



Fulton County Board of Commissioners

## Agenda Item Summary

**BOC Meeting Date**  
3/18/2020

**Requesting Agency**

County Manager

#20-0233

**Commission Districts Affected**

All Districts

**Requested Action** *(Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)*

Ratification of the Emergency Action Plan of the County Manager to address the COVID-19 threat to seniors and young people in Fulton County by suspending certain public services which involve these most vulnerable citizens

**Requirement for Board Action** *(Cite specific Board policy, statute or code requirement)*

[Click here to enter text.](#)

**Is this Item related to a Strategic Priority Area?** *(If yes, note strategic priority area below)*

Yes                      Open and Responsible Government

**Is this a purchasing item?**

No

**Summary & Background**

*(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)*

**Scope of Work:**

[Click here to enter text.](#)

**Contract & Compliance Information**

*(Provide Contractor and Subcontractor details.)*

Agency Director Approval		County Manager's Approval
Typed Name and Title	Phone	
Signature	Date	

Agency Director Approval		County Manager's Approval
Typed Name and Title	Phone	
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

<b>Solicitation Information</b>	<b>NON-MFBE</b>	<b>MBE</b>	<b>FBE</b>	<b>TOTAL</b>
No. Bid Notices Sent:				
No. Bids Received:				
<b>Total Contract Value</b>	.			
<b>Total M/FBE Values</b>	.			
<b>Total Prime Value</b>	.			
<b>Fiscal Impact / Funding Source</b>	<i>(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)</i>			
.				
<b>Exhibits Attached</b>	<i>(Provide copies of originals, number exhibits consecutively, and label all exhibits in the upper right corner.)</i>			
<b>Source of Additional Information</b>	<i>(Type Name, Title, Agency and Phone)</i>			

<b>Agency Director Approval</b>		<b>County Manager's Approval</b>
<b>Typed Name and Title</b>	<b>Phone</b>	
<b>Signature</b>	<b>Date</b>	

## Procurement

Contract Attached:

.

Previous Contracts:

.

Solicitation Number:

.

Submitting Agency:

.

Staff Contact:

.

Contact Phone:

.

Description:.

### FINANCIAL SUMMARY

Total Contract Value:

Original Approved Amount: .

Previous Adjustments: .

This Request: .

TOTAL: .

MBE/FBE Participation:

Amount: . %: .

Amount: . %: .

Amount: . %: .

Amount: . %: .

Grant Information Summary:

Amount Requested: .

Match Required: .

Start Date: .

End Date: .

Match Account \$: .

☐

Cash

☐

In-Kind

☐

Approval to Award

☐

Apply &amp; Accept

Funding Line 1:

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Funding Line 2:

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Funding Line 3:

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Funding Line 4:

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### KEY CONTRACT TERMS

Start Date:

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End Date:

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Cost Adjustment:

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Renewal/Extension Terms:

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### ROUTING & APPROVALS

(Do not edit below this line)

. Originating Department:

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County Attorney:

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Purchasing/Contract Compliance:

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Finance/Budget Analyst/Grants Admin:

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Grants Management:

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County Manager:

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Date: .

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Date: .

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Date: .

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Date: .

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Date: .

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Date: .

1       **RESOLUTION TO RATIFY THE EMERGENCY ACTION PLAN OF THE COUNTY**  
2       **MANAGER TO ADDRESS THE COVID-19 THREAT TO SENIORS AND YOUNG**  
3       **PEOPLE IN FULTON COUNTY BY SUSPENDING CERTAIN PUBIC SERVICES**  
4

5           **WHEREAS**, the coronavirus disease 2019 (“COVID-19”) is a new respiratory  
6 illness that can spread from person to person; and

7           **WHEREAS**, the risk of infection with COVID-19 appears to be higher for people  
8 who are in close contact with someone who has COVID-19; and

