

## LEGISLATIVE FACT SHEET

DATE: 12/19/17

BT or RC No: BT18-037  
(Administration & City Council Bills)

SPONSOR: Public Works / Public Buildings / Medical Examiners Office  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: \_\_\_\_\_

Provide Name: John P. Pappas

Contact Number: 255 - 8707

Email Address: [pappas@coj.net](mailto:pappas@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.)

With the recent increase in drug related overdoses, the need for autopsy services has increased significantly. The current space allocation at the Medical Examiner's Office (MEO) is very restrictive in providing both services and staff workspace. Currently, the maximum number of bodies that can be accommodated is approximately 45. During the past six months, the MEO has been at capacity several times for normal workload processing. The proposed solution will increase refrigerated storage capacity by approximately 40 spaces and the modular office will provide additional needed space for personnel. We are seeking a waiver of all provisions of the Procurement Code, Chapter 126, in order to immediately address the MEO space needs. Once the legislation is approved by the City Council, a waiver of chapter 126 will allow us to quickly procure the items for the MEO by utilizing a vendor currently under contract with the MEO for other services. Deferral of this amendment of the CIP until the next annual budget and CIP review will be detrimental to the best interest of the community because such deferral will result in the unnecessary delay of addressing this critical issue.

APPROPRIATION: Total Amount Appropriated \$206,000.00 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: General Fund - GSD <u>Fund Balance</u>	Amount: \$206,000.00
	To: Authorized Capital Projects Fund <u>SF 32E</u>	Amount: \$206,000.00
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.)

This is an appropriation of a pay-go contribution from the General Fund - General Service District. This transfer will not cause the City to incur any additional debt.

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

**ACTION ITEMS:**

	<b>Yes</b>	<b>No</b>
Emergency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Justification of Emergency: If yes, explanation must include detailed nature of emergency.

We are requesting emergency passage in order to address the capacity needs of the Medical Examiner's Office.

Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.

Fiscal Year Carryover?

Note: If yes, note must include explanation of all-year subfund carryover language.

Subfund 32E is an all-years subfund

CIP Amendment?

Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

Contract / Agreement Approval?

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?

Related RC/BT?

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

Waiver of Code?

Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.

We are seeking a waiver of all provisions of the Procurement Code, Chapter 126, in order to immediately address the MEO space needs. Once the legislation is approved by the City Council, a waiver of chapter 126 will allow us to quickly procure the items for the MEO.

Code Exception?

Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.

Related Enacted Ordinances?

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.

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

**ACTION ITEMS:** Yes No

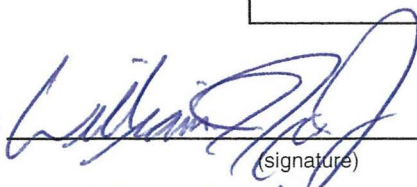
Continuation of Grant?

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?

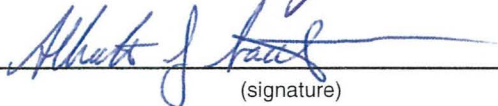
Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Sr Division Chief:   
 (signature)

Date: 12/19/2017

Prepared By:   
 (signature)

Date: 12/19/2017

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: John P. Pappas, P.E., Director of Public Works

(Name, Job Title, Department)

Phone: 255 - 8707

E-mail: [pappas@coj.net](mailto:pappas@coj.net)

From: Roy Birbal, Chief of Public Buildings Division

Initiating Department Representative (Name, Job Title, Department)

Phone: 255 - 4330

E-mail: [rbirbal@coj.net](mailto:rbirbal@coj.net)

Primary Contact: Roy Birbal, Chief of Public Buildings Division

(Name, Job Title, Department)

Phone: 255 - 4330

E-mail: [rbirbal@coj.net](mailto:rbirbal@coj.net)

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