

MISCELLANEOUS APPROPRIATIONS AGREEMENT  
BETWEEN THE  
CITY OF POMPANO BEACH  
AND  
**Broward Regional Health Planning Council, Inc.**

THIS AGREEMENT made and entered into on this \_\_\_\_ day of \_\_\_\_\_, 2017 by and between the CITY OF POMPANO BEACH, a municipal corporation of the State of Florida, hereinafter the CITY.

**Broward Regional Health Planning Council, Inc.** a Florida Not For Profit Corporation authorized to do business in the State of Florida, whose principal office is located at **200 Oakwood Lane, Suite 100, Hollywood, FL 33020** hereinafter referred to as RECIPIENT.

WITNESSETH:

WHEREAS, the City of Pompano Beach has appropriated for its current Fiscal Year 2017-18 (October 1<sup>st</sup> through September 30<sup>th</sup>), the sum of **\$40,000** to RECIPIENT, to conduct a program entitled or activity as described in *Addendum "1"* which is attached hereto and incorporated herein by reference, for the period beginning October 1, 2017 and ending September 30, 2018; and

WHEREAS, it is in the best interest of the City of Pompano Beach to enter into a contract with the RECIPIENT for the conduct of said program or activity in accordance with the terms and conditions set forth herein; and

WHEREAS, I/We, the undersigned representative(s) of the RECIPIENT, am/are authorized to sign this Agreement binding said RECIPIENT.

NOW, THEREFORE, in CONSIDERATION of the mutual promises herein, the parties do hereby agree as follows:

- 1) RECIPIENT agrees to do as follows:
  - a) To accept the funds as appropriated in accordance with the terms of this Agreement;
  - b) If RECIPIENT intends on obtaining matching funds from another source at the time of the application for the CITY grant, to submit a matching fund commitment agreement which is attached hereto as *Exhibit "A"* and incorporated herein by reference in its entirety to the CITY; and
  - c) Prior to the award of any City funds, RECIPIENT shall provide documentation substantiating that RECIPIENT's corporation/organization falls within Section 501(c)(3) and Section 501(A) of the Internal Revenue Code; and
  - d) To abide by Chapter 119, Florida Statutes, as from time to time amended, and to comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations. Any difference between the above federal, state, county or municipal guidelines or regulations and this Agreement shall be resolved in favor of

the more restrictive guidelines; and

- e) Not to utilize allotted funds under this Agreement for any purpose other than the purpose set forth in this Agreement; and
- f) To return to the CITY within fifteen (15) days of demand all City funds paid to said RECIPIENT under the terms of this Agreement upon the finding that the terms of any agreement executed by the RECIPIENT of the provisions or any applicable ordinance or law have been violated by the RECIPIENT; and
- g) To return to the CITY all funds expended for disallowed expenditures as determined by the City of Pompano Beach; and
- h) To maintain books, records and documents in accordance with generally accepted accounting procedures and practices to maintain adequate internal controls which, relating to the project(s), sufficiently and properly reflect all expenditures of funds provided by the City of Pompano Beach under this Agreement; and
- i) To consent to:
  - 1) Such audits of the financial affairs of the RECIPIENT by the City of Pompano Beach Internal Auditor as the CITY may require; and
  - 2) Producing all documents required by the Internal Auditor; and
  - 3) In the case of the RECIPIENT receiving Fifty Thousand Dollars (\$50,000) or more from the City of Pompano Beach, furnish the City of Pompano Beach a copy of a grant auditing report conducted in accordance with generally accepted auditing standards, Government Auditing Standards, issued by the Comptroller General of the United States and the provisions of Office of Management and Budget Circular A-133. All grant funds shall be shown via explicit disclosure in the annual financial statements and/or the accompanying notes to the financial statement. This report shall be due within 120 days of the close of the CITY'S fiscal year; and
  - 4) For grants less than \$50,000, the annual report of receipts and expenditures to be submitted shall use a budget to actual comparative basis which shows the approved budget updated for any budget changes (paragraph 5) and a compilation of quarterly progress reports (paragraph 6). The annual report of revenues and expenditures shall include a statement of expenditures made in each budget category and line item identified in the budget as well as annualized statistical information relative to the program or activity which was previously submitted in quarterly progress reports. Outstanding encumbrances should be indicated in quarterly progress reports of expenditures. Timely liquidation of encumbrances in the fourth quarter of grant activity to expedite the timely submission of the fourth quarterly report is required as there will be no carryover of residual funds remaining unspent or unencumbered by the recipient. This report shall be on a fiscal year of October 1st through September 30th, and shall be due on November 16th of

each fiscal year; and

- 5) Preserve and make available all financial records, supporting documents, statistical records and any other documents pertaining to this agreement for a period of three (3) years after termination of this Agreement; or, if an audit has been initiated and audit findings have not been resolved at the end of these three (3) years, the records shall be retained until resolution of the audit.
- j) To operate the program or activity generally described herein and more particularly described in *Addendum "1"* to this Agreement. The RECIPIENT may not enter into subcontracts or sub-grants under the provisions of this Agreement without the City of Pompano Beach's written approval. The RECIPIENT must furnish the City of Pompano Beach a copy of all subcontracts or sub-grants prior to receiving written approval.
- 2) This Agreement shall become effective on the 1st day of October 2017, and shall terminate on the 30th day of September 2018, unless cancelled sooner with or without cause by either party by giving thirty (30) days prior written notice of such cancellation to the other party.
- 3) The City of Pompano Beach agrees to pay the RECIPIENT the sum of \$40,000 for the program or activity. City of Pompano Beach funds will be provided upon a quarterly reimbursement basis for all awards above \$15,000 based upon documented invoices. Reimbursable amounts for all awards above \$15,000 will be limited to 1/4 of the total award amount per quarter. For those awards equal to or less than \$15,000, reimbursements will be based upon documented invoices for any given quarter up to the entire amount of the award. In the event that RECIPIENT does not receive matching funds described in *Exhibit "A"* or said funds are revoked during the term of the Agreement, CITY funding may be revoked and RECIPIENT shall comply with (1) (f) of this Agreement for returning all or part of awarded CITY funds.
- 4) RECIPIENT agrees to provide the City of Pompano Beach City Manager's Office with a quarterly narrative progress report on the program or activity described in *Addendum "1"*. Such reports shall include basic statistical information relative to the program or activity and a statement of expenditures made in each budget category and line item identified in the budget which is included in *Addendum "1"*. Distribution of each reimbursement payment to the RECIPIENT shall be contingent upon prior receipt of the required progress report which is due during the preceding quarter. Quarterly reports shall be due no later than the following dates:

1st Quarterly Report (October/November/December) - February 1st

2nd Quarterly Report (January/February/March) - May 1st

3rd Quarterly Report (April/May/June) - August 1st

4th Quarterly Report (July/August/September) - November 15th

However, if any of the above dates fall on a weekend, then the due date will be extended to the next business day, thereafter.

- 5) The approved budget for the RECIPIENT, included in *Addendum "1"* and any changes in the budget which would affect expenditure of funds provided under the terms of this contract, must be approved in writing by the City Manager or his/her designee prior to the expenditure of such funds; provided, that nothing herein shall authorize or allow any expenditure or obligation of funds in excess of the total sum aforesaid.
- 6) RECIPIENT agrees that any funds provided by the City of Pompano Beach for the operation of the program or activity during the period of October 1, 2017 through September 30, 2018 which are residual funds remaining unspent or unencumbered by any existing (not contingent) legal obligation shall be retained by the City of Pompano Beach.
- 7) THIS AGREEMENT shall apply to all funds appropriated during the fiscal year ending September 30, 2018, provided that the City of Pompano Beach's rights and the RECIPIENT'S duties hereunder shall continue after said date as provided herein;
  - a) In the event that the City of Pompano Beach fails for any reason to appropriate funds for this agreement, this AGREEMENT shall be deemed terminated and CITY shall provide RECIPIENT with thirty (30) days written notice. Upon receipt of said notice, RECIPIENT shall be responsible for any and all expenses and/or legal obligations made after receipt of written notice from the CITY.
- 8) Nothing in this AGREEMENT shall be deemed to constitute or create a joint venture, partnership, pooling arrangement or other form of business entity between the RECIPIENT and the City of Pompano Beach. RECIPIENT agrees to indemnify and hold harmless the City of Pompano Beach from an against all claims, suits, damages, costs, losses and expenses in any manner arising out of or connected with the RECIPIENT's expenditure of allotted funds under this AGREEMENT and the RECIPIENT's program or activity generally described herein and more particularly described in *Addendum "1"* to this Agreement.

**"CITY":**

Witnesses:

**CITY OF POMPANO BEACH**

\_\_\_\_\_

By: \_\_\_\_\_  
LAMAR FISHER, MAYOR

\_\_\_\_\_

By: \_\_\_\_\_  
GREGORY P. HARRISON, CITY MANAGER

Attest:

(SEAL)

\_\_\_\_\_  
ASCELETA HAMMOND, CITY CLERK

Approved As To Form:

\_\_\_\_\_  
MARK E. BERMAN, CITY ATTORNEY

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2017 by **LAMAR FISHER** as Mayor, **GREGORY P. HARRISON** as City Manager and **ASCELETA HAMMOND** as City Clerk of the City of Pompano Beach, a municipal corporation, on behalf of the municipal corporation, who are personally known to me.

NOTARY'S SEAL:

\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA

\_\_\_\_\_  
(Name of Acknowledger Typed, Printed or Stamped)

\_\_\_\_\_  
Commission Number

**"RECIPIENT":**

Witnesses:

  
Guadalupe Falcone

**BROWARD REGIONAL HEALTH PLANNING COUNCIL, INC.**, a Florida Not For Profit Corporation

By:   
Michael DeLuca

Typed or Printed Name

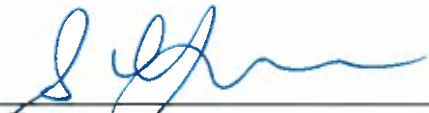
Title: President & CEO.

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 8<sup>th</sup> day of August, 2017 by \_\_\_\_\_ as \_\_\_\_\_ of **Broward Regional Health Planning Council, Inc.**, a Florida Not For Profit Corporation. He/she is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

NOTARY'S SEAL:



  
NOTARY PUBLIC, STATE OF FLORIDA

SANDRA THOMPSON  
(Name of Acknowledger Typed, Printed or Stamped)

DEC 15, 2019  
Commission Number



Broward Regional Health Planning Council, Inc.  
200 Oakwood Lane, Suite 100  
Hollywood, Florida 33020-1929

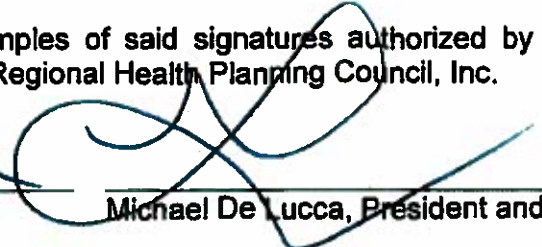
T: (954) 561-9681  
F: (954) 561-9685  
E: info@brhpc.org

RESOLUTION OF BOARD OF DIRECTORS

The Board of Directors of the Broward Regional Health Planning Council, Inc. at its meeting of March 22, 2017, by motion and vote, duly recorded in the minutes thereof, authorize Barbara S. Effman, Chair or Michael De Lucca, President and CEO to sign agreements, contracts and invoices on behalf of the Broward Regional Health Planning Council, Inc.

Appearing below are samples of said signatures authorized by the Board of Directors of the Broward Regional Health Planning Council, Inc.

  
Barbara S. Effman, Chair

  
Michael De Lucca, President and CEO

BOARD OF DIRECTORS

Barbara S. Effman, M.P.H.  
Chair

David Roach, BA  
Vice Chair

John A. Benz, MBA  
Secretary

Cyril Blavo, D.O., M.P.H. & TM, FACOP  
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Lee Chaykin, FACHE  
Mark Dissette, MBA  
Albert C. Jones, MA  
Leliani Kicklighter, MBA, ARM, RN  
Samuel F. Monson, BA, MLS  
Daniel Lewis  
Jasmin Shirley, MSPH  
Cary Zinkin, D P M



Michael De Lucca, MPM  
President and CEO

In witness whereof, I have set my hand of said corporation, in Hollywood, Florida on this 22<sup>nd</sup> day of March, 2017.

Equal Opportunity Employer

  
John Benz, Secretary

In the presence of:

ADDENDUM "1"

CITY OF POMPANO BEACH  
FISCAL YEAR 2018

FUNDING FOR NON-FOR-PROFIT ORGANIZATIONS

1. Legal Name of Organization: Broward Regional Health Planning Council, Inc.
2. Mailing Address: 200 Oakwood Lane Suite #100  
Hollywood, Florida 33020
3. Date of Incorporation: October 6, 1982
  - 3a. Does your corporation/organization fall within Section 501(c)(3) and Section 501(a) of the Internal Revenue Code? Yes  No   
(Please attach proof of tax exempt status)  
  
IRS Tax Exempt Status form is attached as requested.
4. Chief Executive Officer: Michael De Lucca, MHM  
  
Official Title: President & CEO Telephone #: 954 561-9681
5. Contact Person (if different from above): Joanne G. Richter, MS  
Telephone #: 954 561-9681 Ext. 1211
6. *Provide a brief description of the organizations goals and objectives:*  
The Broward Regional Health Planning Council, Inc. (BRHPC) is a private not-for-profit corporation 501(c) (3) established according to Section 408.033, Florida Statutes.

**Mission Statement:** Broward Regional Health Planning Council is committed to delivering health and human service innovations at the national, state and local level through planning, direct services, evaluation and organizational capacity building.

**Purpose:** The organization's purpose is to assume a leadership role in health planning; system coordination; community collaboration and implementation of health and human services planning to meet the needs of the community.

**Direct Service programs:** BRHPC's direct service programs serve uninsured and underinsured low-income Broward County residents. Programs include: Maternal and Child Health, Substance Abuse and Mental Health, Forensic Reintegration, Transforming our Community's Health (health promotion/disease prevention), Chronic Disease Self-Management and Matter of Balance programs for seniors, Housing Assistance, Health



ADDENDUM "1"

Insurance Continuation, HIV/AIDS and Eligibility, Enrollment, Fiscal Administration for School Readiness, Child Care Executive Partnership, Voluntary Prekindergarten and Financially Assisted Child Care Programs (ELC-2) in Broward County. Our maternal/child health programs serve men, women, children and newborns. All programs with the exception of the forensic program, serve children, either directly (i.e. mental health/substance abuse) or as a part of services provided to families (i.e. housing). As part of its programming, BRHPC has developed databases to track client level outcomes and administrative data for each awarded contract.

BRHPC in collaboration with the Broward County Medical Examiner's Office Trauma Management Agency provides both the state required annual report and the state required five (5) year plan which is utilized to determine levels of service and need for additional Trauma facilities and EMS and ambulance response services.

The funds for the contract with the City of Pompano Beach is to assist in providing the required 6% Local Match in order to obtain approximately \$13 million in federal funding for child care services for Economically Eligible *working* parents. In order to assist parents with the child care enrollment process, BRHPC has instituted multiple enrollment options to ensure that enrolling in child care services is more accessible. These options include the ability to enroll online, at the child care center of choice, at Primary Care Centers throughout the County, as well as at BRHPC locations.

7. Amount of funding requested: \$40,000

8. *Provide a brief description of how City funds would be spent and identifying the community need(s) to be addressed. This should include what exactly will be provided and to how many people (City residents).*

The funds being requested will be utilized to provide a portion of the 6% Local Match required in order to obtain the full amount of federal monies being made available to provide Economically Eligible Child Care services to working parents who are residents of Broward County. *Broward County's allocation for Income Eligible Child Care Services is currently \$13 million.* The Local Match requirement is \$780,000 (6%). As each of the county's municipalities have Child Care Centers providing these services for their residents, BRHPC is requesting match funds from each municipality to assist in meeting the required Local Match. The \$40,000 requested from the City of Pompano Beach represents 5% of the required Local Match requirement and also less than 1% of the over \$5,055,312 currently paid for the first six months of FY17 to Child Care Centers, conducting business within the City of Pompano Beach.

## ADDENDUM "1"

During the first six (6) months of FY16/17, a **monthly average of 1,852 children of working parents**, were provided Economically Eligible child care services at licensed Child Care Centers located within the City of Pompano Beach. During this same period, **\$5,055,312.00** was paid to 53 licensed Child Care Centers located within the City of Pompano Beach for the provision of child care services for Economically Eligible working parents.

The Federal Block Grant funding for child care services has a significant mandated Local Match requirement (\$780,000) for the Income Eligible Category and as a result, BRHPC is requesting Local Match funds from each of Broward's municipalities to: 1) ensure that all available federal and state monies earmarked for expenditure in Broward County are allocated; 2) ensure that those families within the City of Pompano Beach who are eligible, receive the much needed licensed child care services that enable children to be prepared and ready to learn; and 3) enable parents to be employed and become financially secure and contributing members of their community.

BRHPC believes strongly that quality child care serves as the foundation for later success in school and life. Equally important however, is the fact that through the provision of quality child care, parents will have the ability to work, knowing that their children are in a safe, educational and supportive environment. This funding assists in increasing the capabilities of Pompano Beach families to continue to work as well as become contributing members of their community.

Additionally, payments made to the Child Care Centers located within the City of Pompano Beach (\$5,055,312/6 months) assist in ensuring these centers remain operational and contribute to the city's tax base and local economy.

9. *How will the recommended funding compliment the array of City services currently being provided to City residents?*

The City of Pompano Beach provides an array of services and events for family members in which to participate. The matching funds being requested for child care services, not only supports funding for child care but provides the ability of parents to be employed and contributing financially to their community as well as being actively engaged in the city's events and services.

