

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2025	2026	2027	2028	2029
Capital Expenditures					
Operating Costs	784,875				
External Revenue	(627,900)				
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	156,975				

No. ADDITIONAL FTE POSITIONS (Cumulative)					
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Is Item Included In Current Budget? Yes No
 Does this item include the use of federal funds? Yes No
 Does this item include the use of state funds? Yes No

Budget Account No.:
 Fund Dept. 0001 Unit 148 Object 1354 Program Code VAR Program Period GY22

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

Funding source is DCF and a County cash match of \$156,975.

Signed by:

 94174C4E8A8C424

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

III. REVIEW COMMENTS

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

Adelle 2/18/25
 OFMB
 Off 2/13
 CB 2/13 mtr 2/13

Grant & Mack 2/20/25
 Contract Development and Control
 26 2.20.25

B. Legal Sufficiency:

Gene C. Boyd 2-20-25
 Assistant County Attorney

C. Other Department Review:

 Department Director

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

Attachment 1
Agenda Item #:3E-2

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

RWIMM TO
R-2021-0781
and
R-2021-0782

Meeting Date: June 15, 2021 Consent Regular
 Ordinance Public Hearing

Department
Submitted By: Community Services
Submitted For: Division of Human Services

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to:

A) approve the signature of the Mayor on Amendment No.0002 to Grant Contract #IP004 with the Florida Department of Children and Families (DCF) Unified Homeless Grant (CFSA 60.021), for the period July 1, 2019 through June 30, 2022, to increase funding by \$1,052,023 for a new total amount not-to-exceed \$2,963,451.55;

B) approve a budget amendment of \$1,052,023 in the General Fund, Human Services Division, to align the budget to the actual grant;

C) approve Amendment No. 1 to the Subrecipient Agreement (R2021-0045) with The Lord's Place Inc., to extend the end date from June 30, 2021 to June 30, 2022 and increase funding by \$1,052,023 for a new total amount not-to-exceed \$2,270,023, to provide emergency shelter, rapid re-housing, outreach, and street engagement services for the homeless to prevent the spread of COVID-19; and

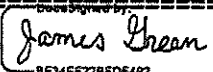
D) authorize the County Administrator, or designee, to execute grant agreements and amendments thereto, and all other necessary documents related to the DCF Unified Homeless Grant.

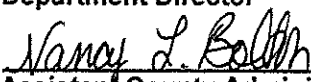
Summary: DCF received \$65,511,297 in Emergency Solutions Grant Coronavirus (ESG-CV2) funding from the U.S. Department of Housing and Urban Development (HUD). The ESG-CV2 funding is used to prevent, prepare for, and respond to the pandemic among individuals and families who are homeless or receiving homeless assistance. The funding is also being used to support additional assistance and prevention services for the homeless to help mitigate the impacts created by the pandemic. Amendment No.0002 to Grant Contract #IP004 (CFSA 60.021) with DCF will be amended to reflect an increase in ESG-CV2 funding in the amount of \$1,052,023, which became effective on May 1, 2021. The Lord's Place Inc. provides emergency shelter, rapid re-housing, outreach, and street engagement services for the homeless to help prevent the spread of COVID-19. **No County match is required.** (Division of Human Services) Countywide (HH)

Background and Justification: Since 2006, the Division of Human and Veteran services has acted as the lead agency for the local Continuum of Care. As a result of the 2009 Hearth Act, HUD implemented CoC Planning Projects to provide funds for the collaboration of the COC, which Palm Beach County is known as the Homeless and Housing Alliance. DCF's Office on Homelessness works in conjunction with HUD to provide funding opportunities to assist persons who are homeless or at risk of homelessness.

Attachments:

- 1. Amendment No.0002 to Grant Contract #IP004
- 2. Budget Amendment
- 3. Amendment No. 2 to the Subrecipient Agreement with The Lord's Place, Inc.

Recommended By:  6/01/2021
Department Director Date

Approved By:  6/11/21
Assistant County Administrator Date



State of Florida
Department of Children and Families

Ron DeSantis
Governor

Shevaun L. Harris
Secretary

APPROVAL MEMORANDUM

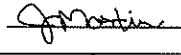


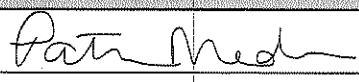
DATE: October 10, 2024

TO: Shevaun L. Harris, Secretary

FROM: Erek Culbreath, Acting Director on Homelessness

SUBJECT: Approval Memorandum – Amendment #0011 to Contract IP004 with Palm Beach County Board of County Commissioners

ROUTING:

Approver	Signature	Date
Programmatic Approval Levels		
Joanna Martin Contract Manager Supervisor		10/10/24
Shannon Piotrowski Program Deputy Director		10/11/24
Vacant Deputy Assistant Secretary of OCS	N/A	N/A
Administrative Approval Levels		
Lynita M. Bell Budget Office	Lynita M. Bell	10.10.24
Cole Sousa Office of Information Technology	N/A	N/A
Quality Office	N/A	N/A
Summerlin Clenney Office of Contracted Client Services	Summerlin Clenney	10.17.24
Michael Greif Office of General Counsel		10.22.24
Executive Approval Levels		
Patricia Medlock Assistant Secretary of OCS		10.22.24
Kate Williams Deputy Secretary	N/A	N/A
Casey Penn Chief of Staff	N/A	N/A
Shevaun L. Harris Secretary	N/A	N/A

Note: When building the approval flow, if an approver's signature is not required, insert N/A. Routing should occur in consecutive order as it appears, beginning with the Programmatic Approval Levels.

