

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2016	2017	2018	2019	2020
Capital Expenditures					
Operating Costs	200,000				
External Revenue					
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	200,000				

# ADDITIONAL FTE POSITIONS (Cumulative)					
---	--	--	--	--	--

Is Item Included In Current Budget: Yes _____ No X

Budget Account No.:

Fund 0001 Dept. 148 Unit 1221 Obj. 3401 Program Code AAF11 Program Period FY16

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

Funding source is the General Fund Contingency Reserve

C. Departmental Fiscal Review:

TM
Taruna Malhotra, Assistant Department Director.

III. REVIEW COMMENTS

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

<p><u>J. P. K. C.</u> 4/4/16 OFMB ^{AK} 3/31 4/1/16</p>	<p><u>[Signature]</u> Contract Development and Control 4/6/16</p>
---	---

B. Legal Sufficiency:

[Signature]
Assistant County Attorney

C. Other Department Review:

Department Director

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

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: _____
Clerk & Comptroller Deputy Clerk

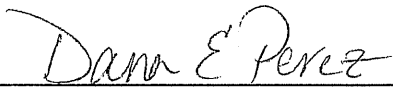
BY: _____
~~Mary Lou Berger, Mayor~~
Mary Lou Berger, Mayor

WITNESS:



Signature

Adopt-A-Family of the Palm Beaches, Inc
AGENCY's Name Typed



Name Typed

BY: 

Signature

59-2471253

Matthew Constantine

AGENCY's Federal ID Number

AGENCY's Signatory Name Typed

**APPROVED AS TO FORM AND
LEGAL SUFFICIENCY**

Executive Director
AGENCY's Signatory Title Typed

By: _____
Assistant County Attorney

**APPROVED AS TO TERMS AND
CONDITIONS Department of Community
Services**



Channell Wilkins, Director

UNITS OF SERVICES AND BUDGET ALLOCATION

Agency: Adopt-A-Family of the Palm Beaches, Inc

Definition of a Unit of Service for The Lewis Center	Number of Units of Service	Cost Per Unit of Service
<p>Mobilization- Start up for this contract period at the Lewis Center. Mobilization funds must be expended on Lewis Center eligible activities as defined by Scope of Work. Any mobilization funds approved by the COUNTY to be carried forward through a contract extension will be expended on Lewis Center participants within the contract renewal period.</p>	1	\$200,000
<p>Lewis Center Operations: A unit of service is defined as one day of operation. Operations includes but is not limited to: <u>Case Management</u> which encompasses outreach, program eligibility determination, intake & assessment, data entry, housing & service plan development, case note entry, linkage & referral to community & mainstream resources, case management sessions, obtaining food vouchers, referral and linkage to housing placement, job placement assistance, legal assistance, credit repair & budgeting, financial assistance, monitoring & evaluating program participant performance, data entry into CMIS, clinical case management supervision, clinical risk management supervision, attendance of meetings & staffing, ongoing rapid re-housing aftercare, initial & ongoing professional training & certification/ licensing fees, computer, cell phone utilization, & mileage. <u>Housing Services</u> which encompasses tracking of interim bed utilization, coordination regarding on-site laundry services & onsite laundry equipment, logging & securing of participant's belongings, computer utilization by participants & computer supplies & participant supplies, coordination of hotel/motel utilization, coordination of available permanent housing options including inspections & landlord negotiations, coordination of available community resources.</p> <p><u>Housing Services</u>-75% do not re-enter the emergency services system.</p> <p><u>Engagement:</u> activities that build relationships with homeless persons and families, data entry into database. <u>Operation</u> services encompass conducting & evaluating background screenings, hiring & supervision of Lewis Center Staff, coordination with Gulfstream Goodwill regarding screening for weapons, hot box (bed bugs) utilization, day to day operations with on-site services, attendance at neighborhood meetings and issues addressed at neighborhood meetings, marketing The Lewis Center, conducting outreach to</p>	365	\$2,089.97

Definition of a Unit of Service for The Lewis Center	Number of Units of Service	Cost Per Unit of Service
provide community education, attendance at agency, Lewis Center, and/or homeless service provider meetings, preparation and distribution of reports as required, development and oversight of Policies and Procedures for The Lewis Center Family Services. <u>Transportation</u> services encompass conducting travel for participants, fuel, insurance, ongoing maintenance and tracking and recording of mileage as well as obtaining bus passes and gas vouchers. <u>Navigation</u> services including but not limited to: Referral services for at-risk and homeless families and individuals to the Homeless Resource Center, activities that build relationship with homeless persons, intake, linkage & referral to community & mainstream resources, data entry into CMIS, conducting outreach to provide community education, development and oversight of Policies and Procedures for the HRC Navigation Services.		
Administration: A unit of service is defined as a day of operation. Administrative services encompass: participation in neighborhood meetings, conducting or participating in The Lewis Center related fund raising events, evaluation of fiscal, grant, CMIS, and funding reports as required, grant writing and budget preparation (to support housing programs/interventions to benefit The Lewis Center clients, payment of leases & utilities, general fiscal accounting and auditing of expenditures, supervision of staff, internal organizational meetings, cell phone utilization, and mileage.	251	\$504.35

BUDGET ALLOCATIONS:

Mobilization Authorized	\$200,000
Lewis Center Operations Authorized	\$762,839
Hotel/Motel Authorized	\$323,583
Leasing and Utility (Off Site) Authorized	\$95,085
Family Reunification Authorized	\$11,000
Administration Authorized	\$126,592
Total Authorized	\$1,519,099

Unit Cost expenses shall mean the actual expenses as authorized by the COUNTY pursuant to this contract, and reasonably incurred by AGENCY directly in connection with AGENCYs performance of its duties and Scope of Work pursuant to this Contract. AGENCY will sustain the program for the full contract period regardless of the rate of expenditure of above funds. Reimbursement for leasing costs will be based on actual costs not to exceed current Fair Market Rent (FMR). Reimbursement for security and utility deposits will be based on actual costs. Back-up documentation for actual expenditures will be reviewed during desk audits and on-site monitoring.

