

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY**

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Meeting Date: October 8, 2019	<input checked="" type="checkbox"/> [X]	Consent	<input type="checkbox"/> []	Regular
	<input type="checkbox"/> []	Ordinance	<input type="checkbox"/> []	Public Hearing

Department: Department of Public Safety
Submitted By: Department of Public Safety
Submitted For: Division of Victim Services

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I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to receive and file: three (3) Grant Adjustment Notices (GAN) #005 New Point of Contact Information; #006 Budget Modification; and #007 Change Project Period with the U.S. Department of Justice (DOJ), Office of Justice Programs (OJP) Multidisciplinary Response to Families and Communities in Complex Homicide Cases grant award (2016-XV-GX-K018), which facilitated administrative filings and approvals through October 31, 2019.

Summary: As per grant guidelines, certain expenditures and work product require approval from the DOJ OJP grant manager. The approval process is facilitated by drafting a GAN and submitting it through the DOJ's Grant Management System (GMS) web portal. GAN #005 changed the point of contact from Nicole Bishop, Director to Holly DiBenedetto, Program Manager. GAN #006 approved a budget modification to increase costs related to travel and supplies. Vests, polo shirts, raincoats, and flashlights are needed for staff who respond to crime scenes. Those items ensure staff safety and identifies the Victim Advocate to law enforcement. GAN #007 approved a one-year no-cost extension of the award period to September 30, 2020, which will allow for completion of projects in relation to the goals and objectives of the grant. R2017-0477 authorized the County Administrator or designee to execute future amendments and partner agreements associated with the current grant on behalf of the Board of County Commissioners, after approval of legal sufficiency by the County Attorney's Office, and within budgeted allocations. Countywide (SF)

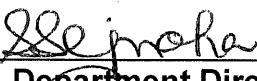
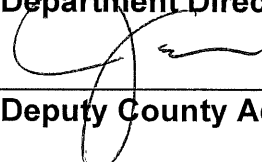
Background and Justification: Impaired driving crashes are often initially treated as accidents instead of crimes, which hinders the appropriate delivery of victim services, or in some cases, may lead to the absence of services altogether. The lengthy process of completing toxicology reports and related medical examiner's investigative reports, both of which are required to determine prosecutorial options, often leave families waiting for up to six months to know whether or not the impaired driver will be charged for the death of their family member(s) and are left alone in their grief, unable to be linked to resources like victim's compensation, burial assistance, evidence-based therapy, personal and legal advocacy and emergency financial assistance.

To address this concern, the County was selected as a demonstration site to develop and institutionalize a multi-disciplinary approach to responding to deaths involving DUI or Impaired Driving and to meet the needs of survivors/victims through trauma-informed and victim-centered approaches. **Continued on Page 3**

Attachments:

- 1) Grant Adjustment Notice 005, U.S. Department of Justice
- 2) Grant Adjustment Notice 006, U.S. Department of Justice
- 3) Grant Adjustment Notice 007, U.S. Department of Justice

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Recommended By:		9/16/19
	Department Director	Date
Approved By:		10-1-19
	Deputy County Administrator	Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
Net Fiscal Impact	_____*	_____	_____	_____	_____

ADDITIONAL FTE

POSITIONS (Cumulative) _____

Is Item Included In Current Budget? Yes _____ No _____
Does this item include the use of federal funds? Yes _____ No _____
Budget Account Exp No: Fund _____ Department _____ Unit _____ Object _____
Rev No: Fund _____ Department _____ Unit _____ Rev Source _____

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

Grant:

Fund:

Unit:

*There is no fiscal impact associated with this agenda item.

Departmental Fiscal Review: (NC) [Signature] 9/23/19

III. REVIEW COMMENTS

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

[Signature] 9/23/19
OFMB OC 9/19 CH 9/20

[Signature] 9/24/19
Contract Administration
9/23/19 TW

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.