9           **WHEREAS**, older people and people of all ages with severe underlying health  
10 conditions such as heart disease, lung disease, diabetes, and other autoimmune issues  
11 seem to be at higher risk of developing serious COVID-19 illness; and

12          **WHEREAS**, because COVID-19 is a new illness, healthcare providers are still  
13 learning about how it is transmitted, who will be affected by it, and proper protocols to  
14 address its spread; and

15          **WHEREAS**, on March 12, 2020, Brian Kemp, Governor of the State of Georgia,  
16 addressed the public concerning COVID-19; and

17          **WHEREAS**, during his address, Governor Kemp stated, in part, that the State of  
18 Georgia “must take extra care around elderly individuals, people with health issues and  
19 those who have a suppressed immune system . . . to dramatically limit their exposure to  
20 the public for the foreseeable future”; and

21          **WHEREAS**, during his address, Governor Kemp also stated that "county and  
22 local governments should consider what closures might be appropriate that do not affect  
23 essential services"; and

24          **WHEREAS**, pursuant to Fulton County Code § 2-148, the County Manager of  
25 Fulton County, Georgia (“County Manager”) is the chief executive officer of the County

1 and tasked with the “duty to execute all lawful orders, directions, instructions and all  
2 rules and regulations adopted by the county commission consistent with this division  
3 and entered upon the minutes of said county commission”; and

4 **WHEREAS**, pursuant to Fulton County Code § 2-148, the County Manager “shall  
5 have supervision over all employees of the county now or hereafter subject to the  
6 jurisdiction of the county commission”; and

7 **WHEREAS**, pursuant to Fulton County Code § 2-152, as the chief executive  
8 officer of the County, the County Manager has the “duty . . . to conduct, supervise and  
9 administer all county affairs, subject only to the general law, to rules prescribed by the  
10 county commission, and subject to the right of the county commission to review, repeal  
11 or modify any action of the county manager which is contrary to the general law or such  
12 rules, by a vote of a majority of the county commission at any subsequent, regular or  
13 called meeting, when such vote thus reviewing, repealing or modifying the action of the  
14 county manager shall be entered in writing on the minutes of the county commission”;  
15 and

16 **WHEREAS**, pursuant to Fulton County Code § 2-154, the “use and disposition of  
17 county property shall be under the supervision and direction of the county manager,  
18 subject to approval by the county commission”; and

19 **WHEREAS**, pursuant to Fulton County Code § 114-37, “the County Manager is  
20 authorized and directed to “(1) [p]rovide policy guidance to the [Director of the Fulton  
21 County Department of Emergency Management Services] in the administration of the  
22 emergency management program; [and] (2) [a]ssist in providing effective mobilization of  
23 all private and public resources of the county in time of emergency”; and

**WHEREAS**, the County Manager, in coordination with various departments of the County, has developed an Emergency Action Plan to Address the COVID-19 Threat to Seniors and Young People in Fulton County.

**NOW, THEREFORE, BE IT RESOLVED**, the Board of Commissioners of Fulton County, Georgia hereby ratifies the Emergency Action Plan to Address the COVID-19 Threat to Seniors and Young People in Fulton County; and

**BE IT FURTHER RESOLVED**, that the Board of Commissioners of Fulton County, Georgia, hereby empower the County Manager to take such additional action as the County Manager may determine to be necessary to alleviate and ameliorate the effects of COVID-19 on the citizens and employees of Fulton County, Georgia; and

**BE IT FINALLY RESOLVED**, that this Resolution shall become effective upon adoption.

**PASSED AND ADOPTED** by the Board of Commissioners of Fulton County,  
Georgia, this 18<sup>th</sup> day of March, 2020.

**FULTON COUNTY BOARD OF COMMISSIONERS**

Robert L. Pitts, Chairman

**ATTEST:**

**APPROVED AS TO FORM:**

Tonya R. Grier  
Interim Clerk to the Commission

Patrise Perkins-Hooker  
County Attorney