One of the initiatives of the City's Strategic Plan is the creation of additional e-government services. BRHPC has also taken the initiative to increase its utilization of online procedures to have its enrollment process become as paperless as possible. In the area of its oversight of child care services, BRHPC has initiated an online system for enrolling in child care services. By providing parents the ability to enroll online, the necessity to drive to one location to enroll has been eliminated. This participation in enrolling online has resulted in moving towards a paperless process, thus reducing the negative impact upon the environment as well as increasing the number of families who

**ADDENDUM "1"**

have enrolled. Parents also have the ability to enroll at numerous locations throughout the county, including BRHPC offices, child care centers and social service offices.

10. *Will the recommended grant amount result in the leveraging of additional funds from the County, State, Federal or other foundations/agencies which require a local match like a contribution from the City of Pompano Beach?* Yes  X  No

10a. *If yes, what is the ratio of this other funding to the City's recommended funding?*

A 6% Local Match of \$780,000 is required to draw down the \$13,000,000.00 in federal funding available to Broward County specifically for Income Eligible child care services for working parents. For FY17/18 Pompano Beach has been requested to provide \$40,000 in Local Match funds. This amount represents less than 1% of the \$5,055,312 paid to Child Care Centers located within Pompano Beach through June 30, 2017.

11. Does your organization receive support from the County or other cities? Yes  X  No

11a. If yes, please list the amount(s) and source(s).

**FY 2015/2016 thru 6/30/16**

**Municipalities (total) \$355,000(Economically Eligible category)**

**United Way of Broward County \$325,000 (Economically Eligible category)**

**Children's Services Council of Broward \$100,000 (Economically Eligible category)**

*The Match dollars provided by Broward County government, for child care services is applied towards the 50% local match required for the Child Care Purchasing Pool which includes children under the age of 6 and children at-risk.*

12. What percentage of your organization's budget is direct delivery of service as opposed to "overhead"?  98%

ADDENDUM "1"

13. PERFORMANCE MEASURES

Please list below the various levels of service [performance measures] that your organization will be providing to residents of the City of Pompano Beach.

	Most Recently Completed Year 2016	Current Year Estimated 2017	Next Year Proposed 2018
Total Persons Served (county-wide Unduplicated)	N/A *	14,592	14,750
Number of Pompano Beach residents served	N/A*	1,852/monthly (average)	1,925/monthly (average)

14. Agency Budget Information: *Please note that Total Resources Available and Total Resources Allocated should be EQUAL for each fiscal year.*

Economically Eligible Child Care Services for Working Parents		Last Year Adopted FY2017	Current Year Proposed FY2018
<b>Resource Available:</b>			
City of Pompano Beach		\$ 40,000	\$ 40,000
Federal Funding (BG8 slots)*		\$13,000,000	\$13,000,000

**ADDENDUM "1"**

State Funding			
Other Local Government Funding (County and Local Match)		\$315,000	\$315,000
Foundation Grants			
User Fees			
Other Revenue Sources (United Way and Children's Services Council)		\$425,000	\$425,000
<b>Total Resources Available</b>		<b>\$13,780,000</b>	<b>\$13,780,000</b>

\*BG8 – Economically Eligible

<b>Resource Allocated:</b>			
Salaries			
Benefits			
Supplies			
Contractual Services-			
Capital Outlay [Equipment] (Computers, Furniture)			
Other (Payments to Child Care Centers)		\$13,780,000	\$13,780,000
<b>Total Resources Allocated</b>		<b>\$13,780,000</b>	<b>\$13,780,000</b>

- *Please provide line item detail for expenses over \$10,000*



Department of the Treasury  
Internal Revenue Service

P.O. Box 2508  
Cincinnati OH 45201

In reply refer to: 0752255928  
May 09, 2016 LTR 4168C 0  
59-2274772 000000 00

00025401  
BODC: TE

BROWARD REGIONAL HEALTH PLANNING  
COUNCIL INC  
200 OAKWOOD LANE SUITE 100  
HOLLYWOOD FL 33020-1929



021585

Employer ID Number: 59-2274772  
Form 990 required: YES✓

Dear Taxpayer:

This is in response to your request dated Apr. 28, 2019, regarding your tax-exempt status.

We issued you a determination letter in JULY 1983, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

Our records also indicate you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If a return is required, you must file Form 990, 990-EZ, 990-N, or 990-PF by the 15th day of the fifth month after the end of your annual accounting period. IRC Section 6033(j) provides that, if you don't file a required annual information return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

0752255928  
May 09, 2016 LTR 4168C 0  
59-2274772 000000 00  
00025402

BROWARD REGIONAL HEALTH PLANNING  
COUNCIL INC  
200 OAKWOOD LANE SUITE 100  
HOLLYWOOD FL 33020-1929

Sincerely yours,



Teri M. Johnson  
Operations Manager, AM Ops. 3

# *State of Florida*

## *Department of State*

I certify from the records of this office that BROWARD REGIONAL HEALTH PLANNING COUNCIL, INC. is a corporation organized under the laws of the State of Florida, filed on October 6, 1982.

The document number of this corporation is 765309.

I further certify that said corporation has paid all fees due this office through December 31, 2017, that its most recent annual report/uniform business report was filed on January 9, 2017, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Ninth day of January, 2017*



*Ken Detjmer*  
**Secretary of State**

Tracking Number: CC8153048483

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>





HEALTH & HUMAN SERVICE INNOVATIONS

CITY OF POMPANO BEACH  
OFFICE OF CITY MANAGER

17 APR 11 AM 9:57

Broward Regional Health Planning Council, Inc.  
300 Oakwood Lane, Suite 100  
Hollywood, Florida 33020-1929

T: (954) 561-9681  
F: (954) 561-9685  
E: info@brhpc.org

April 10, 2017

## Administration

Greg Harrison, City Manager  
City of Pompano Beach  
100 W. Atlantic Blvd., #430  
Pompano Beach, FL 33060

Dear Mr. Harrison:

First of all, on behalf of Broward Regional Health Planning Council, Inc. I wanted to express appreciation for the Match Funding provided to BRHPC for FY16/17. This allocation provided children in Pompano Beach licensed child care, thus allowing their parents to continue working and/or attending school.

BRHPC is one of only two (2) social service agencies in Broward County that are required to provide Local Match dollars in order to obtain their federal funding, the other agency being the Aging and Disability Resource Center. For the upcoming Fiscal year, BRHPC, similar to ADRC, is requesting *"Fair Share" Match dollars* from the City of Pompano Beach in order to meet the Local Match requirement calculated to be \$43,869.

The required 6% Local Match dollars will allow Broward County to draw down over \$18.6 million in federal funds to provide Child Care for the Economically Eligible (Working parents). Through this same contract BRHPC is able to draw down over \$42 million in School Readiness funding which also includes Voluntary Pre-Kindergarten (VPK) child care services.

This Local Match enables parents to continue working and/or attending school, knowing that their children are being cared for in a licensed, secure and educational setting. Additionally, the payments are made directly to child care businesses located in Pompano Beach allowing these businesses to continue operation while also paying taxes to the City.

We at BRHPC are most grateful for the City's allocation for FY16/17 and look forward to your continued funding for FY17/18.

Sincerely,

Michael De Lucca, MPH  
President & CEO

### BOARD OF DIRECTORS

Barbara S. Effman, M.P.H.  
Chair

David Roach, BA  
Vice Chair

John A. Benz, MBA  
Secretary

Cyril Blavo, D.O., M.P.H. & TM, FACOP  
Treasurer

Lee Chaykin, FACHE  
Mark Dissette, MBA  
Albert C. Jones, MA  
Leilani Kicklighter, MBA, ARM, RN  
Daniel Lewis  
Samuel F. Morrison, BA, MLS  
Jasmin Shirley, MSPH  
Cary Zinkin, D.P.M.

Michael De Lucca, MHM  
President and CEO

Equal Opportunity Employer

Broward Regional Health Planning Council, Inc.  
200 Oakwood Lane, Suite 100  
Hollywood, Florida 33020-1929



T: (954) 561-9681  
F: (954) 561-9685  
E: info@brhpc.org

May 31, 2017

### Administration

#### BOARD OF DIRECTORS

Mayor Lamar Fisher  
100 West Atlantic Blvd  
Pompano Beach, FL 33060

**\$780,000 in Local Match = \$13 million in child care for Economically Eligible working parents in Broward County.**

Barbara S. Effman, M.P.H.  
Chair

David Roach, BA  
Vice Chair

John A. Benz, MBA  
Secretary

Cyril Blavo, D.O., M.P.H. & TM, FACOP  
Treasurer

Dear Mayor Fisher:



Broward Regional Health Planning Council, Inc. (BRHPC) is eligible to receive \$13 million in federal funding from the Early Learning Coalition to provide child care at *licensed* facilities for our youngest residents. In order to be eligible for these subsidized payments, which are paid directly to the Child Care Centers, parent(s) must be economically eligible (unable to afford the full cost of care) and working or furthering their education.

