### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

### AGENDA ITEM SUMMARY

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Meeting Date: Ju	ly 21, 2015	[X]	Consent Ordinance	 [] []	Regular Public Hearing
Department Submitted By: Submitted For:	<u>Community Se</u> Human Service				
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#### I. EXECUTIVE BRIEF

## Motion and Title: Staff recommends motion to:

**A) ratify** signature of the Mayor on the 2015 Florida Department of Children and Families Homeless Prevention Grant Application, in the amount of \$70,000 for homeless prevention services for families;

**B)** delegate signature authority to the County Administrator, or his designee, to sign the 2015 Florida Department of Children and Families Homeless Prevention Grant Contract for an amount up to \$70,000; and

**C)** delegate signature authority to the County Administrator, or his designee, to sign the subcontract with Farmworker Coordinating Council of Palm Beach County, Inc., in an amount up to \$70,000 for homeless prevention services.

**Summary:** In 2013, the Florida Legislature created the Homeless Prevention Grant program to provide emergency financial assistance to families facing the loss of their housing due to a financial crisis. In accordance with Section 420.624, Florida Statutes, the grant application must be submitted by the Lead Agency for the Continuum of Care. The Human Services Division of the Community Services Department serves in this capacity for Palm Beach County. If awarded the grant, the funding will be sub-contracted with Farmworker Coordinating Council of Palm Beach County, Inc. to provide financial assistance, such as rental and utility assistance for 35 families. All funds must be expended no later than June 30, 2016. Follow up services must be continued through June 30, 2017. No County match funds are required. (Human Services) <u>Countywide</u> (HH)

**Background and Justification:** Since 2006, the Division of Human Services has acted as the Lead Agency for the local Continuum of Care. The Homeless Prevention Grant Application is funded though Federal Temporary Assistance for Needy Families (TANF) funding. This is the second year since the Homeless Prevention Grant was created by the Florida Legislature that the Department of Children and Families has released a Request for Proposal. The County serves as a pass thru for these grant funds.

Attachments: Grant application w/ Walk-through Memo

Recommended By	: CAMA	c/25/15
-	Department Director	Date
Approved By:	pot Aller	7/10/12
	Assistant County Administrator	Date

## **II. FISCAL IMPACT ANALYSIS**

#### **Five Year Summary of Fiscal Impact:** Α.

Fiscal Years	2015	2016	2017	2018	2019
Capital Expenditures					
Operating Costs	70,000				
External Revenue	(70,000)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	-0-				
		- <b>I</b>	1	L	L

# ADDITIONAL FTE POSITIONS (Cumulative)

Is Item Included In Current Budget: Yes X

No

Budget Account No.: Fund 0001 Dept. 148 Unit 1355 Obj. 3401 Program Code Program Period:

- Β. **Recommended Sources of Funds/Summary of Fiscal Impact:** Above Fiscal Impact if grant is awarded
- **Departmental Fiscal Review:** C.

Taruna Malhotra, Director, Financial & Support Svcs.

## **III. REVIEW COMMENTS**

Α. **OFMB Fiscal and/or Contract Development and Control Comments:** 

Β. **Legal Sufficiency:** 

and C cheeles

Assistant County

C. **Other Department Review:** 

**Department Director** 

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



## **MEMORANDUM**

**Department of Community Services** 

810 Datura Street West Palm Beach, FL 33401 (561) 355-4700 FAX: (561) 355-3863 www.pbcgov.com

Palm Beach County Board of County Commissioners

Shelley Vana, Mayor

Mary Lou Berger, Vice Mayor

Hal R. Valeche

Paulette Burdick

Steven L. Abrams

Melissa McKinlay

Priscilla A. Taylor

#### **County Administrator**

Robert Weisman

"An Equal Opportunity Affirmative Action Employer

TO:	Shelley Vana, Mayor Board of County Commissioners
THRU:	Robert Weisman, County Administrator Board of County Commissioners
THRU:	Jon Van Arnam, Assistant County Administrator Board of County Commissioners
FROM:	Channell Wilkins, Director Community Services Department

**DATE**: June 8, 2015

RE: 2015 DCF Homeless Prevention Grant Application

Pursuant to Section 309 of the Administrative Code, your signature is needed on the 2015 DCF Homeless Prevention Grant Application. This application totals \$70,000 for homeless prevention services for families to include rent and utility assistance for a period up to June 30, 2016. Follow-up services are required to be provided through June 30, 2017. As per the grant requirement, the Division of Human Services, serving as the Lead Agency must apply for the funds. No match is required for this grant. The budget will be amended at the time of ratification.

Upon receipt of the funds, a subcontract will be executed with Farmworker Coordinating Council of Palm Beach County, Inc. to provide the homeless prevention services for homeless families.

The Homeless Prevention Grant Request for Application was released on May 14, 2015 with instructions to return it by June 12, 2015. The emergency signature process is being utilized because there is not sufficient time to submit the application through the regular BCC agenda process. Staff will submit this item at the next BCC Commission meeting.

If additional information is needed, please contact Claudia Tuck, at (561) 355-4775.

Approved by:

Director, Financial & Support Svcs.

Assistant County Attorney

Jon Van Arnam Assistant County Administrator

Attachments:

OFME

Three (3) copies of DCF Homeless Prevention Grant Application Certification Regarding Lobbying form Applicant Certification

# 2015 Florida Department of Children and Families Homeless Prevention Grant Application

# Palm Beach County Board of County Commissioners

## on behalf of

# Farmworker Coordinating Council of Palm Beach County, Inc.

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	- Project Narrative (See Appendix I for guidelines)
<u>Tab 5:</u>	
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	- MyFloridaMarketPlace Registration
	- 501(c)(3)

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Tab 1

- Applicant Information RequestCompleteness Checklist

# Palm Beach County Board of County Commissioners

**Grantee Application Information** 

#### Appendix C

#### **Applicant Information Request**

#### 1. APPLICANT INFORMATION

Name: Palm Beach County Board of County Commissioners

Mailing Address: 301 N. Olive Avenue

City West Palm Beach County: Palm Beach

Zip Code: 33401 Telephone #: (561)355-4775

Applicant's E-mail Address: ctuck@pbcgov.org

Federal Tax Identification: 596000785

DUNS Number: 078470481

#### 2. PROJECT ADMINISTRATOR

Name: Claudia Tuck

Mailing Address: 810 Datura Street, Suite 350

City: West Palm Beach State: FL Zip Code: 33401

Phone: (561)355-4775 Fax: (561)355-4801

Email Address: ctuck@pbcgov.org

## 3. CONTACT PERSON FOR THE APPLICATION

Name: Claudia Tuck

**Phone:** (561)355-4775

Email: ctuck@pbcgov.org

#### 4. COUNTY OR COUNTIES TO BE SERVED: Palm Beach

#### 5. FAITH BASED ORGANIZATION?

YES \_\_\_\_\_ NO <u>X</u>

6. PRIOR TANF FUNDING? (Include 2013 and 2014):

YES <u>X</u> NO \_\_\_\_\_

Amount(s) <u>\$26,431</u> Year(s) <u>2013</u>

Amount(s) <u>\$66,000</u> Year(s) <u>2014</u>

7. TOTAL FUNDS REQUESTED: <u>\$ 70,000</u>

Administration <u>\$2,100</u>

## 8. LEVERAGED FUNDS: \$ 327,446 (Farmworker Coordinating Council)

## 9. TOTAL PROGRAM COST: \$ 397,446 (Farmworker Coordinating Council)

#### 10. NUMBER OF FAMILIES TO BE SERVED MONTHLY: 3

To the best of my knowledge, I certify that the information in this application it true and correct and that the document has been duly authorized by the governing body of the applicant. I will comply with the program rules and regulations if assistance is approved. I also certify that I am aware that providing false information on the application can subject the individual signing such application to criminal sanction.

**Executive Director:** 

helley Vana Signature:

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Typed Name: Shelley Vana

Title: Mayor

Date:

Attest: Sharon R. Bock Clerk and Comptroller

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY
Shene Cating
Cardina and a second
County Attorney

By: \_\_\_\_\_\_ Deputy Clerk

# Farmworker Coordinating Council of Palm Beach County, Inc.

**Sub-Grantee Application Information** 

# FARMWORKER COORDINATING COUNCIL OF PALM BEACH COUNTY, INC.



1313 Central Terrace • Lake Worth, Florida 33460 (561) 533-7227 office • 1-800-727-6224 • (561) 533-6099 fax www.farmworkercouncil.org



**Belle Glade Office:** 233 W. Avenue A • Suite D • P.O. Box 98 • Belle Glade, FL 33430 (561) 992-0603 office • (561) 992-8618 fax



06/01/2015

Jennifer Baker, Grant Manager Department of Children and Families 1317 Winewood Blvd. Bldg. 3, Room 201 Tallahassee, FL 32399-0700

Dear Ms. Baker:

The purpose of this letter is to confirm that Farmworker Coordinating Council of Palm Beach County, Inc. (FWCC) is responding to the 2015 Homeless Prevention TANF Grant Application # LPZ17.

