

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: March 9, 2021 [X] Consent [] Regular [] Ordinance [] Public Hearing
Department: Department of Public Safety
Submitted By: Department of Public Safety
Submitted For: Division of Emergency Management

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to:

- A) approve a Cost-Reimbursement Agreement with the Florida Division of Emergency Management (FDEM) for costs associated with the Emergency Management Accreditation (EMAP) Application Fee, EMAP On-Site Assessment Fee, and the EMAP Accreditation Fee;
B) authorize the County Administrator or designee to execute and approve amendments with FDEM for the above mentioned services; and
C) approve a budget amendment of \$28,500 in the Emergency Management Grant Fund to recognize the cost-reimbursement agreement.

Summary: The Palm Beach County Division of Emergency Management (DEM) received their EMAP Accreditation on October 17, 2016. The accredited status is valid for five years, after which time DEM can reapply for consecutive accreditation. This Agreement provides for the establishment of cost reimbursement of fees associated with the consecutive accreditation of a county emergency management program. The EMAP fees are currently estimated to be between \$19,500 and \$28,500, subject to the actual invoice from EMAP. Disbursement of funds under this agreement is contingent upon DEM working towards or receiving EMAP accreditation. Countywide (LDC)

Background and Justification: The (EMAP) Standard is an internationally recognized standard that focuses on public sector emergency management practices. EMAP is a voluntary set of standards, assessment, and accreditation process for disaster preparedness programs. The standard assesses the recipient's documentation and processes through all phases of emergency management. The standard requires an all-hazard and whole community approach to emergency management in-line with the priorities of DEM.

Attachments:

- 1) County EMAP Accreditation Reimbursement contract Scope of Work
2) Budget Amendment (1427)

Recommended By: [Signature] Department Director Date: 1/29/21
Approved By: [Signature] Deputy County Administrator Date: 2/9/21

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	*28,500	_____	_____	_____	_____
External Revenues	(\$28,500)	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
Net Fiscal Impact	<u>0*</u>	_____	_____	_____	_____
# 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 1427 Department 662 Unit 7406 Object 4909
 Rev No: Fund 1427 Department 662 Unit 7406 Source 3429

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

Fund: Emergency Management
 Dept: Public Safety Grants
 Unit: xxxx

*Fees are estimated between \$19,500 and \$28,500 (application \$7,500; on-site assessment \$10,000 - \$15,000; and accreditation \$2,000 - \$6,000. Budget set up at the maximum amount. If the County fails to receive or is denied accreditation, funds are due back to FDEM.

Departmental Fiscal Review: *[Signature]*

III. REVIEW COMMENTS

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

[Signature] 2/5/21
 OFMB LM
 2/3

[Signature] 2/19/21
 Contract Administration
 E-8 - E1 TW

B. Legal Sufficiency:

[Signature]
 Deputy County Attorney

C. Other Department Review:

 Department Director

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

**SCOPE OF WORK
COUNTY EMAP ACCREDITATION REIMBURSEMENT**

STATEMENT OF PURPOSE / NEED

The Florida Division of Emergency Management recognizes the value of a process for the comprehensive review of policies, procedures, and plans as it relates to emergency management programs. The Emergency Management Accreditation Program (EMAP) is an internationally recognized standard that focuses on public sector emergency management practices. This Scope of Work is for a cost-reimbursement agreement between the Florida Division of Emergency Management (Division) and **Palm Beach County** (Recipient) for costs associated with the EMAP Application Fee, EMAP On-Site Assessment Fee, and the EMAP Accreditation Fee.

The Contract Manager for the Division will be:

Glen Hammers
All Hazards Unit, Preparedness Bureau
Florida Division of Emergency Management
Telephone: 850-591-9947
Email: Glen.Hammers@em.myflorida.com

SCOPE OF WORK

EMAP is a voluntary standards, assessment, and accreditation process for disaster preparedness Programs. The standard assesses the Recipient's documentation and processes through all phases of emergency management. The standard requires an all-hazard and whole-community approach to emergency management in-line with the priorities of the Division. If a Recipient receives an "Accredited" status, it is valid for five years, after which time the Recipient must apply for reaccreditation. Recipients undergoing reaccreditation are assessed by all of the standards as thoroughly as during their initial accreditation.

This Scope of Work provides for the establishment of cost-reimbursement for fees associated with the accreditation of a county emergency management program. It establishes a direct relationship with the Recipient and the Division as it pertains to EMAP accreditation efforts.

RECIPIENT QUALIFICATIONS

1. Must be a Florida County with an established emergency management agency as defined in Section 258.38(1), Florida Statutes; and
2. Must be committed to completing, and eventually complete, the EMAP Accreditation Process.

RECIPIENT RESPONSIBILITIES

1. Coordinate its EMAP Accreditation process directly with the EMAP organization;
2. Provide the Division with estimated dates and dollar amounts associated with EMAP accreditation fees;
3. Forward official EMAP Invoices and proof of payment to the Division as it relates to the reimbursable costs below; and
4. Successfully complete the EMAP Accreditation Process under this agreement or subsequent agreement.

REIMBURSABLE COSTS

This is a cost-reimbursement agreement for the actual costs associated with EMAP Accreditation, as outlined below and stated on official EMAP invoices. Prior to reimbursement, deliverables are subject to review and acceptance by the Division. The criteria for acceptance of deliverables are based on the most recent regulations, guidelines, or directives related to the particular task and deliverable. The three reimbursable EMAP fees under this agreement are:

- **EMAP Application Fee:** Issued by EMAP after Recipient submits their application for assessment. This fee is currently estimated at \$7500, subject to the actual invoice from EMAP.
- **EMAP On-Site Assessment Fee:** Required by EMAP before the Recipient's on-site assessment. This fee is currently estimated to be between \$10,000 and \$15,000, subject to the actual invoice from EMAP.
- **EMAP Accreditation Fee:** Required by EMAP before Recipient's EMAP Accreditation is granted. This fee is currently estimated to be between \$2000 and \$6000, subject to the actual invoice from EMAP.

METHOD OF COMPENSATION

The Division will issue purchase order(s) to the Recipient based on estimated costs of the EMAP Accreditation. Actual payment will be contingent on the following:

- The Recipient provides official EMAP Invoices to the Division for review;
- The Recipient provides proof of payment for the EMAP Invoice;
- Each invoice is unique and applies to one of the three fees discussed in the "REIMBURSABLE COSTS" section; and
- The Recipient certifies they are actively working towards accreditation
- The Recipient provides proof of accreditation by EMAP as the final deliverable to close out the agreement.

Upon execution of this agreement, the Recipient may submit appropriate invoices and proof of payment to the Division for reimbursement under this agreement. The invoices do not have to be submitted together but can be submitted throughout the timeframe of this agreement.

Reimbursements will be evaluated as invoices are received by the Division. If the actual cost shown on the official EMAP invoice for that fee is greater than estimated cost on the Purchase Order for each of the three EMAP fees discussed above, the Recipient will notify the Division which will initiate an amendment process as necessary.

All requests for reimbursement must be submitted no later than 45 days prior to the end of the fiscal year to be considered under this agreement.

REQUIRED DOCUMENTATION

When submitting requests for reimbursement, the recipient is required to include the following:

- A signed letter requesting reimbursement to include which fee(s) and the requested amount;
- The official EMAP invoice(s) attached to the signed letter; and
- Proof of payment to EMAP for the attached invoice(s).

REIMBURSEMENT OF FUNDS:

Disbursement of funds under this agreement is contingent upon the Recipient working towards, or receiving, EMAP accreditation. If, after receiving funds, the Recipient fails to receive, or is denied accreditation by EMAP, or the Recipient fails to pay funds due to EMAP, all funds dispersed under this agreement will be refunded to the Division, even if the failure to receive EMAP accreditation occurs in a subsequent fiscal year.

SPECIAL TERMS AND CONDITIONS

Any requests for changes to the Statement of Work will be in writing and must set forth with the requested changes. All payments by the Division are contingent upon; (1) the Division being authorized to make said payments, and (2) the availability of sufficient funding to make the payment.

X

Palm Beach County Mayor

APPROVED AS TO TERMS
AND CONDITIONS



Stephanie Sejnoha, Director
Public Safety Department
Palm Beach County



X

Preparedness Bureau
Florida Division of Emergency Management

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

County Attorney

21-

BOARD OF COUNTY COMMISSIONERS
 PALM BEACH COUNTY, FLORIDA
 BUDGET AMENDMENT

BGRV - 662- 0122210000000000249
 BGEX - 662- 0122210000000000699

FUND 1427 - Emergency Management

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	EXPENDED/ ENCUMBERED 1/20/2021	REMAINING BALANCE
Citizen Corps								
Revenue								
1427-662-7406-3429	State Grant Other Public Safety	0	0	28,500		28,500		
	Total Revenue and Balance	137,383	165,042	28,500	0	193,542		
Expense								
1427-662-7406-4909	Licenses & Permits	0	0	28,500		28,500	0	28,500
	Total Appropriation and Expenditures	137,383	165,042	28,500	0	193,542	0	193,542

PUBLIC SAFETY ADMINISTRATION
 INITIATING DEPARTMENT/DIVISION
 Administration/Budget Department Approval
 OFMB Department - Posted

Signatures _____ Date 1/22/21

By Board of County Commissioners
 At Meeting of 3/9/2021
 Deputy Clerk to the
 Board of County Commissioners