PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: Jun	e 21, 2016	[X] []	Consent Ordinance	[]	Regular Public Hearing
	Community Human Serv	Servic	es	L	1	rublic Hearing
I. EXECUTIVE BRIEF						
2015, through Septe	ices with The ember 30, 20	Salvati 16, to	ion Army (R20 reallocate bud)15. dge	-142 t be	mendment No. 1 to Contract (0), for the period October 1, tween service programs, to or at risk of homelessness.
homeless men at the funding of \$38,500 Assistance, Life Skil providing essential Department of Housi Department of Commuch needed services	The Salvation Center of Howell be reall less than the services for the services and Urbar munity Services to clients a	n Army ope. The located and Ute individen Devel es dete trisk of	y to continue te Evaluations to Salaries, tilities. These uals in emero opment (HUD ermined that re f being homele	to Bu Bu gen). [eall ess	pro udge uildir udge socy s Both ocat	allocations. The reallocation vide emergency shelter to t line has been removed and ing Insurance, Employment sted line items are used for shelters as defined by the The Salvation Army and the ling the funds would provide e annual contract allocation Services) Countywide (HH)
Background and Justification: The Department of Economic Sustainability received \$522,853 in funding from the Department of Housing and Urban Development. Undertaking of this Program has been a collaborative effort between the Community Services Department and the Department of Economic Sustainability.						
Attachments: Amer			he Salvation A	۲rm	ny	
Recommended By:	Department	Direct	or		_ = = =	<u>6 / i / /6</u> Date
Approved By:	Assistant C	ounty A	Boldo Administrato	r)	10/16/16 Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2016	2017	2018	2019	2020
Capital Expenditures					
Operating Costs					
External Revenue					
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT					
# ADDITIONAL FTE POSITIONS (Cumulative)					
Is Item Included In Curre Budget Account No.: Fund 1101 Dept. 143 Unit		·		Program Per	riod: <u>GY15</u>
B. Recommended So Funding Source is t through the Emerge	he U.S. Departme	nt of Hou	of Fiscal In sing and Urb	npact: pan Develop	oment
C. Departmental Fisc		Malhotra	, Assistant D	Department l	 Director
A. OFMB Fiscal and/o	III. REVIE			Comments	s :
JEMB ET 403	1/1/16 Lin	Contra	act Developm	Jawban ment and Co	ontrol 5
B. Legal Sufficiency:	. , ,		1. 10-		
Assistant County At	torney				
C. Other Department	Review:				
Department Directo	or				

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

AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES

THIS AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES (R2015-1	420)
	day
of, 2016 by and between PALM BEACH COUNTY, a political	•
subdivision of the State of Florida, by and through its Board of County Commission	ners.
hereinafter referred to as "COUNTY" and The Salvation Army, A Georgia Corporat	ion.
hereinafter referred to as the "AGENCY", a not-for-profit corporation, entitled to do	*
business in the State of Florida, whose address is 2100 Palm Beach Lakes Boulev	/ard.
West Palm Beach Florida 33401.	,

WITNESSETH:

WHEREAS, the AGENCY has agreed to provide emergency shelter to homeless men at the Center of Hope; and

WHEREAS, the need exists to amend the current line item allocations.

NOW THEREFORE, the above named parties hereby mutually agree that the Contract entered into on October 20, 2015 is hereby amended as follows:

- I. Exhibit "A" Section II. A. is hereby amended to replace the contents of the this section with the following:
 - A. Provide up to \$93,000 in funding. The County agrees to reimburse the Agency for Emergency Shelter. The total shall not exceed \$93,000 in funding for the following budget line items:

Budget Line Item Description	Amount
Emergency Shelter	
Salaries	\$49,900
Fringe Benefits	\$2,500
Building Insurance	\$7,500
Employment Assistance	\$3,000
Life Skills	\$500
Furniture	\$2,000
Food	\$15,000
Occupancy	\$4,000
Utilities	\$8,600
TOTAL:	\$93,000

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Attachment #	£	
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OTHER PROVISIONS:

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

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:	BY: Mary Lou Berger, Mayor
WITNESS:	AGENCY:
Barne Canacy Signature	The Salvation Army, A Georgia Corporation AGENCY's Name Typed
Bonnee Cassedy Name Typed	BY:Signature
58-0660607	Kenneth Johnson
AGENCY's Federal ID Number	AGENCY's Signatory Name Typed
APPROVED AS TO FORM AND LEGAL SUFFICIENCY By: Assistant County Attorney	Florida Divisional Commander AGENCY's Signatory Title Typed APPROVED AS TO TERMS AND CONDITIONS Department of Community Services
	Channell Wilkins, Director

Simple View

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 contact information.

