

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:


Fiscal Years	2021	2022	2023	2024	2025
Capital Expenditures					
Operating Costs	300,000				
External Revenue	(300,000)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	0				

# ADDITIONAL FTE POSITIONS (Cumulative)					

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

Budget Account No.:
 Fund 0001 Dept. 148 Unit 1345 Object 8301 Program Code Var. Program Period GY200

B. Recommended Sources of Funds/Summary of Fiscal Impact:
 Funding source is Federal Emergency Food and Shelter National Board Program. No County match is required.

DocuSigned by:

 05AC9C7CC5BC4A4...

C. Departmental Fiscal Review: _____
 Julie Dowe, Director, Financial & Support Services

III. REVIEW COMMENTS

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

Belmont-Kawa 4/12/21
 OFMB 4-9-21 4/12 @ u/a

Ann S. Jacobson 4/14/21
 Contract Development and Control
 4-14-21 TW

B. Legal Sufficiency:

Paul Binn for H. H. H. H. H. 4/14/21
 Assistant County Attorney

C. Other Department Review:

 Department Director

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



Community Services Department

810 Datura Street

West Palm Beach, FL 33401

(561) 355-4700

Fax: (561) 242-7336

www.pbcgov.com/communityservices



**Palm Beach County
Board of County
Commissioners**

Dave Kerner, Mayor

Robert S. Weinroth, Vice Mayor

Maria G. Marino

Gregg K. Weiss

Maria Sachs

Melissa McKinlay

Mack Bernard

County Administrator

Verdenia C. Baker

"An Equal Opportunity
Affirmative Action Employer"

Official Electronic Letterhead

TO: Dave Kerner, Mayor
Board of County Commissioners

THRU: Verdenia C. Baker, County Administrator
Board of County Commissioners

THRU: Nancy L. Bolton, Assistant County Administrator
Board of County Commissioners

FROM: James Green, Director
Community Services Department

DocuSigned by:
James Green
BF34EF22BFDF492...

DATE: February 16, 2021

RE: Phase 38 Emergency Food and Shelter Program Application

Pursuant to Section 309 of the Administrative Code, your signature is needed on the Phase 38 Emergency Food and Shelter Program (EFSP) Application.

The Emergency Food and Shelter National Board Program is a restricted federal grant that provides EFSP funds. The United Way of Palm Beach County, Inc. (United Way) administers the award locally and released the Phase 38 EFSP Application. The Division of Human and Veteran Services (DHVS) has received EFSP funds for the past 26 years. The DHVS is applying for funds in the amount of \$300,000 to provide rental assistance to households in need. These are non-recurring funds and no County match is required.

The Phase 38 EFSP Application is due back to the grantor as soon as possible. The emergency signature process is being utilized because there is not sufficient time to submit the application through the regular Board of County Commissioner's agenda process and meet the return deadline.

If additional information is needed, please contact Wendy Tippett, (561)355-4775.

Approved: DocuSigned by:
Taruna Malhotra
1459E4101F1049C...

Assistant Department Director

DocuSigned by:
Helene C. Hvizd
BF3DF20B223413...

Helene Hvizd
Senior Assistant County Attorney

DocuSigned by:
Aaron Pierce
A174251877FF46D...

OFMB

Nancy L. Bolton
Assistant County Administrator

Attachment: Phase 38 Emergency Food and Shelter Program Application

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

AGENCY CONTACT INFORMATION

Agency Name: Palm Beach County Division of Human Services

Executive Director: Wendy Tippett, MNM, GPC

EFSP Contact Person & Title: Kim Parnett; Human Services Operations Supervisor

Address: 810 Datura Street

City, State, Zip Code: West Palm Beach, Florida, 33401

E-Mail: Kparnett@pbcgov.org, Wtippett@pbcgov.org

Telephone: 561-355-4778

Federal ID: 59-6000785

DUNS Number: 078470481

Local Recipient Organization (LRO) Number (if applicable): 168600019

REQUEST FOR FUNDING

Provide your Phase 38 EFSP request for funding broken down in the following categories. Use the unit of service definitions included in this application.

	CATEGORY	REQUEST AMOUNT	ESTIMATED UNITS OF SERVICE	UNIT COST
A	Served Meals			
B	Other Food (Pantry) <ul style="list-style-type: none"> • Pantry • Gift Cards 			
C	Mass Shelter <ul style="list-style-type: none"> • Transitional Housing 			
D	Other Shelter <ul style="list-style-type: none"> • Hotel/Motel 			
E	Rent/Mortgages	\$300,000	325	\$973
F	Utility Payments			
G	Total Request (add A through F)			

**PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County**

AGENCY INFORMATION

All applicants are to complete this section. Only submit this section once, even if requesting participation in multiple EFSP categories. You are encouraged to thoroughly yet succinctly respond to each question.