FWCC is requesting \$70,000 in grant assistance to support the Family Preservation & Economic Stabilization program. The program will focus on serving low income farm worker families at risk of becoming homeless. The program is designed to help families going through an economic crisis by providing case management, emergency rental or utility assistance, referrals and other services that promote self-sufficiency and financial stability. Most of the families entering this program will be migrant or seasonal farm workers who during the off season become unemployed and rely on odd jobs to survive. This program functions as a safety net for those hard working families.

The program will serve at least 35 unduplicated families during the grant cycle. FWCC will provide this program at our two offices locate in Lake Worth and Belle Glade. If you have any questions or need additional information, please do not hesitate to contact me.

Sincerely,

me /m

Sérgio M. Palacio Executive Director

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## Appendix C

## **Applicant Information Request**

### 1. APPLICANT INFORMATION

Name:Farmworker Coordinating Council of Palm Beach County, Inc.						
Mailing Address: 1313 Central Terrace						
City Lake Worth County: Palm Beach County						
Zip Code:         33460         Telephone #:         561-533-7227						
Applicant's E-mail Address: _spalacio@farmworkercouncil.org						
Federal Tax Identification: 59-1830267						
DUNS Number:831640271						

### 2. PROJECT ADMINISTRATOR

Name:	Sergio M. Palac	io				
Mailing	g Address:	1313 Central Terrace				
City:	Lake Worth		_ State:	FL	Zip Code:	33460
Phone:	561-533-7227		Fax:	561-533-6099		
Email 4	Address:	_spalacio@farmworkerco	uncil.org			

## 3. CONTACT PERSON FOR THE APPLICATION

Name:	e: Sergio M. Palacio	
Phone:	e: _561-533-7227	
Email:	: spalacio@farmworkercouncil.org	

4. COUNTY OR COUNTIES TO BE SERVED: Palm Beach County

5.	FAITH	BASED	<b>ORGANIZATION?</b>
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YES \_\_\_\_\_ NO \_X

6. PRIOR TANF FUNDING? (Include 2013 and 2014):

YES \_\_\_\_\_ NO \_X

Amount(s)\_\_\_\_\_ Year(s)\_\_\_\_\_

7. TOTAL FUNDS REQUESTED: \$ 70,000

Administration \$ 2,100

8. LEVERAGED FUNDS: \$ 327,446

9. TOTAL PROGRAM COST: \$ 397,446

### 10. NUMBER OF FAMILIES TO BE SERVED MONTHLY: 3

To the best of my knowledge, I certify that the information in this application it true and correct and that the document has been duly authorized by the governing body of the applicant. I will comply with the program rules and regulations if assistance is approved. I also certify that I am aware that providing false information on the application can subject the individual signing such application to criminal sanction.

Executive Director:
Signature: Immuch
Typed Name: <u>SERCIO M. PALACIO</u>
Title: EXECUTIVE DINSOLODAte: JUNE 1, 2015

## Appendix D

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## **Completeness Check**

Application Item	<u>Complete</u> <u>Yes/No</u>	<u>Initial</u>	<u>Page</u> <u>Number</u>
1. Original Application, plus 1 copy			N/A
2. Applicant Information Request			5
3. Application Scoring Criteria Form			13
4. Budget Form			35
5. Budget Narrative			36
6. Project Narrative			39
7. Certification Regarding Lobbying			45
8. Certification of Program in CoC Plan			49
9. 501(c)(3) for nonprofits			56
10. MyFloridaMarketPlace Registration			51

Tab 2

- Applicant Scoring CriteriaAll relevant attachments to Scoring Criteria

### **Application Scoring Criteria Form**

All applicants must fill this form out in order to be scored. Evaluators will use the Applicant Scoring Criteria Worksheet in Appendix J to score each application.

Statutory Preference 1: Leverage of Additional Private and Public Funds

Document the source(s) and amounts of public and private funding committed to the Homelessness Prevention Grant Program for 2015-16 in the Budget Narrative and respond to the following:

Funding Source	Total Amount Leveraged (July 1, 2015 - June 30, 2016)	Ratio to Grant Request
Public (List all sources)		
Palm Beach County FAA	\$150,346	1 : 2.1
Private (list all sources)		
Town of Palm Beach United Way	\$102,600	1 : 1.5
United Way of Palm Beach County	\$54,500	1:0.8
Mary Alice Fortin Foundation	\$20,000	1 : 0.3

Statutory Preference 2: Effectiveness of Keeping Families Housed

Describe the method used to capture the housing stability data available for the year ending December 31, 2013. Provide data on the clients served in calendar year 2013 on success in staying in their housing for twelve (12) months after the last assistance was provided. Attach the data report, clearly citing the source of the data and report to receive points toward scoring.

# Families served in	# Remained housed	<u>100</u> %
2013: <u>111</u>	after 12 months:	Remained housed
		after 12 months

Statutory Preference 3: Commitment of Other Assistance to the Family Receiving Grant Funds

#### Tab 2 – Statutory Preference 2

Describe the method used to capture the housing stability data available for the year ending December 31, 2013. Provide data on the clients served in calendar year 2013 on success in staying in their housing for twelve (12) months after the last assistance was provided. Attach the data report, clearly citing the source of the data and report to receive points toward scoring.

All clients who receive Emergency Rental or Utility Assistance are entered into our internal data base (CTK Apricot), Palm Beach County database (HMIS), case notes and Emergency Assistance Log. As an agency policy, the case managers are required to follow up with active clients on a monthly basis. Once the cases are inactive, case managers are required to do a 6 and 12 month follow up with clients. In addition, case manager will check the HMIS system to verify that clients are not going to other local agencies asking for assistance. In 2013, FWCC provided emergency rental or utilities assistance to a total of 111 household representing 243 individuals. Based on the FWCC Follow Up Log, 100% of clients who received emergency payment assistance avoided homelessness and were still housed after a 12 month period. Please see attachments.

The applicant must demonstrate the commitment of other assistance available and ready to be provided to the families being assisted, as evidenced by executed written agreements. Such agreements must define the role of supporting agency, the responsibility to respond to referrals for service, and the type and level of service that will be available to the family receiving the housing assistance for past due housing costs.

Copies of the following executed agreement must be attached to claim points:

Written agreement provided for the following entities/services:

- 1. Local workforce board for job training and placements
- 2. Local business entity to make jobs available to the adults in the family assisted
- 3. Local healthcare providers to address family health needs
- 4. Local mental health providers to treat family mental illness needs
- 5. Local substance abuse treatment for family member's addiction issues
- 6. Local school district to ensure child of school age continues to access education
- 7. Local early learning coalition to place young children in school readiness programs
- 8. Local Head Start or other day care providers to place the children into daycare

In the event of two or more applicants having the same total score, the applicant with the highest ratio of other public and private funding to the grant request will be ranked higher.

#### **Applicant Certification**

The responses to the above scoring criteria are true and accurate:

Name of Authorized Officer:

Date:

SERGIO M. PALACIO

6/1/2015

Signature:

Attach all documents immediately following this certification.