Lee Chaykin, MHSA  
Mark Dissette, MBA  
Albert C. Jones, MA  
Leilani Kicklighter, MBA, ARM, RN  
Daniel Lewis  
Samuel F. Morrison, BA, MLS  
Jasmin Shirley, MSPH  
Cary Zinkin, D.P.M.

To receive the entire \$13 million available for Broward County children, *BRHPC must provide a 6% Local Match of \$780,000*. With the assistance of your city, our county's children will be healthy and ready to learn as their parents work or further their education.

Michael De Lucca, MHM  
President and CEO

Equal Opportunity Employer

This program provides high quality early childhood education for children of working parents at approximately 650 licensed early learning centers throughout Broward County. The program not only ensures that our children are prepared to be successful in school but also allows parents to remain in the workforce. Additionally, license fees and taxes paid by the child care centers contribute to the economy of the individual municipalities in which they are located.

On behalf of the working families in Broward County, BRHPC has requested, in correspondence with each City Manager, an allocation in the FY17/18 budget, from each of the municipalities, in order to ensure that our children are cared for in a licensed, secure and educational setting.

Sincerely,

Michael De Lucca, MHM  
President & CEO

17 JUN -5 AM 9:48  
CITY OF POMPANO BEACH  
OFFICE OF CITY MANAGER

*Broward Regional Health Planning Council, Inc.  
FY 17/18 Non-Profit Funding Request*

**Description of Program**

Broward Regional Health Planning Council, Inc. is one of only two (2) social service agencies in Broward County that are required to provide Local Match dollars in order to obtain their federal funding allocation, the other agency being the Aging And Disability Resource Center.

For FY17/18, BRHPC is requesting "Fair Share" Local Match dollars from the City of Pompano Beach, in order to obtain federal funding for the provision of subsidized child care for low income (Economically Eligible) families. "Fair Share" Funding from the City of Pompano Beach, in the amount of **\$43,869**, will be used to provide a portion of the required 6% Local Match necessary to draw down the over **\$18.6 million** in federal and state monies granted through the Early Learning Coalition of Broward and its administration of the Federal Child Care Block Grant (Title XX), allowing subsidies for Pompano Beach children through state/federal Title XX and/or Child Care Purchasing Pool funds allocated for Economically Eligible (Subsidized) Child Care.

Licensed Child Care Centers, located in the City of Pompano Beach, receiving payments directly from Broward Regional Health Planning Council, Inc. *serve an average of 1,694 children each month at a cost of \$2,500 annually.*

This program provides the ability for parents to be working or attending school full-time. The program also ensure that children are enrolled in *licensed* child care centers which are regulated by both the County and the State. Through the child care center programs provided, parents are assured that their children are safe and well cared for, as well as prepared and ready to learn. *In order to receive Economically Eligible child care for their children, parents must be working and or attending school.*

Additionally, this child care funding increases the capabilities of Pompano Beach families to remain financially secure and contributing members of their community. Payments are made by Broward Regional Health Planning Council *directly* to the Child Care businesses, on behalf of each family. These monthly payments to the individual Child Care Centers contribute to the economy of the city through taxes and fees paid by the individual child care centers.

**Services Provided to Citizens of Pompano Beach**

Subsidized Child Care for the Economically Eligible requires that a number of conditions need to be met by applicants, including income limits, in order to be eligible

- Parents who enroll their children for the program must either be employed or attending a trade school or college at least 20 hours per week.

BRHPC FY17/18 Non-Profit Funding Request  
Page Two

- This program provides payments for child care services directly to a *licensed* child care center

**Benefits if funded**

- Provides payments for child care services directly to a licensed child care center allowing parents with the means to become financially self-sufficient by providing the opportunity to be employed and/or attend a trade school or college.
- Program allows young children to be successful in school in the future. Many studies show that by attending day or child care, that the experience will better prepare young children and infants to start kindergarten ready to learn and grow.
- Ensures children are cared for in a safe, secure and educational setting while their parents are working or attending school.
- Contributes to development of small businesses and taxes/fees paid to the City

**Other Funding received** - *Local Match funding is being utilized to leverage Federal and State funding from the Child Care and Development Fund Block Grant for the provision of Child Care Services throughout all of Broward County. As for FY16/17 local municipalities, the Children's Services Council and United Way of Broward County contribute to the Local Match requirement.*

**In summary:**

- 1) Child Care for the Economically Eligible will be available to approximately 1,695 Pompano Beach children monthly;
- 2) The current amount available to Broward County for the outlined child care service is approximately *\$18.6 million*;
- 3) Match Funding in the amount of *\$43,869* is being requested from the City of Pompano Beach to assist in meeting the Federal Grant mandated requirement of a *6% Local Match for the Economically Eligible* program;
- 4) The Local Match required in order to draw down the *\$18.6 million* of available federal funding is approximately *\$1.2 million*; and
- 5) Additional Local Match Funding is being requested from each of the County's municipalities as well as the Children's Services Council of Broward and the United Way of Broward County, all of which have contributed annually towards the 6% Local Match requirement.

**Attachments:** Supplemental Spreadsheet  
Certificate of Corporation  
501(c) (3) Tax Exempt Status



**BRHPC ~ At Corner of Oakwood L:**  
**BRHPC supports National HIV Te**  
According to the Florida Departme  
diagnosed and unaware. Of those,  
HIV testing is the initial step in the  
are aware of their HIV infection and  
**Take the test, take control!**

---

**From:** Renee Jaffe [<mailto:RJaffe@elcbroward.org>]

**Sent:** Thursday, June 01, 2017 2:54 PM

**To:** Michael De Lucca

**Subject:** Contract Status

Hi Mike,

Last night there was an ELC Executive Committee meeting and, as you may have already heard from your staff, the committee made a motion to extend your current contract for three months (as is) with pro-rated level funding. The intent of the three month extension was to allow the ELC additional time to evaluate the waitlist services and allow ample time for negotiations should it be needed. After we complete our evaluation, any changes would likely be included in a renewal process. The Exec committee requested your acceptance of the terms described above prior to our June 9<sup>th</sup> Board meeting.

Our understanding of this approval is that all services should stay as is until the end of the three month period (9/30/17), which includes the subcontracted services for the waitlist with 211 Broward. As a result, at this time, please do not make any changes to the form or structure of how services are currently delivered.

My intent for providing the information by email was so you have it in writing and sooner rather than later, however I'd more than happy and welcome a discussion via phone or in person. So let me know if/when you want to meet or talk... and I'll make myself available. Otherwise, let me know if you have any questions. In the near future, I will schedule a meeting with you, me and Shelia so we can connect and make sure we are all on the same page.

I hope you are doing well and I look forward to hearing from you.

Renee

**Renee Jaffe,**  
*Chief Executive Officer*

**Early Learning Coalition of Broward County, Inc.**

6301 NW 5th Way, Suite 3400

Ft. Lauderdale, FL 33309

Phone: (954) 377-2194

Fax: (954) 377-2192

[www.elcbroward.org](http://www.elcbroward.org)

**SUNSHINE LAW:** All emails to and from the Early Learning Coalition of Broward County, Inc. are subject to Government-in-the-Sunshine law and public record requests.



**Early Learning Coalition of Broward County, Inc.**

**Amendment # 003**

to

**CONTRACT No. BRHPC-EDAP-17-ELC2**

  X   Program      X   Budget      X   Other

This amendment is entered into between the **Early Learning Coalition of Broward County, Inc.**, hereinafter referred to as the "**COALITION**" and **Broward Regional Health Planning Council, Inc.**, hereinafter referred to as the "**CONTRACTOR**," ("Amendment") and amends the contract identified as **Contract # BRHPC-EDAP-17-ELC2, Eligibility and Enrollment and Fiscal Administration for School Readiness, Child Care Executive Partnership, Voluntary Prekindergarten, and Financially Assisted Child Care Programs, Fiscal Year: July 1, 2015-June 30, 2017, between the COALITION and the CONTRACTOR (hereinafter the "Contract").**

**WHEREAS**, on June 10, 2016, the COALITION's Board of Directors approved a budget amount for FY2016-2017 of \$3,088,743 for School Readiness (SR) services, \$12,046 for Department of Children and Families' ("DCF") Refugee services, \$961,097 for Voluntary Prekindergarten (VPK) services, \$32,406,746 for School Readiness slot payments, \$2,447,306 for Child Care Executive Partnership (CCEP) slot payments, \$4,517,850 for Children Services Council slot payments, \$97,504 for DCF Refugee slot payments, \$743,631 for Contracted SR slot payments, and \$38,662,955 for VPK slot payments; and

**WHEREAS**, on June 10, 2016, the COALITION's Board of Directors approved revisions to the deliverables to clarify anti-fraud activities identified in the Contract; and

**WHEREAS**, the parties desire to amend the Contract in order to reflect said action by the COALITION's Board of Directors and amend certain provisions of the Contract to further clarify the responsibilities of the CONTRACTOR.