- 1. How many years has the agency been in existence? 56
- 2. How many years has the agency been providing emergency support services? 56
- 3. What are the agency's overall mission and goals? (1000 character maximum)

To prevent and end homelessness by using financial support and case management in partnership with other housing and homelessness agencies in Palm Beach County.

- 4. Briefly describe services the agency provides to the community. (2000 character maximum)

We offer assistance using multiple funding sources to prevent evictions and homelessness. We also offer case management and education to further change and support families in Palm Beach County that will enhance and improve their lives.

- 5. Is the agency an access partner with the Florida Department of Children and Families?

Yes x No N/A

If no, indicate why not? (1000 character maximum)

- 6. If applying for the categories Mass Shelter, Other Shelter, Rent/Mortgage and Utility Payments, are you a member of the Palm Beach County Homeless and Housing Alliance (HHA) (Formerly the Continuum of Care)?

[HHA delivers a comprehensive and coordinated continuum of services for homeless individuals and families. Components include homeless prevention, outreach and assessment, emergency shelter, transitional housing, supportive services, permanent housing, and permanent supportive housing. The HHA includes a variety of community-based members that meet monthly.]

Yes x No N/A

If no, indicate why not? (1000 character maximum)

- 7. The Palm Beach County Homeless Management Information System *[Client Management Information System (CMIS) ClientTRACK]* was created to avoid duplication of services provided to an individual by multiple agencies. EFSP requires immediate entry of client data at the time of services and prior to issuance of any funds.

Is the agency an active user of CMIS ClientTRACK?

Yes x No

Does the agency utilize CMIS ClientTRACK beyond EFSP?

**PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County**

Yes No

If no, explain why not? (1000 character maximum)

8. How does the agency provide services to people with disabilities, including those who require reasonable accommodation as required by the Americans with Disabilities Act (ADA)? *(For example, describe the agency's policies and procedures to assist clients who require a Sign Language Interpreter, assistance in filling out forms, wheelchair accessibility, and/or accessibility for service animals in the proposed EFSP-funded program services locations.)* (2000 character maximum)

Palm Beach County fully adheres to all ADA requirements. There are no barriers to assistance for any disabled person, and any person regardless of race, religion, sexual orientation and ethnicity. We are currently offering on line services to all County residents, appointments in the offices, and in home appointments if necessary.

EFSP FUNDING HISTORY

9. Has your agency ever received EFSP funding?

Yes No

10. If your agency has received funding, provide the following information for the past two phases.

Funding Category	Phase 35				Phase 36			
	Amount of EFSP Funding requested	Units of service proposed	Amount of EFSP funding received*	Units of service provided with EFSP funding	Amount of EFSP Funding requested	Units of service you proposed	Amount of EFSP funding received*	Units of service provided with EFSP funding
Served Meals								
Other Food								
Mass Shelter								
Other Shelter								
Rent/Mortgage	\$300,000	325	\$240,000	293	\$300,000	325	\$209,849	256
Utility								
Total								

This amount should reflect any approved redistribution of funds.

11. Did the agency have any EFSP compliance issues that resulted in the agency having to return money?

Yes No N/A

If yes, how much?

Explain: (1000 character maximum)

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

CATEGORY NARRATIVE SERVED MEALS
--

Program Name: N/A

Provide a summary of the program for which you are requesting funding. You are encouraged to thoroughly yet succinctly respond to each question. If the program operates at multiple sites, respond to specific sites requesting funding. Indicate whether the answer applies to all sites or answer per site and estimate the amount of EFSP funding the agency will designate to each site. Read the questions thoroughly and include only narrative that answers the question directly.

1. Target Population (3000 character maximum)

- a. Describe the primary target population served by this program; i.e., demographic data and geographic area served.
- b. Describe the eligibility requirements for the "served meals" program and how the program ensures that everyone, not just the agency's clients, receive this service. Describe the process and steps clients take to receive services, including when (days and hours of operation, holidays, off hours) and how (appointment and/or walk-ins) clients access the program services supported by EFSP funds.

