

**Lee County Board Of County Commissioners  
Agenda Item Summary**

**Blue Sheet No. 20021324**

**1. REQUESTED MOTION:**

**ACTION REQUESTED:** Request Board approval and to execute two Amendments to contracts, beginning 7/1/2002, with the Florida Department of Children and Family Services. These contracts are for the Family Connection Center to operate an on-going supervised visitation and parent education program, \$ 27,320.00 (DCF Contract HJL16) for Parent Education services with a match of \$6,830.00, and \$79,677.00 (DCF Contract HJL13) for Supervised Visitation program with a match of \$18,089.62.

**WHY ACTION IS NECESSARY:** To formalize the acceptance of amendments to all Board approved contracts.

**WHAT ACTION ACCOMPLISHES:** Amendment 1 replaces Exhibit C, 3MP report, Exhibit D, CFS reporting tool, Exhibit G, monthly invoice, adds and changes to contract language.

**2. DEPARTMENTAL CATEGORY:**  
**COMMISSION DISTRICT #**

*C11B*

**3. MEETING DATE:**

*12-10-2002*

**4. AGENDA:**

**5. REQUIREMENT/PURPOSE:**  
*(Specify)*

**6. REQUESTOR OF INFORMATION:**

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:

- STATUTE 753.004
- ORDINANCE
- ADMIN. CODE
- OTHER

- A. COMMISSIONER
- B. DEPARTMENT Parks & Recreation
- C. DIVISION Cooperative Extension Service

BY: John Yarbrough

*John Yarbrough*

**BACKGROUND:** Lee County entered into a sixth year partnership with the Family Connection Center (FCC), (blue sheet #20020722 on 7/2/02) to provide supervised visitations for families and children in out-of-home care with the Department of Children and Family Services (DCFS). In addition, FCC provides supervised visitation by court order to children and non-custodial parents undergoing divorce or custody disputes and families struggling with issues of domestic violence. FCC started as a pilot program in 1986 but has gained statewide recognition as a model of collaborative, community effort. FCC is a member of the Supervised Visitation Network, a national organization promoting standards for supervised visitation programs. FCC provides visitation to families at the Lee County Extension Services and other locations. Educational information is then accessible to parents through the Extension Service. FCC has received reimbursement for service grants from the DCFS for children in its dependency program, and has received a lesser amount from fees paid by parents whose children are not in foster care but where supervised contact is ordered. FCC also provides Parenting Education Classes for parents undergoing difficulties in specific or general areas of Parenting. FCC provides its services using one full-time Lee County employee, temporary/on-call staff (as funding permits), and volunteers and interns. It should be noted these grants operate as a fee for service with the ability to earn up to the dollar amount specified in each contract for the contract term. Said amendments were created to update monthly forms and change inapplicable language.

**8. MANAGEMENT RECOMMENDATIONS:**

**9. RECOMMENDED APPROVAL:**

A Department Director		B Purchasing or Contracts		C Human Resources		D Other		E County Attorney		F Budget Services				G County Manager									
<i>11-10-02</i>		<i>NIA</i>						<i>11/22/02</i>		<table border="1"> <tr> <td><i>OA</i></td> <td><i>OM</i></td> <td><i>Risk</i></td> <td><i>GC</i></td> </tr> <tr> <td><i>11/25/02</i></td> <td><i>11/25/02</i></td> <td><i>11/25/02</i></td> <td><i>11-25-02</i></td> </tr> </table>				<i>OA</i>	<i>OM</i>	<i>Risk</i>	<i>GC</i>	<i>11/25/02</i>	<i>11/25/02</i>	<i>11/25/02</i>	<i>11-25-02</i>	<i>11-25-02</i>	
<i>OA</i>	<i>OM</i>	<i>Risk</i>	<i>GC</i>																				
<i>11/25/02</i>	<i>11/25/02</i>	<i>11/25/02</i>	<i>11-25-02</i>																				

**10. COMMISSION ACTION:**

- APPROVED
- DENIED
- DEFERRED
- OTHER

**Rec. by Coltly**  
Date: *11/22/02*  
Time: *2:25 pm*  
Forwarded To: *Budget 11/22/02 2:30 pm*

**RECEIVED BY COUNTY ADMIN. CA**  
*11-22 4:00*  
COUNTY ADMIN. FORWARDED TO: *OS*  
*11-25-02*



Jeb Bush  
Governor

Kathleen A. Kearney  
Secretary

CERTIFIED MAIL: 7000 1530 0004 2753 8249

October 23, 2002

Robert P. Janes, Board Chairman  
Lee County Board of County Commissioner for  
Family Connection Center  
3406 Palm Beach Boulevard  
Fort Myers, Florida 33916

Dear Mr. Janes:

Enclosed are three originals of Amendment #001 to contract #HJL16.