**NOW THEREFORE**, in consideration of the mutual terms, conditions, promises, covenants and payments hereinafter set forth in the Amendment, the parties to this Amendment hereby agree to amend the Contract as follows:

1. Page 1, Section C of the Contract, entitled *Contract Payment and Availability of Funding*, as previously amended through Amendment #002, is hereby further amended by deleting the amount of "\$3,695,641.00" and replacing it with the amount of "\$4,061,886.00."
2. Page 47, Section B.4.i. of Attachment 1, entitled *Schedule and Description of Deliverables, Deliverables, Records and Documentation* is hereby amended by adding the following deliverable at the end of the section i:
  - (14) *The Contractor shall develop and implement policy and procedures according to Florida Administrative Code 6M-9.400 Rule (Early Learning Coalition Anti-Fraud Plans) to address the detection and prevention of overpayments, abuse, and fraud relating to the provision of and payment for the school readiness program and Voluntary Prekindergarten Education Program services.*

3. Page 55, Section B. 6.b. (2) of Attachment 1, entitled *Schedule and Description of Deliverables, CONTRACTOR Responsibilities, CONTRACTOR Programmatic Responsibilities, Services* is hereby amended by adding the following at the end of the section (2):

*(2.26) Adhere to the approved anti-fraud plan as it relates to client eligibility and provider payments.*

4. Pages 93 to 111 of Exhibit A and Composite Exhibit B: Forms B-1, B-2, and B-3 of Attachment 1 to the Standard Core Contract, as previously amended through Amendment #002, is hereby further amended by replacing said exhibits in their entirety with **Exhibit A and Composite Exhibit B: Forms B-1, B-2, and B-3** of this Amendment to the Contract.
5. Page 131, Exhibit F to the Standard Core Contract is hereby amended by replacing said exhibit in its entirety with **Exhibit F** of this Amendment to the Contract.
6. Composite Exhibit J of Amendment #001 is hereby removed in its entirety and hereby incorporated in **Exhibit A and Composite Exhibit B: Forms B-1, B-2, and B-3** of this Amendment and with said reference to Exhibit J hereby removed as part of said incorporation.
7. Page 131, Exhibit H to the Standard Core Contract is hereby amended by replacing said exhibit in its entirety with **Exhibit H** of this Amendment to the Contract.

Except as modified herein, all remaining terms and conditions of this Contract shall remain in full force and effect.

All provisions in the Contract and any attachments thereto in conflict with this Amendment shall be changed to conform with this Amendment.

**IN WITNESS WHEREOF**, the parties hereto have caused this amendment to be executed by their officials thereunto duly authorized.

---

[THIS AREA INTENTIONALLY LEFT BLANK]



**EARLY LEARNING COALITION OF BROWARD COUNTY, INC.**

Witness Renee Jaffe  
Renee Jaffe  
\_\_\_\_ day of June, 2016

By Laurie Sallarulo  
Laurie Sallarulo, Chair  
\_\_\_\_ day of June, 2016

STATE OF Florida

COUNTY OF Broward

The foregoing instrument was acknowledged before me this 15th day of June, 2016 by Laurie Sallarulo of Early Learning Coalition of Broward County, Inc. on behalf of the corporation/agency.

He/She is personally known to me or produced \_\_\_\_\_ as identification and did/did not first take an oath.

*Type of Identification*

Deborah Hopper  
Signature - Notary Public

(SEAL)

Printed Name of Notary

Notary's Commission  
My Commission Expires



Approved as to form by  
Jacob C. Jackson, Esquire  
General Counsel  
Early Learning Coalition of Broward County, Inc.

By Jacob Jackson  
Jacob Jackson, Esquire

Federal EID # (or SSN): 65-1060848  
CONTRACTOR Fiscal Year Ending Date: 6/30/17

BROWARD REGIONAL HEALTH PLANNING COUNCIL, INC.

SIGNED BY: [Signature]  
 Electronic Signature

NAME: Michael De Lucca

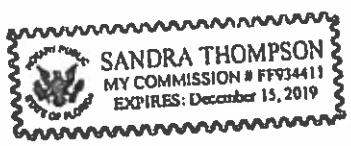
TITLE: President /CEO

Witness [Signature]

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 27<sup>th</sup> day of June, 2016  
by Michael De Lucca of Broward Regional Health Plan on behalf of the  
*Name of Person*  
corporation/agency. He/She is personally known to me or produced  
*Type of Identification*  
as identification and did/did not first take an oath.



(SEAL)

[Signature]  
Signature - Notary Public

Sandra Thompson  
Printed Name of Notary

FF934411  
Notary's Commission No.

My Commission Expires: 12/15/19

Federal EIN # (or SSN): 59-2274772  
CONTRACTOR Fiscal Year Ending Date: 06/30/17

EARLY LEARNING COALITION OF BROWARD COUNTY, INC.

Witness

Renee Jaffe  
Renee Jaffe

20 day of June, 2016

By

Laurie Sallarulo, Chair

20 day of June, 2016

STATE OF Florida

COUNTY OF Broward

The foregoing instrument was acknowledged before me this 20 day of June, 2016 by Laurie Sallarulo of Early Learning Coalition of Broward County, Inc. on behalf of the corporation/agency.

He/She is personally known to me or produced \_\_\_\_\_ as identification and did/did not first take an oath.

Notary Public  
Type of Identification

Deborah Hopper  
Signature - Notary Public

(SEAL)

Printed Name of Notary

Notary's Commission  
My Commission Expires



Approved as to form by  
Jacob C. Jackson, Esquire  
General Counsel  
Early Learning Coalition of Broward County, Inc.

By Jacob Jackson, Esquire

Federal EID # (or SSN): 65-1060848  
CONTRACTOR Fiscal Year Ending Date: 6/30/17

**EXHIBIT A  
ELC 2 Amendment #003**

**Early Learning Coalition of Broward County, Inc.**  
 Broward Regional Health Planning Council - Budget Allocation  
**Contract # BRHPC-EDAP-17-ELC2 Amendment #003**  
**Eligibility Determination, Application Processing, Slot Management, and Provider Payment - ELC ;**  
 Fiscal Year 2016-2017  
 For the Period of July 1, 2016 through June 30, 2017

Category	OCA	OEL	CCEP (Purchasing Pool)	OEL-VPK	CSC/Other	Total Contract	Percent of Total Contract
Eligibility Determination & Enrollment/Slot Payment Management	07BDE*	\$ 2,339,206		\$	\$ 350,000	\$ 2,880,206	7%
Non-Direct Services/Eligibility	07PPD*		199,537			199,537	0.2%
VPK Administration/Payment Management Includes BHA and SYS	VPADM*			801,097		801,097	1%
					12,046	12,046	0%
<b>Non-Direct Services: (Total)</b>		<b>2,339,206</b>	<b>199,537</b>	<b>961,097</b>	<b>562,046</b>	<b>4,061,886</b>	<b>5%</b>
<b>Rate: (Total)</b>		<b>33,150,377</b>	<b>2,447,306</b>	<b>38,662,955</b>	<b>4,615,354</b>	<b>78,875,992</b>	<b>95%</b>
Purchasing Pool (Includes Gold Seal)	07PPD*		2,447,306			2,447,306	3%
OEL (determined by CFS Reports)	Various**	33,150,377				33,150,377	40%
CSC (Limited to Attachment 1A3: (1)(c))	Various with Limits**				4,517,850	4,517,850	5%
VPK Enrollment	VPKRS			38,662,955		38,662,955	47%
Other Direct Slots					97,504	97,504	0.1%
<b>Total Allocated</b>		<b>\$ 35,489,583</b>	<b>\$ 2,646,843</b>	<b>\$ 39,624,052</b>	<b>\$ 5,177,400</b>	<b>\$ 82,937,878</b>	<b>100%</b>

Match-VPK Working Pool	\$ 700,000
Match-Purchasing Pool - County	1,467,000
Match-Purchasing Pool - Business	1,000,000
Provider Parent Assessment Fee	5,000,000
Number of Slots @ \$4000	8,915
Number of VPK Slots (10,000 School Yr / 1000 Summer)	17,000

Estimated CFDA to Funding Source*	
<b>Ednet Programs (CAL Base)</b>	
03.558 - Temporary Assistance to Needy Families (TANF)	16.92%
03.558 - TANF Maintenance of Effort (MOE)	12.12%
03.575 - Child Care Development Fund (CCDF)	39.39%
03.598 - CCDF Mandatory	6.29%
03.598 - CCDF Matching	20.94%
03.598 - CCDF Maintenance of Effort (MOE)	4.24%
03.667 - Social Services Block Grant (SSBG)	0.09%
Total - US Department of Health and Human Services	100%
<b>Voluntary Contributions ADD</b>	
75.007 - General Revenue	100.00%

\* Percent City of General Usage for Actual Expenses  
 \*\*As per the 2016-2017 CCL Preliminary Notice of Award