2. Program (7000 character maximum)

- a. Provide a description of the program services, in relation to the funding category.
- b. How is the vendor/supplier chosen? Describe the rationale for choosing this vendor.
- c. Describe the program's efforts to ensure optimal value (including nutritional value) when purchasing food.
- d. Describe the agency's administrative structure and the program's staffing structure. If funded, how will the staffing meet the increased number of clients the agency will serve.
- e. Describe how the program's staff connect clients with other resources or programs in the community to ensure comprehensive services are provided to clients. *[For example, referral and/or linkage to 211, Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), Low Income Home Energy Assistance Program (LIHEAP), Emergency Home Energy Assistance for the Elderly Program (EHEAP), Florida Power & Light's Care to Share Program]*

3. Success and Results (3000 character maximum)

- a. Describe how the EFSP funds will be used to enhance or expand current services.
- b. Describe the current system the program is using to measure results. How is the data tracked (this can include # served, client feedback, any outcomes you might collect, etc.)? What data system do you currently use (paper, Excel, database, etc.)?
- c. Briefly describe the program's case management services, if any, including determination of client stabilization plan and 30-60 days follow-up.

4. Accounting and Financial Stability (3000 character maximum)

- a. Describe how the agency will ensure EFSP funds will be used only for the intended purpose. Include a description of the agency's documentation requirements for EFSP funds, internal controls and staff responsible for financial management.
- b. Describe how the agency has the fiscal capacity to begin delivering EFSP services through the current program prior to receiving EFSP funding.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

5. Budget

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the program for which you are applying. EFSP funding requests may not be more than 50% of the current fiscal year program budget.

Total Program Budget

Complete the table below and indicate the amount of the current fiscal year (FY) program budget line item expense, number of units to be provided, amount of your EFSP request for each line item, and number of added units.

Category	Excluding previous EFSP funding		Phase 38 Request	
	Current FY Amount Budgeted	Number of Units to be Provided	EFSP Funding Request	Number of Added Units
Congregate meals (Unit = 1 Person)				
Home Delivered Meal (Unit = 1 Person)				

Note: EFSP funding is intended to provide for daily, basic, nutritional meal costs on an ongoing basis. The funding is not intended to be used for a singular event, special events/celebratory events/holiday meals, etc. Also, dessert items (i.e., cookies, snack food, candy, etc.) used as part of a daily meal plan may be purchased in limited amounts. **The daily per served meal allowance is exactly \$2.**

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

CATEGORY NARRATIVE OTHER FOOD

Program Name: N/A

Provide a summary of the program for which you are requesting funding. You are encouraged to thoroughly yet succinctly respond to each question. If the program operates at multiple sites, respond to specific sites requesting funding. Indicate whether the answer applies to all sites or answer per site and estimate the amount of EFSP funding the agency will designate to each site. Read the questions thoroughly and include only narrative that answers the question directly.

1. Target Population (3000 character maximum)

- a. Describe the primary target population served by this program; i.e., demographic data and geographic area served.
- b. Describe the eligibility requirements for the "other food" program and how the program ensures that everyone, not just the agency's clients, receive this service. Describe the process and steps clients take to receive services, including when (days and hours of operation, holidays, off hours) and how (appointment and/or walk-ins) clients access the program services supported by EFSP funds.

2. Program (7000 character maximum)

- a. Provide a description of the program services, in relation to the funding category.
- b. How is the vendor/supplier chosen? Describe the rationale for choosing this vendor.
- c. Describe the program's efforts to ensure optimal value (including nutritional value) when purchasing food.
- d. Indicate if the food pantry is a brick and mortar facility or a mobile food service.
- e. Indicate whether the agency receives USDA commodities.
- f. Describe the agency's administrative structure and the program's staffing structure. If funded, how will the staffing meet the increased number of clients the agency will serve.
- g. Describe how the program's staff connect clients with other resources or programs in the community to ensure comprehensive services are provided to clients. *[For example, referral and/or linkage to 211, Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), Low Income Home Energy Assistance Program (LIHEAP), Emergency Home Energy Assistance for the Elderly Program (EHEAP), Florida Power & Light's Care to Share Program]*

3. Success and Results (3000 character maximum)

- a. Describe how the EFSP funds will be used to enhance or expand current services.
- b. Describe the current system the program is using to measure results. How is the data tracked (this can include # served, client feedback, any outcomes you might collect, etc.)? What data system do you currently use (paper, Excel, database, etc.)?
- c. Briefly describe the program's case management services, if any, including determination of client stabilization plan and 30-60 days follow-up.

