the needs of the clients. These reallocated dollars will allow additional clients to be served with emergency shelter and homeless prevention services. No County funds are required. (Human Services) Countywide (TKF)

Background and Justification: The Department of Economic Sustainability received \$393,491 in funding from the U.S. Department of Housing and Urban Development to administer the ESG program for Fiscal Year 2013-2014. Undertaking of this Program has been an inter-department effort between the Community Services Department and the Department of Economic Sustainability.

Attachments: ① Amendment No. 01 to the Contract for Provision of Services
② Budget Availability Statement

Recommended By:  _____
Department Director Date 8/20/14

Approved By:  _____
Assistant County Administrator Date 9/3/14

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2014	2015	2016	2017	2018
Capital Expenditures					
Operating Costs	\$ 9,604				
External Revenue	\$(9,604)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	* 0				

# ADDITIONAL FTE POSITIONS (Cumulative)					
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Is Item Included In Current Budget: Yes X No _____

Budget Account No.:

Fund 1101 Dept. 143 Unit 1435 Obj. 8201 Program Code ES46 Program Period GY12/GY13

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

* Funding Source is the Emergency Solutions Grant from the U.S. Department of Housing and Urban Development.

C. Departmental Fiscal Review:

TM
Taruna Mathotra, Director, Financial & Support Svcs.

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development and Control Comments:

[Signature]
OFMB KD AK SA
8/21 8/22/14 8/22

[Signature]
Contract Development and Control
9-2-14 B. Whelan

B. Legal Sufficiency:

[Signature] 9/2/14
Chief Assistant County Attorney

C. Other Department Review:

Department Director

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

**AMENDMENT TO THE
CONTRACT FOR PROVISION OF SERVICES**

THIS AMENDMENT TO THE CONTRACT FOR PROVISION OF SERVICES (R2013-1404) is made as of _____, by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the **COUNTY**, and Vita Nova, Inc., a not-for-profit corporation, authorized to do business in the State of Florida, hereinafter referred to as the **AGENCY**, whose Federal I.D. is 65-0298299.

WITNESSETH:

WHEREAS, AGENCY has agreed to provide transitional shelter and housing stability case management to youths who have aged out of the foster care system; and

WHEREAS, the need exists to amend the current contract to increase the total contract amount by \$9,604.

NOW THEREFORE, the above named parties hereby mutually agree that the contract entered into on October 22, 2013 is hereby amended as follows:

- I. **Article 3** is hereby amended to replace "Forty Nine Thousand Eight Hundred and Seventy Three Dollars (\$49,873)" with "Fifty Nine Thousand Four Hundred Seventy Seven Dollars (\$59,477)."
- II. **Article 11** is hereby amended to read The AGENCY warrants and represents that all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national origin, ancestry, marital status, familial status, sexual orientation, gender identity and expression, or genetic information.
- III. **Exhibit "A" Section I. D.** is hereby amended to replace "forty-seven (47)" with "53" and replace "thirty (30)" with "36".
- IV. **Exhibit "A" Section I. E. 2.** is hereby amended to replace the contents of this section with the following:

"2. The Agency shall expend the remaining balance of \$37,035 by September 30, 2014."
- V. **Exhibit "A" Section I. M.** is hereby amended to replace "\$49,873" with "\$59,477."

VI. **Exhibit "A" Section II. A.** is hereby amended to replace the contents of this section with the following:

A. Provide up to \$59,477 in funding. The County agrees to reimburse the Agency for housing stabilization case management services for 17 clients, up to 4 units per client, for a total of 68 units at a rate of \$130 per unit. The total reimbursement amount shall not exceed \$59,477 in funding for the following budget line items:

Budget Line Item Description	Amount
Emergency Shelter	
1. Security & Maintenance	\$23,374
2. Utilities	\$24,730
3. Equipment Rental	\$2,024
4. Supplies	\$500
subtotal	\$50,628
Homeless Prevention	
Individual Housing Stabilization Case Management – 68 units at \$130 per unit (up to 4 units per client)	\$8,849
TOTAL:	\$59,477

OTHER PROVISIONS:

All provisions in the contract or exhibits to the contract in conflict with this amendment 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.

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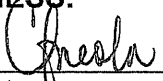
IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this contract on behalf of the COUNTY and the AGENCY has hereunto set its hand the day and year above written.

ATTEST:
SHARON R. BOCK
CLERK & COMPTROLLER

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

By: _____
Deputy Clerk

By: _____
Priscilla A. Taylor, Mayor

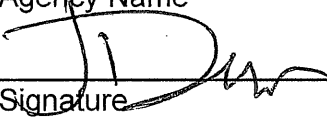
WITNESS:


Signature

CHERRY MEOLA

Name (type or print)

AGENCY:
Vita Nova, Inc.