2415 North Monroe Street, Suite 400, Tallahassee, Florida 32303-4190

Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

CONTRACT INFORMATION				
Contract/Solicitation No.	IP004			
Contract Manager or Procurement Officer	Megan Raulerson			
Provider Name	Palm Beach County Board of County Commissioners			
Contract Term	7/1/2019 – 6/30/2025			
Method of Procurement	RFA			
PROGRAM BUDGET				
Contract Amount	\$5,595,976.99	Amendment Amount	\$627,900.09	
State FY Funds		Fed FY Funds	Total Amended Contract Amount	\$6,223,877.08

SERVICES PROVIDED:

The Office of Homelessness provides 27 contracts to Continuums of Care (CoCs) throughout the state. The Challenge Unsheltered Grant, funded through Specific Appropriation 351 of the 2024 General Appropriations Act, is aimed at mitigating unsheltered homelessness. This funding will support mental health and substance abuse treatment, emergency and transitional shelters, non- congregate shelters, and certified encampments for homeless individuals and families.

This funding allocation is intended to bolster CoC efforts in providing comprehensive services, including shelter operations, staffing support, and specialized services such as mental health and substance abuse treatment.

REASON FOR AMENDMENT/ADDENDUM (if applicable):

The Office of Homelessness is requesting approval to execute this amendment to add Challenge Unsheltered funding that will integrate state appropriations into the CoC contracts for State Fiscal Year 2024-2025, allowing for enhanced service provision to address homelessness across Florida. In addition, contract language will be updated to reflect the latest reporting and service requirements, including changes to monthly deliverable submission dates and expanded reporting formats to ease data incorporation. This Amendment mirrors GPZ47 A14 that has routed through Executive Leadership and is 1 of 27 total amendments.

KEY PROVISIONS:

- Challenge Unsheltered Grant: Adds funding to mitigate unsheltered homelessness by supporting services such as mental health and substance abuse treatment, emergency shelters, and non-congregate shelter operations.
- Updates Part 1 of the CoC contracts with the latest Part 1 language.

ATTACHMENTS:

- Amendment 0011
- PCMT-02 v24.3 Contract Part 1
- Approval Memo

PROVIDER INFORMATION				
Only required when routing contract executions and amendments.				
Provider Name	Palm Beach County Board of County Commissioners			
Provider FEID #	59-6000785	Provider FY End	06/30	Provider UEI# (if applicable)
Provider Contract Manager Name	Wendy Tippett	Provider Contract Manager Email Address	Wtippett@pbcgov.org	
Provider Signatory Name	Verdenia C. Baker	Provider Signatory Email Address	Wtippett@pbcgov.org	

REVENUE INFORMATION	
Only required when routing contract executions or amendments that change the information below.	
Federal Subrecipient vs. Contractor Determination	Select determination.
Assistance Listing Number (ALN) Click to enter text.	
Florida Single Audit Act Determination	Select determination.
Code of State Financial Assistance (CSFA) No. Click to enter text.	



**State of Florida
Department of Children and Families**

Ron DeSantis
Governor

Shevaun L. Harris
Secretary

APPROVAL MEMORANDUM

DATE: September 16, 2024
TO: Shevaun L. Harris, Secretary
FROM: Erek Culbreath, Acting Director on Homelessness
SUBJECT: Approval Memorandum – Blanket Executive Leadership Approval for 27 CoC Amendments to add 10 million in Challenge Unsheltered Grant funds and update Part 1 of CoC contracts.
ROUTING:

Approver	Signature	Date
Programmatic Approval Levels		
Joanna Martin Contract Manager Supervisor	N/A	N/A
Erek Culbreath Program Director	N/A	N/A
Patricia Medlock Deputy Assistant Secretary of OCS	N/A	N/A
Administrative Approval Levels		
Lynita M. Bell Budget Office	N/A	N/A
Cole Sousa Office of Information Technology	N/A	N/A
Quality Office	N/A	N/A
Summerlin Clenney Office of Contracted Client Services	N/A	N/A
Thomas Valentine Office of General Counsel	N/A	N/A
Executive Approval Levels		
Patricia Medlock Interim Assistant Secretary of OCS	N/A	N/A
Kate Williams Deputy Secretary		
Casey Penn Chief of Staff	<i>OCOP</i>	10/18/24
Shevaun L. Harris Secretary	<i>Shevaun</i>	10/18/24

Note: When building the approval flow, if an approver's signature is not required, insert N/A. Routing should occur in consecutive order as it appears, beginning with the Programmatic Approval Levels.

