RESOLUTION NO. 2016-373

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, APPROVING THE TERMS, PROVISIONS, CONDITIONS, AND REQUIREMENTS OF AN AGREEMENT BETWEEN ST. JOHNS COUNTY, FLORIDA, AND ACTION FOR CHILD PROTECTION AND AUTHORIZING THE CHAIR OF THE BOARD OF COUNTY COMMISSIONERS TO EXECUTE THE AGREEMENT ON BEHALF OF THE COUNTY

WHEREAS, St. Johns County is providing funding to ACTION for Child Protection to perform training and child welfare staff development services, at fee for service; and,

WHEREAS, the County has reviewed the terms, provisions, conditions, and requirements of the Agreement; and

WHEREAS, the County has determined that accepting the terms of the Agreement, and entering into said Agreement will serve the interests of the County.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AS FOLLOWS:

Section 1. The above Recitals are hereby incorporated into the body of this Resolution, and are adopted as Findings of Fact.

Section 2. The Board of County Commissioners hereby approves the terms, provisions, conditions, and requirements of the Agreement between the St. Johns County, Florida, and ACTION for Child Protection and authorizes the Chair of the Board of County Commissioners to execute the Agreement on behalf of the County.

Section 3. To the extent that there are typographical and/or administrative errors and/or omissions that do not change the tone, tenor, or context of this Resolution, then this Resolution may be revised, without subsequent approval of the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, Florida, this 29th day of December, 2016.

BOARD OF COUNTY COMMISSIONERS OF
ST. JOHNS COUNTY, FLORIDA

Attest:  
Deputy Clerk

By:  
Chair

RENDITION DATE 12/7/16
CONTRACT BETWEEN
ST. JOHNS COUNTY
AND
ACTION FOR CHILD PROTECTION

THIS AGREEMENT ("Agreement") is dated as of _____________, 2016 (the "Effective Date"), and is entered into between ACTION for Child Protection, with a principal place of business at 2101 Sardis Road N, Suite 204, Charlotte, NC 28227 ("herein referred to as the "Provider", "Vendor" or "ACTION"), and St. Johns County, a political subdivision of the State of Florida ("SJC").

I. **Scope of Service**

A. ACTION shall provide agreed upon training services to SJC.

II. **Service Tasks**

ACTION agrees to perform the following professional services:

A. Training for a (2) two day training class (8 hours minus 1 hour for lunch each day) on "Assessing Impending Danger". The training class will be taught for up to (25) twenty five staff. The training will focus on information collection protocol, including the activities associated to pre-commencement and identifying present danger. Review of present danger assessments and case application are applied during the training. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

B. Training for a (2) two day training class (8 hours minus 1 hour for lunch each day) on "Assessing and Scaling Caregiver Protective Capacities". The training class will be taught for up to (25) twenty five staff. The training will focus on the assessment of caregiver protective capacities through the Ongoing Family Functioning Assessment (FFA). Participants will learn the intervention stages and exploration as a means to gather information for the Ongoing FFA to inform the caregiver protective capacities. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

C. Training for a (2) two day training class (8 hours minus 1 hour for lunch each day) on "Assessing and Scaling Child Needs". The training class will be taught for up to (25) twenty five staff. The training will focus on the assessment of the child needs through the ongoing family functioning assessment. Focus on child development, experiences of children in child welfare and effects on child development, and case application of concepts associated
with information collection to inform assessing and scaling of child needs. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

D. Training for a (2) two day training class (8 hours minus 1 hour for lunch each day) on "Crafting Case Plan Outcomes for Achieving Change in Caregiver Protective Capacities". The training class will be taught for up to (25) twenty five staff. The training will focus on the use of information obtained during the ongoing family functioning assessment to inform the case plan outcomes. Training will include application of crafting the case plan outcomes and reviewing case plan outcomes. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

E. Training for a (2) two day training class (8 hours minus 1 hour for lunch each day) on "Developing Case Plans". The training class will be taught for up to (25) twenty five staff. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

F. Training for a (2) two day training class (8 hours minus 1 hour for lunch each day) on "Consultation and Skill Building for Case Management Supervisors Around Case Consultation, Coaching, and Training". The training class will be taught for up to (25) twenty five staff. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

G. Training for a (1) one day class (8 hours minus 1 hour for lunch) on "Establishing Sufficient Safety Plans". The training class will be taught for up to (25) twenty five staff. ACTION will issue training certificates of completion to participants who complete the full (2) two day training. Any materials or handouts will be produced by ACTION. SJC and ACTION will determine when the two day training will take place. Training will take place at the St. Johns County Health and Human Services Building, 200 San Sebastian View, St. Augustine, FL 32084.

III. Compensation

A. Amount: This is a fee for service vendor agreement. SJC shall compensate ACTION for each service provided, in accordance with this agreement, at the rates described below, which shall not exceed the total dollar amount of $46,200.00, subject to availability of funds.
B. Method of Payment: The provider shall be authorized a fee-for-service amount. Any costs or services paid to or for the provider under any other agreement, contract, or from any other source, are not eligible for payment under this agreement.

C. SJC agrees to pay for the services at the fee for service and limits listed below:

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee For Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training workshop on assessing Impending Danger</td>
<td>$7,700.00</td>
</tr>
<tr>
<td>2 Day On Site Training</td>
<td></td>
</tr>
<tr>
<td>Includes materials for 25 participants and all costs associated to execution of the training on site.</td>
<td></td>
</tr>
<tr>
<td>Training workshop on assessing and scaling Caregiver Protective Capacities</td>
<td>$7,700.00</td>
</tr>
<tr>
<td>2 Day On Site Training</td>
<td></td>
</tr>
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<td></td>
</tr>
<tr>
<td>Training workshop on crafting case plan outcomes for achieving change in Caregiver Protective Capacities</td>
<td>$7,700.00</td>
</tr>
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<tr>
<td>Includes materials for 25 participants and all costs associated to execution of the training on site.</td>
<td></td>
</tr>
<tr>
<td>Training workshop on developing case plans</td>
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</tr>
<tr>
<td>Includes materials for 25 participants and all costs associated to execution of the training on site.</td>
<td></td>
</tr>
<tr>
<td>Training workshop on consultation and skill building for Case Management Supervisors around Case Consultation, Coaching, and Training</td>
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</tr>
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<td></td>
</tr>
</tbody>
</table>

D. Request for Payment: The service for which payment is requested may not exceed the total dollar amount authorized by this agreement. The provider shall request payment within ten (10) calendar days following the end of the month in which services were provided through submission of a properly completed invoice. Payments may be authorized only for services on the invoice that are in accordance with the above. An invoice returned to the provider, due to preparation errors, will result in a payment delay. SJC shall pay the provider with a Net 30 term.

E. SJC will not be responsible or liable for payment of any invoice submitted more than thirty (30) calendar days, after the end of the month, in which the services were rendered. In the event that the Provider is not paid by forty-five (45) calendar days, after the end of the service month, the Provider is obligated to contact the current SJC Health and Human Services
Finance and Contract Manager (Raechel Meeks, the current SJC Health and Human Services Finance and Contract Manager, should be contacted at her email address: rmeeks@sicfl.us). If the Provider does not contact the current SJC Health and Human Services Finance and Contract Manager within forty-five (45) calendar days after the service month, then the services rendered for the month will be considered paid in full and no further obligations or outstanding invoices will be allowed for the unpaid service month.

F. Submission of Invoice: An invoice must be submitted in the following manner: By email to: rmeeks@sicfl.us and jplasta@sicfl.us

G. The invoice will include the following information:
   - Name of Provider
   - Tax ID#
   - Address of Provider
   - Date of Invoice
   - Invoice Number
   - Date of each service provided
   - Each service provided
   - Fee requested for each service provided

H. Deferred Payment/Return of Funds
The County may defer payment to the Provider for noncompliance with contract deliverables or program requirements.

If, as a result of monitoring or audit, expenditures are not documented, a payment may be deferred. If one or more expenditures are found to be unallowable, no future payments will be made until the full amount of overpayment is remitted to St. Johns County or a repayment agreement is accepted by St. Johns County. If the monitoring or audit occurs after the term of this contract, the Provider will be required to remit funds to the County in accordance with the repayment conditions below.

The Provider agrees to return to the County any overpayments due to funds disallowed pursuant to the terms of this Contract. Such funds shall be considered County funds and must be refunded to the County within 30 days of the Provider’s receipt of notice from the County in writing regarding the overpayment. Should repayment not be made in a timely manner, the County will charge interest of 1 percent per month compounded on the outstanding balance after 40 calendar days after the date of notification or discovery. The Provider will be required to reimburse the County for any acts of non-compliance resulting in disallowed costs or fines.

IV. Contractor Status
A. It is the Parties’ intention that the Provider will be an independent contractor and not the County’s employee for all purposes, including, but not limited to, the application of the Fair Labor Standards Act minimum wage and overtime payments, Federal Insurance Contribution Act, the Social Security Act, the Federal Unemployment Tax Act, the provisions of the Internal Revenue Code, Florida revenue and taxation law, Florida Worker’s Compensation law and
Florida Unemployment Insurance Law. The Provider shall retain sole and absolute discretion in the judgment of the manner and means of carrying out the Provider’s activities and responsibilities under this Contract. The Provider agrees that it is a separate and independent enterprise from the public employer, that it has made its own investment in its business, and that it will utilize a high level of skill necessary to perform the work. This agreement shall not be construed as creating any joint employment relationship between the Provider and the County, and the County will not be liable for any obligation incurred by the Provider, including unpaid minimum wages or overtime premiums.

B. The Provider’s primary roles and responsibilities under this Contract cannot be subcontracted. It is mutually agreed that any County-funded program component that is subcontracted by Provider must have a written contract that incorporates the terms of this Contract. The Provider must ensure that each subcontractor conforms to the terms and conditions of this Contract.

V. Risk Management
A. Indemnification
The Provider will defend, hold harmless, and indemnify the County from all claims, losses, suits, administrative actions, alternative dispute resolution proceedings, costs, attorneys' fees, and expenses connected with the Provider’s, or any subcontractor of the Provider’s, performance under this Contract.

The Provider further agrees that it will, at its own expense, defend all claims, actions, suits, or other proceedings that may be brought against the County in connection with this Contract and satisfy any judgment or other resolution of claims that may be entered against the County in any such action or proceedings.

The Provider further agrees that it is responsible for all claims arising from the hiring of individuals in connection with activities provided under the Contract. All individuals hired are employees of the Provider and not of the County.

B. Insurance
The Provider shall not commence work under this Contract until it has obtained all insurance required under this section and such insurance has been approved by the County. All insurance policies shall be issued by companies authorized to do business under the laws of the State of Florida. The Provider shall furnish proof of insurance to the County prior to the commencement of operations. Each certificate shall clearly indicate that the Provider has obtained insurance of the type, amount, and classification as required by this Contract and that no material change or cancellation of the insurance shall be effective without 30 days prior written notice to the County. Each certificate shall specifically include the County as additional insured for all lines of coverage except Workers' Compensation and Professional Liability. A copy of the endorsement must accompany the certificate. Compliance with the foregoing requirements shall not relieve the Provider of its liability and obligations under this Contract.

Certificate Holder Address: St. Johns County, a political subdivision of the State of Florida
500 San Sebastian View
The Provider shall maintain during the life of this Contract, Comprehensive General Liability Insurance with minimum limits of $1,000,000 per occurrence, $2,000,000 aggregate, to protect the Provider from claims for damages for bodily injury, including wrongful death, as well as from claims of property damages which may arise from any operations under this contract, whether such operations be by the Provider or by anyone directly employed by or contracting with the Provider.

The Provider shall maintain during the life of the contract, Professional Liability or Errors and Omissions Insurance with minimum limits of $1,000,000, if applicable.

The Provider shall maintain during the life of this Contract, Comprehensive Automobile Liability Insurance with minimum limits of $300,000 combined single limit for bodily injury and property damage liability to protect the Provider from claims for damages for bodily injury, including the ownership, use, or maintenance of owned and non-owned automobiles, including rented/hired automobiles whether such operations be by the Provider or by anyone directly or indirectly employed by a Provider.

The Provider shall maintain during the life of this Contract, adequate Workers' Compensation Insurance in at least such amounts as required by Florida law.

In the event of unusual circumstances, the County Administrator or his designee may adjust these insurance requirements.

VI. Suspension/Term/Termination

A. Suspension

The County reserves the right to suspend funding for failure to comply with the requirements of this contract.

If the Provider ceases operation for any reason or files for protection from creditors under bankruptcy law, any remaining unpaid portion of this Contract, less funds for expenditures already incurred, shall be retained by the County and the County shall have no further funding obligation to the Provider with regard to those unpaid funds.

B. Termination by County

The County may, at any time and for any reason, cancel this Contract by giving 24 hours written notice to the Provider by certified mail following a determination by the Board of County Commissioners, at its sole discretion, that such cancellation is in the best interest of the people of the county. From the date of cancellation, neither party shall have any further obligation unless specified in the termination notice.

C. Termination by Provider
The Provider may at any time and for any reason cancel this Contract by giving 72 hours prior written notice to the County by certified mail of such cancellation and specifying the effective date. In such event, the County’s obligation to make any payments under any provision of this Contract shall cease on the effective date of termination.

D. All services must be completed by 06/30/2017.

VII. Assurance, Certifications, and Compliance

The Provider agrees that compliance with these assurances and certifications constitutes a condition of continued receipt of or benefit from funds provided through this Contract, and that it is binding upon the Provider, its successors, transferees, and assignees for the period during which services are provided.

The Provider further assures that all contractors, subcontractors, or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of statutes, regulations, guidelines and standards. By acceptance of this funding, the Provider assures and certifies the following:

A. That it will comply with all applicable laws, ordinances, and regulations of the United States, the State of Florida, the County, and the municipalities as said laws, ordinances, and regulations exist and are amended from time to time. In entering into this Contract, the County does not waive the requirements of any County or local ordinance or the requirements of obtaining any permits or licenses that are normally required to conduct business or activity contemplated by the Provider.

B. That it will comply with all Federal, State and local anti-discrimination laws that are applicable to the Provider.

C. That it will administer its programs under procedures, supervision, safeguards, and such other methods as may be necessary to prevent fraud and abuse, and that it will target its services to those who most need them.

D. That if clients are to be transported under this contract, the Provider will comply with the provisions of Chapter 427, Florida Statutes, which requires the coordination of transportation for the disadvantaged.

E. That any products or materials purchased with contract funds shall be procured in accordance with the provisions of Chapter 403.7065, Florida Statutes, which refers to the procurement of products or materials with recycled content.

F. That it will comply with Chapter 39.201, Florida Statutes, that any person who knows, or has reasonable cause to suspect, that a child is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the child’s welfare, as defined in this chapter, shall report such knowledge or suspicion to the Central Abuse Hotline (1-800-342-3720).

G. That it will comply with Chapter 415.1034, Florida Statutes, that any person who knows...
or has reasonable cause to suspect that a vulnerable and or disabled adult has been abused, neglected, or exploited, shall immediately report such knowledge or suspicion to the National Center on Elder Abuse Hotline (1-800-962-2873).

H. That if personnel in programs under this contract work directly with children or youths and vulnerable or disabled adults, the Provider will comply with the provisions of Chapters 435.03 and 435.04, Florida Statutes, which requires employment screening.

I. That it will comply with Chapter 216.347, Florida Statutes, which prohibits the expenditure of contract funds for the purpose of lobbying the legislature, state or county agencies.

J. That it will notify the County immediately of any funding source changes or additions from other sources that are different from that shown in the Provider’s application. This notification shall include a statement as to how this change in funding affects provision of service as well as the use of and continued need for County funds.

K. That it will acknowledge support for all activities funded wholly or in part by County funds.

L. That it will notify the County of any significant changes to the Provider’s organization, including changes to the Provider’s Articles of Incorporation or Bylaws, within 10 working days of the effective date of any such change.

VIII. Health Insurance Portability And Accountability Act Of 1996 (HIPAA)

The County, pursuant to the Federal Health Insurance Portability and Accountability Act of 1996 (the Act), is a covered entity as the Act defines that term. Any personal health information (PHI), as defined by the Act, that the County receives pursuant to this Agreement is subject to the disclosure and security requirements of the Act. Transfer of information to the County sufficiently redacted to no longer be considered PHI is encouraged as being in the best interest of client PHI confidentiality to the extent that client services are unaffected. Particular methods to accomplish the highest levels of client service coupled with PHI confidentiality shall be an ongoing task of the affected staffs of the County and Provider.

IX. Public Records

A. The cost of reproduction, access to, disclosure, non-disclosure, or exemption of records, data, documents, and/or materials, associated with this Agreement shall be subject to the applicable provisions of the Florida Public Records Law (Chapter 119, Florida Statutes), and other applicable State and Federal provisions. Access to such public records, may not be blocked, thwarted, and/or hindered by placing the public records in the possession of a third party, or an unaffiliated party.

B. In accordance with Florida law, to the extent that Contractor’s performance under this Contract constitutes an act on behalf of the County, Contractor shall comply with all requirements of Florida’s public records law. Specifically, if Contractor is expressly authorized, and acts on behalf of the County under this Agreement, Contractor shall:
(1) Keep and maintain public records that ordinarily and necessarily would be required by the County in order to perform the Services;

(2) Upon request from the County's custodian of public records, provide the County with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost as provided in Chapter 119, Florida Statutes, or as otherwise provided by law;

(3) Ensure that public records related to this Agreement that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by applicable law for the duration of this Agreement and following completion of this Agreement if the Contractor does not transfer the records to the County; and

(4) Upon completion of this Agreement, transfer, at no cost, to the County all public records in possession of the Contractor or keep and maintain public records required by the County to perform the Services.

If the Contractor transfers all public records to the County upon completion of this Agreement, the Contractor shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the Contractor keeps and maintains public records upon completion of this Agreement, the Contractor shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the County, upon request from the County's custodian of public records, in a format that is compatible with the County's information technology systems.

Failure by the Contractor to comply with the requirements of this section shall be grounds for immediate, unilateral termination of this Agreement by the County.

IF THE CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO ITS DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS AGREEMENT, CONTACT THE CUSTOMDIAN OF PUBLIC RECORDS AT:

500 San Sebastian View  
St. Augustine, FL 32084  
(904) 209-0805  
publicrecords@sjcfl.us

X. All Terms and Conditions Included

This Contract, its attachments, and any exhibits referenced in said attachments, together with all documents incorporated by reference, contain all the terms and conditions agreed upon by the parties. This contract supersedes all previous communications, representations, or agreements, either verbal or written, between the parties.
XI. **Governing Law**

This Contract shall be construed according to the laws of the State of Florida. Venue for any administrative or legal action arising under this Contract shall be in St. Johns County, Florida.

XII. **Severability**

If any word, phrase, sentence, part, section, subsection, or other portion of this contract, or any application thereof, to any person or circumstance is declared void, unconstitutional, or invalid for any reason, then such word, phrase, sentence, part, section, subsection, other portion, or the proscribed application thereof, shall be severable, and the remaining portions of this contract, and all applications thereof, not having been declared void, shall remain in full force, and effect.

XIII. **Dispute Resolution**

A. SJC and the provider agree to comply with the following steps in the case if a dispute or communication difficulties:

   Step 1 is resolution of the dispute/communication issue among the staff who surfaced the issue; and

   Step 2 is resolution of the dispute/communication issue by the SJC management staff and the provider management staff.

XIV. **Audits, Monitoring, and Records**

A. **Monitoring**

The Provider agrees to permit persons duly authorized by the County and the Federal or State grantor agency (if applicable) or any representatives to inspect all records, papers, documents, facility's goods and services of the Provider and interview any clients and employees of the Provider to be assured of satisfactory performance of the terms and conditions of this contract to the extent permitted by the law after giving the Provider reasonable notice. The monitoring is a limited scope review of the contract and agency management and does not relieve the Provider of its obligation to manage the grant in accordance with applicable rules and sound management practices.

Following such monitoring the County will deliver to the Provider a written report regarding the manner in which services are being provided. The Provider will rectify all noted deficiencies within the specified period of time indicated in the monitoring report or provide the County with a reasonable and acceptable justification for not correcting the noted shortcomings. The Provider's failure to correct or justify the deficiencies within the time specified by the County may result in the withholding of payments, being deemed in breach or default, or termination of this Contract.

Provider must supply County with copies of all monitoring reports of programs that are funded by the County including agency response, within 30 days of receipt.

B. **Audits and Inspections**
The Provider will make all records referenced in Article IV.C of this Contract and all items included on financial statements available for audit or inspection purposes at any time during normal business hours and as often as County deems necessary.

The Clerk of Courts Internal Audit Division, the Federal or State grantor agency (if applicable), St. Johns County employees, or any of their duly authorized representatives have the right of timely and unrestricted access to any books, documents, papers, or other records of Provider or its Certified Public Accountant (CPA) that are pertinent to the contract, in order to make audits, examinations, excerpts, transcripts, and copies of such documents. If contract non-compliance or material weaknesses in the organization are noted, the County or other authorized representatives have the right to unlimited access to records during an audit or inspection, including timely and reasonable access to a Provider's personnel for the purpose of interview and discussion related to such documents.

C. Records

The Provider shall retain all financial, client demographics, and programmatic records, supporting documentation, statistical records, and other records which are necessary to document service provision, expenditures, income and assets of the Provider by funding source, program, and functional expenses category during the term of this contract and 5 years from the date of contract expiration. If any litigation, claim, negotiation, audit, or other action involving the records has been initiated before the expiration of the 5-year period, the records shall be retained for 1 year after the final resolution of the action and final resolution of all issues that arise from such action.

D. Independent Audit

For contracts where the total compensation, disbursement, grant, or reimbursable expense (or any combination thereof) exceeds three hundred thousand dollars, an original bound audit of the Provider’s financial statements must be submitted to the County, in the form, format, and timeframe noted below, or elsewhere in this Contract.

For contracts where the total compensation, disbursement, grant, or reimbursable expense (or any combination thereof) does not exceed three hundred thousand dollars, an original, bound audit is not required, unless the County determines that an independent audit is warranted (based on among other things, the use of such funds), and provides the Provider with a written explanation supporting the County’s determination that such an independent audit is warranted. Under those circumstances, the County’s written explanation will set forth the form, format, and timeframe for the independent audit.

An original, bound audit of the Provider’s financial statements in accordance with Generally Accepted Accounting Principles (GAAP), and/or current Generally Accepted Government Auditing Standards (GAGAS) as applicable, including the auditor’s opinion, requisite reports on internal control and compliance, if required, management letter addressing internal controls, and management’s response to such letter, must be submitted to the County no later than 180 days following the end of Provider’s fiscal year along with any corrective action plan if applicable. Failure to submit the report within the required timeframe will result in the withholding of payment requested, or termination of the contract by the County.
The audit must be conducted by an independent, licensed certified public accountant and must be in accordance with the General Accounting Office (GAO) Yellow Book, generally accepted Government Auditing Standards, OMB Circular A-133 “Audits of States, Local Governments and Non-Profit Organizations” if applicable, the Florida Single Audit Act (F.S. 215.97) if applicable, and the Auditor General Rule 10.550 (Government) or 10.650 (Not For Profit) as applicable. The audit must specifically identify the programs that are funded by this Contract, either in the statement of functional expenses, revenues and expenditures, footnotes, schedule of Federal awards and State financial assistance, or as supplemental data in the financial statements. The statement should be consistent with programs detailed in the corresponding proposal and attachment.

XV. Amendments

Any request by the Provider for an amendment to this Contract shall be in writing and shall detail the nature of and justification for the requested amendment. The County reserves the right to approve or deny all contract amendments for any reason. An approved amendment shall be in writing and signed by both parties.

IN WITNESS THEREOF, PROVIDER and COUNTY have caused this 12-page contract and all Contract Exhibits and Attachments as indicated on next page to be executed by their undersigned officials as duly authorized.

PROVIDER: ACTION FOR CHILD PROTECTION

By: _______________________

________________________
(Signature of authorized officer)

Title

________________________
Date

COUNTY: ST. JOHNS COUNTY

By: Michael D Wanchick

________________________
(Signature of authorized officer)

County Administrator

Title

________________________
Date

APPROVED AS TO FORM: COUNTY ATTORNEY’S OFFICE

By: _______________________

Title: _______________________

Date: _______________________

ATTEST: CLERK OF CIRCUIT COURT

By: _______________________

Title: _______________________

Date: _______________________

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