

LEGISLATIVE FACT SHEET

DATE: 06/12/24 BT or RC No: _____
 (Administration & City Council Bills)

SPONSOR: Grants and Contract Compliance Division
 (Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Grants Administrator

Provide Name: Maribel Hernandez

Contact Number: 255-5356

Email Address: Hernandezm@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 City of Jacksonville entered into a contract with Reintegration Solutions, Inc. of Jacksonville for the 4-month period October 1, 2023 to January 31, 2024. The City of Jacksonville did not extend or renew this contract and the staff of the Division of Grants and Contract Compliance have been working with Reintegration Solutions, Inc. of Jacksonville to resolve outstanding grant expenditures and grant-funded inventory items. There are two budget amendments requested which are as follows:

1) One of the expenditures requested for reimbursement is a final bill of \$10,365 for workers' compensation dated January 2024 and exceeds the remaining balance from the original \$3,000 budget for workers' compensation allowed by the contract. The invoice in question represents a workers' compensation audit performed by the State of Florida and is allowable. There are not sufficient funds remaining in the line item for this unplanned expense. The budget amendment necessary to pay this invoice would be \$9,746, which represents the difference between the \$10,365 invoice amount and the remaining budget in this contract for workers' compensation. For any budget amendments exceeding 10% above the original budget, we must seek City Council approval.

2) The second budget amendment is to correct a discrepancy on line items for salaries for violence interrupters. Funds would be moved from P/T Violence Interrupter salaries to Regular Violence Interrupter salaries to cover the deficit from the approved budget. The budget amendment would be \$5,401.72. There would be no change in the overall category for Employee Compensation. However, because the amount being adjusted exceeds 10% above the original budget, City Council approval is required.

Approval is requested from the City Council for a budget amendment to the Reintegration Solutions, Inc. of Jacksonville contract to allow for the reimbursement of expenditures incurred under contract with the City of Jacksonville in excess of the budgeted amount. This legislation and expenditure reimbursement will allow the Division of Grants and Contract Compliance to close out this Cure Violence contract with Reintegration Solutions, Inc. of Jacksonville (contract #668809-24).

APPROPRIATION: Total Amount Appropriated: _____ 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: 00111.193005.582001.000000.000000 Amount: \$9,746.00
	To: 00111.193005.582001.000000.000000 Amount: \$9,746.00

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.)

The funds are remaining in the same account. Authorization is necessary to increase the Workers Compensation line item by more than 10%, which requires City Council approval.

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"/>	Justification of Emergency: If yes, explanation must include detailed nature of emergency. <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Explanation. If yes, explanation must include detailed nature of mandate including Statute or Provision. <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Note: If yes, note must include explanation of a 1-year subfund carryover language. <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attachment. If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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? <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
Related RC/BT?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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. <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>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?</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Attachment: If yes, attach appropriate form(s).</p>
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>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 reports.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>

BUSINESS IMPACT ESTIMATE

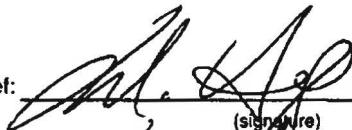
Pursuant to Section 166.041(4), F.S., the City is required to prepare a Business Impact Estimate for ordinances that are **NOT** exempt from this requirement.

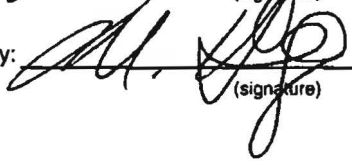
A list of ordinance exemptions are provided below. Please check all exemption boxes that apply to this ordinance. If an exemption is applicable, a Business Impact Estimate **IS NOT** required.

- The proposed ordinance is required for compliance with Federal or State law or regulation;
- The proposed ordinance relates to the issuance or refinancing of debt;
- The proposed ordinance relates to the adoption of budgets or budget amendments, including revenue sources necessary to fund the budget;
- The proposed ordinance is required to implement a contract or an agreement, including, but not limited to, any Federal, State, local, or private grant or other financial assistance accepted by the municipal government;
- The proposed ordinance is an emergency ordinance;
- The ordinance relates to procurement;
- The proposed ordinance is enacted to implement any of the following:
 - a. Part II of Chapter 163, Florida Statutes, relating to growth policy, county and municipal planning, and land development regulation, including zoning, development orders, development agreements and development permits;
 - b. Sections 190.005 and 190.046, Florida Statutes, regarding community development districts;
 - c. Section 553.73, Florida Statutes, relating to the Florida Building Code;
 - d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention Code.

If none of the boxes above are checked, then a Business Impact Estimate **IS REQUIRED** to be prepared by the using agency/office/department and submitted in the MBRC filing packet along with the memorandum request, legislative fact sheet, etc. A Business Impact Estimate form can be found at:

<https://www.coj.net/departments/finance/budget/mayor-s-budget-review-committee>

(Ack) Division Chief: 
(signature)

Prepared By: 
(signature)

Date: 6/12/24

Date: 6/11/24

ADMINISTRATIVE TRANSMITTAL

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

Thru: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)
Phone: 255-5000 E-mail: BNorris@coj.net

From: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Initiating Department Representative (Name, Job Title, Department)
Phone: 255-5000 E-mail: BNorris@coj.net

Primary Contact: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)
Phone: 255-5000 E-mail: BNorris@coj.net

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Phone: 255-5000 E-mail: BNorris@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Mary Staffopoulos, Office of General Counsel, St. James Suite 480
Phone: 904-255-5062 E-mail: mstaff@coj.net

From: _____
Initiating Council Member / Independent Agency / Constitutional Officer
Phone: _____ E-mail: _____

Primary Contact
(Name, Job Title, Department)
Phone: _____ E-mail: _____

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Phone: 255-5000 E-mail: BNorris@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