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Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

CONTRACT INFORMATION				
Contract/Solicitation No.	GPZ47			
Contract Manager or Procurement Officer	Joni Pugh			
Provider Name	Homelessness Services Network of Central Florida			
Contract Term	7/1/2019 – 6/30/2025			
Method of Procurement	RFA			
PROGRAM BUDGET				
Contract Amount	\$11,772,972.07	Amendment Amount	\$560,551.64	
State FY Funds	\$1,680,753.60	Fed FY Funds	\$424,651.76	Total Amended Contract Amount \$12,333,523.71

SERVICES PROVIDED:

The Office of Homelessness provides 27 contracts to Continuums of Care (CoCs) throughout the state. The Challenge Unsheltered Grant, funded through Specific Appropriation 351 of the 2024 General Appropriations Act, is aimed at mitigating unsheltered homelessness. This funding will support mental health and substance abuse treatment, emergency and transitional shelters, non-congregate shelters, and certified encampments for homeless individuals and families.

This funding allocation is intended to bolster CoC efforts in providing comprehensive services, including shelter operations, staffing support, and specialized services such as mental health and substance abuse treatment.

REASON FOR AMENDMENT/ADDENDUM (if applicable):

The Office of Homelessness requests approval to execute 27 Homelessness contract amendments to add Challenge Unsheltered Grant funds. These amendments will integrate state appropriations into the CoC contracts for State Fiscal Year 2024-2025, allowing for enhanced service provision to address homelessness across Florida. In addition, contract language will be updated to reflect the latest reporting and service requirements, including changes to monthly deliverable submission dates and expanded reporting formats to ease data incorporation.

KEY PROVISIONS:

- Challenge Unsheltered Grant: Adds funding to mitigate unsheltered homelessness by supporting services such as mental health and substance abuse treatment, emergency shelters, and non-congregate shelter operations.
- Updates Part 1 of the CoC contracts with the latest Part 1 language.

ATTACHMENTS:

- Amendment
- PCMT-02 v24.3 Contract Part 1
- Approval Memo
- CoC Funding spreadsheet

PROVIDER INFORMATION			
Only required when routing contract executions and amendments			
Provider Name	Homelessness Services Network of Central Florida		
Provider FEID #	59-3213827	Provider FY End	6/30
Provider Contract Manager Name	Martha Are	Provider Contract Manager Email Address	martha.are@hsncfl.org
Provider Signatory Name	Martha Are	Provider Signatory Email Address	martha.are@hsncfl.org

REVENUE INFORMATION	
Only required when routing contract executions or amendments that change the information below	
Federal Subrecipient vs. Contractor Determination	Select determination.
Assistance Listing Number (ALN) Click to enter text.	
Florida Single Audit Act Determination	Select determination.
Code of State Financial Assistance (CSFA) No. Click to enter text.	