Please sign, date and return all three copies to me as soon as possible. Once our District Administrator signs all copies, I will send you a fully executed original.

Thank you for the services your agency provides to our community. If you have any questions, please call me at 239/338-1407.

Sincerely,

A handwritten signature in black ink, appearing to read "Cherisse Brizendine", with a long horizontal flourish extending to the right.

Cherisse Brizendine  
Senior Human Services Program Specialist

Enclosure

Cc: Lorna Kibbey, Senior Management Analyst Supervisor  
Contract File

District Eight • P.O. Box 60085 • Fort Myers, Florida 33906-0085

*The Department of Children & Families is committed to working in partnership with local communities to ensure safety, well-being and self-sufficiency for the people we serve.*

### AMENDMENT #0001

THIS AMENDMENT, entered into between the State of Florida, Department of Children and Families, hereinafter referred to as the "department" and the Lee County Board of County Commissioners for Family Connection Center, hereinafter referred to as the "provider" amends contract # HJL16. This amendment incorporates the following:

- Replaces Exhibit C, 3MP report as attached.
- Replaces Exhibit D, CFS, Children and Families Services reporting tool as attached.
- Changes contract language.

1.) Attachment I, Page 9, section A, Services to be provided, paragraph 1.b, (9) lines one and two shall now read:

(9) Family Services Plan - A written plan developed, within the first two sessions and updated quarterly, between the provider's case worker

2.) Attachment I, Page 13, section B, Manner of Service Provision, paragraph 1.a, (2) line one shall now read:

(2) Develop a Family Service Plan within the first two sessions based

3.) Attachment I, Page 14, section B, Manner of Service Provision, paragraph 1.a, (9) lines two and three shall now read:

activities shall be submitted to the contract manager by May 5,2003.

4.) Attachment I, Page 14, section B, Manner of Service Provision, paragraph 4.c, Reports, Child Abuse Prevention Campaign Activity Summary, Report Due Date shall now read:

By 5/5/2003.

5.) Attachment I, Page 22, section B, Manner of Service Provision, paragraph 4.c, Reports, (7) lines two and three shall now read:

activities shall be submitted to the contract manager by May 5,2003.

6.) Attachment I, Page 22, section B, Manner of Service Provision, paragraph 4.c, Reports, (4) delete the word electronic from line three.

7.) Attachment I, Page 22, section B, Manner of Service Provision, paragraph 4.c, Reports, (5) delete the word electronic from line two.

8.) Replace Exhibit C, 3MP report, as attached.

9.) Replace Exhibit G, CFS Children and Families Services reporting tool, as attached.

This amendment shall begin on September 26, 2002, or the date on which the amendment has been signed by both parties, whichever is later.

All provision in the contract and any attachments thereof in conflict with this amendment shall be and hereby changed to conform to 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.

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This amendment and all its attachments are hereby made a part of the contract.  
IN WITNESS THEREOF, the parties hereto have caused this 4-page amendment to be executed by their officials' thereunto duly authorized.

PROVIDER: Lee County Board of  
County Commissioners  
For Family Connection  
Center.