Background and Justification: The County was awarded \$579,965 to fund this project for a 36-month term beginning October 1, 2016 through September 30, 2019. The grant provides funding for Florida State University to serve as the project research partner, Mother's Against Drunk Driving to assist with death notification training, and two County positions.



Update Contact GAN



All Active

Change Requested

Approved

Denied

Draft

Create Grant Adjustment

Help/Frequently Asked Questions



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information			
Grantee Name:	Palm Beach County Board of County Commissioners	Project Period:	10/01/2016 - 09/30/2020
Grantee Address:	301 N. Olive Avenue West Palm Beach, 33401	Program Office:	OVC
Grantee DUNS Number:	07-847-0481	Grant Manager:	Mary Atlas-Terry
Grantee EIN:	59-6000785	Application Number(s):	2016-40314-FL-XV
Vendor #:	596000078	Award Number:	2016-XV-GX-K018
Project Title:	Palm Beach County's Enhanced Response to DUI/Impaired Driving Related Deaths	Award Amount:	\$579,965.00

Update Contact																																																																	
Contact																																																																	
Either New Point of Contact Information or New Alternate Point of Contact Information is required.																																																																	
Current Point of Contact Information	New Point of Contact Information																																																																
<table><tr><td>Prefix</td><td>Mrs.</td></tr><tr><td>Prefix (Other)</td><td></td></tr><tr><td>First Name</td><td>Nicole</td></tr><tr><td>Middle Initial</td><td>A</td></tr><tr><td>Last Name</td><td>Bishop</td></tr><tr><td>Suffix</td><td></td></tr><tr><td>Suffix (Other)</td><td></td></tr><tr><td>Title</td><td>Director, Victim Services</td></tr><tr><td>Address Line 1</td><td>205 North Dixie Highway</td></tr><tr><td>Address Line 2</td><td>Suite 5.1100</td></tr><tr><td>City</td><td>West Palm Beach</td></tr><tr><td>State</td><td>Florida</td></tr><tr><td>Zip</td><td>33401 -</td></tr><tr><td>Phone</td><td>(561) 355-1723 Ext</td></tr><tr><td>Fax</td><td>(561) 355-2757</td></tr><tr><td>Email</td><td>nbishop@pbcgov.org</td></tr></table>	Prefix	Mrs.	Prefix (Other)		First Name	Nicole	Middle Initial	A	Last Name	Bishop	Suffix		Suffix (Other)		Title	Director, Victim Services	Address Line 1	205 North Dixie Highway	Address Line 2	Suite 5.1100	City	West Palm Beach	State	Florida	Zip	33401 -	Phone	(561) 355-1723 Ext	Fax	(561) 355-2757	Email	nbishop@pbcgov.org	<table><tr><td>*Prefix</td><td>Ms.</td></tr><tr><td>Prefix (Other)</td><td></td></tr><tr><td>*First Name</td><td>Holly</td></tr><tr><td>Middle Initial</td><td>A</td></tr><tr><td>*Last Name</td><td>DiBenedetto</td></tr><tr><td>Suffix</td><td></td></tr><tr><td>Suffix (Other)</td><td></td></tr><tr><td>*Title</td><td>Program Manager</td></tr><tr><td>*Address Line 1</td><td>205 N. Dixie Highway</td></tr><tr><td>Address Line 2</td><td>Suite 5.1100</td></tr><tr><td>*City</td><td>West Palm Beach</td></tr><tr><td>*State</td><td>Florida</td></tr><tr><td>*Zip</td><td>33401 -</td></tr><tr><td>*Phone</td><td>(561) 274-1500 Ext</td></tr><tr><td>Fax</td><td>(561) 274-1511</td></tr><tr><td>*Email</td><td>hdibened@pbcgov.org</td></tr></table>	*Prefix	Ms.	Prefix (Other)		*First Name	Holly	Middle Initial	A	*Last Name	DiBenedetto	Suffix		Suffix (Other)		*Title	Program Manager	*Address Line 1	205 N. Dixie Highway	Address Line 2	Suite 5.1100	*City	West Palm Beach	*State	Florida	*Zip	33401 -	*Phone	(561) 274-1500 Ext	Fax	(561) 274-1511	*Email	hdibened@pbcgov.org
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Fax	(561) 274-1511																																																																
*Email	hdibened@pbcgov.org																																																																
Alternate Contact/Principal Investigator																																																																	
Current Alternate Point of Contact Information	New Alternate Point of Contact Information																																																																