Contract#	Amd #	Provider Name	Total Contract Amount	Total Amended Amount	Last Amendment	FY24-25 Amount	Total Amended Contract Amount
APZ10	15	Opening Doors of NWFL Inc.	\$8,754,837.53	\$393,192.22	\$734,604.78	\$1,648,939.85	\$9,148,029.75
APZ11	13	Homelessness and Housing Alliance (Santa Rosa)	\$8,647,951.93	\$336,449.50	\$895,082.96	\$1,825,175.31	\$8,984,401.43
BPZ11	15	Homeless and Hunger Coalition of Northwest Florida, Inc. dba Doorways of NWFL (PC)	\$7,423,810.03	\$259,629.24	\$556,826.85	\$1,267,848.94	\$7,683,439.27
BPZ12	15	Big Bend Continuum of Care	\$6,016,902.21	\$293,592.06	\$549,094.14	\$1,386,640.80	\$6,310,494.27
CP006	13	United Way of Suwannee Valley	\$7,057,498.62	\$314,685.98	\$734,604.78	\$1,570,433.61	\$7,372,184.60
CP007	1	TaskForce Fore Ending Homelessness	\$1,042,373.83	\$306,812.90	\$0.00	\$1,349,186.73	\$1,349,186.73
DP002	13	Changing Homelessness	\$9,128,043.81	\$346,945.31	\$882,059.45	\$2,017,197.25	\$9,474,989.12
GPZ47	14	Homeless Services Network of Central Florida	\$11,772,972.07	\$560,551.54	\$884,908.34	\$2,105,405.36	\$12,333,523.71
GPZ48	12	Brevard Homeless Coalition	\$9,711,714.99	\$396,870.94	\$734,604.78	\$1,646,868.57	\$10,108,585.93
IP004	11	Palm Beach County Division of Human Services	\$5,595,976.99	\$627,900.09	\$533,832.21	\$1,573,351.50	\$6,223,877.08
JP003	13	Broward County Homeless Initiative Partnership	\$8,718,012.51	\$667,342.90	\$728,196.70	\$1,815,701.45	\$9,385,355.41
KP009	11	Miami-Dade County Homeless Trust	\$14,421,026.14	\$554,547.94	\$884,908.34	\$2,211,773.11	\$14,975,574.08
KP010	12	Monroe County Homeless Services	\$6,981,767.83	\$230,528.43	\$734,604.78	\$1,866,932.95	\$7,212,296.26
NP005	13	Volusia/Flagler County Coalition for the Homeless	\$7,131,169.30	\$417,568.23	\$884,908.34	\$1,804,701.42	\$7,548,737.53
NP006	12	Flagler Hospital - St Augustine	\$5,691,606.59	\$327,766.35	\$556,826.85	\$1,410,207.42	\$6,019,372.94
PPZ60	12	Mid Florida Homeless Coalition	\$8,277,530.08	\$380,659.11	\$734,604.78	\$1,636,406.74	\$8,658,189.19
PPZ61	10	Marion County Board of County Commissioners	\$4,583,390.52	\$192,517.60	\$551,332.55	\$1,146,993.00	\$4,775,908.12
QPZ01	12	Collier County Hunger and Homeless Coalition	\$4,310,618.07	\$262,046.51	\$554,181.44	\$1,227,146.74	\$4,572,664.58
QPZ02	12	Lee County Continuum of Care	\$6,238,135.52	\$356,640.55	\$875,295.87	\$1,746,631.27	\$6,596,776.07
QPZ03	12	Gulf Coast Partnership	\$8,037,340.10	\$236,022.66	\$895,082.96	\$1,733,330.47	\$8,273,362.76
QPZ04	11	Suncoast Partnership to End Homelessness (Manatee and Sarasota County)	\$6,473,537.68	\$327,717.63	\$725,956.39	\$1,535,505.23	\$6,801,255.31
QPZ05	13	Tampa Hillsborough Homeless Initiative	\$8,823,939.84	\$519,118.53	\$549,195.88	\$1,517,971.56	\$9,343,058.37
QPZ06	11	Pinellas County Homeless Leadership Board	\$7,664,432.91	\$393,611.46	\$884,908.34	\$2,039,871.86	\$8,058,044.37
QPZ07	13	Coalition for the Homeless of Pasco County	\$5,879,728.74	\$328,222.43	\$725,956.35	\$1,484,571.63	\$6,207,951.17
TPZ17	12	Homeless Coalition of Polk County	\$5,928,635.63	\$459,548.49	\$725,956.35	\$1,618,330.69	\$6,388,184.12
TPZ18	11	Heartland Coalition	\$6,023,160.34	\$188,851.57	\$556,826.85	\$1,220,657.88	\$6,212,011.91
ZP003	13	Treasure Coast Homeless Services Council	\$7,143,025.03	\$318,659.73	\$895,082.96	\$2,055,307.01	\$7,461,684.76

**FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES
CONTRACT NO. IP004
AMENDMENT NO. 0011**

This Amendment shall be effective July 1, 2024, or the last party signature date, whichever is later. The above referenced Contract is hereby amended as follows:

1. The following items were as last addressed in the noted Amendments:
Amendment #0008: 6-11, 13, 15-17, 21-23
Amendment #0009: 12
Amendment #0010: 4, 14, 18-20
2. **CF Standard Contract 2019 Part 1 of 2** is replaced by the attached **v24.3**; Part 2 of the Contract remains in effect, except as modified herein.
3. Notwithstanding Item 2, the original Effective Date and the Original Signatures remain in effect.
4. In 1.1., **\$5,595,976.99** is replaced by **\$6,223,877.08**.
5. The highlighted portions in this amendment are amended as found below or attached. Non-highlighted portions, absent more specific instructions, are solely for context and unaffected by this amendment.
6. **B-1.2.** is amended to add:

B-1.2.2. Challenge Unsheltered Grant – Pursuant to proviso language in Specific Appropriation 351 of the 2024 General Appropriations Act, mitigate unsheltered homelessness by providing support to homeless individuals and families through mental health and substance abuse treatment at shelter sites, support for emergency and transitional shelters, support for non-congregate shelters, and support for sanctioned camping sites.

This section is Applicable.
This section is Not Applicable.

7. **B-2.2.** is amended to add:
B-2.2.2. Challenge Unsheltered Grant – The applicability of this section is identified in **B-1.2.2.** The objective of the Challenge Unsheltered Grant is to mitigate unsheltered homelessness by providing support to homeless individuals and families through mental health and substance abuse treatment at shelter sites, support for emergency and transitional shelters, support for non-congregate shelters, and support for sanctioned camping sites.
8. **B-4.2.** is amended to add:
B-4.2.2. Challenge Unsheltered Grant – The applicability of this section is identified in **B-1.2.2.** The Provider must serve clients in a manner consistent with the proposed projects that are included in the CoC plan, while mitigating unsheltered homelessness by providing support to homeless individuals and families through mental health and substance abuse treatment at shelter sites, support for emergency and transitional shelters, support for non-congregate shelters, and support for sanctioned camping sites.

