## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

# AGENDA ITEM SUMMARY

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Meeting Date: I Department	March 13, 2018	[X] []	Consent Ordinance	[ ] [ ]	Regular Public Hearing
Submitted By: Submitted For: =======	Community Se Financially Ass		encies_ ====================================		

# I. EXECUTIVE BRIEF

**Motion and Title: Staff recommends motion to approve:** Amendment No. 1 to Contract for Provision of Financial Assistance with American Association of Caregiving Youth, Inc. (AACY) (R2017-1627), for the period October 1, 2017, through September 30, 2020, to amend the cost unit rate and number of clients served, for the provision of behavioral health care management services for youth.

**Summary:** Amendment No. 1 is necessary in order to increase the cost unit rate and adjust the number of clients served. AACY works with middle and high school students who are caregiving youth currently caring for a family member with a physical and/or mental health condition. Many of the youths experience high level of stress, anxiety, and/or depression. AACY provides behavioral health support in school, out of school and at home. This amendment will allow AACY to increase support services to youth with on-going care management and behavioral health intervention. No additional County funds are required. (Financially Assisted Agencies) <u>Countywide</u> (HH)

**Background and Justification:** In providing for human service needs, Palm Beach County augments its own service mix through the provision of funding for programming and services delivered by community-based agencies. The FAA Program was established in the early 1980s to overcome the adverse impact of reduced federal funding. It is now an important component of the federal, state, and local funding sources that support the County's system of care. The Board of County Commissioners has directed staff to pursue data-driven, evidence-based programming and outcome measures that ensure effective changes in the lives of those in our community. Funded organizations are monitored by the Community Services Department to maintain programmatic and fiscal accountability. Contracts include the following safeguards to protect the County: insurance coverage is mandatory, funds are paid out on a unit cost basis, and funds cannot be used to initiate or to pursue litigation against the County.

Attachments: Amendment No. 1 to Contract for Provision of Financial Assistance (1)

Recommended By:		2/21/18
	Department Director	´ Date
Approved By:	<u>NAMAY</u> <u>Bolim</u> Assistant County Administrator	<u> </u>

# **II. FISCAL IMPACT ANALYSIS**

# A. Five Year Summary of Fiscal Impact:

Fiscal	lYears	2018	2019	2020	2021	2022
Capita	al Expenditures					
Operating Costs		0				
External Revenue						
Program Income (County)						
In-Kin	d Match (County)					
NET FISCAL IMPACT		0				
POSI	DDITIONAL FTE TIONS ulative)					
Does	n Included In Curren this item include th	~	Yes al funds? Yes	s <u>X</u> No s No	<u>x</u>	
	et Account No.: DeptUni	itObject	Progra	am Code	Program I	Period
В. С.	Recommended Sources of Funds/Summary of Fiscal Impact   No fiscal impact. Contract is being changed to adjust number of clients and the unit rate.   Departmental Fiscal Review:   Julie Dowe, Director of Finance and Support Services					
		III. REVI	EW COMMENT	ſS		
A.						
~	OFMB Fiscal and/or Contract Development and Control Comments:					
	Palyn Paly OFMB CAL	22/22	118 Contract E	Development a	Ind Control	12125
В.	Legal Sufficiency:					
	Deline Cott	rizol				

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- Assistant County Attorney
- C. Other Department Review:

Department Director

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

## AMENDMENT TO FINANCIALLY ASSISTED AGENCIES CONTRACT FOR PROVISION OF FINANCIAL ASSISTANCE

## THIS AMENDMENT TO THE FINANCIALLY ASSISTED AGENCIES CONTRACT

(R2017-1627) made and entered into in Palm Beach County Florida, on this \_\_\_\_\_ day of \_\_\_\_\_2018 by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the COUNTY, and <u>American Association of Caregiving Youth, Inc.</u>, hereinafter referred to as the AGENCY, a not-for-profit corporation authorized to do business in the State of Florida, whose Federal Tax I.D. is <u>65-0866677</u>.