State of Florida Department  
of Children and Families

SIGNED: \_\_\_\_\_  
NAME: Robert James  
TITLE: Board Chairman

SIGNED: \_\_\_\_\_  
NAME: Mike M. Murphy  
TITLE: District Administrator

DATE: \_\_\_\_\_  
FEDERAL ID NUMBER: VF650575098

DATE: \_\_\_\_\_

EXHIBIT C

3-MONTH MATCHING PROJECT FOR CHILD MALTREATMENT

3MP TOOL

Month/Year \_\_\_\_\_

Provider Name: \_\_\_\_\_

Program Name: \_\_\_\_\_

Child's Name Last, First, M. I.	Social Security Number	Date of Birth	Commencement Date	Completion Date	Gender	Race	Hispanic Yes/No	Program Area Supp/Pres/Reu/Adop

Race: Black / White / Asian / Pacific Islander / Amer Ind/Alaskan Native / Other  
Program Area: Supp / Preservation / Reunification / Adoption

All Children in Families served three month or longer

## Child and Family Services Monthly Report

District/Region: 8 Reporting Month: \_\_\_\_\_ Current Date: \_\_\_\_\_ Fiscal Year: 2002/2003

Provider Name: Family Connection Center Contract # HJL16

Preparer Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Report Type: (check the appropriate box)

Counties Served: Lee County

- Primary Community Based Family Support Services
- Secondary Community Based Family Support Services
- Family Preservation Services
- Time Limited Reunification
- Adoption Promotion and Support

Service Description (list up to 3)

Target Population (list up to 3)

Self-help Groups/Support Groups

Children age 0-21

Nurturing Parenting Programs

Families with child abuse/neglect

Parents(adoptive, biological, caretaker, and foster)

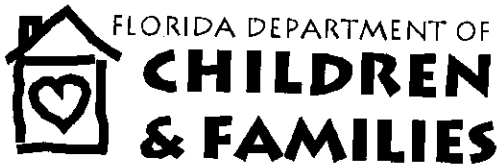
Numbers Served							
Families		Children		Adults			
Carryover	New	Carryover	New	Carryover		New	
				59<	60+	59<	60+

Service Type: (check the appropriate box)

Program / Service Duration: 6 weeks to 3 months

- New
- Expanded or Enhanced
- Continuation

Funding Sources		
Federal Sources	State Sources	Local Sources
Promoting Safe and Stable Families		County Funding
Family Preservation OCA E4000		



Jeb Bush  
Governor

Kathleen A. Kearney  
Secretary

CERTIFIED MAIL: 7000 1530 0004 2753 <sup>8249</sup> 8232

October 23, 2002

Robert P. Janes, Board Chairman  
Lee County Board of County Commissioner for  
Family Connection Center  
3406 Palm Beach Boulevard  
Fort Myers, Florida 33916

Dear Mr. Janes:

Enclosed are three originals of Amendment #001 to your contract #HJL13.

Please sign, date and return all three copies to me within 7 days of receipt of this letter. Once our District Administrator signs all copies, I will send you a fully executed original.

Thank you for the services your agency provides to our community. If you have any questions, please call me at 239/338-1407.

Sincerely,

Cherisse Brizendine  
Senior Human Services Program Specialist

Enclosure

Copy to: Lorna Kibbey, Senior Management Analyst Supervisor  
Contract File

District Eight • P.O. Box 60085 • Fort Myers, Florida 33906-0085

*The Department of Children & Families is committed to working in partnership with local communities to ensure safety, well-being and self-sufficiency for the people we serve.*

**AMENDMENT #0001**

THIS AMENDMENT, entered into between the State of Florida, Department of Children and Families, hereinafter referred to as the "department" and the Lee County Board of County Commissioners for Family Connection Center, hereinafter referred to as the "provider" amends contract # HJL13. This amendment incorporates the following:

- Deletes Exhibit B, 3MP report.
- Deletes Exhibit C Family Admission and Discharge Form.
- Replaces Exhibit D, CFS, Children and Families Services reporting tool as attached.
- Replaces Exhibit G, Monthly Invoice as attached.
- Adds and changes contract language.

1.) Standard Contract, Page 6, signature section, shall now read:

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In WITNESS THEREOF, the parties hereto have caused this 51 page contract to be executed by their undersigned officials as duly authorized.

2.) Attachment I, Page 15, section B, Manner of Service Provision, delete paragraph 1.a, (15).

3.) Attachment I, Page 16, section B, Manner of Service Provision, delete paragraph 1.a, (16).

4.) Attachment I, Page 16, section B, Manner of Service Provision, add paragraph 1.a, (18).