9. **C-1.2.** is amended to add:

C-1.2.2. The applicability of this section is identified in **B-1.2.2.** To achieve the Major Contract Goals for the **Challenge Unsheltered Grant** set forth in **B-2.2.2,** the Provider shall perform the tasks specified in **Exhibit C2.**

10. **Exhibit C2** is amended to add:

C2-3. The intent of the Challenge Unsheltered Grant is to mitigate unsheltered homelessness by providing support to homeless individuals and families through mental health and substance abuse treatment at shelter sites, support for emergency and transitional shelters, support for non-congregate shelters, and support for sanctioned camping sites.

C2-3.1. Mental Health and Substance Abuse Treatment – Provide or support the provision of (through purchasing or subcontracting, etc.) mental health and substance abuse treatment to individuals and families at emergency, transitional, or non-congregate shelters, or sanctioned camping sites, or support such mental health and substance abuse treatment being provided.

C2-3.2. Emergency and Transitional Shelters – Provide support to emergency and transitional shelters. This support may take the form of construction, improvement, supply costs, operating costs, staff costs, or other costs as approved.

C2-3.3. Support for Non-Congregate Shelters – Provide or support non-congregate sheltering operations, which includes sheltering individuals or families in non-congregate settings.

C2-3.4. Support for Sanctioned Camping Sites – Provide support to Department certified county homelessness encampment sites, or sites operated by an NGO with the cooperation of local government. This support may take the form of construction, improvement, supply costs, operating costs, staff costs, or other costs as approved.

11. **D-1.2.** is amended to add:

D-1.2.2. Challenge Unsheltered Grant – The applicability of this section is identified in **B-1.2.2.** A unit of service is (1) month of providing eligible service tasks as described in Exhibit C2 to individuals suffering homelessness or at risk of homelessness, or homeless organizations (shelters, homeless service organizations). If providing support to homelessness organizations which is not directly tied to specific individuals who are suffering homelessness or at risk of homelessness (i.e. shelter construction, improvement, supply costs, operating costs, staff costs), a unit of service is (1) month of providing eligible service tasks at a rate of one deliverable per \$1,235 spent on providing eligible service tasks. When using this rate to determine the level of deliverables achieved per (1) month unit of service, any partial deliverables achieved should be rounded downward to the nearest whole number.

12. **D-3.2.4.,** inadvertently struck by scrivener’s error, is restated here, nunc pro tunc the effective date of amendment #0009:

D-3.2.4. Challenge Plus funds – The applicability of this section is identified in **B-1.2.1.** Each month, the Provider shall provide rapid re-housing of families with a primary goal of reunification and provide homelessness prevention services for defined vulnerable populations.

Challenge Plus funds Activities – The Challenge Plus funds, Housing Projects will serve, at a minimum, the following number of individuals each year.

Reunification (Initiative 1)	
Total Number of Families to be Served Annually	FY24-25
Rapid Rehousing	0
Prevention	30

Vulnerable Adults (Initiative 2)	
Total Number of Individuals to be Served Annually	FY24-25
Rapid Rehousing	0
Prevention	40

13. **D-3.2.** is amended to add:

D-3.2.5. Challenge Unsheltered Grant Activities – The applicability of this section is identified in **B-1.2.2.** Each month, the provider shall provide eligible service tasks as described in **Exhibit C2** to individuals suffering homelessness or at risk of homelessness, or homeless organizations (shelters, homeless service organizations).

If providing support to homelessness organizations which is not directly tied to specific individuals who are suffering homelessness or at risk of homelessness (i.e. shelter construction, improvement, supply costs, operating costs, staff costs), a unit of service is (1) month of providing eligible service tasks at a rate of one unit of one deliverable per \$1,235 spent on providing eligible service tasks. When using this rate to determine the level of deliverables achieved per (1) month unit of service, any partial deliverables achieved should be rounded downward to the nearest whole number.

The Challenge Unsheltered Grant will serve, at a minimum, the following number of individuals, or organizations at the rate specified above, each fiscal year.

Fiscal Year (FY)	FY24-25
Total Deliverables	154

14. The attached **Attachment D8** Challenge Unsheltered Grant Monthly Status Report is added.

15. **E-1.2.** is amended to add:

E-1.2.2. Challenge Unsheltered Grant – The applicability of this section is identified in **B-1.2.2.** Performance measures will specifically address deliverables and deliverable requirements identified in **Exhibit C-2, D-1.2.** and **D-3.2.**, and Attachment E6.

16. **E-2.3.** is amended to add:

E-2.3.2. Challenge Unsheltered Grant – The applicability of this section is identified in **B-1.2.2.** Performance measures will specifically address deliverables and deliverable requirements identified in **Exhibit C-2, D-1.2.** and **D-3.2.**, and **Attachment E6.**

Minimum Service Target	Criteria for Evaluating Completion
Challenge Unsheltered Grant Activities – complete at a minimum the number of deliverables as identified in D-3.2.5. (Annual).	100% of deliverables as identified in D-3.2.5. completed with sufficient deliverable requirements and documentation

- 17. The attached **Attachment E6** Challenge Unsheltered Grant Back-up Documentation is added.
- 18. **F.1.2.1. Challenge, Challenge Plus, and Challenge Unsheltered Grants** – Administrative Costs for the Challenge, Challenge Plus, and Challenge Unsheltered Grants may not exceed the percentage outlined in §420.622(4)(d), F.S.
- 19. **F-2.1.** This is a multi-year fixed price and/or cost reimbursement contract for the provision of services to homeless persons. The Department shall pay the Provider for the delivery of service units provided in accordance with terms of this contract for a total dollar amount not to exceed **\$6,223,877.08**, subject to availability of funds.

FISCAL YEAR	ANNUAL FUNDING
2019-2020	\$231,142.85
2020-2021	\$455,803.25
2021-2022	\$1,955,844.19
2022-2023	\$551,804.11
2023-2024	\$1,455,931.18
2024-2025	\$1,573,351.50
Total	\$6,223,877.08

*Any Challenge and Challenge Plus Grant funding and deliverables not utilized by June 30, 2024, will be reverted, and reappropriated to be used in the FY24/25 contract year.

- 20. **F-2.1.2.** is amended to add:

F-2.1.2.1. Challenge Unsheltered Grant – The Department agrees to reimburse for allowable costs listed below for Challenge Unsheltered Grant Activities.

FISCAL YEAR	UNIT OF SERVICE	UNITS	RATE	FISCAL YEAR TOTAL
2024-2025	One month of Eligible Challenge Unsheltered Grant Activities	N/A	N/A	\$627,900.09
	Total			\$627,900.09

21. F-2.2.1. is amended to add:

F-2.2.1.2. Challenge Unsheltered Grant – The applicability of this section is identified in **B-1.2.2** and **F-2.1.2.1**. The Challenge Unsheltered Grant is a cost reimbursement grant funded by state funds pursuant to program guidelines under Section 420.622(4), Florida Statutes, and pursuant to proviso language in Specific Appropriation 351 of the 2024 General Appropriations Act. The Department shall reimburse the Provider for allowable expenditures incurred pursuant to the terms of this Contract for a total dollar amount identified in **F-2.1.2.1.**, subject to availability of funds.

22. The attached **Attachment F8** Challenge Unsheltered Grant Monthly Invoice Report is added.

23. The attached **Attachment F8.1** Challenge Unsheltered Grant Monthly Roll-up Report is added.

24. Attachment 2 is deleted.

25. In **A-4.1.1.** "Section 4.16" is replaced by 4.1.1.6.

26. In **C-2.1.2.** and **C5** "Section 4.14" is replaced by 4.16.

27. In **C5** "Section 4.3.1." is replaced by 4.6.

28. All provisions in the Contract and any attachments thereto in conflict with this Amendment are changed to conform with this Amendment. All provisions not in conflict with this Amendment are still in effect and are to be performed at the level specified in the Contract. This Amendment and all its attachments are made a part of the Contract.

IN WITNESS THEREOF, the parties hereto have caused this Amendment executed by their undersigned officials as duly authorized.

**PROVIDER: Palm Beach County Board of
County Commissioners**

DEPARTMENT OF CHILDREN AND FAMILIES

Signature: Verdenia C. Baker

Signature: Shevaun L. Harris

Name: Verdenia C. Baker

Name: Shevaun L. Harris

Title: County Administrator

Title: Secretary

Date: 12/11/24

Date: 1/8/2025 | 10:15 AM EST

Approved as to form and legal sufficiency:

By: ^{Signed by:}
Anne Helfant
Assistant County Attorney

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ATTACHMENT D8 – CHALLENGE UNSHELTERED GRANT MONTHLY STATUS REPORT

	Provider Name	Monthly Status Report	
	Contract #		Month of Services
<p>ATTESTATION: By completing this report, I certify to the best of my knowledge and belief that the report is true, complete and accurate and the expenditures, disbursements and cash receipts are for the purpose and objectives set forth in the terms and conditions of the Award. I am aware that any false, fictitious, or fraudulent information or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statement, false claims, or otherwise. Additionally, I certify that all invoices supporting this report have been submitted to the Department in accordance with this agreement.</p>			
Name & Title of Agency Official			Date
<p>Challenge Unsheltered Grant Status Report – Deliverable Breakdown</p>	Challenge Unsheltered Activities		
		Monthly Individuals Served	Monthly Support to Homeless Organizations (non-individuals)
	Mental Health and Substance Abuse Treatment		
	Emergency and Transitional Shelters		
	Support for Non-Congregate Shelters		
	Support for Sanctioned Camping Sites		
	Total Monthly Individuals Served		
	Total Monthly Support Deliverables		
	Total Monthly Deliverables		
	Total Invoiced in \$USD	\$	
	YTD Deliverables Submitted (including current monthly deliverables)		
	YTD Remaining Deliverables (including current monthly deliverables)		

ATTACHMENT E6 – CHALLENGE GRANT BACK-UP DOCUMENTATION REQUIREMENTS

The applicability of this section is identified in section B-1.2.2. of this Contract.