4. Accounting and Financial Stability (3000 character maximum)

- a. Describe how the agency will ensure EFSP funds will be used only for the intended purpose. Include a description of the agency's documentation requirements for EFSP funds, internal controls and staff responsible for financial management. *Note: Gift cards are eligible only if they can be marked/encoded "Food Only". The same applies for food vouchers and gift certificates. There must be an agreement with the vendor that food items only will be allowed, and no cash will be returned to clients.*

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

- b. Describe how the agency has the fiscal capacity to begin delivering EFSP services through the current program prior to receiving EFSP funding.

5. Budget

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the program for which you are applying. EFSP funding requests may not be more than 50% of the current fiscal year program budget.

Total Program Budget

Complete the table below and indicate the amount of the current fiscal year (FY) program budget line item expense, number of units to be provided, amount of your EFSP request for each line item, and number of added units.

Category	Excluding previous EFSP funding		Phase 38 Request	
	Current FY Amount Budgeted	Number of Units to be Provided	EFSP Funding Request	Number of Added Units
Pantry/Bulk Food (Unit = Pounds/Bags)				
Gift Cards/Certificates (Unit = Household)				

Note: EFSP funding is intended to provide for basic, nutritional meals on an ongoing basis and not for non-nutritive items. The "other food" category is intended to allow agencies such as food pantries and food banks to pay for the purchase of food items, food vouchers and food gift cards/certificates to assist in the feeding of eligible clients. The funding is not intended to be used for a singular event, special celebratory events, holiday baskets, etc. Also, dessert items (i.e., cookies, snack food, candy, etc.) used as part of a daily meal plan may be purchased in limited amounts.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

CATEGORY/NARRATIVE MASS SHELTER

Program Name: N/A

Provide a summary of the program for which you are requesting funding. You are encouraged to thoroughly yet succinctly respond to each question. If the program operates at multiple sites, respond to specific sites requesting funding. Indicate whether the answer applies to all sites or answer per site and estimate the amount of EFSP funding the agency will designate to each site. Read the questions thoroughly and include only narrative that answers the question directly.

1. Target Population (3000 character maximum)

- a. Describe the primary target population served by this program; i.e., demographic data and geographic area served.
- b. Describe the eligibility requirements for the "mass shelter" program and how the program ensures that everyone, not just your clients, receive this service. Describe the process and steps clients take to receive services, including when (days and hours of operation, holidays, off hours) and how (appointment and/or walk-ins) clients access the program services supported by EFSP funds.

2. Program (7000 character maximum)

- a. Provide a description of the program services, in relation to the funding category.
- b. Provide the program's shelter bed capacity and how many bed nights will be funded by EFSP funds.
- c. How is the vendor chosen? Describe the rationale for choosing this vendor.
- d. Describe how the program will ensure the safety and quality of the living environment.
- e. Describe the agency's administrative structure and the program's staffing structure. If funded, how will the staffing meet the increased number of clients the agency will serve.
- f. Describe how the program's staff connect clients with other resources or programs in the community to ensure comprehensive services are provided to clients. *[For example, referral and/or linkage to 211, Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), Low Income Home Energy Assistance Program (LIHEAP), Emergency Home Energy Assistance for the Elderly Program (EHEAP), Florida Power & Light's Care to Share Program]*

3. Success and Results (3000 character maximum)

- a. Describe how the EFSP funds will be used to enhance or expand current services.
- b. Describe the current system the program is using to measure results. How is the data tracked (this can include # served, client feedback, any outcomes you might collect, etc.)? What data system do you currently use (paper, Excel, database, etc.)?
- c. Briefly describe the program's case management services, if any, including determination of client stabilization plan and 30-60 days follow-up.

4. Accounting and Financial Stability (3000 character maximum)

- a. Describe how the agency will ensure EFSP funds will be used only for the intended purpose. Include a description of the agency's documentation requirements for EFSP funds, internal controls and staff responsible for financial management.
- b. Describe how the agency has the fiscal capacity to begin delivering EFSP services through the current program prior to receiving EFSP funding.

5. Budget

Revised 10/2018

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the program for which you are applying. EFSP funding requests may not be more than 50% of the current fiscal year program budget.

Total Program Budget

Complete the table below and indicate the amount of the current fiscal year (FY) program budget line item expense, number of units to be provided, amount of your EFSP request for each line item, and number of added units.

Category	Excluding previous EFSP funding		Phase 38 Request	
	Current FY Amount Budgeted	Number of Units to be Provided	EFSP Funding Request	Number of Added Units
Mass Shelter (Unit = 1 Bed)				

Note: EFSP funding is intended to be utilized to supplement the costs of operating a homeless shelter of 5 beds or more and expand services provided and/or the number of clients served. **The per diem allowance per person per night is exactly \$12.50.**

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

CATEGORY NARRATIVE OTHER SHELTER

Program Name: N/A

Provide a summary of the program for which you are requesting funding. You are encouraged to thoroughly yet succinctly respond to each question. If the program operates at multiple sites, respond to specific sites requesting funding. Indicate whether the answer applies to all sites or answer per site and estimate the amount of EFSP funding the agency will designate to each site. Read the questions thoroughly and include only narrative that answers the question directly.