	EB	VPK	Other	Total
FY 2016-2017 Contract	39,139,426	39,624,052	5,177,400	\$ 82,937,878

**COMPOSITE EXHIBIT  
ELC 2 Amendment #003**

**FORM B-1: INDIVIDUAL PROGRAM BUDGET NARRATIVE  
FO,REARLY LEARNING COALITION OF BROWARD COUNTY, INC.**

Vendor Name: Broward Regional Health Planning Council Proposed Budget for FY Ending: June 30, 2017

Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration

**EX ENDITIJRES**

5000	Employee Provided Salaries and Benefits		\$	2,138,548
5001	Regular Salary			
5001	Overtime Salary			55,294
5000	Total Salaries			2,193,842
	Employee Benefits			
5005	Payroll Taxes	FICA /MICA-7.65% of Salaries Social Security = 6.20% / Medicare - 1.45%		168,487
5007	Benefits - Reemployment	First \$7,000 x 59.78 FTE x .0346		14,556
5010	Health, Dental, ADD & Life	\$560.98 x 12 x 59.78 FTE		404,062
5020	Retirement	5% - 15% depending on length of employment		87,328
5030	Life and Disability, Other Benefits			-
5040	Other Benefits			-
	Total Employee Benefits			674,432
5000	Total Salaries/ Benefits			2,868,274

**COMPOSITE EXHIBIT  
ELC 2 Amendment #003**

**FORM 8-1: INDIVIDUAL PROGRAM BUDGET NARRATIVE  
FOR EARLY LEARNING COALITION OF BROWARD COUNTY, INC.**

Proposed Budget for FY Ending:  
**June 30, 2017**

Vendor Name: Broward Regional Health Planning Council

Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration

<b>6035</b>	<b>Other Professional Services</b>		
		Subcontracts: 211 Broward waitlist processing, SR Eligibility and Enrollment Support \$165,000. Consultant provides training and related observation and coaching services for School Readiness and Voluntary Prekindergarten program policies and procedures as well as the proper use of the Enhanced Field System (EFS) database (ELC Manatee Shared Services and Sharon Oakes) \$99,000. Data Analyst Consultant \$55,000. Appointment System \$24,000. ONE E-App	393,000
<b>6000</b>	<b>Total Professional Services</b>		533,400
<b>6050</b>	<b>Direct Services - Child Care</b>		-
<b>7000</b>	<b>Occupancy</b>		-
		59.78 FTE distribution for 12 months for office rent= \$76000. Office rent at 3 child care centers for BRHPC eligibility specialists for 12 months \$18,000.	95,599
<b>7001</b>	Rental - Office Space		
<b>7002</b>	Utilities	FTE distribution for 12 months for FPL invoices.	5,347
<b>7003</b>	Building Maintenance	FTE Distribution for 12 months for office maintenance and janitorial expens.	10,647
<b>7000</b>	<b>Total Occupancy</b>		111,594
<b>7050</b>	<b>Postage, Freight, Delivery</b>		
		Postage, overnight and next-day deliveries, mail to families, providers, newsletter and packages.	8,900
<b>7051</b>	Postage, Freight, Delivery		

**COMPOSITE EXHIBI  
ELC 2 Amendment #003**

**FORM 8-1: INDIVIDUAL PROGRAM BUDGET NARRATIVE  
FOR EARLY LEARNING COALITION OF BROWARD COUNTY, INC.**

Proposed Budget for FY Ending:  
June 30, 2017

Vendor Name: Broward Regional Health Planning Council

Program Name: ELC-2: Eligibilit, Enrollment, and Fiscal Administration

7265	Insurance (Workers Compensation)	18,096
7275	Insurance (Bond)	8,915
7250	Total Insurance	34,153
7300	Tangible Personal Property	
7301	Equipment > \$1,000	18,520
7302	Equipment < \$1,000	4,520
7300	Total Tangible Personal Property	23,040
7400	Quality	
7401	Quality and Classroom materials	-
7405	Training materials and space	-
7410	Consumer Education and Outreach Mat	-
7415	Grants to Providers	-
7420	Scholarships and Other Education Opp	-

**COMPOSITE EXHIBIT  
ELC 2 Amendment #003**

**FORM B-1: INDIVIDUAL PROGRAM BUDGET NARRATIVE  
FOR EARLY LEARNING COALITION OF BROWARD COUN.1Y, INC.**

Proposed Budget for FY Ending:  
June 30, 2017

Vendor Name: Broward Regional Health Planning Council

Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration

7610	Web Service/hosting, support, back-up services and maintenance	Construct an IT infrastructure application and SharePoint operational functions: User authentication , procedural workflows, document storage/retrieval and printing/scanning services. Update and develop intranet sites and Team sites for operational units to assist with information dissemination, document management, reports, dashboards, blogs and sharing of team resources.	10,898
7635	Miscellaneous/other current charges		70,132
<b>7600</b>	<b>Total Other Expenses</b>		
<b>9001</b>	Depreciation		-
<b>9100</b>	<b>Indirect Cost</b>		
<b>9100</b>	<b>Indirect Cost</b>		322,036
	Administrative Oversight - Salary and Fringe	Director of Finance - M Gimenez .33 FTE	24,750
	Administrative Oversight - Salary and Fringe	Division Director - M Rosiere .20 FTE	18,464
	Administrative Oversight - Salary and Fringe	IT System Administrator- J. Hill .14 FTE	8,255
	Administrative Oversight - Salary and Fringe	Admin Program Manager - M Delucca .61 FTE	116,375
	Administrative Oversight - Salary and Fringe	Admin Services Manager - Y. Falcone .28 FTE	20,582
	Administrative Oversight - Salary and Fringe	Accounting Manager - S. Thompson .27 FTE	15,001
	Administrative Oversight - Salary and Fringe	AP Processor - L. Edmunds .31 FTE	14,895
	Administrative Oversight - Salary and Fringe	Legal Counsel - J. Werner .29 FTE	4,394
	Administrative Oversight - Salary and Fringe	Finance QA Coordinator - M. McNemey .22 FTE	4,515



**COMPOSITE EXHIBIT B  
ELC 2 Amendment #003**

**FORM B-2: INDIVIDUAL PROGRAM BUDGET  
BY FUNDING SOURCES**

Vendor Name: Broward Regional Health Planning Council Proposed Budget for FY Ending: June 30, 2017  
 Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration 1/01/1900

		(1)	(2)	(3)	(4)	(5)
		SR	VPK	Other Funds	TOTAL	
REVENUES						
4000	Contracts, Grants and Other Financial Assistance					
4001	Contracts, Grants - State and Federal					
	Early Learning Coalition of Broward County, Inc.	\$ 3,038,743.00	\$ -	\$ 62,046.00	\$ 961,097.00	\$ 4,061,886.00
4010	Contracts, Grants - Local					
4020	Contracts, Grants - Other					
4020	Contracts, Grants - Other					
4020	Contracts, Grants - Other					
4050	Gifts, Donations and Pledges					
4060	In-Kind					
	<b>Total Revenue</b>	<b>\$ 3,038,743.00</b>	<b>\$ -</b>	<b>\$ 62,046.00</b>	<b>\$ 961,097.00</b>	<b>\$ 4,061,886.00</b>

COMPOSITE EXHIBIT B  
ELC 2 Amendment #003

**FORM B-2: INDIVIDUAL PROGRAM BUDGET  
BY FUNDING SOURCES**

Vendor Name: Broward Regional Health Planning Council Proposed Budget for FY Ending: June 30, 2017  
 Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration 10/1/1900

	(1)	(2)	(3)	(4)	(5)
	SR	VPK	Other Funds	TOTAL	
<b>5100 Total Staff Development</b>	\$ 3,019.00	\$ -	\$ 981.00	\$ -	\$ 4,000.00
<b>6000 Professional Services</b>					
6002 Auditino	30,390.00	9,610.00			\$ 40,000.00
6005 Information Technoloo	37,418.00	11,832.00			\$ 49,250.00
6020 Temoorary Emolvment	3,799.00	1,201.00			\$ 5,000.00
6025 Printing and Reproduction	29,400.00	9,296.00			\$ 38,696.00
6030 Repair and Maintenance	5,663.00	1,791.00			\$ 7,454.00
6035 Other Professional Services	260,597.00	82,403.00	50,000.00		\$ 393,000.00
<b>6000 Total Professional Services</b>	\$ 367,267.00	\$ -	\$ 116,133.00	\$ 50,000.00	\$ 533,400.00
<b>6050 Direct Services - Child Care</b>					
<b>7000 Occupancy</b>					
7001 Rental - Office Space	72,632.00	22,967.00			\$ 95,599.00
7002 Utilities	4,062.00	1,285.00			\$ 5,347.00
7003 Building Maintenance	8,090.00	2,558.00			\$ 10,648.00
<b>7000 Total Occupancy</b>	\$ 84,784.00	\$ -	\$ 26,810.00	\$ -	\$ 111,594.00
<b>7050 Postage, Freight, Delivery</b>					
7051 Postage, Freight, Delivery	6,762.00	2,138.00			\$ 8,900.00
<b>7050 Total Postage, Freight, Delivery</b>	\$ 6,762.00	\$ -	\$ 2,138.00	\$ -	\$ 8,900.00
<b>7100 Rental</b>					
7101 Rental - Office Equipment	-	-	-	-	\$ -
<b>7100 Total Rental</b>	\$ -	\$ -	\$ -	\$ -	\$ -
<b>7150 Supplies</b>					
7151 Office Supplies and Office Items	22,327.00	7,060.00			\$ 29,387.00
<b>7150 Total Supplies</b>	\$ 22,183.00	\$ -	\$ 7,204.00	\$ -	\$ 29,387.00