# WITNESETH:

WHEREAS, the parties entered in a contract on October 17, 2017;

**WHEREAS** the AGENCY has proposed providing certain services under the <u>Service Area</u> of Behavioral Health;

**WHEREAS**, the parties agree that certain other amendments to the contract are necessary and appropriate.

**NOW THEREFORE**, the above named parties hereby mutually agree that the contract is hereby amended as follows:

- 1. So much of Exhibit A-1 for FY2018-2020 is attached hereto and made a part of hereof showing a revised SCOPE OF WORK & SERVICE UNITS and such exhibit supersedes and replaces Exhibit A.
- 2. So much of Exhibit B-1 for FY 2018-2020 is attached hereto and made a part hereof showing new units' service rate and definition and such exhibit supersedes and replaces Exhibit B.
- **3.** So much of Exhibit C-1 for FY 2018-2020 is attached hereto and made a part hereof showing Financial Reconciliation Statement and such exhibit supersedes and replaces Exhibit C.

## 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 this amendment.

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

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IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Contract on behalf of the COUNTY and 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:

Deputy Clerk

BY: \_

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Melissa McKinlay, Mayor

WITNESS:

AGENCY:

By: American Association of Caregiving

BY: <u>Geraldine Fallon</u> BY: <u>Ceraldine Fallon</u> Name Typed BY: <u>Ceraldine Fallon</u> BY: <u>Curve Sakowski</u> Signature

<u>Connie</u> Siskowski AGENCY's Signatory Name Typed

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

BY: Department Director

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

BY: \_

# Assistant County Attorney

## SCOPE OF WORK 2018 - 2020 FINANCIAL ASSISTANCE

Agency Name:	American Association of Caregiving Youth
Program Name:	Caregiving Youth Project (CYP) Behavioral Health Care
	Management
Location:	Boca Raton to West Palm Beach
Target Population:	Middle and high school students who are caregiving youth with
	high levels of stress, anxiety, and/or depression who care for a
	family member with a physical and/or mental health condition or
	for those with a physical and/or mental health condition.
Funding Priority:	Care Coordination Services

## **Overview:**

In Palm Beach County, there are more than 10,000 students who sacrifice their education, well-being and childhood to provide care for ill or disabled family members. From 6th grade through high school, the Caregiving Youth Project, in partnership with schools, assesses and provides support in-school (Skills Building groups, Lunch & Learns), out of school (camp, picnics, etc.) & at home (assessment, links to resources, respite & more) all contributing to the child's success; however, care management for students needing behavioral health interventions, especially for those who have anxiety or depression due to their circumstances. Early identification, targeted interventions and ongoing care management of behavioral health support, will result in improvement in their psycho-social well-being as they progress and remain in school, becoming confident, productive adults.

#### Services:

The Agency offers needs driven and prioritized services throughout the calendar year for caregiving youth and their families including but not limited to:

- Early identification and then formal assessment of anxiety, stress, depression and trauma
- Home visits
- Referrals to existing and new partner agencies
- Respite
- Tutoring
- Mentoring
- Skills Building including life skills and stress management
- Camp Treasure and other fun activities

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- Laptop computers
- Special projects
- Workshops for writing skills and post-secondary education planning
- Community service hours for caregiving at home
- Relationship building
- Future planning including college tours
- Monitoring and re-assessment of progress

The Agency will conduct an initial intake process with eligible participants and identifies students with high levels of anxiety based on new interview questions.

The Agency will receive consent forms from Parents for student participation.

The Agency will conduct Behavioral Health Assessment (pre and post) for clients in order to determine baseline for progress of reducing anxiety, depression and stress. Trauma identification results in immediate referral out.

The Agency will conduct periodic check-ins of existing students & identify those in need of Behavioral Health Care Management.

The Agency will conduct up to six counseling sessions with students identified in need of Behavioral Health support. As a result, referrals will be provided, as needed.

The Agency will (with parental consent) conduct a home assessment to determine and initiate appropriate referrals, including respite, and/or follow-up visits.

