

DocuSigned by:  
James E. Green  
8/15/2022

Recommended By: \_\_\_\_\_  
Department Director \_\_\_\_\_  
Date \_\_\_\_\_

Approved By: \_\_\_\_\_  
Assistant County Administrator \_\_\_\_\_  
Date \_\_\_\_\_

## II. FISCAL IMPACT ANALYSIS

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

| Fiscal Years                                    | 2022     | 2023     | 2024 | 2025 | 2026 |
|---|----------|----------|------|------|------|
| Capital Expenditures                            | \$60,000 | \$60,000 | 0    | 0    | 0    |
| Operating Costs                                 |          |          |      |      |      |
| External Revenue                                |          |          |      |      |      |
| Program Income<br>(County)                      |          |          |      |      |      |
| In-Kind Match (County)                          |          |          |      |      |      |
| NET FISCAL IMPACT                               | \$60,000 | \$60,000 | 0    | 0    | 0    |
| No. ADDITIONAL FTE<br>POSITIONS<br>(Cumulative) |          |          |      |      |      |

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

Budget Account No.:  
Fund 0001 Dept 146 Unit 7621 Object 3401 Program Code \_\_\_\_\_ Program Period \_\_\_\_\_

**B. Recommended Sources of Funds/Summary of Fiscal Impact:  
Funding Source is Palm Beach County.**

**C. Departmental Fiscal Review:** \_\_\_\_\_

DocuSigned by:  
*Julie Dowe*  
05AC9C7CC5BC4A4...

Julie Dowe, Director of Finance and Support Services

| <u>I.</u> | <u>REVIEW COMMENTS</u> |
|-----------|------------------------|
|-----------|------------------------|

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

Jaramila  
 Repson  
 8/18/22

L. R. M. 8/18/22  
 OFMB 8/18

*Ann J. Jacob* 8/23/22  
Contract Development and Control  
8-23-22 *me*

**B. Legal Sufficiency:**

Helene C. Hrydz 8-23-22  
Assistant County Attorney

**C. Other Department Review:**

Department Director

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

AMENDMENT 1

FIRST AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES

**THIS FIRST AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES** dated March 22, 2022, (**R2022-0269**), is made on this \_\_\_\_\_ day of \_\_\_\_\_, 2022, 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 **Florida Association of Recovery Residences, Inc.**, 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 **46-0634210**.

In consideration of the mutual promises contained herein, the COUNTY and the AGENCY agree as follows:

**WHEREAS**, on March 22, 2022, the above named parties entered into a Contract for Provision of Services, (R2022-0269) (the Contract), in an amount not to exceed \$60,000.00, to provide Recovery Supports services to residents of Palm Beach County; and

**WHEREAS**, the need exists to amend the Contract with the AGENCY, to extend the term of the Contract by amending **ARTICLE 3 – SCHEDULE**, increase the total funding by amending the first paragraph in **ARTICLE 4 – PAYMENTS TO AGENCY**, to replace **EXHIBIT B – PAYMENT SCHEDULE**, with **EXHIBIT B1 – PAYMENT SCHEDULE**, as well as to update **ARTICLE 16 – AGENCY'S PROGRAMMATIC REQUIREMENTS**.

**NOW THEREFORE**, the COUNTY and the AGENCY mutually agree that the Contract is hereby amended as follows:

I. The foregoing recitals are true and correct and incorporated herein by reference and made a part of the parties' Contract.

II. The first sentence of **ARTICLE 3 – SCHEDULE** is hereby replaced with the following:

The AGENCY shall commence services on October 1, 2021 and complete services on September 30, 2023.

III. The first paragraph in **ARTICLE 4 – PAYMENTS TO AGENCY** is amended to read as follows:

The total amount to be paid by the COUNTY under this Agreement for services and materials shall not exceed a total Agreement amount of **ONE HUNDRED TWENTY THOUSAND DOLLARS AND ZERO CENTS (\$120,000.00)**.