COMPOSITE EXHIBIT B  
ELC 2 Amendment #003

**FORM B-2: INDIVIDUAL PROGRAM BUDGET  
BY FUNDING SOURCES**

Vendor Name: Broward Regional Health Planning Council Proposed Budget for FY Ending: June 30, 2017  
 Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration 1/0/1900

	(1)	(2)	(3)	(4)	(5)
	SR		VPK	Other Funds	TOTAL
<b>7500</b>					
Travel					
7501 Travel - In-State - Travel	-		-		\$ -
7505 Travel - Out of State - Travel					\$ -
7510 Travel - Local	2,292.00		725.00		\$ 3,017.00
<b>Total Travel</b>	<b>\$ 2,292.00</b>	<b>\$ -</b>	<b>\$ 725.00</b>	<b>\$ -</b>	<b>\$ 3,017.00</b>
<b>7600</b>					
Other Expenses					
7601 Bank Fees	20,688.00		6,542.00		\$ 27,230.00
7605 Software and Licenses and Support	24,315.00		7,689.00		\$ 32,004.00
7610 IT/Web /hosting, support, back-up and maintenance	7,598.00		2,402.00	898.00	\$ 10,898.00
7615 Other employee related expenditures	-		-		\$ -
7620 Dues and Subscriptions	-		-		\$ -
7625 Taxes, Licenses and fees	-		-		\$ -
7630 In-Kind expenditure	-		-		\$ -
7635 Miscellaneous/other current charges	-		-		\$ -
<b>Total Other Expenses</b>	<b>\$ 52,601.00</b>	<b>\$ -</b>	<b>\$ 16,633.00</b>	<b>\$ 898.00</b>	<b>\$ 70,132.00</b>
<b>9000</b>					
Depreciation					
9001 Depreciation	-		-		\$ -
<b>9100</b>					
Indirect Cost					
9100 Indirect Cost	\$ 244,668.00		\$ 77,368.00		\$ 322,036.00
<b>TOTAL EXPENDITURES</b>	<b>\$ 3,038,743.00</b>	<b>\$ -</b>	<b>\$ 961,097.00</b>	<b>\$ 62,046.00</b>	<b>\$ 4,061,886.00</b>
	0.76		0.24		

ALL FINANCIAL INFORMATION ROUNDED TO NEAREST DOLLAR.

**COMPOSITE EXHIBIT B  
ELC 2 Amendment #003**

EDRM.B-3 PERSONNEL BUDGET NARRATIVE

**FOR EARLY LEARNING COALITION OF BROWARD COUNTY, INC.**

Proposed Budget for FY Ending:

June 30, 2017

Vendor Name: Broward Regional Health Planning Council

Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration

(1) PERSONNEL	(2) % OF TIME	(3) Vendor SALARY	(4) bonus in Salary	(5) DATES		(6) NUMBER OF PAY PERIODS	(7) SALARY / PP	(8) % OF TOTAL SALARY	(9) AMOUNT	(10) TOTAL
				FROM	TO					
Eligibility Specialist II Shirelle Sanders	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Rosa Rojas	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Wesley Crew	79.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 25,881.00	\$ 25,881.00
Eligibility Specialist II Sandra Oliveira	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Enette Charles	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Patricia Felenus	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Elia Correia-Abreu	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Margaret Perez	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Nowlett Dawkins	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Ethel Clarke	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Eligibility Specialist II Silke Angulo	79.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 25,881.00	\$ 25,881.00
Eligibility Specialist II Vandna Chawla	79.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 25,881.00	\$ 25,881.00
One E APP Specialist Ruth Thomas	0.0%	35,750	750	7/1/2016	6/30/2017	26	\$ 1,375.00	100.0%	\$ -	\$ -
Director of Finance Merdi Gimenez	15.0%	75,000	1,000	7/1/2016	6/30/2017	26	\$ 2,884.62	15.0%	\$ 11,250.00	\$ 11,250.00
Payment Manager Crisly Kozla	79.0%	62,000	2,000	7/1/2016	6/30/2017	26	\$ 2,384.62	100.0%	\$ 48,980.00	\$ 48,980.00
Payment Specialist III Lou Vonna Brown	61.0%	41,000	1,000	7/1/2016	6/30/2017	26	\$ 1,576.92	61.0%	\$ 25,010.00	\$ 25,010.00
Payment Specialist I Mayur Bandaka	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Payment Specialist I Ryan Edun	79.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 25,881.00	\$ 25,881.00
Payment Specialist I Sherena McRae	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Payment Specialist I Carolina Ocampo	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00
Payment Specialist I Stanley Williams	100.0%	32,761	750	7/1/2016	6/30/2017	26	\$ 1,260.04	100.0%	\$ 32,761.00	\$ 32,761.00

BRHPC-EDAP-17-ELC2

**COMPOSITE EXHIBIT B  
ELC 2 Amendment #003**

**FORM B-1: PERSONNEL BUDGET NARRATIVE  
FOR EARLY LEARNING COALITION OF BROWARD COUNTY, INC.**

Proposed Budget for FY Ending:  
June 30, 2017

Vendor Name: Broward Regional Health Planning Council  
Program Name: ELC-2: Eligibility, Enrollment, and Fiscal Administration

(1) PERSONNEL	(2) % OF TIME	(3) Vendor SALARY	(4) bonus in Salary	(5) DATES		(6) NUMBER OF PAY PERIODS	(7) SALARY /PP	(8) % OF TOTAL SALARY	(9) AMOUNT	(10) TOTAL
				FROM	TO					
EPS Administrator	100.0%	42,200	1,000	7/1/2016	6/30/2017	26	\$ 1,623.08	100.0%	\$ 42,200.00	\$ 42,200.00
Data Analyst	15.0%	42,730	500	7/1/2016	6/30/2017	26	\$ 1,643.46	15.0%	\$ 6,410.00	\$ 6,410.00
Data Analyst	100.0%	35,000	750	7/1/2016	6/30/2017	26	\$ 1,346.15	100.0%	\$ 35,000.00	\$ 35,000.00
ELC AR Processor	100.0%	45,500	500	7/1/2016	6/30/2017	26	\$ 1,750.00	100.0%	\$ 45,500.00	\$ 45,500.00
ELC AP Processor	100.0%	45,500	500	7/1/2016	6/30/2017	26	\$ 1,750.00	100.0%	\$ 45,500.00	\$ 45,500.00
ELC Screener	100.0%	32,761	500	7/1/2016	6/30/2017	27	\$ 1,213.37	200.0%	\$ 32,761.00	\$ 32,761.00
ELC Screener	100.0%	32,761	500	7/1/2016	6/30/2017	27	\$ 1,213.37	200.0%	\$ 32,761.00	\$ 32,761.00
Accounting Processor	100.0%	45,500	500	7/1/2016	6/30/2017	28	\$ 1,625.00	300.0%	\$ 45,500.00	\$ 45,500.00
Eligibility Specialist II - DCF	26.6%	32,761	750	7/1/2016	6/30/2017	26	1260.04	100.0%	\$ 8,710.00	\$ 8,710.00
									76.0%	\$ 1,618,161.00
									24.0%	\$ 511,677.00
<b>Total Salaries</b>	<b>59.78</b>								<b>\$ 2,129,838.00</b>	<b>\$ 2,138,648.00</b>

**EXHIBITH  
LISTING OF REPORTS**

<b>Reports</b>	<b>Frequency</b>	<b>Due Date</b>	<b>Reference</b>
Anti-Fraud Plan	Annually	By May 30	Attachment I, B.6.a. (2)
Continuity of Operations Plan (COOP) / Update	Annually	Within 30 days of contract execution and By June I thereafter	Attachment I, B.1.a.(10) and B.6.a.(3)
Internal Control Questionnaire	Annually	During Annual Fiscal Monitoring	Attachment IV
Annual Report	Annually	By August 15	Attachment I, B.4.b (4) (t)
CCR&R Staffing List	Annually	By Aug. 30 (then monthly within 2 days of staffing changes)	Attachment I, B.4.b (4) (c); Exhibit D
13 <sup>th</sup> month Invoice	Annually	40 days after the Contact ends	Standard Contract, Paragraph G.
Property Inventory Report	Annually & as needed thereafter	By September I	Standard Contract, Paragraph I
Revenue and Expenditure Report	Annually	By October I	Attachment I, B.4.b (3) (b)
Financial and Single Audit Report	Annually	Within the earlier of thirty (30) days after receipt of the audit report or by March 31	Attachment II
Cost Allocation Plan or Certification Form	Annually	By April 30	Attachment I, 8.6.a.(1)
CCR&R Level I Evaluation	Annually	Within 4 months of starting training in CCR&R (then annually if Level 2 certification is not achieved within one year of Level I certification)	Attachment I, 8.4.b (4) (c); Exhibit D
CCR&R Coordinator Evaluations	As needed	Within 4 months of starting training in CCR&R and following completion of Level I certification	Attachment I, B.4.b (4) (c); Exhibit D
CCR&R Level 2 Evaluation	One time	Optional; Within 4 months of starting training in CCR&R and following completion of Level I certification; must be re-taken only if Accountability Review indicates need for additional training	Attachment I, 8.4.b (4) (c); Exhibit D
Match Report	Monthly	By the 15 <sup>th</sup> day after the period	Attachment I, B.4.b.(3)g Attachment I, B.5.a. (4) Attachment I, 8.6.a.(4)
Invoices	Monthly	By the 14 <sup>th</sup> day after the period	Attachment I, D. I.
Management Reports	Monthly, Quarterly, Year End	By the 14 <sup>th</sup> day after the period	Attachment I, B.4.b.