		*Prefix	Chairman
Prefix	Chairman	Prefix (Other)	
Prefix (Other)		*First Name	
First Name		Middle Initial	
Middle Initial		*Last Name	
Last Name		Suffix	
Suffix		Suffix (Other)	
Suffix (Other)		*Title	
Title		*Address Line 1	
Address Line 1		Address Line 2	
Address Line 2		*City	
City		*State	Alabama
State	Alabama	*Zip	-
Zip	-	*Phone	Ext
Phone	Ext	Fax	
Fax		*Email	
Email			

Comments/Additional Information

Attachments:

None

Actions:

Close

Printer Friendly Version

Audit Trail:

Description:	Role:	User:	Timestamp:	Note:
Approved-Final	PO - Grant Manager	AtlasM	12/04/2018 1:18 PM	View Note
Submitted	PO - Grant Manager	NBishop2	12/03/2018 10:26 AM	View Note



Modify Budget GAN



All Active

Change Requested

Approved

Denied

Draft

Create Grant Adjustment

Help/Frequently Asked Questions



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information				
Grantee Name:	Palm Beach County Board of County Commissioners	Project Period:	10/01/2016 - 09/30/2020	GAN Number: 006
Grantee Address:	301 N. Olive Avenue West Palm Beach, 33401	Program Office:	OVC	Date: 03/28/2019
Grantee DUNS Number:	07-847-0481	Grant Manager:	Mary Atlas-Terry	
Grantee EIN:	59-6000785	Application Number(s):	2016-40314-FL-XV	
Vendor #:	596000078	Award Number:	2016-XV-GX-K018	
Project Title:	Palm Beach County's Enhanced Response to DUI/Impaired Driving Related Deaths	Award Amount:	\$579,965.00	

Budget Modification			
* All editable Budget fields must contain a numeric value.			
Categories	Approved Budget	Requested Changes to Budget	Revised Budget
A. Personnel	\$ 260216	\$ 8974	\$ 269190
B. Fringe Benefits	\$ 119034	\$ -12277	\$ 106757
C. Travel	\$ 12774	\$ 2073	\$ 14847
D. Equipment	\$ 2800	\$ 0	\$ 2800
E. Supplies	\$ 2904	\$ 4650	\$ 7554
F. Construction	\$ 0	\$ 0	\$ 0
G. Contractual	\$ 162197	\$ 0	\$ 162197
H. Other	\$ 20040	\$ -3420	\$ 16620
TOTAL DIRECT COST	\$ 579965	\$ 0	\$ 579965
Total Direct Costs = (Sum of lines A-H)			
INDIRECT COST	\$ 0	\$ 0	\$ 0
TOTAL PROJECT COST	\$ 579965	\$ 0	\$ 579965
Total Project Costs = Total Direct Costs + Indirect Cost			

Total Project Costs = Federal Funds Approved + Non-Federal Funds + Program Income

FEDERAL FUNDS APPROVED	\$579965		\$579965
NON-FEDERAL FUNDS APPROVED	\$0	\$0	\$0
PROGRAM INCOME	\$0	\$0	\$0

*Required Justification for Budget Modification

Please review the budget that was uploaded on Feb 15, 2019. Budget modification was needed to increase costs related to travel and supplies. Vests, polo shirts, raincoats and flashlights are needed for staff who respond to

Attachments:

Filename:	User:	Timestamp:	Action:
Copy of DUImpaired driving Budget Detail Worksheet and Narrative Revised 3.6.19.pdf	NBishop2	03/07/2019 1:12 PM	Delete Attachment

