#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

#### **AGENDA ITEM SUMMARY**

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Meeting Date: October 16, 2018 Department Submitted By: <u>Community Serv</u> Submitted For: <u>Ryan White Prog</u>		[X] []	Consent Ordinance	[ ]	Regular   Public Hearing				
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### I. EXECUTIVE BRIEF

**Motion and Title: Staff recommends motion to ratify:** the signature of the Mayor on the Ryan White Part A HIV Emergency Relief Grant Program application with the U.S. Department of Health and Human Services, Health Resources Services Administration (HRSA), for the period of March 1, 2019 through February 29, 2020, in the amount of \$7,796,721.

**Summary:** The Ryan White Part A HIV Emergency Relief Grant Program application in the amount of \$7,796,721 was submitted to HRSA on September 18, 2018. The grant highlights the need to maintain all existing programs. This grant will allow the Community Services Department to continue providing needed medical and support services to Palm Beach County residents living with HIV/AIDS. HRSA released the application guidance with instructions to return no later than September 21, 2018 to avoid any delays due to the complexities of the online submission process. The emergency signature process was utilized because there was insufficient time to submit this item through the regular agenda process. **No County match is required.** (Ryan White Program) <u>Countywide (HH)</u>

**Background and Justification:** Palm Beach County Board of County Commissioners has been receiving this grant since 1994 and has assisted thousands of persons living with HIV/AIDS with medical and support services.

Attachments: Grant Application with Walkthrough Memo

**Recommended By:** partment Director **Approved By:** 

# **II. FISCAL IMPACT ANALYSIS**

### A. Five Year Summary of Fiscal Impact:

Fiscal Years	2019	2020	2021	2022	2023
Capital Expenditures					
Operating Costs	4,548,088	3,248,633			
External Revenue	(4,548,088)	(3,248,633)			
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	0	0			

No. ADDITIONAL FTE POSITIONS (Cumulative)

Is Item Included In Current Budget?	Yes X	Νο
Does this item include the use of federal funds?	Yes X	No

Budget Account No.:

Fund <u>1010</u> Dept <u>142</u> Unit <u>VAR</u> Object <u>VAR</u> Program Code <u>VAR</u> Program Period <u>GY19</u>

- B. Recommended Sources of Funds/Summary of Fiscal Impact: Funding source is the Department of Health and Human Services. No County funding is required
- C. Departmental Fiscal Review:

Julie Dowe, Director, Financial & Support Svcs.

## **III. REVIEW COMMENTS**

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

10/3/15 "<u>0][</u>0 羽吻2 Contract Development and Control lio

B. Legal Sufficiency:

<u>fo-10-18</u> Assistant County

C. Other Department Review:

Department Director

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