CIED: Performance and Quality Improvement Meeting: - Friday, September 16th, 2016

Site: Broward Regional Park Health Planning Council

Agenda Item	Discussion	Notes/Follow Up
Meeting Dates and Location	<p><b>NEW NEW NEW!!!</b>  <i>Monthly meetings:            4th Friday of each month at BRHPC</i></p>	<p>Meetings will be ½ days in Conference Room B or Executive Conference Room</p>
Staff Changes and Updates	<p><b>Good Bye and Good Luck: Lyse Pierre Paul</b></p>	<p><b>Happy Birthday September Babies!!</b></p>
<b>Training</b>	<p><b>Reengagement and Reassessment</b></p>	
<b>CIED Program Monitoring</b>	<p>Training: Referrals and Disposition- Documenting of ALL attempts to reach client  <b>Scheduling clients appointment 30 days prior</b></p>	<p>Update on Referral report cleanup from everyone:            Scheduler open to everyone to assist</p>
HICP Update	<p>Meredeth            Training on ACA and health insurance plans</p>	
Documentation of Medical Appointments for Clients in PE	<p>Past medical appointments will be documented</p>	<p>Will remain in agenda until outcome indicator improves monthly</p>
Viral Load Entry into PE	<p>Discuss with Client and document in Progress logs: "your Labs are only # months old, please make sure you schedule an appointment for Labs". Assist client with making appointment/document</p>	<p>Review in PE how to review reports</p>
Site Visits by VS and LA	<p>Discuss with Team</p>	
Scheduler Update	<p>Review in PE</p>	<p>-Discuss how to view schedule            -Improvements            -Working as a team</p>
Conducting Benefit Assessment	<p>3<sup>rd</sup> party payor: Discuss</p>	<p>Wording in Progress Note</p>

<p>Monthly Billing/Notes:</p>	<p><b>Congratulations!</b> Discuss common errors and progress logs</p>	
<p>Individual QI Staff Meetings:</p>	<p>Will be done on the day your rotate through the office</p>	
<p>Other:</p>		
<p>Keeping log sheets of clients Following up with Clients</p>	<p>If Clients did not submit all documents, you must follow up with client</p>	<p>Open Item: Clients have expired eligibility due to not bringing in a document. We are responsible.</p>
<p>Future Agenda Items</p>	<p>What would you like to have for future training topics?</p>	<p><b>Food Stamp Application Training ACCESS</b></p>
<p><b>THANK YOU ALL FOR ALL THAT YOU DO!</b></p>		



CIED and HICP: Performance and Quality Improvement Meeting: - Friday, October 20th, 2016

Site: Broward Regional Park Health Planning Council

Agenda Item	Discussion	Notes/Follow Up
Meeting Dates and Location	<p><i>Monthly meetings:</i>                      3<sup>rd</sup> Friday in November 18<sup>th</sup>                      2<sup>nd</sup> Wednesday, December 14<sup>th</sup>                      (All sites closed report all day to BRHPC)</p>	<p>Meetings will be ½ days in Conference Room B or Executive Conference Room</p>
Staff Changes and Updates	<p>Welcome: Terry Sanchez, Eligibility Specialist, CIED</p>	<p>Happy Birthday October Babies!!</p>
<b>DEEP BREATHING EXERCISES!</b>	<p><b>STAND UP/SIT DOWN AND BREATHE!</b></p>	
Training	<p><i>SNAP benefit application- Vanessa/Adriana Medicaid Codes- Lisa</i></p>	
<b>CIED Program Monitoring</b>	<p>Training: Referrals and Disposition- Documenting of ALL attempts to reach client  <i>Scheduling clients appointment 30 days prior</i></p>	<p>Update on Referral report cleanup from everyone:                      Scheduler open to everyone to assist</p>
Documentation of Financial information	<p>Discuss</p>	
HICP Update	<p>Meredeth                      Training on ACA and health insurance plans</p>	<p>We still do not know health plans.                      November 1 - health plan roll out</p>
Documentation of Medical Appointments for Clients in PE	<p>Past medical appointments will be documented</p>	<p>Document right away- check all files from past and ensure appointment was entered</p>
Viral Load Entry into PE	<p>Discuss with Client and document in Progress logs: <i>"your Labs are only # months old, please make sure you schedule an appointment for Labs"</i>. Assist client with making appointment/document</p>	<p>Review in PE how to review reports</p>

Tracker Forms	Tracker: Follow up- Lisa	Please continue to use Trackers to note PE# where you need to follow up, and review files for completeness
Scheduler Update	Review in PE	-Discuss how to view schedule -Improvements -Working as a team
Progress Logs	<ul style="list-style-type: none"> <li>- Complete case notes</li> <li>- Dates</li> <li>- Correct information</li> </ul>	
Monthly Billing/Notes:	All notes in by the 5 <sup>th</sup> of the following month. No changes can be made after the 5th	
Individual QI Staff Meetings:	Will be done on the day your rotate through the office	<b>This will resume in November</b>
New Staff Update	Lisa will discuss	
Ending: Breathing Exercise	Good Vibes for the Week ahead!!	
Other:		
<b>THANK YOU ALL FOR ALL THAT YOU DO!</b>		

CIED and HICP: Performance and Quality Improvement Meeting: - Friday, November 18th, 2016

Site: Broward Regional Park Health Planning Council

Agenda Item	Discussion	Notes/Follow Up
Meeting Dates and Location	<p><i>Monthly meetings:</i>                      3<sup>rd</sup> Friday in November 18<sup>th</sup>                      2<sup>nd</sup> Wednesday, December 14<sup>th</sup>                      (All sites closed report all day to BRHPC)</p>	<p>Meetings will be ½ days in Conference Room B or Executive Conference Room</p>
Staff Changes and Updates	<p>Welcome: Marissa, Eligibility Specialist,                      See you again soon Meredith!!</p>	<p>Happy Birthday November Babies!!</p>
CIED Program Monitoring	<p>Training: Referrals and Disposition- (Open Item)                      Documenting of ALL attempts to reach client. <i>Scheduling clients appointment 30 days prior</i>                      - <i>Referral Disposition</i></p>	<p>Update and Refresher Training                      Common errors:                      - Do not close referrals same day                      - E.S. are not following up on referrals                      - E.S. need to utilize trackers                      Discussion: <i>Look in PE</i></p>
Training	<p>ACA and Scanning in documents</p>	
Scheduling an Appointment with a Navigator	<p>We will review this in PE</p>	
Marketing materials	<p>Distribute palm cards, calendars for HIVPC</p>	<p>Everyone</p>
HICP Update	<p>Meredeth, Claudia                      Training on ACA and health insurance plans</p>	<p>We have the health insurance plans!</p>
Documentation of Medical Appointments for Clients in PE	<p>Past medical appointments will be documented</p>	<p>Discussion</p>
Viral Load Entry into PE	<p>Discuss with Client and document in Progress logs: "your Labs are only # months old, please make sure you schedule an appointment for Labs ". Assist client with making appointment/document</p>	<p>Review in PE how to review reports</p>

Holiday Schedule	See Vanessa	
Scheduler Update	Review in PE	-Discuss how to view schedule -Improvements -Working as a team
PE	<ul style="list-style-type: none"> <li>- Mark appointments as KEPT</li> <li>- Assist with rescheduling of appts</li> </ul>	All
Monthly Billing/Notes:	All notes in by the 5 <sup>th</sup> of the following month. No changes can be made after the 5th	
Individual QI Staff Meetings:	Will be done on the day your rotate through the office	<b>Continuation</b>
New Staff Update	Lisa will discuss	
Other:		
THANK YOU ALL FOR ALL THAT YOU DO!		