A complete and accurate Monthly Status Report and Invoice and Match Report (including Roll-up Report) are required for payment from the Department. Additional backup documentation required for payment is identified below and sorted by Deliverables identified in section D-1.2.2. and D-3.2.5. of this Contract. Challenge Unsheltered Grant activities must provide a detailed expenditure report by subcontractor.

Below are examples of backup documentation that may fall into the identified categories.

Mental Health and Substance Abuse Treatment

- Payment Statement/Invoice
 - Itemized receipts or invoices for services provided by mental health or substance abuse professionals.
- Proof of Payment
 - Cleared checks, receipts, or financial ledgers showing payments made for mental health and substance abuse services.
- Case Management
 - Time-card/sheet documenting the hours dedicated to the Mental Health and Substance Abuse case management services provided.
 - Pay Stub of Staff Member being paid.
- Monthly Service Reports
 - Summary of services delivered, including the number of clients receiving mental health or substance abuse treatment each month.
- Contracts or Agreements
 - Subcontractor agreements with mental health providers, outlining the scope of services, duration, and payment terms. Note subcontractor terms in this contract.
- Site denomination
 - If providing Mental Health and Substance Abuse Treatment support for a specific sanctioned camping site, shelter, or organization, please denote this in the roll-up.

Emergency and Transitional Shelters

- Construction and Improvement
 - Contracts with vendors or subcontractors for construction or facility improvement.
 - Receipts and invoices for construction materials, labor, and equipment rentals.
 - Proof of payment for construction-related activities.
- Operating Costs
 - Itemized receipts of operating expenses including utility bills, rent/mortgage statements, improvement costs, and other operational expenses.
 - Detailed financial reports showing shelter operating costs (e.g., electricity, water, food services) submitted for reimbursement.
- Staffing
 - Payroll records for shelter staff, including timecards and pay stubs.
 - Job descriptions and duties for staff positions funded by the grant.
 - Documentation of staff training, if applicable.

- Contracts or Agreements
 - Subcontractor agreements outlining the scope of services, duration, and payment terms. Note subcontractor terms in this contract.

Non-Congregate Shelters

- Non-Congregate Rapid Rehousing Rental Assistance (deposit and subsequent months rental assistance)
 - Copy of Lease Agreement (first page and signature page) or Landlord Agreement Form with signatures
 - Copy of hotel agreement and itemized receipts if applicable.
 - Proof of payment (cleared check, receipt, financial ledger, etc.).
- Non-Congregate Rapid Rehousing Utility Assistance
 - Letter stating arrears from utility company.
 - Deposit requirements/information from utility company.
 - Proof of payment (cleared check, receipt, financial ledger, etc.).
- Sheltering Operations
 - Itemized receipts of operating expenses.
 - Payroll records for shelter staff, including timecards and pay stubs.
 - Job descriptions and duties for staff positions funded by the grant.
 - Documentation of staff training, if applicable.

Support for Sanctioned Camping Sites

- Construction and Improvement
 - Contracts with vendors or subcontractors for construction or facility improvement.
 - Receipts and invoices for construction materials, labor, and equipment rentals.
 - Proof of Payment for construction-related activities.
- Operating Costs
 - Itemized receipts of operating expenses including utility bills, rent/mortgage statements, improvement costs, and other operational expenses.
 - Detailed financial reports showing shelter operating costs (e.g., electricity, water, food services) submitted for reimbursement.
- Staffing
 - Payroll records for shelter staff, including timecards and pay stubs.
 - Job descriptions and duties for staff positions funded by the grant.
 - Documentation of staff training, if applicable.
- Contracts or Agreements
 - Subcontractor agreements outlining the scope of services, duration, and payment terms. Note subcontractor terms in this contract.

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ATTACHMENT F8 – CHALLENGE UNSHELTERED GRANT INVOICE & MATCH REPORT

CHALLENGE GRANT		FEID #
Contract #		Provider Name
Invoice #		Address
Invoice Period		

For Use by Provider							Previous	Balance
Org Code	Description	Deliver-able	Served this Month	Approved Budget	Payment Amount	Payment(s) Total	After This Payment	
60303038209	Challenge Unsheltered			\$	\$	\$	\$	
60303040209	Admin			\$	\$	\$	\$	
	Total			\$	\$	\$	\$	
	Match			\$	\$	\$	\$	

By signing this invoice, I certify to the best of my knowledge and belief that the invoice is true, complete and accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal or State Award. I am aware that any false, fictitious, or fraudulent information or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. Additionally, I certify that all reports supporting this invoice have been submitted to the Department in accordance with this agreement.

Signature of Provider Official	Date	Title of Provider Official
--------------------------------	------	----------------------------

For Use by Contract Manager Only			
Deliverables Met (if no, see delayed payment per contract section F-5.2)	Amount of Delayed Payment (for Unmet Service Deliverables)	\$	Date of Invoice Received
Yes / No	Recoupment of Delayed Payment (Previous Unmet Service Deliverables Achieved)	\$	Date Goods / Services Received
Will a Financial Consequence be applied?	Amount of Financial Consequence (Admin)	\$	Date Goods Inspected and Approved
Yes / No	Total Payment Amount	\$	Date Invoice Approved

Org Code	see payment detail above	Contract Manager Name
OCA	Object	1000
EO	Category	100379
		Contract Manager Signature

ATTACHMENT F8.1 – CHALLENGE GRANT ROLL-UP REPORT

Provider Name

Contract Number

Month of Services

Mental Health and Substance Abuse Treatment

<i>Date Service Provided</i>	<i>HMIS Number (Client ID)*</i>	<i>Service Provided</i>	<i>Vendor</i>	<i>Amount</i>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

*(HMIS Number if applicable)

Total

\$

Emergency and Transitional Shelters

<i>Date Service Provided</i>	<i>HMIS Number (Client ID)*</i>	<i>Service Provided</i>	<i>Vendor</i>	<i>Amount</i>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

*(HMIS Number if applicable)

Total

\$

Non-Congregate Shelters *(HMIS Number if applicable)

<i>Date Service Provided</i>	<i>HMIS Number (Client ID)*</i>	<i>Service Provided</i>	<i>Vendor</i>	<i>Amount</i>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
*(HMIS Number if applicable)			Total	\$

Support for Sanctioned Camping Sites *(HMIS Number if applicable)

<i>Date Service Provided</i>	<i>HMIS Number (Client ID)</i>	<i>Service Provided</i>	<i>Vendor</i>	<i>Amount</i>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
*(HMIS Number if applicable)			Total	\$

Administrative Costs

			Total (10%)	\$
TOTAL AMOUNT SUBMITTED FOR PAYMENT			Total	\$

25-0399

Attachment 3

BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
BUDGET AMENDMENT

BGRV 148 - 1204240000000000155

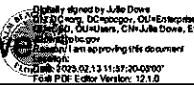
BGEX 148 - 1204240000000000470

FUND General Fund

ACCOUNT NUMBER	ACCOUNT NAME	UNIT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED as of 2/13/2025	REMAINING BALANCE
REVENUES									
148 1354 3469	State Grnt Oth Human Services	DCF Unified Homeless Contract	231,143	1,890,708	627,900	0	2,518,608		
			0	0	0	0	0		
	Total Fund Revenues		2,373,562,814	2,377,970,716	627,900	0	2,378,598,616		
EXPENDITURES									
148 1354 8201	Contributions-Non-Govts Agnces	DCF Unified Homeless Contract	124,000	1,391,246	627,900	0	2,019,146	299,646	1,719,500
			0	0	0	0	0		0
	Total Fund Expenditures		2,373,562,814	2,377,970,716	627,900	0	2,378,598,616		

SIGNATURES

Julie Dowse



DATES

02/13/25

Initiating Department/Division

ASDUA

Administration/Budget Department Approval

2/18/25

OFMB Department - Posted

BY BOARD OF COUNTY COMMISSIONERS

At Meeting of: 03/11/2025

Deputy Clerk to the Board of County Commissioners

25-0569

Attachment 4


BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
EXPENDITURE BUDGET TRANSFER

BGEX 148 - 1220240000000000609

FUND 0001 - General Fund

ACCOUNT NUMBER	ACCOUNT NAME	UNIT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED as of 12/20/24	REMAINING BALANCE
EXPENDITURES									
820 9900 9901	Contingency Reserves	Reserves	20,000,000	20,841,195	0	156,975	20,684,220	0	20,684,220
148 1354 8201	Contributions-Non-Govts Agnces	DCF Unified Homeless Contract	124,000	1,391,246	156,975	0	1,548,221	0	1,548,221
	Total Fund Expenditures				156,975	156,975			

SIGNATURES

Julie Dowe  Digitally signed by Julie Dowe
DN: cn=org, DC=pbegov, OU=Enterprise, OU=Users, CN=Julie Dowe, E=JDowe@palmbeach.fl.gov; am approving this document
Date: 2025.02.13 11:58:13 -05'00'
Email: BOE.Editor.Version: 12.1.0

DATES

02/13/25

ASD/CAJL 2/18/25

Initiating Department/Division

Administration/Budget Department Approval

OFMB Department - Posted

BY BOARD OF COUNTY COMMISSIONERS

At Meeting of: 03/11/25

Deputy Clerk to the Board of County Commissioners