1. Target Population (3000 character maximum)

- a. Describe the primary target population served by this program; i.e., demographic data and geographic area served.
- b. Describe the eligibility requirements for the "other shelter" program and how the program ensures that everyone, not just the program's clients, receive this service. Describe the process and steps clients take to receive services, including when (days and hours of operation, holidays, off hours) and how (appointment and/or walk-ins) clients access the program services supported by EFSP funds.

2. Program (7000 character maximum)

- a. Provide a description of the program services, in relation to the funding category.
- b. What criteria are used in choosing the hotels/motels?
- c. Describe the program's methods in monitoring the hotels/motels used by the clients.
- d. Describe the agency's administrative structure and the program's staffing structure. If funded, how will the staffing meet the increased number of clients the agency will serve.
- e. Describe how the program's staff connect clients with other resources or programs in the community to ensure comprehensive services are provided to clients. *[For example, referral and/or linkage to 211, Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), Low Income Home Energy Assistance Program (LIHEAP), Emergency Home Energy Assistance for the Elderly Program (EHEAP), Florida Power & Light's Care to Share Program]*?

3. Success and Results (3000 character maximum)

- a. Describe how the EFSP funds will be used to enhance or expand current services.
- b. Describe the current system the program is using to measure results. How is the data tracked (this can include # served, client feedback, any outcomes you might collect, etc.)? What data system do you currently use (paper, Excel, database, etc.)?
- c. Briefly describe the program's case management services, if any, including determination of client stabilization plan and 30-60 days follow-up.

4. Accounting and Financial Stability (3000 character maximum)

- a. Describe how the agency will ensure EFSP funds will be used only for the intended purpose. Include a description of the agency's documentation requirements for EFSP funds, internal controls and staff responsible for financial management.
- b. Describe how the agency has the fiscal capacity to begin delivering EFSP services through the current program prior to receiving EFSP funding.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

5. Budget

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the program for which you are applying. EFSP funding requests may not be more than 50% of the current fiscal year program budget.

Total Program Budget

Complete the table below and indicate the amount of the current fiscal year (FY) program budget line item expense, number of units to be provided, amount of your EFSP request for each line item, and number of added units.

Category	Excluding previous EFSP funding		Phase 38 Request	
	Current FY Amount Budgeted	Number of Units to be Provided	EFSP Funding Request	Number of Added Units
Hotel/Motel (Unit = Household)				

Note: EFSP funding is intended to allow agencies to provide off-site emergency lodging (room and tax only) in a hotel/motel or other off-site shelter facility of eligible clients. Agencies may not operate as vendors for themselves or other LROs; self-billing is not eligible with this funding. EFSP funds may pay for no more than 30 days of hotel/motel stay.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

CATEGORY NARRATIVE: RENT/MORTGAGE

Program Name: Palm Beach County Division of Human Services/Palm Beach County BCC

Provide a summary of the program for which you are requesting funding. You are encouraged to thoroughly yet succinctly respond to each question. If the program operates at multiple sites, respond to specific sites requesting funding. Indicate whether the answer applies to all sites or answer per site and estimate the amount of EFSP funding the agency will designate to each site. Read the questions thoroughly and include only narrative that answers the question directly.

1. Target Population (3000 character maximum)

- a. Describe the primary target population served by this program; i.e., demographic data and geographic area served.
- b. Describe the eligibility requirements for the "rent/mortgage" program and how the program ensures that everyone, not just the program's clients, receive this service. Describe the process and steps clients take to receive services, including when (days and hours of operation, holidays, off hours) and how (appointment and/or walk-ins) clients access the program services supported by EFSP funds.

- a. Our target population are all renters living within the boundaries of Palm Beach County, and who are at risk of homelessness through eviction. We also assist with first month rent.
- b. Residents of Palm Beach County, US Citizen or legal resident, age 18 and up. Most have a current lease and landlord is willing to accept payment of \$1000 maximum, verifying they will not start eviction proceeding within 30 days of payment. Our offices are open Monday-Friday, 8am to 5pm. We now have an online application process, but we can see appointments in the office etc... We have application directions and information on WWW.rentalassistancepbc.org. 211 and partner agencies are able to make referrals to the Division of Human Services. Appointments can be scheduled by calling 561-355-3792 or 561-904-7900.