Monday, May 16, 2016

Images

Contracts

Insured:

The Salvation Army, a Georgia Corporation

Insured ID: 041HS0215-PBC

Status:

Compliant (with overrides)

ITS Account Number:

PLC1523

Project(s):

Palm Beach County - Community Services

Insurance Policy	Required	Provided	<u>Override</u>
General Liability Expiration: 1/1/2017			
General Aggregate:	\$1,000,000	\$500,000	X
Products - Completed Operations Aggregate:	\$1,000,000	\$500,000	X
Personal And Advertising Injury:	\$1,000,000	\$500,000	X
Each Occurrence:	\$1,000,000	\$500,000	x
Fire Damage:	\$0	* \$0	
Medical Expense:	\$0	\$0	
Automobile Liability Expiration: 1/1/2017	All Owned Autos Hired Autos Non-Owned Autos	Any Auto not provided not provided not provided	X X X
Combined Single Limit:	\$1,000,000	\$100,000	X
Excess/Umbrella Liability Expiration: 1/1/2017			
Each Occurrence:	\$0	\$3,000,000	
Aggregate Limit:	\$0	\$3,000,000	•
Workers Compensation/Employers Liability	WC Stat. Limits	WC Stat. Limits	
Expiration: 1/1/2017			
Each Accident:	\$100,000	\$1,000,000	
Disease - Policy Limit:	\$500,000	\$1,000,000	
Disease - Each Employee:	\$100,000	\$1,000,000	

Notifications

There were no deficiency letters issued.

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

 $https://its.insurancetrackingservices.com/clientreports/ProblemsSpecificRpt.asp? Vendor = 1... \ \ 5/16/2016$

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: June 6, 2016

REQUESTED BY: Shairette Major PHONE: 561-233-3679 PROJECT TITLE: The Salvation Army PROJECT NO.: n/a ORIGINAL CONTRACT AMOUNT: \$93,000 BCC RESOLUTION#: R2015-1420 **CONSULTANT/CONTRACTOR:** Community Services PROVIDE A BRIEF STATEMENT OF THE SCOPE OF SERVICES TO BE PROVIDED BY THE CONSULTANT/CONTRACTOR: This amendment amends line item allocations. The Evaluations budget line has been removed and funding of \$38,500 will be reallocated to Salaries, Building and Insurance, Employment Assistance, Life Skills, Furniture and Utilities. Palm Beach County Community Services manages The Salvation Army sub recipient agreement funded in FY 2015-2016 under the Emergency Solutions Grant Program. The annual contract allocation remains at \$93.000. WILL THIS AMENDMENT CHANGE THE ESTIMATED COAST OF THE PROJECT? IF YES, PROVIDE ESTIMATES OF THE NEW COSTS: **CONSTRUCTION: \$-0-**PROFESSIONAL SERVICES: \$-0-STAFF COSTS: \$-0-**EQUIP./SUPPLIES: \$-0-CONTINGENCY: \$-0-TOTAL: \$-0-BUDGET ACCOUNT NUMBER (IF KNOWN) FUND:** 1101 **DEPT:** 143 **UNIT:** 1435 **OBJ:** 8201 PROG CODE: ES25/GY15 IDENTIFY FUNDING SOURCE (CHECK ALL THAT APPLY): \square AD VALOREM □, NON-AD VALOREM ☐ GRANT Emergency Solutions Grant - Federal Grant ☐ FEDERAL/DAVIS BACON MNO SUBJECT TO INSPECTOR GENERAL FEE **TYES** Department: Department of Egonomic Sustainability **ENCUMBRANCE NUMBER:**

Attachment # _____