Summary of Certificates

This report displays detailed Certificate of Insurance information for a selected Insured. Any items shown in red are deficient. Click on the Insured Name to update to contact information.

Wednesday, March 16, 2016

[Images](#)

[Contracts](#)

Insured: Adopt-A-Family of the Palm Beaches, Inc. **Insured ID:** 002FAA03FY15

Status: Compliant

ITS Account Number: PLC1274

Project(s): Palm Beach County - Community Services

Insurance Policy	Required	Provided	Override
<u>General Liability</u>			
Expiration: 12/7/2016			
General Aggregate:	\$1,000,000	\$3,000,000	
Products - Completed Operations Aggregate:	\$0	\$0	
Personal And Advertising Injury:	\$0	\$0	
Each Occurrence:	\$1,000,000	\$1,000,000	
Fire Damage:	\$0	\$0	
Medical Expense:	\$0	\$0	
<u>Automobile Liability</u>			
Expiration: 12/7/2016			
	All Owned Autos Hired Autos Non-Owned Autos	Any Auto not provided Hired Autos Non-Owned Autos	X
Combined Single Limit:	\$1,000,000	\$1,000,000	
<u>Workers Compensation/Employers Liability</u>			
Expiration: 12/22/2016			
<u>Professional Liability</u>			
Expiration: 12/7/2016			
Each Occurrence:	\$1,000,000	\$1,000,000	
Aggregate Limit:	\$1,000,000	\$3,000,000	

Notifications

There were no deficiency letters issued.

Do you have an updated Certificate? Click the button below to submit a Certificate.

[Certificate Submittal](#)



ADOPT-A-FAMILY

of the Palm Beaches, Inc.

1712 Second Avenue North, Lake Worth, FL 33460-3210
Tel: 561-253-1361 • Fax: 561/253-1370 • www.adoptafamilypbc.org

NON-DISCRIMINATION POLICY

Adopt-A-Family of the Palm Beaches, Inc. is committed to the spirit and letter of all federal, state, and local laws and regulations pertaining to the equal opportunities of individuals without regard to race, color, national origin, religion, gender identity and expression, ancestry, sex, age, familial status, marital status, sexual orientation, disability, genetic information, pregnancy, and other medical conditions related to pregnancy, amnesty or status as a covered veteran in accordance with applicable federal, state and local laws. This policy extends to all terms, conditions and privileges of employment as well as the use of all facilities of Adopt-A-Family of the Palm Beaches. No form of unlawful discrimination, including unlawful harassment, will be tolerated.

NON-DISCRIMINATION POLICY

Pursuant to Resolution R-2014-1421, as may be amended, it is the policy of the Board of County Commissioners of Palm Beach County that Palm Beach County shall not conduct business with nor appropriate any funds to any organization that practices discrimination on the basis of race, color, national origin, religion, ancestry, sex, age, familial status, marital status, sexual orientation, gender identity and expression, disability, or genetic information.

All entities doing business with Palm Beach County are required to submit a copy of their non-discrimination policy which shall be consistent with the policy of Palm Beach County stated above, prior to entering into any contract with Palm Beach County. In the event an entity does not have a written non-discrimination policy, such entity shall be required to sign a statement affirming their non-discrimination policy is in conformance with Palm Beach County's policy.

Check one:

Adopt-A-Family (company name) hereby attaches its non-discrimination policy which is consistent with the policy of Palm Beach County, or

_____ (company name) does not have a written non-discrimination policy; however Company affirms that its non-discrimination policy is in conformance with the above.

COMPANY:

Matthew Constantine
Signature

Matthew Constantine
Name (type or print)

CEO
Title

16 - 0699

BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
BUDGET TRANSFER

BGEX - 148 - 020916*927

FUND (0001) - General Fund

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET AS OF 02/09/2016	EXPENDED/ ENCUMBERED	REMAINING BALANCE
EXPENDITURE								
148 1221 3401	Other Contractual Services	3,759,314	3,759,314	200,000		3,959,314	3,685,256	274,058
820 9900 9901	Contingency Reserves	20,775,190	19,748,849		200,000	19,548,849	0	19,548,849
Total Expenditures		1,175,064,887	1,181,241,710	200,000	200,000	1,181,241,710		

Signatures

Date

By Board of County Commissioners
At Meeting on April 19, 2016

COMMUNITY SERVICES

INITIATING DEPARTMENT/DIVISION Channel Wilkins

Administration/Budget Department Approval

OFMB Department - Posted

May
[Signature]

3/30/16
4/4/16

Deputy Clerk to the
Board of County Commissioners

Attachment #

2