**Effectiveness of Keeping Families Housed Data Report** 

Far	Farmworker Coordinating Council of Palm Beach County, Inc.					
Follow Up Log						
<u>2013</u>						
DATE	TYPE OF ASSISTANCE	TOTAL	FAMIL		Homeless Avoided	Follow up Source
1/8/2013	Rent	\$650.00	1	3	Yes	Client/CMIS
1/21/2013	Rent	\$700.00	1	2	Yes	Client/CMIS
1/21/2013	Rent	\$400.00	1	4	Yes	Client/CMIS
2/13/2013	Rent	\$1,140.00	1	3	Yes	Client/CMIS
2/14/2013	Rent	\$800.00	1	1	Yes	Client/CMIS
2/28/2013	Rent	\$750.00	1	1	Yes	Client/CMIS
2/28/2013	Rent	\$780.00	1	1	Yes	Client/CMIS
2/28/2013	Rent	\$660.00	1	1	Yes	Client/CMIS
3/5/2013	Rent	\$600.00	1	2	yes	Client/CMIS
3/5/2013	Rent	\$660.00	1	1	Yes	Client/CMIS
3/5/2013	Rent	\$600.00	1	1	Yes	Client/CMIS
3/13/2013	Rent	\$660.00	1	1	Yes	Client/CMIS
3/26/2013	Rent	\$550.00	1	1	Yes	Client/CMIS
3/26/2013	Rent	\$900.00	1	4	Yes	Client/CMIS
3/26/2013	Rent	\$650.00	1	2	Yes	Client/CMIS
3/26/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
3/26/2013	Rent	\$800.00	1	5	Yes	Client/CMIS
3/26/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
3/29/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
3/29/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
5/14/2013	Rent	\$584.00	1	2	Yes	Client/CMIS
5/21/2013	Rent	\$650.00	1	3	Yes	Client/CMIS
5/21/2013	Rent	\$660.00	1	1	Yes	Client/CMIS
5/28/2013	Rent	\$660.00	1	1	Yes	Client/CMIS
5/28/2013	Rent	\$700.00	1	3	Yes	Client/CMIS
8/5/2013	Rent	\$275.00	1	3	yes	Client/CMIS
8/5/2013	Rent	\$750.00	1	1	Yes	Client/CMIS
8/5/2013	Rent	\$800.00	1	1	Yes	Client/CMIS
8/14/2013	Rent	\$301.66	1	3	Yes	Client/CMIS
8/14/2013	Rent	\$700.00	1	2	Yes	Client/CMIS
8/14/2013	Rent	\$500.00	1	2	Yes	Client/CMIS
6/7/2013	Rental	\$550.00	1	3	Yes	Client/CMIS
6/7/2013	Rental	\$700.00	1	4	Yes	Client/CMIS
6/12/2013	Rental	\$750.00	1	1	Yes	Client/CMIS
6/12/2013	Rental	\$700.00	1	1	Yes	Client/CMIS
6/12/2013	Rental	\$292.00	1	4	Yes	Client/CMIS
6/27/2013	Rental	\$582.00	1	2	Yes	Client/CMIS
6/27/2013	Rental	\$520.00	1	1	Yes	Client/CMIS

## Farmworker Coordinating Council of Palm Beach County, Inc.

DATE	TYPE OF ASSISTANCE	TOTAL	FAMILY COUNT	and the second second second	Homeless Avoided	Follow up Source
6/27/2013	Rent	\$750.00	1	1	Yes	Client/CMIS
7/3/2013	Rent	\$300.00	1	1	Yes	Client/CMIS
7/10/2013	Rent	\$600.00	1	1	Yes	Client/CMIS
7/10/2013	Rent	\$800.00	1	2	Yes	Client/CMIS
7/15/2013	Rent	\$600.00	1	3	Yes	Client/CMIS
7/15/2013	Rent	-\$150.00			Yes	Client/CMIS
7/16/2013	Rent	\$600.00	1	1	Yes	Client/CMIS
7/16/2013	Rent	\$600.00	1	1	Yes	Client/CMIS
7/16/2013	Rent	\$352.00	1	4	Yes	Client/CMIS
7/16/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
7/16/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
9/11/2013	Rent	\$515.00	1	1	Yes	Client/CMIS
9/11/2013	Rent	\$292.00	1	2	yes	Client/CMIS
9/11/2013	Rent	\$400.00	1	3	yes	Client/CMIS
9/18/2013	Rent	\$750.00	1	4	Yes	Client/CMIS
9/18/2013	Rent	\$500.00	1	1	Yes	Client/CMIS
9/18/2013	Rent	\$550.00	1	3	Yes	Client/CMIS
9/18/2013	Rent	\$640.00	1	1	Yes	Client/CMIS
9/19/2013	Rent	\$550.00	1	2	Yes	Client/CMIS
9/20/2013	Rent	\$750.00	1	1	Yes	Client/CMIS
9/23/2013	Rent	\$352.00	1	4	Yes	Client/CMIS
9/23/2013	Rent	\$600.00	1	1	Yes	Client/CMIS
9/30/2013	Rent	\$292.00	1	1	yes	Client/CMIS
9/30/2013	Rent	\$292.00	1	2	Yes	Client/CMIS
10/3/2013	Rent	\$500.00	1	1	Yes	Client/CMIS
10/7/2013	Rent	\$549.00	1	5	Yes	Client/CMIS
10/16/2013	Rent	\$192.00	1	1	Yes	Client/CMIS
10/16/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
10/16/2013	Rent	\$600.00	1	1	Yes	Client/CMIS
10/28/2013	Rent	\$650.00	1	1	Yes	Client/CMIS
10/28/2013	Rent	\$650.00	1	2	Yes	Client/CMIS
10/28/2013	Rent	\$750.00	1	3	Yes	Client/CMIS
10/28/2013	Rent	\$718.69	1	6	Yes	Client/CMIS
10/28/2013	Rent	\$225.00	1	3	Yes	Client/CMIS
11/4/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
11/4/2013	Rent	\$700.00	1	1	Yes	Client/CMIS
11/4/2013	Rent	\$215.00	1	4	Yes	Client/CMIS
11/4/2013	Rent	\$700.00	1	4	Yes	Client/CMIS
11/4/2013	Rent	\$475.00	1	2	Yes	Client/CMIS
11/14/2013	Rent	\$700.00	1	1	Yes	Client/CMIS

## Farmworker Coordinating Council of Palm Beach County, Inc.

DATE	TYPE OF ASSISTANCE	TOTAL	FAMILY COUNT	HH SIZE	Homeless Avoided	Follow up Source
11/14/2013	Rent	\$650.00	1	5	Yes	Client/CMIS
11/19/2013	Rent	\$560.00	1	2	Yes	Client/CMIS
11/19/2013	Rent	\$620.00	1	1	Yes	Client/CMIS
12/10/2013	Rent	\$600.00	1	2	Yes	Client/CMIS
12.19.13	Rent	\$230.00	1	3	yes	Client/CMIS
12.19.13	Rent	\$700.00	1	1	Yes	Client/CMIS
12.24.13	Rent	\$600.00	1	2	Yes	Client/CMIS
12.24.13	Rent	\$300.00	1	2	Yes	Client/CMIS
10/16/2013	Uitility	\$217.21	1	3	Yes	Client/CMIS
10/16/2013	Uitility	\$326.89	1	4	Yes	Client/CMIS
2/21/2013	Utility	\$259.28	1	2	Yes	Client/CMIS
1/21/2013	Utility	\$233.71	1	3	Yes	Client/CMIS
1/28/2013	Utility	\$446.59	1	2	Yes	Client/CMIS
1/28/2013	Utility	\$420.57	1	5	Yes	Client/CMIS
3/26/2013	Utility	\$99.33	1	4	Yes	Client/CMIS
3/29/2013	Utility	\$606.01	1	1	Yes	Client/CMIS
3/29/2013	Utility	\$399.87	1	2	Yes	Client/CMIS
3/29/2013	Utility	\$55.02	1	4	Yes	Client/CMIS
6/27/2013	Utility	\$116.42	1	2	Yes	Client/CMIS
8/23/2013	Utility	\$101.52	1	1	Yes	Client/CMIS
9/27/2013	Utility	\$124.71	1	1	Yes	Client/CMIS
9/30/2013	Utility	\$149.52	1	1	Yes	Client/CMIS
10/21/2013	Utility	\$277.76	1	5	Yes	Client/CMIS
11/4/2013	Utility	\$257.94	1	6	Yes	Client/CMIS
11/14/2013	Utility	\$100.01	1	4	Yes	Client/CMIS
11/14/2013	Utility	\$158.62	1	2	Yes	Client/CMIS
11/25/2013	Utility	\$481.81	1	1	Yes	Client/CMIS
11/27/2013	Utility	\$256.55	1	7	Yes	Client/CMIS
11/27/2013	Utility	\$120.74	1	1	yes	Client/CMIS
11/27/2013	Utility	\$187.03	1	1	Yes	Client/CMIS
12.10.13	Utility	\$230.96	1	1	Yes	Client/CMIS
12.24.13	Utility	\$324.00	1	3	Yes	Client/CMIS
12.24.13	Utility	\$258.08	1	4	Yes	Client/CMIS
12.24.13	Utility	\$166.22	1	1	Yes	Client/CMIS

\$56,770.72

243

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# Commitment of Other Assistance to Family Receiving Grant Funds

# FARMWORKER COORDINATING COUNCIL OF PALM BEACH COUNTY, INC.



1313 Central Terrace • Lake Worth, Florida 33460 (561) 533-7227 office • 1-800-727-6224 • (561) 533-6099 fax www.farmworkercouncil.org



**Belle Glade Office:** 233 W. Avenue A • Suite D • P.O. Box 98 • Belle Glade, FL 33430 (561) 992-0603 office • (561) 992-8618 fax



Re: Statutory Preference 3: Commitment of Other Assistance to the Family Receiving Grant Funds

Farmworker Coordinating Council of Palm Beach County, Inc. certifies that the agency has established working relationships with the following community partners in order to provide quality additional services to the families served.