IV. **ARTICLE 16 – AGENCY'S PROGRAMMATIC REQUIREMENTS** is amended in two respects as follows:

a) The first Paragraph is amended to read as follows:

The AGENCY agrees to specific programmatic requirements, including but not limited to the

following. Failure to provide the information required by this Article in a timely fashion and in the format required, and to comply with the requirements of this Article will constitute a material breach of this Contract and may result in termination of this Contract.

b) Section “20” is replaced in its entirety with the following:

20. AGENCY may provide Key Personnel, staff with the following trainings, in compliance with Section 760.10, Florida Statutes, as amended:

- Racial Equity
- Lesbian, Gay, Bi-Sexual, Transgender, Questioning (LGBTQ) Cultural Competency;
- Trauma-Informed Care (TIC); Adverse Childhood Experiences (ACEs); Motivational Interviewing (MI)
- Cultural Humility
- RCI®™ (if applicable)

V. Exhibit B1, attached hereto and incorporated herein, replaces Exhibit B in its entirety.

**OTHER PROVISIONS:**

All other provision of the Contract not modified in this First Amendment are still in effect and are to be performed at the same level as specified in the Contract.

*REMAINDER OF PAGE LEFT BLANK INTENTIONALLY*

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this First Amendment on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

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

PALM BEACH COUNTY, FLORIDA,  
A Political Subdivision of the State of Florida  
BOARD OF COUNTY COMMISSIONERS

BY \_\_\_\_\_  
Deputy Clerk

BY \_\_\_\_\_  
Robert S. Weinroth, Mayor

AGENCY:

Florida Association of Recovery Residence, Inc.  
AGENCY'S Name Typed

DocuSigned by:  
Whitney Lehman  
18D1B9EC1BEA403  
AGENCY'S Signatory Name

Whitney Lehman, Executive Director  
AGENCY'S Signatory Title Typed

APPROVED AS TO FORM AND  
LEGAL SUFFICIENCY

DocuSigned by:  
Helene C. Hvizd  
BF3DF20B2223413...  
Assistant County Attorney

APPROVED AS TO TERMS  
AND CONDITIONS

DocuSigned by:  
Taruna Malhotra  
1459E4101F1049C...  
Taruna Malhotra, Assistant Director  
Community Services Department



EXHIBIT B1

Payment Schedule

The Scope of Work to be completed by FARR as defined in Exhibit "A" consists of specific completion of the services as expressly indicated below. Compensation for the work tasks stated herein shall be in accordance with the following Schedule of Payments:

**Agency:** Florida Association of Recovery Residences, Inc. (FARR)  
**Project:** Recovery Capital Initiative  
**Service:** Recovery Supports  
**Funding:** Opioid Response  
**Funding Cycle:** October 1, 2021-September 30, 2022; and October 1, 2022-September 30, 2023

| Service Deliverables   | Unit Description: | FY22        | FY23        | Agreement Total |
|--|-------------------|-------------|-------------|-----------------|
| A monthly report must be submitted along with the invoice that includes, but not limited to the following: Progress updates on RCI developments, education/trainings, and activities with dates, number of participants, and the name of facilitators. | Actual Cost *     | \$60,000.00 | \$60,000.00 | \$120,000.00    |

\* Expenses will be reimbursed based on actual costs, as evidenced by agency general ledgers or other proof of payments.



Palm Beach County  
Compliance Summary Report

| Vendor Number | Vendor Name                                | AM Best Rating | Insurance Carrier                            | Policy #       | Eff. Date | Exp. Date | Coverage               | Contract Number | Contract Name                              |
|---------------|--|----------------|--|----------------|-----------|-----------|------------------------|-----------------|--|
| DX00001708    | Florida Association of Recovery Residences |                | Compliant                                    |                |           |           |                        | 086-01          | Florida Association of Recovery Residences |
|               |  | Ag , XV        | Allied World Surplus Lines Insurance Company | 5088113102     | 4/21/2022 | 4/21/2023 | General Liability      |                 |  |
|               |  | Ag , XV        | Allied World Surplus Lines Insurance Company | 5088113102     | 4/21/2022 | 4/21/2023 | Professional Liability |                 |  |
|               |  | A++g , XV      | Travelers Indemnity Company of America       | UB9N2009202242 | 8/8/2022  | 8/8/2023  | Workers Comp           |                 |  |

Risk Profile : Standard - Professional Services  
Required Additional Insured : Palm Beach County Board of County Commissioners  
Ownership Entity :