2. Program (7000 character maximum)

- a. Provide a description of the program services, in relation to the funding category.
- b. Describe the agency's administrative structure and the program's staffing structure. If funded, how will the staffing meet the increased number of clients the agency will serve.
- c. Describe how the program's staff connect clients with other resources or programs in the community to ensure comprehensive services are provided to clients [For example, referral and/or linkage to 211, Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), Low Income Home Energy Assistance Program (LIHEAP), Emergency Home Energy Assistance for the Elderly Program (EHEAP), Florida Power & Light's Care to Share Program]?

The Division of Human Services primary goal is to end homelessness and prevent evictions. We also merged with Community Action, which has traditionally provided anti-poverty services, including rent, utilities (LIHEAP) and employment training. In addition, Human Services Housing Stability Program provides first, last and security deposits, electric, including Care to Share FPL, water, gas payments, and deposits for all utilities. Our Rapid Rehousing Program assists homeless individuals with rental assistance and case management for up to two years. We do refer seniors and veterans to Palm Beach County Division of Senior and Veteran Services for EHEAP if appropriate. We are partners to many agencies in Palm Beach County and make referrals to all programs if we cannot provide similar services. The Division of Human Services currently works closely with Vita Nova, Adopt-a-Family and Gulfstream Goodwill that provides housing and case management to families, individuals and youth. Other funding resources: Ad Valorem tax dollars, HOME funds, ESG, CSBG, SHIP.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

3. Success and Results (3000 character maximum)

- a. Describe how the EFSP funds will be used to enhance or expand current services.
- b. Describe the current system the program is using to measure results. How is the data tracked (this can include # served, client feedback, any outcomes you might collect, etc.)? What data system do you currently use (paper, Excel, database, etc.)?
- c. Briefly describe the program's case management services, if any, including determination of client stabilization plan and 30-60 days follow-up.

a. EFSP rent assistance, uniquely assists a broader group of needy families because we do not count income to determine eligibility. Other grants and funding have more stringent requirements. This allows for more individuals and families to save their housing who otherwise will not.

b. We look at all of our service provisions and dollars expended monthly. Palm Beach County has a system of data collection we are required to report. The report is called KPI and it is on our County intranet. This data is used to determine funding and needs for future budgeting allocations. We also report services on Client Track (HMIS) and we maintain a log on Excel as required. We staff our cases and services to discuss trends and productivity.

c. We create a service plan with goals and objectives. We require that case managers contact each recipient of rental assistance funds 30 days after payment is approved to check to see if the service was successful and if the client is stable. If they are not stable, we will reevaluate to determine if further assistance is warranted.

4. Accounting and Financial Stability (3000 character maximum)

- a. Describe how the agency will ensure EFSP funds will be used only for the intended purpose. Include a description of the agency's documentation requirements for EFSP funds, internal controls and staff responsible for financial management.
- b. Describe how the agency has the fiscal capacity to begin delivering EFSP services through the current program prior to receiving EFSP funding.

a. Palm Beach County Division of Human Services keeps all funding resources separate. We have a Fiscal and Finance Department that ensures all funding is properly accounted. The County uses a database called Advantage that keeps records of transactions, including check disbursement. Our Fiscal Manager is Julie Dowe. Victoria Jones is our Financial Analyst II who manages all EFSP payments.

c. Palm Beach County is a large governmental agency with millions of dollars in tax revenue and investments. They will cover all costs prior to disbursement of EFSP funds from the United Way.

5. Budget

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the program for which you are applying. EFSP funding requests may not be more than 50% of the current fiscal year program budget.

Total Program Budget Rent, not including utilities and deposits is \$784,000 for Fiscal Year 2021 from Ad Valorem dollars alone. Other grants or funding are not available at this time. .

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

Complete the table below and indicate the amount of the current fiscal year (FY) program budget line item expense, number of units to be provided, amount of your EFSP request for each line item, and number of added units.

Category	Excluding previous EFSP funding		Phase 38 Request	
	Current FY Amount Budgeted	Number of Units to be Provided	EFSP Funding Request	Number of Added Units
Rent/Mortgage (Unit = Household)	\$784,000	650	\$300,000	325

Note: EFSP funding is intended to provide one-time payment of rent or mortgage (principal and interest only (P&I)) up to \$1,000 for qualifying clients. A one-time payment of \$250.00 or less is allowed when it is not possible to verify the monthly amount. Payment must be in arrears or due within 10 calendar days and must guarantee an additional 30 days of service. These funds may NOT be used for Deposit Fees, Late Fees, or Condo Fees.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

CATEGORY NARRATIVE UTILITY

Program Name: N/A

Provide a summary of the program for which you are requesting funding. You are encouraged to thoroughly yet succinctly respond to each question. If the program operates at multiple sites, respond to specific sites requesting funding. Indicate whether the answer applies to all sites or answer per site and estimate the amount of EFSP funding the agency will designate to each site. Read the questions thoroughly and include only narrative that answers the question directly.