Agency Name	Service Offered
CareerSource Palm Beach County, Inc.	Occupational skills training, job search, job referral and placement assistance.
C.L. Brumback Primary Care Clinics.	Primary medical care, mental health counseling and dental care.
Caridad Center.	Provides medical, vision, dental and mental care for uninsured individuals and families.
First Care Women's Clinic.	Women's clinic that provides pregnancy tests, sonograms and parenting/childbirth classes.
Department of Children and Families.	This partnership allows FWCC to assist families applying for Food Stamps and Medicaid. DCF gives FWCC access to their website system to complete and verify applications for services.
FWCC Education Program.	Financial literacy, ESOL, literacy and computer classes for adults. Tutoring and homework assistance for children.

## Commitment of Other Assistance to the Family Receiving Grant Funds:

Mr. Sergio M. Palacio Executive Director

2015

Date

## MEMORANDUM OF UNDERSTANDING BETWEEN FARMWORKER COORDINATING COUNCIL OF PALM BEACH COUNTY, INC. AND CAREERSOURCE PALM BEACH COUNTY, INC.

#### FOR THE DELIVERY OF SERVICES TO FARMWORKERS UNDER TITLE I, SECTION 167 OF WORKFORCE INVESTMENT ACT

The following Memorandum of Understanding (the "Agreement") sets forth the terms of Agreement for cooperation and consultation between Farmworker Coordinating Council of Palm Beach County, Inc. ("Farmworker Council") and CareerSource Palm Beach County, Inc. ("CareerSource") with regard to the workforce program services delivered by CareerSource staff in the One-Stop System established within Workforce Region #21 as part of their employment and career development programs.

## I. Applicable Workforce Programs

This Agreement covers the delivery of the following program services:

- Workforce activities authorized under Title I of the \*Workforce Investment Act including counseling, training, and placement. \*Note: effective 7/1/15 the Workforce Investment Act will be replaced by the Workforce Innovation and Opportunity Act.
- Provision of Labor Market Information (LMI)
- Other workforce program services that may be directly provided by the Program.

### II Governing Law

The \*Workforce Investment Act of 1998 shall be the principle law that governs Farmworker Council and CareerSource relative to the delivery of programs services within the One-Stop system established by CareerSource. CareerSource and Farmworker Council shall also comply with the applicable federal and state law and rule that governs each of the above referenced Program delivered workforce service. \*Note: effective 7/1/15 the Workforce Investment Act will be replaced by the Workforce Innovation and Opportunity Act.

### **III** Purpose of Agreement

It is the purpose of this Agreement to establish an organizational framework to integrate the delivery of Program workforce services into the One-Stop delivery system established by CareerSource. The Agreement satisfies the requirements contained in the \*Workforce Investment Act of 1998 for a Memorandum of Understanding between Farmworker Council and CareerSource for the delivery of these services within the locally managed One-Stop delivery system. The Agreement defines the partnership between Farmworker Council and CareerSource to provide Program workforce services in a coordinated, seamless, and customer friendly manner within the locally established One-Stop delivery system. \*Note: effective 7/1/15 the Workforce Investment Act will be replaced by the Workforce Innovation and Opportunity Act.

#### **IV** Duration of Agreement

This Agreement shall commence on the date of execution and shall remain in full force and effect until the <u>30</u> day of <u>June</u>, <u>2016</u> or until the Agreement is cancelled by either party in accordance with the terms set forth herein.

#### V Statement of Work

CareerSource shall retain fiscal responsibility and accountability for the administration of the funds allocated to it under \*WIA Title I, Section 167 and any other applicable federal and state laws for the workforce program services directly delivered by their programs. It is understood by the parties to this Agreement that each should be able to fulfill its responsibilities under the Agreement in accordance with the provisions of law and regulation that govern their respective activities. Nothing in this Agreement is intended to negate or otherwise render ineffective any such provision or mandated operating procedure. \*Note: effective 7/1/15 the Workforce Investment Act will be replaced by the Workforce Innovation and Opportunity Act.

Farmworker Council and CareerSource agree to share resources in supporting those core and intensive services common to each of the programs administered by each party. CareerSource will support the Farmworker Council in providing the following common core and intensive One-Stop Services.

#### **Core Services:**

- One-Stop delivery system orientation
- Employment statistics information
- Information on training providers
- Local area performance measures
- Supportive services information
- Eligibility determination for all \*WIA Title I programs
- Assistance in establishing eligibility for WIA funded financial aid and other financial aid
- Job search, job referral, and placement assistance
- Career counseling
- Initial assessment

\*Note: effective 7/1/15 the Workforce Investment Act will be replaced by the Workforce Innovation and Opportunity Act.

#### **Intensive Services:**

- Comprehensive assessment of skill levels and service needs
- Diagnostic testing and evaluation of occupational skills, educational skills
- Identification of employment barriers and employment goals
- Development of an Individual Employment Plan
- Individual and group counseling
- Career planning
- Adult education, literacy, ESOL, and GED
- Dropout prevention activities
- Needs based payments
- Paid work experience

Page 2 of 3

#### **Training Services:**

- Occupational skills training
- On-the-job training
- Occupational training programs operated by the private sector
- Skill upgrading and retraining
- Training related supportive services which will enable farm workers to complete training services

#### **Related Assistance:**

- Emergency assistance
- Workplace safety and farm worker pesticide safety instruction
- English language classes and basic education classes
- Other supportive services described in the project plan

## VI Program Records

Both parties agree to share confidential customer and program information within the limits established by federal and state laws and regulations governing confidentiality. Both parties also agree to provide access and share any forms that may be used in the delivery of workforce services in the local One-Step System.

## VII Modification or Cancellation of Agreement

The Agreement may be modified at any time in writing by mutual consent of the parties. Either party upon written notification of the change to the other party can effect simple and minor changes. Unless requested by the other party, these changes do not require a formal modification of this Agreement.

The Agreement may be cancelled by either party upon twenty-four (24) hours written notice except where the cancellation is for cause due to a material breach of any of the provisions of the Agreement in which case it may be cancelled upon delivery of written notice to the other party.

IN WITNESS THEREOF, the parties here to have caused this Agreement to be executed by their duly authorized representative respective on the latest day and year noted below.

Signature <u>Steve Craig, President and CEO</u> For the Regional Workforce Board CareerSource Palm Beach County, Inc.

6-1-15 Date

Signature <u>Sergio M. Palacio , Executive Director</u> Farmworker Coordinating Council of Palm Beach County, Inc.

Date

Page 3 of 3

## MEMORANDUM OF UNDERSTANDING

This non-binding Memorandum of Understanding ("MOU") is entered into between Farmworker Coordinating Council of Palm Beach County, Inc. (FWCC) and C.L. Brumback Primary Care Clinics.

The purpose of this MOU is to establish a collaborative linkage between Farmworker Coordinating Council of Palm Beach County, Inc. and C.L. Brumback Primary Care Clinics and foster collaborative efforts in delivering comprehensive services including primary medical care, mental health counseling and dental care. The C. L. Brumback Primary Care Clinics offer adult and pediatric medical care six days a week in each of its multiple locations throughout Palm Beach County.

Farmworker Coordinating Council of Palm Beach County, Inc. may refer Family Preservation & Economic Stabilization program participants that are farm workers needing primary medical care, mental health counseling and dental care. Provision of services to referred individuals shall be subject to terms and provisions, and at the discretion of C.L. Brumback Primary Care Clinics

C.L. Brumback Primary Care Clinics will provide:

- 1. Medical Evaluations
- 2. Yearly Physicals
- 3. Mental Health Counseling
- 4. Dental Care
- 5. Health Care for the Homeless and Agricultural Workers

No provision of this MOU shall be construed as obligating either Farmworker Coordinating Council of Palm Beach County, Inc. or C.L. Brumback Primary Care Clinics to any act or expenditure. This MOU will be reviewed periodically, but not less than annually, and may be amended as agreed to in writing by both parties and may be discontinued by either party at any time. Neither party may use the other party's name, programs or services in connection with any advertising or marketing without prior written approval of the other party.

This MOU shall be effective upon the signature of authorized representatives from Farmworker Coordinating Council of Palm Beach County, Inc. and C.L. Brumback Primary Care Clinics and shall expire on 06/30/2016.

Sergio M. Palacio

**Executive Director** 

**Farmworker Coordinating Council** 

, inc. and C.L. Brumback Primary Care Clini

Christopher F. Irizarry, MPA

FQHC Executive Director

C.L. Brumback Primary Care Clinics

of Palm Beach County

## MEMORANDUM OF UNDERSTANDING

This non-binding Memorandum of Understanding ("MOU") is entered into between Farmworker Coordinating Council of Palm Beach County, Inc. and Caridad Center.