Agency Name


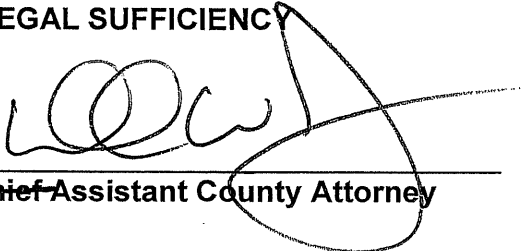
Signature

Jeff Demario


Name

Chief Executive Officer

Title

**APPROVED AS TO FORM AND
LEGAL SUFFICIENCY**


Chief Assistant County Attorney

**APPROVED AS TO TERMS AND
CONDITIONS**


Department Director

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/19/14

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: BB&T - Huffaker & Trimble, 735 Broad Street, Suite 100, PO Box 6217, Chattanooga, TN 37401. CONTACT NAME: Ashley Beaty, PHONE: 423 648-7207, FAX: 423 265-8543. INSURED: Vita Nova Inc, 1800 S. Australian Avenue, Suite 301, West Palm Beach, FL 33409. INSURER(S): Philadelpia Indemnity Insuranc (18058), BusinessFirst Insurance Company (11697), Federal Insurance Company (20281).

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include: A GENERAL LIABILITY (PHPK1082021), A AUTOMOBILE LIABILITY (PHPK1082021), A UMBRELLA LIAB (PHUB436542), B WORKERS COMPENSATION AND EMPLOYERS' LIABILITY (52102556), C D&O/EPLI (82371433), A Professional Liability (PHPK1082021).

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Palm Beach County Board of Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents are included as Additional Insured with respects to General Liability. Professional Liability is Per Occurrence.

CERTIFICATE HOLDER: Palm Beach County Board of County Commissioners, c/o Human Services, 810 Datura Street, Suite 350, West Palm Beach, FL 33401. CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: Sharon Lynn Pollie.

Schedule of Commercial Vehicles

Print Date: 02/19/14

Client Name and Address Vita Nova Inc 1800 S. Australian Avenue Suite 301 West Palm Beach, FL 33409

Company Philadelphia Indemnity In	
Policy Number PHPK1082021	
Effective Date 10/01/13	Expiration Date 10/01/14

Agency Name and Address BB&T - Huffaker & Trimble 735 Broad Street, Suite 100 PO Box 6217 Chattanooga, TN 37401

Veh. #	Clt. #	Vehicle Description Garage Location	Body Type	GVW/ GCW Cost New	5 Comp Ded	Vehicle I.D. Number Coll Ded	ST	Date On Class Code	Date Off Premium
1	1	2004 Chevrolet Van West Palm Beach, FL33409	VAN	\$25,000	5	1GNDM19X64B114307 \$1,000	FL	10/01/13 6251	
2	2	2006 Isuzu Box West Palm Beach, FL33409	TK	\$31,224	5	JALB4B16767022264 \$1,000	FL	10/01/13 22199	
3	3	2004 Chevrolet Aveo West Palm Beach, FL33409	PP	\$11,150	5	KL1TD62694B213455 \$1,000	FL	10/01/13 07391	

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: 08/28/14 REQUESTED BY: Shairette Major PHONE: 233-3679
Fiscal Manager II/DES
PROJECT TITLE: Emergency Solutions Grant PROJECT NO.: n/a
FAX: 656-7558

ORIGINAL CONTRACT AMOUNT: n/a BCC RESOLUTION NO.: n/a
REQUESTED AMOUNT: \$9,604.00 DATE: n/a
CSA OR CHANGE ORDER NUMBER: n/a

CONSULTANT/CONTRACTOR: Community Services

PROVIDE A BRIEF STATEMENT OF THE SCOPE OF SERVICES TO BE PROVIDED BY THE
CONSULTANT/CONTRACTOR: Palm Beach County Department of Community Services will manage sub recipient agreements with 14 agencies funded in FY 2013-14 under the Emergency Solutions Grant Program. This involves, among other things, the processing of monthly invoices.

CONSTRUCTION: \$-0-
PROFESSIONAL SERVICES: \$ 9,604
STAFF COSTS: \$-0-
EQUIP./SUPPLIES:
CONTINGENCY:
MISC.
TOTAL: \$9,604

BUDGET ACCOUNT NUMBER

FUND: 1101 DEPT: 143 UNIT: 1435 OBJ: 8201 PROG CODE: ES46/GY13 \$3,841.60
FUND: 1101 DEPT: 143 UNIT: 1435 OBJ: 8201 PROG CODE: ES46/GY12 \$5,762.40

IDENTIFY FUNDING SOURCE FOR EACH ACCOUNT: (check all that apply)

- Ad Valorem (source/type: _____)
- Non-Ad Valorem (source/type: _____)
- Grant (source/type: Emergency Solutions Grant - Federal Grant)
- Park Improvement Fund (source/type: _____)
- General Fund
- Operating Budget
- Federal/Davis Bacon

Department: Department of Economic Sustainability

BAS APPROVED BY: Edward W. Lowery 8/28/2014 DATE: 08/14/2014
Edward W. Lowery, Director

ENCUMBRANCE NUMBER: