

## PEMBROKE PINES CITY COMMISSION

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Charles F. Dodge CITY MANAGER 954-450-1040 cdodge@ppines.com November 30th, 2017

South Florida Therapeutic Solutions 9050 Pines Boulevard, Suite 383 Pembroke Pines, Florida 33024

## Re: Adult Civil Citation Program - Social Services

Dear Sir/Madam:

This Letter of Understanding is intended to summarize the arrangements between South Florida Therapeutic Solutions (hereinafter "Solutions") and the City of Pembroke Pines (hereinafter "City") for the coordination of services to ensure that a full range of alcohol, drug, mental health and other social services are offered to persons who are participating in the City's Adult Civil Citation Program and who are referred to Solutions.

- (1) Solutions shall provide all services listed in the Scope of Work, attached hereto and incorporated herein as Exhibit "A".
- (2) Both parties agree to comply with federal guidelines regarding confidentiality.
- (3) Solutions agrees that it shall be liable for damages arising or resulting from the negligent or wrongful act or omission of any employee of Solutions while performing the services under this Letter of Understanding.
- (4) The City acknowledges and agrees that refusal to provide treatment to termination of treatment is the sole prerogative of the referral agency. Treatment staff may reject any client who does not meet the treatment criteria. Each instance shall be documented and reported to the Adult Civil Citation Program within one (1) working week.
- (5) Either party may terminate this Letter of Understanding upon seven (7) days written notice to the other party.
- (6) Nothing contained herein is intended nor shall be construed to waive the City's rights and immunities under the common law or Section 768.28, Florida Statutes, as amended from time to time. The provisions of this paragraph shall survive the execution, delivery and performance of this Letter of Understanding.

Concurrence with this Letter of Understanding will be indicated by your signature below, and the return of one signed copy to my attention at your very earliest convenience.

Sincerely,

Crurles A. Dodge

Charles F. Dodge City Manager

For Solutions: I agree with the contents of the Letter of Understanding as outlined above.

Date

Stephanie Cobealu

APPROVED AS TO LEGAL FORM

OF THE CITY ADTORNEY

DATED:

## **EXHIBIT "A"**

This Statement of Work is for the Educational Training Courses for 1st Time Offenders which Solutions will provide to offenders (clients) that are referred by the Pembroke Pines Police Department's Adult Civil Citation (ACC) program.

## **General Services and Specific Duties**

- 1. Solutions must provide the following to all referred clients:
  - a. A drug-screen
  - b. A general assessment (GAIN-Q, Addiction severity index, or similar tool) to identify potential life problems.
- 2. Based on the drug-screen and the general assessment, Solutions' intervention program must provide an individualized plan to the client to include at minimum, basic and/or advanced services.
- 3. Solutions' intervention program (basic or advanced) must able to be completed by referred clients within the period of one (1) to ninety (90) days.
- 4. The total cost for a client to successfully complete Solutions' intervention Program (basic or advanced), regardless of the type of plan offered, cannot exceed \$350.00.
  - a. This fee is the sole responsibility of the client and must be paid prior to the rendering of services.
  - b. Lenient payment options (payment plan, etc.) must be made available for clients, based on their ability to pay.
- 5. Solutions' intervention program (basic or advanced) must be made available in face-to-face/classroom type format, at their own facilities, which must be located in Broward County, Florida.
- 6. Solutions' intervention program (basic or advanced) must make convenient scheduling available based on the client's ability to attend, due to work, Solutions or other client obligations.

- 7. Solutions' intervention program (basic or advanced) must be relevant to the following eligible offenses for which the Pembroke Pines Police Department will make referrals:
  - a. Criminal Mischief (vandalism)
  - b. Petit Theft
  - c. Possession of Alcohol by a person under 21 years of age
  - d. Possession of two (2) grams or less of cannabis
  - e. Possession of paraphernalia
  - f. Assault and battery offenses
- 8. The Solutions must make written notification to the Pembroke Pines Police Department when a client registers for and when a client completes Solutions' intervention program, to include providing the Police Department a copy of the completed certificate.