The purpose of this MOU is to establish a collaborative linkage between Farmworker Coordinating Council of Palm Beach County, Inc. and Caridad Center and foster collaborative efforts in delivering comprehensive health care services. Caridad Center is located at 8645 W. Boynton Beach Blvd, Boynton Beach, FL 33472.

Farmworker Coordinating Council of Palm Beach County, Inc. may refer Family Preservation & Economic Stabilization program participants that are farm workers needing medical, mental, dental, and vision care. Provision of services to referred individuals shall be subject to terms and provisions, and at the discretion of Caridad Center.

Caridad Center will provide:

- 1. Medical Care
- 2. Vision and Dental Care
- 3. Chronic Disease Prevention and Management
- 4. Mental/behavioral programs

No provision of this MOU shall be construed as obligating either Farmworker Coordinating Council of Palm Beach County, Inc. or Caridad Center to any act or expenditure. This MOU will be reviewed periodically, but not less than annually, and may be amended as agreed to in writing by both parties and may be discontinued by either party at any time. Neither party may use the other party's name, programs or services in connection with any advertising or marketing without prior written approval of the other party.

This MOU shall be effective upon the signature of authorized representatives from Farmworker Coordinating Council of Palm Beach County, Inc. and Caridad Center and shall expire on 06/30/2016.

Sergio M. Palacio Executive Director Farmworker Coordinating Council of Palm Beach County

Laura Kallus, MA Executive Director Caridad Center



## MEMORANDUM OF UNDERSTANDING

This non-binding Memorandum of Understanding ("MOU") is entered into between Farmworker Coordinating Council of Palm Beach County, Inc. (FWCC) and First Care Women's Clinic (FCWC).

The purpose of this MOU is to establish a collaborative linkage between Farmworker Coordinating Council of Palm Beach County, Inc. and First Care Women's Clinic and foster collaborative efforts in delivering all applicable comprehensive services. First Care Women's Clinic is located at 233 West Avenue A Suite C Belle Glade, Florida.

Farmworker Coordinating Council of Palm Beach County, Inc. may refer Family Preservation & Economic Stabilization program participants that are farm workers needing any services provided by FCWC. All referred individuals shall be subject to terms and provisions, and at the discretion of FCWC.

First Care Women's Clinic will provide: Pregnancy Tests. Sonograms. Parenting /Childbirth Classes.

No provision of this MOU shall be construed as obligating either Farmworker Coordinating Council of Palm Beach County, Inc. or First Care Women's Clinic to any act or expenditure. This MOU will be reviewed periodically, but not less than annually, and may be amended as agreed to in writing by both parties and may be discontinued by either party at any time. Neither party may use the other party's name, programs or services in connection with any advertising or marketing without prior written approval of the other party.

This MOU shall be effective upon the signature of authorized representatives from Farmworker Coordinating Council of Palm Beach County, Inc. and First Care Women's Clinic and shall expire on 06/30/2016.

mare.

Sergio M. Palacio Executive Director Farmworker Coordinating Council of Palm Beach County

Sandi Davis Clinic Director First Care Women's Clinic



Medical Clinics: Belle Glade: 233 West Ave A, Ste C. Belle Glade Fl 33430 Lake Worth: 3965 South Jog Road, Lake Worth, Fl 33467 45th Street: 3115 45th St West Palm Beach Fl 33407 South County Mobile Clinic (561) 996-6888 • Fax (561) 996-6869 (561) 649-4027 • Fax (561) 649-4072 (561) 471-3601 • Fax (561) 686-4309 (561) 405-5540

Administrative Office:

Mailing: PO Box 15198 West Palm Beach, FL 33406-5814 (561) 688-216
 Physical: 2200 N Florida Mango Rd Ste\_102, West Palm Beach, FL 33409-66473

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(561) 688-2163 • Fax (561) 471-3713 33409-66473



## Economic Self-Sufficiency ACCESS Florida Community Partner Network Agreement

This agreement is entered into between <u>Farmworker Coordinating Council of Palm Beach County. Inc.</u>, hereinafter referred to as the Community Partner or "Partner" and the Florida Department of Children and Families, hereinafter referred to as "Department". <u>Farmworker Coordinating Council of Palm Beach County.</u> Inc., located at 1313 Central Terrace, Lake Worth, FL 33460, agrees to serve as an access point for applicants and recipients of Economic Self-Sufficiency (ESS) services. For purposes of this agreement, ESS services are benefits through Supplemental Nutrition Assistance Program (SNAP), Temporary Cash Assistance, Refugee Assistance, and Medicaid programs for which the Department determines eligibility. The Automated Community Connection for Economic Self-Sufficiency (ACCESS) is the system which allows customers to apply online for ESS benefits. The ESS program is the program which determines eligibility for benefits.

As a member of the ACCESS Florida Community Network our organization will be available to:

Serve our current customer population \_\_\_\_\_Serve the general public in our community.

Our organization name and street address information listed above may be advertised as an ACCESS Florida Community Partner Network site and listed on the ACCESS Florida public internet web page at http://www.dcf.state.fl.us/programs/access/

Partner agrees to be advertised on the ACCESS Community Partner Network site: If Yes I No

Our telephone and fax number may also be included with this advertisement:

Phone Number: (561) 533-7227 Fax Number: (561) 533-6099

Partner shall provide all services under this agreement without charge to the customer, shall display ESS program signage, required informational posters, ESS program brochures to support customer education and support, and shall notify the Department of any established Partner site closures.

The access level of our organization is:

Choose one: C Self-Service Site X Assisted Service Site\*

Service Type\_\_\_\_

\*At a minimum, provides services annotated with asterisk (\*) below

Services offered at our organization's site(s):

- Provide Informational handouts\*
- D Provide paper applications as requested by customers\*
- Provide access to telephone to call DCF Customer Call Center- 1-866-762-2237
- Provide computer to apply for assistance on-line
- Provide printer for ESS program documents
- Provide fax machine to fax application and other documents to DCF
- Provide copy machine to copy application related documents
- Provide an explanation of the application process \*
- Provide assistance to customers to complete/submit applications and/or provide requested Information\*
- Provide customer assistance for "My ACCESS Account"

#### PARTNER ASSURANCES

#### A. Indemnification

- 1. The Partner agrees to be liable for and indemnify, defend, and hold harmless the Department and its officers, agents, and employees from all claims, suits, judgments, awards of money damages, attorney fees, and court costs, arising out of any act, neglect, or omission by the Partner, its agents, employees, and if applicable, subcontractors during the performance of this agreement, including subsequent amendments thereof.
- 2. The Partner's inability to evaluate liability or the evaluation of liability shall not excuse the Partner's duty to comply with subparagraph A.1. above, within seven (7) days after notice by the Department to the Partner by certified mall or any other delivery service that provides verification of delivery or by hand delivery. After the highest appeal taken is exhausted, only an adjudication or judgment specifically finding the Partner not liable shall excuse the Partner's compliance with subparagraph A.1. The Partner shall pay all costs and fees, including attorney fees related to obligations and enforcement against the Partner by the Department. The Department's failure to notify the Partner of a claim, suit, or judgment, award of money damages, attorney's fees, or court costs shall not release the Partner from the requirements of subparagraphs A.1. or A.2. The Partner shall not be liable for the sole act, negligence, or omission of the Department.
- If the Partner is an agency or subdivision of the state, its obligation to indemnify, defend and hold harmless the Department shall be to the extent permitted by law and without waiving the limits of sovereign immunity.

#### B. Civil Rights Compliance

The Partner shall ensure that all civil rights requirements are met. All applicants and recipients are granted civil rights in accordance with federal laws and U.S. Department of Agriculture (USDA), Food and Nutrition Services policy that services will be provided without discrimination on the basis of race, color, national origin, age, sex, disability, political beliefs or religion. The nondiscrimination poster, "And Justice for All", is posted on the ACCESS Florida internet page at

http://www.myflorida.com/accessflorida/. If this web page is not accessible to customers, the "And Justice for All "poster shall be posted in a lobby area for customers to read.

#### C. Confidentiality of Customer Information

The Partner will only use confidential customer case file information to assist the applicant, the recipient, and the Department or the respective duly authorized representatives, with the completion of the application process for ESS program benefits or services, or to conduct an investigation into performance of this agreement or the administration of ESS program services. The Partner will only disclose confidential customer case file information to the applicant, the recipient, and the Department, or the respective duly authorized representatives for the purposes set forth in this section. If the Partner has questions or concerns about safeguarding of confidential case file information or an intended use or disclosure of such information, the Partner must contact the appropriate local Department of Children and Families office contact person, or designes. The Partner agrees not to use or disclose confidential case file information obtained from a customer's records may be shared with individuals or organizations. All such requests should be referred to the Department for review and action.

The Partner will only access confidential customer case file information if designated as an approved Assisted Service Site, after completing all required security training, and receiving a consent form from the customer allowing access to information that is dated within ninety (90) days of the access to information.

### D. Health Insurance Portability and Accountability Act

Where applicable, Partners agree to comply with the Health Insurance Portability and Accountability Act (42 U. S. C. 1320d.) and all regulations promulgated hereunder (45 CFR Parts 160, 162, and 164).

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#### E. Brochures, ESS Program Materials and Signage

The Partner shall ensure that customers are aware that the Partner is an ESS program Partner by displaying an ESS program sign in their store front window or other appropriate area as agreed upon between the Department and the Partner. Brochures, paper applications and other informational ESS program materials shall be made available to customers.

#### F. Training

- The Partner must participate in on-line training as provided by the Department in the following areas:

   The use or disclosure of confidential case file information, including information governed by the Health Insurance Portability and Accountability Act of 1996 and related federal regulations; and
   Civil Rights requirements
- 2. Additionally, the Partner will participate in either the on-line training modules or other training sessions provided by the Department that address:
  - a. ESS Program overview, and
  - b. the ACCESS Self-Service Portal Training (My Account)
- 3. The Partner agrees to complete any other training required by the Department, as reflected in written notice provided by the Department.

#### G. Information Security Obligations

The Partner shall be held responsible for information security, especially involving the access, transport or storing of sensitive and confidential information. Fulfillment of security responsibilities shall be mandatory and violations may be cause for action, up to and including civil penalties or criminal penalties under Chapters 119, 812, 815, 817, 839, or 877, Florida Statutes, or similar laws.

#### H. Client Risk Prevention and Incident Reporting

The Partner must immediately report knowledge or reasonable suspicion of abuse, neglect, or exploitation of a child, aged person, or disabled adult to the Florida Abuse Hotline on the statewide toll-free telephone number of 1-800-962-2873 (1-800-96ABUSE). This requirement is binding upon the Partner and its officers, agents, and employees, as required by Chapters 39 and 415, Florida Statutes.

#### I. Publicity

The Partner and its employees, agents, and representatives will not, without prior written consent from the Department in each instance, use in advertising, publicity or any other promotional endeavor any state mark, the name of the state's mark, the name of the state or any state affiliate or any officer or employee of the state, or represent, directly or indirectly, that any product or service provided by the Partner has been approved or endorsed by the state, or refer to the existence of this agreement in press releases, advertising or materials distributed to the Partner's prospective customers.

#### J. Fee For Services

This is a non-monetary agreement. The Partner agrees to provide services under this agreement at no cost to the Department or the customers served pursuant to this agreement.

#### K. Monitoring

The Partner agrees to allow on-site monitoring as established by the Department.

#### **DEPARTMENT ASSURANCES**

#### A. Training

1. The Department will offer on-line training to the Partner in the following areas:

- The use or disclosure of confidential case file information, including information governed by the Health Insurance Portability and Accountability Act of 1996 and implementing federal regulations;
- b. Civil Rights requirements; and
- c. Other training as required by the Department.
- 2. Additionally, the Department offers on-line or classroom training that addresses:
  - a. ESS Program overview, and
  - b. ACCESS Self-Service Portal Training (My Account)

Version 08/2014

### B. Supplies and Materials

The Department will supply and replenish ESS program signage, paper applications and public assistance programs literature as needed at no cost to the Partner. The Partner must notify the Department of the need for additional literature in a timely manner based on its local demand levels.

#### C. Eligibility Determination

The Department will complete the eligibility determination process on completed applications received from the Partner site(s), including timely notifying applicants of the eligibility decision, the availability of hearing rights, and how fair hearings may be requested.

#### **MUTUAL AGREEMENT**

#### A. Agreement Document

The Partner agrees to provide services in accordance with the terms and conditions specified in this Agreement including its attachment(s) \_\_\_\_\_.

#### B. Start Date and End Date

This agreement shall begin on \_\_\_\_\_\_or on the date on which it is signed by the last party required to sign it, whichever is latest.
 This agreement shall end at midnight, local time in \_\_\_\_\_\_, Florida, on \_\_\_\_\_\_

Or

H This agreement will remain in effect unless terminated by either party with proper notice.

#### C. Termination

1. This agreement can be terminated by either party without cause upon no less than thirty (30) calendar days, with a notice in writing to the other party by certified mail or any other delivery service that provides verification of delivery or by hand delivery, unless an earlier time is mutually agreed upon in writing.

2. This agreement may be terminated for Partner's non-performance upon no less than twenty-four (24) hours, with a notice in writing by the Department. The Department may exercise the provisions of Rula 60A-1.006(3), Florida Administrative Code, if this agreement is terminated for nonperformance. Waiver of any breach of this agreement shall not be deemed a waiver of any other breach and shall not be construed to be a modification of this agreement. The Department may exercise all other rights and remedies at law or in equity to redress a breach of this agreement.

3. Partner's failure to perform any obligation required by this agreement in a manner satisfactory to the Department will be sufficient cause to terminate this agreement. To be terminated as a Partner under this subparagraph, Partner must have: (1) previously failed to satisfactorily perform in a contract with the Department, been notified by the Department of the unsatisfactory performance, and failed to correct the unsatisfactory performance to the Department's satisfaction; or (2) had a contract terminated by the Department for cause.

The Partner's contact person, or designee, shall be responsible for informing the appropriate local Department of Children and Families office of performance concerns of which the Partner becomes aware in the performance of duties and responsibilities, and be responsible for providing in a timely manner the appropriate local Department of Children and Families office with original or copies of documentation required by this agreement, and for being available to the Department for consultation and assistance, as requested by the Department, during Partner's normal business hours and days of operation.

Version 08/2014

#### D. Contacts

1.Partner's name, as shown on page 1, mailing address, telephone number and e-mail address is:

	Carlos M. Perez
	1313 Central Terrace
:	Lake Worth, FL 33460
	581-533-7227
	cperez@farmworkercouncil.org

2. The name, address, telephone number and e-mail address of Department of Children and Families ESS Program contact person is:

. President and the second sec	
	Teresa Janeczek
	111 S. Sapodilla Ave
	West Palm Beach, FL 33401
	561-227-6780
Te	resa.Janeczek@Myfifamilles.com

The Department's contact person will be available to assist the Partner in its performance of this agreement on an "as needed" basis during the Department's normal business hours and days of operation. All contact with the Department by the Partner must be through the Department's local contact person.

SIGNATURES Signature of the Community Agency Executive or Designee Date **Printed Name of the Community** Agency Executive or Designee 6-3-13 Signature of DCF Regional Date **Director or Designee** Printed Name of the Regional Clay Walker **Director or Designee** Date

# FARMWORKER COORDINATING COUNCIL OF PALM BEACH COUNTY, INC.



1313 Central Terrace • Lake Worth, Florida 33460 (561) 533-7227 office • 1-800-727-6224 • (561) 533-6099 fax www.farmworkercouncil.org

**Belle Glade Office:** 233 W. Avenue A • Suite D • P.O. Box 98 • Belle Glade, FL 33430 (561) 992-0603 office • (561) 992-8618 fax





05/29/2015

To whom it may concern,

This letter will confirm that Farmworker Coordinating Council of Palm Beach County, Inc. (FWCC) is committing to provide tutoring, homework assistance and summer school programs to children of clients who are recipients of payment assistance through the Family Preservation and Economic Stabilization program.

In addition, FWCC is committing to provide ESOL, Literacy and Computer classes to clients interested in improving their education. These classes will be provided by the FWCC's Education Program.

Clients will be advised of the available services during the initial intake process and throughout the oneyear follow-up period.

If you have any questions regarding FWCC's commitment to providing these services, please do not hesitate to contact me.

Respectfully,

Sergio M. Palacio Executive Director

Tab 3

- Budget FormBudget Narrative

#### Appendix F

#### **Budget Form**

#### Homelessness Prevention Grant Budget for FY2015 - 16

	Eligible Activity	Grant Funds	Leveraged \$
1.	Past due rent or mortgage assistance	\$ 47,500	\$
2. 3.	Past due utility payments (electric, gas, water, sewer only) Case management	\$ 6,400	\$
	a. Salaries and benefits Number of FTE's5	\$ 14,000	\$ 245,453
	b. Operating expenses	\$	\$ 81,993
4.	Grant Administration (Maximum = 3% of total award)	\$ 2,100	\$
	TOTAL	\$ 70,000	\$ 327,446

Attach budget narrative to support the request, and document the commitment of leveraged dollars from private and other public sources.

