



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

Award Contract Grant

Requested Board Meeting Date: 10/03/2017

* = Mandatory, information must be provided

or Procurement Director Award

***Contractor/Vendor Name/Grantor (DBA):**

Five Point Solutions

***Project Title/Description:**

Implementation of Enhancements in support of the Pima County Drug Court Program Drug Treatment Alternative to Prison Program (DTAP).

***Purpose:**

To provide an Accountability Court Case Management System that streamlines the management of program evaluation, treatment, and monitoring through the use of electronic document management. Amendment #2 to increase funding.

***Procurement Method:**

Direct Select D 29.6

***Program Goals/Predicted Outcomes:**

Ensure consistent offender accountability for second-time and serious first time offenders.

***Public Benefit:**

Grant funded alternative to prison programs reduces recidivism, saves millions of taxpayer dollars, saves lives and reunite families.

***Metrics Available to Measure Performance:**

Pima County Attorney's Office will be reviewing and approving invoices to monitor services provided under this agreement required to meet the needs of the Drug Treatment Alternative to Prison Program (DTAP).

***Retroactive:**

No.

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To: COB - 9-27-17
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Addendum

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e.,15-123): _____

Effective Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____

Expense Amount: \$* _____ Revenue Amount: \$ _____

***Funding Source(s) required:**

Funding from General Fund? Yes No If Yes \$ _____ % _____

Contract is fully or partially funded with Federal Funds? Yes No

***Is the Contract to a vendor or subrecipient?** _____

Were insurance or indemnity clauses modified? Yes No

If Yes, attach Risk's approval

Vendor is using a Social Security Number? Yes No

If Yes, attach the required form per Administrative Procedure 22-73.

Amendment / Revised Award Information

Document Type: CT Department Code: PCA Contract Number (i.e.,15-123): 16-389

Amendment No.: 2 AMS Version No.: 4

Effective Date: 10/03/2017 New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

Expense or Revenue Increase Decrease Amount This Amendment: \$ 7,000.00

Is there revenue included? Yes No If Yes \$ _____

***Funding Source(s) required:** BHTCC- Pima County Behavioral Health Treatment Court Collaboration.(DTAP)

Funding from General Fund? Yes No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards) Award Amendment

Document Type: _____ Department Code: _____ Grant Number (i.e.,15-123): _____

Effective Date: _____ Termination Date: _____ Amendment Number: _____

Match Amount: \$ _____ Revenue Amount: \$ _____

***All Funding Source(s) required:**

***Match funding from General Fund?** Yes No If Yes \$ _____ % _____

***Match funding from other sources?** Yes No If Yes \$ _____ % _____

***Funding Source:** _____

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?** _____

Contact: Rozana Villanes

Department: PCA Telephone: 724-5631

Department Director Signature/Date: DAVE SMITH 9/26/17

Deputy County Administrator Signature/Date: _____

County Administrator Signature/Date: C. Buehler 9/27/17

(Required for Board Agenda/Addendum Items)

<p>Pima County Attorney's Office</p> <p>Project: Implementation of Enhancements to the Pima County Drug Court Program and Establishment of Drug treatment Alternative to Prison Program (DTAP)</p> <p>Contractor: Five Point Solutions LLC 905 Old Cherokee Rd. Lexington, SC 29072</p> <p>Contract No.: CT-PCA-16-389</p> <p>Contract Amendment No.: Two (#02)</p>	<table border="1"> <tr> <td style="text-align: center;">CONTRACT</td> </tr> <tr> <td>NO. <u>CT-PCA-16-389</u></td> </tr> <tr> <td>AMENDMENT NO. <u>02</u></td> </tr> <tr> <td>This number must appear on all invoices, correspondence and documents pertaining to this contract.</td> </tr> </table>	CONTRACT	NO. <u>CT-PCA-16-389</u>	AMENDMENT NO. <u>02</u>	This number must appear on all invoices, correspondence and documents pertaining to this contract.
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AMENDMENT NO. <u>02</u>					
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Orig. Contract Term: 07/15/2016 - 06/14/2017	Orig. Amount:	\$ 45,700.00
Termination Date Prior Amendment: 06/14/2018	Prior Amendments Amount:	\$ 5,000.00
Termination Date This Amendment: 06/14/2018	This Amendment Amount:	\$ 7,000.00
	Revised Total Amount:	\$ 57,700.00

CONTRACT AMENDMENT

The parties agree to amend the above-referenced contract as follows:

- 1. Maximum Payment Amount.** The maximum amount the County will spend under this Contract, as set forth in Article 3, is increased by \$7,000.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$57,700.00.

The effective date of this Amendment is October 3, 2017.

All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

PIMA COUNTY

Chair, Board of Supervisors

Date

ATTEST

Clerk of the Board

Date

APPROVED AS TO FORM



Deputy County Attorney

Tobin Rosen

Print DCA Name

9/26/17

Date

CONTRACTOR



Authorized Officer Signature


Cicero G. Lucas IV, President

Printed Name and Title

9/19/2017

Date

APPROVED AS TO CONTENT



David Smutzer, Department Head

9/26/17

Date