1. Target Population (3000 character maximum)

- a. Describe the primary target population served by this program; i.e., demographic data and geographic area served.
- b. Describe the eligibility requirements for the "Utility" program and how the program ensures that everyone, not just the program's clients, receive this service. Describe the process and steps clients take to receive services, including when (days and hours of operation, holidays, off hours) and how (appointment and/or walk-ins) clients access the program services supported by EFSP funds.

2. Program (7000 character maximum)

- a. Provide a description of the program services, in relation to the funding category.
- b. Describe the agency's administrative structure and the program's staffing structure. If funded, how will the staffing meet the increased number of clients the agency will serve.
- c. Describe how the program's staff connect clients with other resources or programs in the community to ensure comprehensive services are provided to clients. *[For example, referral and/or linkage to 211, Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), Low Income Home Energy Assistance Program (LIHEAP), Emergency Home Energy Assistance for the Elderly Program (EHEAP), Florida Power & Light's Care to Share Program]*?

3. Success and Results (3000 character maximum)

- a. Describe how the EFSP funds will be used to enhance or expand current services.
- b. Describe the current system the program is using to measure results. How is the data tracked (this can include # served, client feedback, any outcomes you might collect, etc.)? What data system do you currently use (paper, Excel, database, etc.)?
- c. Briefly describe the program's case management services, if any, including determination of client stabilization plan and 30-60 days follow-up.

4. Accounting and Financial Stability (3000 character maximum)

- a. Describe how the agency will ensure EFSP funds will be used only for the intended purpose. Include a description of the agency's documentation requirements for EFSP funds, internal controls and staff responsible for financial management.
- b. Describe how the agency has the fiscal capacity to begin delivering EFSP services through the current program prior to receiving EFSP funding.

PHASE 38 EMERGENCY FOOD AND SHELTER PROGRAM (EFSP) APPLICATION
Federal Emergency Management Agency/Palm Beach County

5. Budget

The intent of the Emergency Food and Shelter Program is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. Other funding sources must be in place for the program for which you are applying. EFSP funding requests may not be more than 50% of the current fiscal year program budget.

Total Program Budget

Complete the table below and indicate the amount of the current fiscal year (FY) program budget line item expense, number of units to be provided, amount of your EFSP request for each line item, and number of added units.

Category	Excluding previous EFSP funding		Phase 38 Request	
	Current FY Amount Budgeted	Number of Units to be Provided	EFSP Funding Request	Number of Added Units
Gas (Unit = Household)				
Electricity (Unit = Household)				
Water (Unit = Household)				

Note: EFSP funding is intended to provide one-time payment of utility assistance for metered (gas, electricity, water, and sewer) services up to \$200 with an itemized bill for qualifying clients. EFSP allows a payment of \$100 or less on a utility bill with a past due amount or shut-off notice of \$100 or more without the monthly breakdown showing the client's monthly billing amount. The monthly information must be verified with the utility company. If one month's service cannot be verified from the bill or with the utility company, the LRO may pay up to \$100 per individual or household provided at least \$100 is owed on the bill. Payment must be in arrears or due within 10 calendar days and must guarantee an additional 30 days of service. These funds may NOT be used for Late Fees or Deposit Fees.

EMERGENCY FOOD AND SHELTER NATIONAL BOARD PROGRAM

PHASE 38 CERTIFICATION REGARDING LOBBYING

Attest: Joseph Abruzzo
Clerk of the Circuit Court and
Comptroller
Palm Beach County

Certification for Contracts, Grants, Loans and Cooperative Agreements Deputy Clerk

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on the behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, contribution, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Title 31 U.S.C. §1352. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

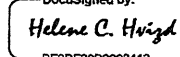
This form must be completed in its entirety. Please do not alter this form; any questions regarding the form should be directed to EFSP staff.

