

# BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

C Award	Requested Board Meeting Date: 11/07/23 or Procurement Director Award:		
* = Mandatory, information must be provided			
*Contractor/Vendor Name/Grantor (DBA):			
Santa Cruz County			
*Project Title/Description:			
H-1B Workforce Program			
*Purpose:			
Santa Cruz County, subrecipient, will provide H-1B Workforce Service	es. Subrecipient will work directly with County and employers to create		

career-focused advancement and training programs for the H-1B Workforce Program. The H-1B One Workforce Grant Program is designed to develop replicable, comprehensive workforce strategies for preparing the workforce for middle-to high-skilled H-1B occupations within the information technology, advanced manufacturing, and transportation sectors. This amendment is to decrease the funding amount from \$587,312.00 to \$142,948.14.

\$307,312.00 to \$142,340.14.

The contract can be found in OnBase by searching 21\*361 in Doc\_ID\_AMS

Attachment: Contract Number CT-CR-21-361 (Amendment 1)

\*Procurement Method:

This Subrecipient Agreement is a non-Procurement contract and not subject to Procurement rules.

\*Program Goals/Predicted Outcomes:

The program's goal is to prepare job seekers for current and projected demand occupations that offer wages that allow self-sufficiency or that have a clear career path leading to self-sufficiency.

\*Public Benefit:

This program supports Pima County's economic development by helping to develop a trained and productive labor force that meets employers' needs.

\*Metrics Available to Measure Performance:

Santa Cruz County will submit monthly summary reports.

\*Retroactive:

Yes. As advised by Grants Management & Innovation, the amendment states that the budget "will remain in effect February 1, 2023 throughout January 31, 2025," and per Procurement, that means the amendment is treated as retroactive. However, no funds will be reduced under the terms of this amendment until after execution by the Board of Supervisors. Following is a timeline of the development of this amendment:

- Discussions with the vendor about potential budget reductions began in late June, 2023
- In subsequent months, technical assistance sessions were held with Grants Management & Innovation and the vendor to determine the amount of any reduction
- A draft amendment was sent to the vendor on 10/9/23
- Vendor approval was received 10/16/23

The first available Board of Supervisors meeting is November 7.

GMI Approves To: COB, 10-24-2023 Q AF 10/18/23 PSS.:4

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## THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

<b>Contract / Award Information</b>		
Document Type:	Department Code:	Contract Number (i.e., 15-123):
Commencement Date:	Termination Date:	Prior Contract Number (Synergen/CMS):
Expense Amount \$*		Revenue Amount: \$
*Funding Source(s) required:		
Funding from General Fund? Yes	No If Yes \$	<u> </u>
Contract is fully or partially funded with Fe If Yes, is the Contract to a vendor or sub		· No
Were insurance or indemnity clauses mod If Yes, attach Risk's approval.	ified? CYes C	` No
Vendor is using a Social Security Number?  If Yes, attach the required form per Administr	C Yes ( rative Procedure 22-10,	<sup>C</sup> No
Amendment / Revised Award Informati	on ·	
Document Type: <u>CT</u>	Department Code: <u>CR</u>	Contract Number (i.e., 15-123): 21-361
Amendment No.: 1		AMS Version No.: <u>11</u>
Commencement Date: 02/01/23		New Termination Date: 01/31/25 (No change)
		Prior Contract No. (Synergen/CMS): N/A
	Decrease	Amount This Amount of (AAA 200 00)
Is there revenue included? C Yes	No If Yes \$	Amount This Amendment: \$ (444,363.86)
*Funding Source(s) required: US Depar	tment of Labor Employm	ent and Training
Funding from General Fund? Yes	-	
Grant/Amendment Information (for gra		
Document Type:	Department Code:	Grant Number (i.e., 15-123):
Commencement Date:	Termination Date:	
Match Amount: \$		Revenue Amount: \$
*All Funding Source(s) required:		
*Match funding from General Fund?	Yes C No If Yes \$	<b>%</b>
*Match funding from other sources? *Funding Source:	Yes ( No If Yes \$	%
*If Federal funds are received, is fundin	g coming directly from the	Federal government or passed through other organization(s)?
Contact: Rhonda Pina/Rise Hart		
Contact: Rhonda Pina/Rise Hart  Department: Community & Workforce C	Pevelopment	Telephone: 724-4703/724-5723
Department: Community & Workforce D	0()	\ \ \
	Development  Down D	. 1

Pima County Department of Community and Workforce Development

Project: H-1B Workforce Program

Subrecipient name and address: Santa Cruz County
2150 N. Congress Drive, #119
Nogales, AZ 85621

Amount: \$142,948.14

Contract No.: CT-CR-21-361

Amendment No.: 1

Subrecipient Unique Entity Identifier (UEI):	UVLV	R8CN2FM4	SAM expi	iration date (if e):	09/18/2024
Federal Award Identification Number (FAIN)	HG-35	5918-21-60-A-4		ward date	02/01/2021- 01/31/2025
Subaward term/ period of performance start and end date	02/01/2 01/31/2	2025	date	art and end	02/01/2021- 01/31/2025
Amount of federal fund entity to the subrecipie	s obligant (amo	ated by this action	on by the p	ass-through	-\$444,363.86
Total amount of federal funds obligated to the subrecipient by the pass-through entity including the current financial obligation (amount of original agreement, plus any prior amendments, including this amendment)			\$142,948.14		
Total amount of the federal award committed to the subrecipient by the pass-through entity (amount of original agreement, plus any prior amendments, plus any match, plus any future budget periods, if applicable)		\$142,948.14			
Federal award project description (descriptive project title)		H-1B One Workforce			
Funding agency		U.S. Department of Labor Employment and Training			
Pass-through entity (primary recipient)		Pima County			
Pass-through entity (secondary recipient, if applicable)		Santa Cruz County			
Assistance listing number and title (applies to 100% of this sub-award, including all disbursements)  17.268 H-1B Job Training Grants Prog		Grants Program			
Is this subaward for research and development?			Yes NoX		
Subrecipient indirect cost rate and methodology  Negotiated I Cost Rate Agree			XDe minimis	□No Indirect	
Required match	YE	S[X]NO	Match an	nount	\$0

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#### SUBAWARD AMENDMENT

#### 1. BACKGROUND AND PURPOSE.

- 1.1. <u>Background</u>. On May 04, 2021, County and Subrecipient (collectively "Parties") entered into the above referenced agreement to provide H-1B One Workforce Grant Program administrative and business outreach services.
- 1.2. <u>Purpose</u>. County requires amendment due to current low participant service level numbers and length of time remaining in grant to achieve performance outcomes. Pima County will adjust participant service level numbers and commensurate budget accordingly to meet grant performance outcomes by the end of grant period.

### 2. COMPENSATION AND PAYMENT.

- 2.1. <u>Maximum Payment Amount.</u> The maximum amount the County will spend under this Contract, as set forth in Section 5.1 of the original agreement, is decreased by \$444,363.86. County's total payments to Subrecipient under this contract, including any sales taxes, will not exceed \$142,948.14.
- 2.2. <u>Budget; Adjustment.</u> The budget in **Exhibit A** is replaced in its entirety with the below. This budget will remain in effect February 1, 2023 throughout January 31, 2025 unless otherwise adjusted and formally agreed to.

Budget Item	Allocated Amount	Allocated Amount
	2/1/23-1/31/24	2/1/24-1/31/25
Salary: WDS	\$5,500	\$2,750
Salary: CSS	\$5,500	\$2,750
Fringe benefits	\$6,000	\$3,000
Indirect costs	\$1,600	\$800
Supplies (including postage and outreach)	\$0	\$0
Training/tuition	\$26,000	\$13,000
Testing	\$0	\$0
Supportive Services	\$0	\$0
OJT/apprenticeship	\$0	\$0
Total Operating Budget	\$44,600	\$22,300

3. SCOPE OF SERVICES. The parties have revised the number of participants served in the original scope of services Exhibit B - Scope of Services. Subrecipient will implement the services described below from the effective date of February 1,2023 through January 31, 2025. Subrecipient will perform its duties in a humane and respectful manner and in accordance with any applicable professional standards and will obtain and maintain all required licenses, permits and authority required for performance under this Agreement.

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SERVICE LEVELS	Number of Participants
Total participants enrolled in education/training activities	19
Total participants who complete education/training activities	19
Total participants who complete education/training and receive a degree or credential	19
Total number of unemployed or underemployed individuals completing education/training and obtain employment	13
Total number of incumbent worker participants completing education/training and receive new position	0

All other provisions of the Agreement not expressly modified in this Amendment will remain in effect and be binding on the parties.

THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK

This agreement may be executed in counterparts, each of which, when taken together, will constitute one original agreement.

PIMA COUNTY	SUBRECIPIENT
Chair, Board of Supervisors	Authorized Officer Signature
Date	Printed Name and Title
	Date
ATTEST	
Clerk of the Board	
Date	
APPROVED AS TO FORM	APRROVED AS TO CONTENT
Deputy County Attorney	Department Head
Kyle Johnson Print DCA Name	Date 10)17/223