

LEGISLATIVE FACT SHEET

DATE: 12/21/16

BT or RC No: _____
(Administration & City Council Bills)

SPONSOR: Jacksonville Children's Commission
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations _____

Provide Name: Bill Hodges, Director of Governmental Affairs

Contact Number: (904) 630-6411

Email Address: bhodges@coj.net

PURPOSE: White Paper (Explain Why this legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council Research will complete this form for Council Introduced legislation and the Administration is responsible for all other legislation. (Minimum of 350 words - Maximum of 1 page.)

The Jacksonville Children's Commission requests approval of legislation to enter into a license agreement between the Jacksonville Children's Commission and Northeast Florida Healthy Start Coalition, Inc. for occupancy of space at JCC's facility located at 1095 A. Philip Randolph Blvd.

Background

- Council approved 2015-287 which consolidated Healthy Families Jacksonville Services to one provider.
- Healthy Families is intensive evidence based, voluntary home visiting program. The program has been proven to prevent child abuse/neglect and improve outcomes for Jacksonville's highest risk families.
- Upon the consolidation of providers the funder, Florida Ounce of Prevention required that all services be brought physically together in one location.
- Council approved 2015-517 which authorized a three year use of space agreement between JCC and the Bridge of Northeast Florida who subsequently was replaced by the Northeast Florida Healthy Start Coalition in 2016. The agreement will be for three years through June 30, 2020.

Issue

The Northeast Florida Healthy Start Coalition will locate approximately 32 Healthy Families staff into the Jacksonville Children's Commission building significantly improving administration and oversight.

Fiscal Impact

It is estimated that by consolidation of providers and relocation of staff that the Jacksonville Children's Commission may have an annual cost saving of \$84,500.

The Jacksonville Children's Commission requests approval of legislation to enter into a license agreement between the Jacksonville Children's Commission and Northeast Florida Healthy Start Coalition, Inc. for occupancy of space at JCC's facility located at 1095 A. Philip Randolph Blvd.

APPROPRIATION: Total Amount Appropriated: None as follows:
 List the source name and provide Object and Subobject Numbers for each category listed below:

(Name of Fund as it will appear in title of legislation)

Name of Federal Funding Source(s)	From: _____	Amount: _____
	To: _____	Amount: _____
Name of State Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name of City of Jacksonville Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name of In-Kind Contribution(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name & Number of Bond Account(s):	From: _____	Amount: _____
	To: _____	Amount: _____

PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.

(Minimum of 350 words - Maximum of 1 page.)

A federal pass through grant from The Ounce of Prevention Fund of Florida will be used to implement the program. The City of Jacksonville provides a cash match. The Provider is mandated by the Grantor to be located in JCC's facility for direct supervision.

ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS:	Yes	No	
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Justification of Emergency: If yes, explanation must include detailed nature of emergency.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Federal or State Mandate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.</p> <div style="border: 1px solid black; padding: 5px;"> <p>The Grantor mandated the Provider to be housed at JCC for direct supervision.</p> </div>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Note: If yes, note must include explanation of all-year subfund carryover language.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.</p>
Contract / Agreement Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted?</p> <div style="border: 1px solid black; padding: 5px;"> <p>JCC will oversee the License Agreement. The draft agreement is in OGC</p> </div>
Related RC/BT?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Attachment: If yes, attach appropriate RC/BT form(s).</p>
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Related Enacted Ordinances?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper.</p> <div style="border: 1px solid black; padding: 5px;"> <p>Ordinances 2015-517-E; 2015-287-E; and 2016-771-E</p> </div>

ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS:

	Yes	No
Continuation of Grant?	X	

Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?

The funds will be used to implement the Healthy Families Program. The agreement will be for three (3) years through June 30, 2020.

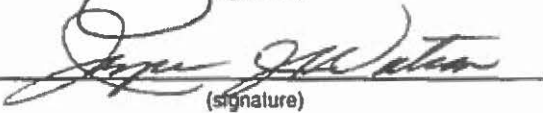
Surplus Property Certification?		X
Reporting Requirements?		X

Attachment: If yes, attach appropriate form(s).

Explanation: List agencies (including City Council / Auditor) to receive reports and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for generating

Division Chief: 
(signature)

Date: 12-21-16

Prepared By: 
(signature)

Date: 12-21-16

ADMINISTRATIVE TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

Thru: Sam Mousa, Chief Administrative Officer

(Name, Job Title, Department)

Phone: (904) 630-1776

E-mail: Smousa@coj.net

From: Jon Heymann, CEO/Executive Director, Jacksonville Children's Commission

Initiating Department Representative (Name, Job Title, Department)

Phone: (904) 630-6425

E-mail: jheyman@coj.net

Primary Contact: Bill Hodges, Director of Governmental Affairs, Jacksonville Children's Commission

(Name, Job Title, Department)

Phone: (904) 630-6411

E-mail: bhodges@coj.net

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor
904-630-1825 E-mail: akshelton@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 904-630-4647

E-mail: psidman@coj.net

From:

Initiating Council Member / Independent Agency / Constitutional Officer

Phone: _____

E-mail: _____

Primary

Contact: _____
(Name, Job Title, Department)

Phone: _____

E-mail: _____

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor
904-630-1825 E-mail: akshelton@coj.net

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

Independent Agency Action Item: Yes No

Boards Action / Resolution?

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED