

SERVICE FUNDING AGREEMENT
First Option of Renewal and Amendment 1

THIS AGREEMENT (Agreement), entered into this ____ day of _____, 2018, by and between **PINELLAS COUNTY**, a political subdivision of the State of Florida, hereinafter called the "**COUNTY**," and **BOLEY CENTERS, INC.**, a non-profit Florida corporation, whose address is 445 31st Street North, Saint Petersburg, FL 33713, hereinafter called the "**AGENCY**."

WITNESSETH:

WHEREAS, the **AGENCY** provides assistance to the mentally impaired and chronically homeless population by providing them with housing and access to support services such as medical care, substance abuse treatment services, vocational training and job placement as well as linkage to other community services; and

WHEREAS, the **AGENCY** maintains a multidisciplinary staff to provide integrated treatment to individuals it assists; and

WHEREAS, the **AGENCY** is currently funded primarily through a United States Department of Housing and Urban Development, (hereinafter called HUD), Grant.

WHEREAS, the **AGENCY** is in need of local match funds in order to maintain these programs for the mentally impaired and chronically homeless; and

WHEREAS, the **COUNTY** desires to provide an optional HUD match to assist in supporting the **AGENCY**'s programs; and

WHEREAS, the **COUNTY** recognizes that the **AGENCY** is providing an essential service within the community.

NOW, THEREFORE, the parties hereto do mutually agree as follows:

1. This Agreement is hereby renewed pursuant to Section 2 thereof, effective October 1, 2018,

and continuing for a period of twelve months from that date unless terminated or cancelled as provided therein.

2. Section 5 of the aforesaid Agreement is hereby amended to read as follows:

Section 5a. Pinellas Homeless Management Information System (PHMIS).

The AGENCY agrees to participate in and enter information into the Pinellas Homeless Management Information System (PHMIS) administered by the Pinellas Homeless Leadership Board (HLB), or similar system as required by the Pinellas County Homeless Continuum of Care.

Section 5b. 211 Tampa Bay Cares Database

As a condition of receipt of a funding award from Pinellas County, the AGENCY agrees to list new or updated program data in the 211 Tampa Bay Cares, Inc. online database.

3. The Agreement is hereby amended to include Section 30:

Section 30. Housing First and Coordinated Entry

As a condition of receipt of a funding award from Pinellas County, the AGENCY agrees to support the Housing First philosophy and participate in coordinated entry as established and implemented by the local Continuum of Care.

4. The Agreement is hereby amended to include Section 31:

Section 31. Universal Release of Information Form.

As a condition of receipt of a funding award from Pinellas County, the AGENCY agrees to use a standard, community-wide Patient Authorization for Disclosure of Health Information - Universal Release of Information Form, upon request. The release covers general medical as well as Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS), psychiatric, psychological, substance abuse information from medical

record(s) in accordance with Florida Statutes 394.459, 381.004, 395.3025, and 90.503; 42 CFR, Part 2; and the Health Insurance Portability and Accountability act of 1996 (HIPAA) 45 CFR parts 160 and 164.

5. Except as herein provided, all other terms and conditions of the Agreement remain in full force and effect.

[Signature Page Follows]

IN WITNESS WHEREOF, the parties hereto have caused this instrument to be executed on the day and year first above written.

ATTEST:
KEN BURKE
Clerk of Circuit Court

PINELLAS COUNTY, FLORIDA, acting by and through its Board of County Commissioners

By: _____
Deputy Clerk


By: _____
Kenneth T. Welch, Chairman

Dated: _____, 2018

ATTEST:


BOLEY CENTERS, INC.

By: 
Witness

By: 
Gary MacMath
President/CEO

Dated: JUNE 19, 2018

APPROVED AS TO FORM

By: 
Office of the County Attorney
Assistant County Attorney