The Agency will provide a curriculum that will include Skills Building group sessions & other workshops. Students participate in fun and other educational activities.

The Agency will re-evaluate progress at least every 6 months of 100% of students in Behavioral Health Care Management – Ongoing evaluations identify status and potential new needs for interventions to improve well-being.

The Agency will follow up with home visits and monitor youth and family progress – Quarterly reports to family specialists and team provides results and early reinterventions as needed in 100% of students being managed.

The Agency will coordinate special projects – Records feedback from 100% of families who have received assistance and impact on anxiety/stress reduction for them; families report feeling cared about.

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# Number of Clients Served Through FAA:

65 caregiving youth

# UNITS OF SERVICE RATE AND DEFINITION

# 2018 – 2020 FINANCIAL ASSISTANCE CONTRACT

# Agency:

# American Association of Caregiving Youth

# Agency Program:

# CYP Behavioral Health Care Management

Description	Unit Cost	Total FY18	Total FY19	Total FY20	Total 3 Year Contract Amount
A unit of service is defined as an hour of staff time in direct client services.	\$78.00	\$37,500	\$37,500	\$37,500	\$112,500
Total Contract over a three (3) year period					\$112,500

The AGENCY is allowed to expend up to \$4,000 for initial certification or \$1,500 for the annual renewal fee every year of the contract. This option exercised by the agency will be taken from the approved budget thus reducing the number of units to be provided. Certification is a requirement of contracting with the COUNTY as referenced in Article 14 of this contract.

## FINANCIAL RECONCILIATION STATEMENT

As required by the provisions of the Agreement/Contract between Palm Beach County ("the COUNTY") and Agency Name ("Agency") [Contract Number] effective \_\_\_\_\_

\_\_\_\_\_, 201\_\_, for \_\_\_[describe subject of Agreement/Contract], attached is a final financial reconciliation of the funds provided by COUNTY.

As shown in the attached (mark applicable box):

□ All funds provided by Palm Beach County were spent in accordance with the provisions of the Agreement/Contract; and total administrative expenses did not exceed fifteen percent (15%)

OR

□ There were under expenditures in the amount of \$\_\_\_\_\_, which pursuant to the Contract/Agreement, will be returned to Palm Beach County by \_\_\_\_\_ [date]; all other funds were spent in accordance with the provisions of the Agreement/Contract.

The undersigned states that he/she is the CFO or other individual dually authorized as stipulated in the contract to sign this type of document. The information attached is a true and accurate representation of the expenditure of Palm Beach County funds under the Agreement/Contract.

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Signature

Date

Print Name

# **Summary of Certificates**

# This report displays detailed Certificate of Insurance information for a selected Insured. Any items shown in red are deficient.

Wednesday, January 10, 2018 Simple View Certificate Images Documents American Association of Caregiving Youth, Insured: Insured ID: 070FAA01FY18 Inc. Status: Compliant **ITS Account Number:** PLC2862 Project(s): Palm Beach County - Community Services Override **Insurance Policy** Required Provided **General Liability** Expiration: 4/22/2018 \$3,000,000 \$500,000 **General Aggregate: Products - Completed Operations** \$500,000 \$3,000,000 Aggregate: \$500,000 \$1,000,000 Personal And Advertising Injury: \$500,000 \$1,000,000 Each Occurrence: \$0 \$0 Fire Damage: **Medical Expense:** \$0 \$0 Х **All Owned Autos** not provided Automobile Liability **Hired Autos Hired Autos** Expiration: 4/22/2018 **Non-Owned Autos Non-Owned Autos Combined Single Limit:** \$500,000 \$1,000,000 WC Stat. Limits WC Stat. Limits Workers Compensation/Employers Liability Expiration: 12/9/2018 \$100,000 \$0 **Each Accident:** \$500,000 **Disease - Policy Limit:** \$0 \$0 \$100,000 **Disease - Each Employee: Professional Liability** Expiration: 4/22/2018 Each Occurrence: \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 **Aggregate Limit:** 

Notifications (Show All)

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... 1/10/2018