(18) Develop a specific campaign for April 2003, Child Abuse Prevention Month or participate in the statewide public awareness campaign sponsored by the department. A written summary of all Child Abuse Prevention Campaign activities shall be submitted to the contract manager by May 5, 2003 to incorporate into the Annual Child and Family Services report.

5.) Attachment I, Page 20, section B, Manner of Service Provision, paragraph 4.c, Reports, add:

Child Abuse Prevention Campaign Activity Summary	Annually	By 5/5/2003	1	Contract Manager
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6.) Attachment I, Page 20, section B, Manner of Service Provision, paragraph 4.c, Reports, Delete Report titled:

3MP Report.

7.) Attachment I, Page 20, section B, Manner of Service Provision, paragraph 4.c, Reports, Delete Report titled:

Admission/Discharge Form

8.) Attachment I, Page 22, section B, Manner of Service Provision, add paragraph 4.c, Reports, number (12).

(12) A written summary of all Child Abuse Prevention Campaign activities shall be submitted to the contract manager by May 5, 2003.



- 9.) Replace Exhibit D, CFS Children and Families Services reporting tool, as attached.
- 10.) Attachment I, Page 30, section D. Special Provisions, List of Exhibits: delete 8.,b. **Exhibit B**,3MP Report.
- 11.) Attachment I, Page 30, section D. Special Provisions, List of Exhibits: delete 8.,c. **Exhibit C**, Admission and Discharge Form.
- 12.) Replaces Exhibit G, Monthly Invoice, as attached.

This amendment shall begin on September 26, 2002, or the date on which the amendment has been signed by both parties, whichever is later.

---

All provision in the contract and any attachments thereof in conflict with this amendment shall be and hereby changed to conform to 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 hereby made a part of the contract.  
IN WITNESS THEREOF, the parties hereto have caused this 4-page amendment to be executed by their officials' thereunto duly authorized.

PROVIDER: Lee County Board of  
County Commissioners  
For Family Connection  
Center.

State of Florida Department  
of Children and Families

SIGNED: \_\_\_\_\_  
NAME: Robert James  
TITLE: Board Chairman

SIGNED: \_\_\_\_\_  
NAME: Mike M. Murphy  
TITLE: District Administrator

DATE: \_\_\_\_\_  
FEDERAL ID NUMBER: VF650575098

DATE: \_\_\_\_\_



## Child and Family Services Monthly Report

District/Region: 8 Reporting Month: \_\_\_\_\_ Current Date: \_\_\_\_\_ Fiscal Year: 2002/2003

Provider Name: Family Connection Center Contract # HJL13

Preparer Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Report Type: (check the appropriate box)

Counties Served: Lee County

- Primary Community Based Family Support Services
- Secondary Community Based Family Support Services
- Family Preservation Services
- Time Limited Reunification
- Adoption Promotion and Support

Service Description (list up to 3)

Target Population (list up to 3)

Visitation Services

Children age 0-21

\_\_\_\_\_

Families with Child abuse/neglect

\_\_\_\_\_

Parents(adoptive, biological, caretaker, and foster)

Numbers Served							
Families		Children		Adults			
Carryover	New	Carryover	New	Carryover		New	
				59<	60+	59<	60+

Service Type: (check the appropriate box)

Program / Service Duration: 3 months to 1 year

- New
- Expanded or Enhanced
- Continuation

Funding Sources		
Federal Sources	State Sources	Local Sources
Promoting Safe and Stable Families		County Funding
OCA E1100		Other local funding
Other local funding OCA 8500		

Monthly Invoice Contract # HT113  
 Supervised Visitation  
 Family Connection Center

Exhibit C

Reporting Period

From / / to / /  
 Supervised Visitation

Name of Biological Parent	Name of Child	Child's DOB	Race	Sex (M/F)	Child's Soc. Sec. #	Start Date	Dates of Service	End Date	Reason	Unit Cost	Total Units	Reimbursement Requested

Total Units Provided		Total Reimbursement	
Total Match Amount (10%)			

- Reason Codes
- Program/Service completed A
- Refused program/Service B
- Voluntary withdrawal C
- Unable to locate client D
- Reunification occurred
- (If applicable)

Original Signature and Date

I hereby certify that services have been provided for the named individuals as indicated