Grant expenditures must be obligated by June 30, 2016.

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#### <u>Farmworker Coordinating Council of Palm Beach County, Inc.</u> <u>Budget Narrative</u>

#### **Overall Agency Budget Information:**

The Farmworker Coordinating Council of Palm Beach County, Inc. (FWCC) fiscal year starts on July 1<sup>st</sup>, 2015 – June 30<sup>th</sup>, 2016. The agency overall proposed budget for 2015-2016 fiscal year is approximately \$1,108,000. The agency receives funding from the U.S. Department of Labor, Palm Beach County Financially Assisted Agencies (FAA), Florida Blue Foundation, Town of Palm Beach United Way, Quantum Foundation, United Way of Palm Beach County, Jim Moran Foundation, Mary Alice Fortin Foundation and other private foundations. In addition, the agency coordinates many fundraising events throughout the year. FWCC currently has four major programs.

#### Budget Narrative for the Family Preservation & Economic Stabilization Program:

The approximate total budget for fiscal year 2015-2016 for the Family Preservation & Economic Stabilization Program is \$397,446. Here is the breakdown by funder:

- <u>DCF Homeless Prevention Grant \$70,000 (Pending)</u> This grant will allow us to provide \$53,900 to help families in need of emergency mortgage, rental or utilities payment assistance (Mortgage and Rent Assistance \$47,500. Utilities assistance \$6,400). The other \$14,000 will be used to cover a case manager's salary and benefits and 3% for grant administration.
- <u>Palm Beach County FAA \$150,346 (Pending)</u> The agency has been receiving this grant for over five years. FWCC already submitted the grant proposal for fiscal year 2015-2016. This grant will cover salaries and benfits for case managers in the program and operating expenses such as a percentage of our rent, utilities, insurances, etc.
- <u>Town of Palm Beach United Way \$102,600 (Confirmed)</u> This funding will cover salaries and benefits for case managers and a percentage of the program's operating expenses.
- <u>United Way of Palm Beach County \$54,500 (Pending)</u> This grant allow us to pay for one full time case manager and a percentage of the program's operating expenses.
- <u>Mary Alice Fortin Foundation \$20,000 (Pending)</u> This funding is allocated for the program's operating expenses.

#### Management and Oversight of Budget:

FWCC is governed by a volunteer Board of Directors. As part of its governance structure, a Finance Committee is established as a standing committee of the Board of Directors. The Finance Committee provides oversight of the agency budgetary and fiscal matters, and provides guidance to the Executive Director.

#### **Key Executive Staff:**

Sergio M. Palacio – Executive Director Carlos M. Perez – Director of Programs Lois Monroe – Belle Glade Branch Director Rosalinda Mendez – Case Manager Supervisor

#### Farmworker Coordinating Council of Palm Beach County, Inc. Budget by line for Family Preservation & Economic Stabilization Program 2015-2016

Revenues	
Palm Beach County FAA	\$150,346
Town of Palm Beach United Way	\$102,600
DCF Homeless Prevention Grant	\$70,000
United Way of Palm Beach County	\$54,500
Mary Alice Fortin Foundation	\$20,000
Total Revenue	\$397,446
Expenses	
Salaries & Benefits	\$259,453
Building/Occupancy	\$25,500
Utilities	\$7,981
Project supplies/equipment	\$9,413
Local travel	\$5,000
Professional Development	\$772
Consulting Fees	\$300
Other (Insurance, Audit, IT Services, etc)	\$35,127
Client Mortgage/Rental Assistance	\$47,500
Client Utility Assistance	\$6,400
Total Expenditures	\$397,446

Tab 4

- Project Narrative

#### Farmworker Coordinating Council of Palm Beach County, Inc.

#### **Project Narrative**

The mission of the Farmworker Coordinating Council of Palm Beach County, Inc (FWCC). is to promote self-sufficiency and improve the quality of life of migrant and seasonal farm workers through education, advocacy and access to services. FWCC traces its beginnings to a grassroots effort led by Ernesto Gonzalez and a group of volunteers to meet the needs of farm workers who found themselves without work in the winter of 1977-1978 during a sudden freeze. From its humble beginnings in a borrowed warehouse, the Farmworker Coordinating Council has grown into a diverse social services agency that addresses the continuing barriers to basic needs faced by farm workers in Palm Beach County.

In an effort to support our mission and reduce homelessness among the farm worker population, the Family Preservation & Economic Stabilization (FPES) program was established in 2005. The program is designed to empower clients to move from crisis to stability through ongoing support fostering client independence. The Family Preservation & Economic Stabilization program focuses on assisting low income farm workers and their families to reduce their risk of becoming homeless and suffer from hunger. The program provides a variety of services such as Case Management, Emergency Rental and Utility Assistance, Distribution of Food and Clothing, Transportation, Financial Education, Referrals and additional services that promote self-sufficiency and economic stabilization. The program is based out of our two offices located in Lake Worth and Belle Glade, and services are provided by Case Managers that are familiar with the culture and needs of this population.

### 1. Method by which the applicant will take applications for assistance from eligible families.

Whenever a new individual or family comes to the FWCC's offices asking for help, our first step is to go through an intake process to determine if the client qualifies for our programs and services. If the family qualifies for our programs, then they are assigned to a case manager depending on the client's need. From that point forward, the case manager becomes the main point of contact for that client. During the first meeting between the client and the case manager, they develop an action plan with three goals (Short, Intermediate and Long Term) to help the family attain self-sufficiency. These goals become a roadmap for both the client and the case manager to help the family become self-sufficient. If during the development of the action plan the client mentions that they need emergency rental or utility assistance, this becomes the short term goal and the priority for this case. At this time, the case manager advises the clients of all the required information to bring in to apply for emergency rental or utility assistance. Clients have to bring in documentation of their inability to pay rent or utilities such as an eviction notice or utility final notice, lease agreement, etc. Once the case manager collects all required information (including records from Palm Beach County HMIS), the case is submitted to the Director of Program for review and approval. Once approved, a check will be given to the vendor and the case manager will notify client.

### 2. How the applicant will keep these families informed on the status of their request for assistance.

The case manager is responsible for keeping the families informed on the status of their request for assistance. Usually, during this process the case manager contacts the client on a daily basis.

# 3. The eligible grant funded services to be provided, and the specific housing cost to be covered by the direct financial assistance.

The Family Preservation & Economic Stabilization program will provide the following grant funded services: Case Management, financial assistance with past due mortgage, rent and utilities, and referrals for other services in our community. In addition to these services, families in the program will receive food, clothing, toiletries, diapers and transportation to social or medical appointments. These services will help improve their quality of life and lower their expenses. As a requirement, every client that receives assistance with mortgage, rent or utilities has to attend the FWCC Financial Literacy Workshops. The total amount allocated for direct financial assistance will be \$53,900 or 77% of the total grant requested.

# 4. How the grantee will provide case management reviews to document family eligibility and housing stability plan.

As mentioned on question # 1, one of the first steps during the intake process is to create an action plan with goals that will help the client move out of a crisis and work towards becoming self-sufficient and financially stable. This is one of the most important components of the program. FWCC strongly believes in empowering people and not enabling them. By helping the clients accomplish their goals, we are helping them become self-sufficient and helping them avoid homelessness. All clients' information including the action plan is added to the FWCC data base. The Director of Program regularly monitors this database to ensure that clients are working towards meeting their goals. On average each client stays in the program for a period of 368 days.

# 5. Describe any preference, or priorities used to select eligible families to be assisted, and how those references or priorities shall be determined/documented.

In order for families to qualify for our programs and services, more than 50% of their income has to come from farm work and their total household income has to be below the poverty guideline. In most cases families are coming to us because the harvesting season ended and they become unemployed. Priorities will be given to those families showing proof that they will be able to continue making payments to their rent, mortgage or utilities.

#### 6. The number of families to be assisted.

This grant will allow FWCC to provide services to at least 35 unduplicated households.

### 7. How often a family can apply and receive assistance and the limit on the number of times a family will be assisted.

Families can apply and receive assistance only once a year.

# 8. The maximum level of direct financial assistance to be provided to an eligible household under the grant award, as well as the estimated average cost per family served.

The maximum level of direct financial assistance to be provided to an eligible household under this grant is \$2,500. The average cost per family served will be \$1,540.

# 9. The content of each applicant's case file used to establish the family's eligibility for assistance.

Each applicant's case file will contain the following documents:

Pre-screening form, intake form, monthly budget form, employment history form, household members form, case notes, service forms, referral forms, eviction notice or utility final notice, lease agreement, HMIS history, release of information form, agency/client agreement form, ID's for each household member, paystubs or letter from employer stating client's rate of pay and hours worked per week and other information as needed.

# 10. In the case of the denial of assistance, describe the process by which the family can appeal the decision.

In the case of a denial of assistance the case manager will explain to the client why the case was denied. At that time, the client will have the opportunity to appeal the decision and provide further documentation or explanation to the Director of Programs. At any time, the client can request to speak with the Director of Programs or the Executive Director about the case. If the case is denied due to eligibility requirements, the case manager will refer the case to other organizations providing this service.

# 11. Describe how your organization will track the assisted household's housing status following assistance provided under the grant award.

After providing payment assistance to a client, the case manager will continue to follow up with the family on a monthly basis for up to a year to make sure the family is housed. During that time, FWCC will continue to provide other services to the client such as distribution of food, clothing, toiletries, diapers, etc with the intent of helping them reduce their monthly expenses. All services provided to the client will be entered in the client's file and on the FWCC data base and HMIS. In addition, the case manager will monitor the client through our community HMIS system to make sure client is not asking other organization for payment assistance.

# 12. How the program will connect the family to other services and benefits they may need and be eligible to receive.

In order to help the families become self-sufficient, case manager will refer clients to other services in our community. The case manager will also follow up with the client and service providers to make sure there was a linkage of service between the two parties. FWCC believes in partnerships with other organizations to increase the number of services available to our clients. FWCC is currently a community partner of organizations such as: Department of Children and Families, Health Care District, Legal Aid Society, Center for Family Services, Caridad Center, Career Source, Catholic Charities, 211, Palm Tran, etc.

Tab 5

- Certification Regarding Lobbying
  MyFloridaMarketPlace Registration
  501(c)(3)

### Palm Beach County Board of County Commissioners

**Certification Regarding Lobbying Form** 

#### **Certification Regarding Lobbying**

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or an employee of any agency, a member of congress, an officer or employee of congress, or an employee of a member of congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of congress, an officer or employee of congress, or an employee of a member of congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature

Shelley Vana, Mayor Name of Authorized Individual

Palm Beach County Board of County Commissioners

301 North Olive Avenue, West Palm Beach, Fl 33401

Address of Organization

Attest: Sharon R. Bock Clerk and Comptroller

Ву:\_

Deputy Clerk

APPROVED AS TO FORM AND LEGAL SUFFICIENCY County Attorney

45

6/91 Date

LPZ17 Application or Contract Number

### Farmworker Coordinating Council of Palm Beach County, Inc.

# **Certification Regarding Lobbying Form**

#### **Certification Regarding Lobbying**

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or an employee of any agency, a member of congress, an officer or employee of congress, or an employee of a member of congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of congress, an officer or employee of congress, or an employee of a member of congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
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mi Signature

SERGIO M. PALACIO

Name of Authorized Individual FARMWORKER COORDINATING COUNCIL 1313 CENTRAL TERRACE, LAKE WORTH, FL 33460

Application or Contract Number

Address of Organization

### **Certification of Program in CoC Plan**

#### Certification that Prevention Program is Contained in the CoC Plan

In compliance with section 414.161(3), Florida Statutes, the homelessness prevention program to be funded must be included in the CoC plan.

As the designated lead agency for this homeless CoC planning area, I certify that the Family Preservation and to be implemented by Farmworker Coordinating Council of Palm Beach County (Name of Prevention Program) (Name of Agency)

is contained in the current approved CoC plan, as submitted for the 2013/2014 CoC competition to the U.S. Department of Housing and Urban Development

On behalf of this CoC, the above certification is made and is true and accurate. Further, I am duly authorized to make this certification on behalf of the CoC.

Name of Official:	Certifying Elizabeth Jo Miller
Title:	Chair, Palm Beach County Continuum of Care
Signature	: Clijabett Miller
Date Signed:	6/9/15

# My Florida MarketPlace Registration

### Grantee

Registration :: :: ::

Welcome, publicuser :: Logout

#### **View Vendor Detail**

General Vendor Informa	tion		
Vendor Status / Effecti	ve Date: AC /		
Vendor Name:	Paim Beach	County Board of County Commissioners	
Short Name (Does Bus Dun and Bradstreet Nu	siness As):		
Website:	Imber (DUNS): 078470481 http://www.p	bcgov.org/	
		- •	
W9 Status: DFS W9 Last Update D	Valid W-9 on		
Business Designation		4 Entity - County	
-			
		e of Business: FL	
Certified Business Enter	prise (CBE) Categorv		
Non-Minority / Non-Woman-Owned /			
Solicitations			
Registered for Sourcing: No			
Registered for VBS: No			
Special Exceptions			
Fee has been waived:		Г	
Terms of Use have not b	een agreed to:		
Reluctant Vendor			1
Reluctant Vendor:1E			
Florida Terms of Use			
Accepted:	Yes, 02/20/2014		
Accepted By:	Taruna Malhotra		
Contacts			
lide Nome			
Name Titl Alhotra, Taruna Director of Financial		Email 16 tmalhotr@pbcgov.org	
_ocations			1
241 Department of Community Se	envic Status: AC Collanse		
Sequence Number: 241	Ariba Network ID:	Order From:	
Remit To:	Bill To:	Orders: EMAIL	
Payment: USMAIL	Bill: EMAIL	Fax: null	
Email: Tmalhotr@pbcgov.org	Email: Tmalhotr@pbcgov.org	Email: Tmalhotr@pbcgov.org	
Contact: Taruna Malhotra	Fax: null	Contact: Taruna Malhotra	
	Contact: Taruna Malhotra	810 Datura Street Suite 200	
	•	810 Datura Street Suite 200	

51

810 Datura Street Suite 200	810 Datura Street Suite 200	
West Palm Beach , FL 33401 Palm Beach	West Palm Beach , FL 33401 Palm Beach	West Palm Beach , FL 33401 Palm Beach
[-] Commodity Codes		
No Commodity Codes Selected		
	Return to List	

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MyFloridaMarketPlace Vendor Registration Customer Service: 866-FLA-EPRO (866-352-3776)

# My Florida MarketPlace Registration Sub-Grantee

#### View Vendor Detail

	Vendor Information	
	Vendor Status / Effective Date:	AC /
	Vendor Name:	Farmworker Coordinating Council of Palm Beach County, Inc.
	Short Name (Does Business As): Dun and Bradstreet Number (DUNS):	Farmworker Coordinating Councl 831640271
	Website:	http://www.farmworkercouncil.org
	W9 Status: DFS W9 Last Update Date: Business Designation	Valid W-9 on File Sep 17, 2013 Not-for-Profit Corporation
		Primary Place of Business: FL
Solicitat	/ / Non-Woman-Owned / Non-SDVBE jons or Sourcing: No	
Speciai	Exceptions Fee has been waived:	
	Terms of Use have not been agreed	
23		
Rebucta	ਸੀ Vendor Reluctant Vendor:1D	
	า Vendor Reluctant Vendor:1D ferms of Use Accepted:	Yes, 06/20/2003
Florida 1 Contacte	nt Vendor Reluctant Vendor:1D ferms: of Use Accepted: Accepted By:	
Plorida 3 Contacte <b>Tew Contact</b>	nt Vendor: 1D Reluctant Vendor: 1D ferms. of Use Accepted: Accepted By: List	Yes, 06/20/2003
Plosida 1 Contacts Fiew Contact	nt Vendor: 1D Reluctant Vendor: 1D ferms. of Use Accepted: Accepted By: List	Yes, 06/20/2003
Plosida 1 Contacte liew Contact Loc. aŭom	nt Vendor: Reluctant Vendor:1D ferms of Use Accepted: Accepted By: List	Yes, 06/20/2003

# Farmworker Coordinating Council of Palm Beach County, Inc.

501 (c)( 3)

 IRS Department of the Treasury Internal Revenue Service
 P.O. Box 2508
 Cincinnati OH 45201

In reply refer to: 0248674152 Feb. 18, 2011 LTR 4168C E0 59-1830267 000000 00 00016520 BODC: TE

FARMWORKERS COORDINATING COUNCIL OF PALM BEACH COUNTY INC 1313 CENTRAL TERRACE LAKE WORTH FL 33460

1522

Employer Identification Number: 59–1830267 Person to Contact: MS IVEY Toll Free Telephone Number: 1–877–829–5500

Dear TAXPAYER:

This is in response to your Feb. 09, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in JANUARY, 1983.

Dur records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

56

0248674152 Feb. 18, 2011 LTR 4168C E0 59-1830267 000000 00 00016521

FARMWORKERS COORDINATING COUNCIL OF PALM BEACH COUNTY INC 1313 CENTRAL TERRACE LAKE WORTH FL 33460

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Michele M. Sullivar

Michele M. Sullivan, Oper. Mgr. Accounts Management Operations I