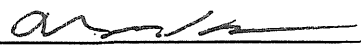
Palm Beach County Board of County Commissioners
LRO Name

168600019
LRO ID Number (9 digits)

Dave Kerner, Mayor
Representative Name

Approved as to form and legal sufficiency

By: 
Senior Assistant County Attorney


Representative Signature

02/23/21
Date (month/day/year)

NOTE: Standard Form LLL and instructions are available at www.grants.gov

NOTE: LROs will be required to submit an updated Certification Lobbying form via DocuSign once award notifications have been announced.

EMERGENCY FOOD AND SHELTER NATIONAL BOARD PROGRAM PHASE 38 LOCAL RECIPIENT ORGANIZATION CERTIFICATION

By signing this Local Recipient Organization (LRO) Certification Form, our agency certifies we have read and understand the Emergency Food and Shelter Program (EFSP) Phase 38 Responsibilities and Requirements Manual, including the Grant Agreement Articles, Financial Terms and Conditions, and Other Terms and Conditions as well as the Eligible and Ineligible Costs and Documentation sections and agree to comply with all program requirements. Our agency understands that all parties will be held accountable for complying with the provisions of the grant as well as full compliance with applicable requirements of all other Federal laws, Executive Orders, regulations, and policies governing this program including those not specifically stated in the Manual. All appropriate staff and volunteers have been informed of EFSP requirements. The Local Board has been provided and we have retained a copy of this form for our records.

I certify that my public or private agency:

- Has the capability to provide emergency food and/or shelter services.
- Will use funds to supplement/extend existing resources and not to substitute or reimburse ongoing programs and services.
- Is nonprofit or an agency of government.
- Will not use EFSP funds as a cost-match for other Federal funds or programs.
- Has an accounting system, and will pay all vendors by an approved method of payment.
- Understands that cash payments (including petty cash) are not eligible under EFSP.
- Conducts an independent annual review if receiving \$50,000-\$99,999/an independent annual audit if receiving \$100,000 or more in EFSP funds, and follows OMB's Uniformed Guidance if receiving \$750,000 or more in Federal funding.
- Has not received an adverse or no opinion audit.
- Is not debarred or suspended from receiving Federal funds.
- Has provided a Federal Employer Identification Number (FEIN) to EFSP.
- Has provided a Data Universal Number System (DUNS) number issued by Dun & Bradstreet (D&B) and required associated information to EFSP.
- Practices non-discrimination (agencies with a religious affiliation, will not refuse service to an applicant based on religion, nor engage in religious proselytizing or religious counseling in any program receiving Federal funds).
- Will not charge a fee to clients for EFSP funded services.
- Has a voluntary board if private, not-for-profit.
- Will provide all required reports to the Local Board in a timely manner; (i.e., Second Payment/Interim Request and Final Reports).
- Will expend monies only on eligible costs and keep complete documentation (copies of canceled LRO checks -- front and back, other proof of payment, invoices, receipts, etc.) on all expenditures for a minimum of three years after end-of-program date, and for compliance issues until resolved.
- Will spend all funds and close-out the program by my jurisdiction's selected end-of-program date and return any unused funds (\$5.00 or more) to the National Board.
- Will provide complete, accurate documentation of expenses to the Local Board, if requested, following my jurisdiction's selected end-of-program date.
- Has no known EFSP compliance exceptions in this or any other jurisdiction.
- Will not use EFSP funding for any lobbying activities and if receiving \$100,000 or more, will provide the "Certification Regarding Lobbying" and, if applicable, will complete Standard Form LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.
- Will not and will ensure its employees, volunteers or other individuals associated with the program will not engage in any trafficking of persons during the period this award is in effect.
- Will not and will ensure its employees, volunteers or other individuals associated with the program will not use EFSP funds to support access to classified national security information.

Approved as to form and legal sufficiency

By: DocuSigned by:
Helene C. Hoizl
EF 30P 2002270014
Senior Assistant County Attorney

Attest: Joseph Abruzzo
Clerk of the Circuit Court and Comptroller
Palm Beach County

Deputy Clerk

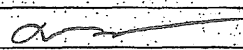
This form must be completed in its entirety. Please do not alter this form; any questions regarding the form should be directed to EFSP staff.

LRO ID (9 digit): 168600019 FEIN#: 59-6000785 DUNS #: 078470481

LRO Name: Palm Beach County Board of County Commissioner

Street Address/City/State/Zip: 810 Datura Street

Phone #: 561-355-4772 Fax #: Email: wtippeff@pbcgov.org

Print Name: Dave Kerner, Mayor 

Signature: _____ Date: 02/23/2014

NOTE: The EFSP National Board will be updating this document once the Phase 38 Manual has been finalized. LROs will be required to submit an updated Local Recipient Organization Certification form via DocuSign once award notifications have been announced.