Actions:

Close

Printer Friendly Version

Audit Trail:

Description:	Role:	User:	Timestamp:	Note:
Approved-Final	OCFMD - Supervisor	nguyenk	03/28/2019 1:46 PM	View Note
Submitted	PO - Grant Manager	NBishop2	03/07/2019 1:13 PM	View Note
Draft	EXTERNAL - External User	NBishop2	03/07/2019 1:13 PM	View Note
Change Requested	PO - Grant Manager	AtlasM	03/05/2019 4:47 PM	View Note
Change Requested	EXTERNAL - External User	AtlasM	03/05/2019 4:47 PM	View Note
Submitted	PO - Grant Manager	NBishop2	02/28/2019 10:18 AM	View Note
Change Requested	PO - Grant Manager	AtlasM	02/26/2019 1:51 PM	View Note
Change Requested	EXTERNAL - External User	AtlasM	02/26/2019 1:51 PM	View Note
Submitted	PO - Grant Manager	NBishop2	02/19/2019 11:38 AM	View Note
Draft	EXTERNAL - External User	NBishop2	02/19/2019 11:37 AM	View Note
Draft	EXTERNAL - External User	NBishop2	02/19/2019 11:34 AM	View Note
Change Requested	EXTERNAL - External User	AtlasM	02/19/2019 11:01 AM	View Note
Change Requested	PO - Grant Manager	AtlasM	02/19/2019 11:01 AM	View Note
Submitted	PO - Grant Manager	NBishop2	02/15/2019 3:29 PM	View Note
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Change Requested	PO - Grant Manager	AtlasM	02/11/2019 11:59 AM	View Note
Change Requested	PO - Grant Manager	AtlasM	01/24/2019 2:00 PM	View Note
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Submitted	PO - Grant Manager	NBishop2	12/03/2018 10:12 AM	View Note
Draft	EXTERNAL - External User	NBishop2	12/03/2018 10:11 AM	View Note



Change Project Period GAN



All Active

Change Requested

Approved

Denied

Draft

Create Grant Adjustment

Help/Frequently Asked Questions



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information				
Grantee Name:	Palm Beach County Board of County Commissioners	Project Period:	10/01/2016 - 09/30/2020	GAN Number: 007
Grantee Address:	301 N. Olive Avenue West Palm Beach, 33401	Program Office:	OVC	Date: 08/01/2019
Grantee DUNS Number:	07-847-0481	Grant Manager:	Mary Atlas-Terry	
Grantee EIN:	59-6000785	Application Number(s):	2016-40314-FL-XV	
Vendor #:	596000078	Award Number:	2016-XV-GX-K018	
Project Title:	Palm Beach County's Enhanced Response to DUI/Impaired Driving Related Deaths		Award Amount:	\$579,965.00

Change Project Period			
Current Grant Period:	Month: 35 Day: 29	New Grant Period:	Month: 47 Day: 29
Project Start Date:	10/01/2016	* New Project Start Date:	10/01/2016
Project End Date:	09/30/2019	* New Project End Date:	09/30/2020

* Required Justification for Change Project Period:

The grantee is requesting a 12-month no-cost extension. The Request for the extension will allow for an expanded timeframe for completion for projects in relation to the goals and objectives of the grant. This is the first (and

Attachments:

Filename:	User:	Timestamp:	Action:
No Cost Extension signed letter.pdf	NBishop2	07/09/2019 10:23 AM	Delete Attachment
Time Task Plan- final.pdf	NBishop2	07/09/2019 10:26 AM	Delete Attachment

Actions:

Close

Printer Friendly Version

Audit Trail:

Description:	Role:	User:	Timestamp:	Note:
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Submitted	PO - Grant Manager	NBishop2	07/09/2019 10:28 AM	View Note
Draft	EXTERNAL - External User	NBishop2	07/09/2019 10:26 AM	View Note
Draft	EXTERNAL - External User	NBishop2	07/09/2019 10:23 AM	View Note

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