



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: June 3, 2025

* = Mandatory, information must be provided

or Procurement Director Award: ☐

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

Compass Affordable Housing Inc.

***Project Title/Description:**

Emergency Eviction Legal Services Emergency Housing – Rehousing Assistance

***Purpose:**

As part of the Emergency Eviction Legal Services (EELS) program, Community & Workforce Development (CWD) provides noncongregate bridge housing to families and other high-need individuals who have become homeless due to eviction. Housing is provided at The Craycroft (formerly Knights Inn), which is owned by the City of Tucson and operated by the EELS program under an Intergovernmental Agreement with the City (CT-CR-24-046). On June 18, 2024, the Board approved a subaward of \$1,055,106 in Arizona Department of Housing (ADOH) grant funding to Compass Affordable Housing for rehousing assistance (rent, utilities, deposits, fees, etc.) and case management to help clients exit the shelter to permanent housing.

This amendment would modify Compass's budget to reduce the amount allocated to Rehousing Assistance Payments and increase the amounts allocated for Case Management Staff and Program Supplies. This revision does not increase or decrease the overall subaward nor does it change the term of the subaward. ADOH has approved the budget revision.

The Emergency Eviction Legal Services program and this amendment align with Pima County Budget Pillar 2 – Improving the Quality of Life and Prosperity Initiative Policy 3 – Improve Housing Stability.

***Procurement Method:**

Direct selection per Board of Supervisors Policy D 29.6.III-C.

***Program Goals/Predicted Outcomes:**

Individuals and families staying at the shelter will receive rehousing assistance, supportive services, and intensive case management toward the desired outcome of housing stability and increased workforce participation.

***Public Benefit:**

A reduction in unsheltered homelessness and increased workforce participation benefit program participants and the community as a whole.

***Metrics Available to Measure Performance:**

Contractor will serve a minimum of 75 households exiting the shelter. Participant data, including exit data and detailed demographic and other information, are tracked in the Homeless Management Information System.

***Retroactive:**

No.

TO: COB, 5-15-2025 (1)
Vers.: 3
pgs.: 2

Gill approves
KCB [Signature]
5/14/2025

MAY 14 2025 PM 01:44 PD

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

Contract / Award Information

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 \$ _____ % _____

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

If Yes, 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 22-10.

Amendment / Revised Award Information

Document Type: PO Department Code: CWD Contract Number (i.e., 15-123): CT_24000000000000000468

Amendment No.: 1 AMS Version No.: 3

Commencement Date: 6/3/2025 New Termination Date: 6/30/2026

Prior Contract No. (Synergen/CMS): CT-CR-24-468

☒ Expense ☐ Revenue ☐ Increase ☐ Decrease

Amount This Amendment: \$ 0

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

***Funding Source(s) required:** Arizona Department of Housing – Homeless Shelter & Services Fund

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): _____

Commencement 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: Andy Flagg

Department: Community & Workforce Development

Telephone: 724-8508

Department Director Signature: [Signature] Date: 5/13/2025

Deputy County Administrator Signature: [Signature] Date: 5/14/2025

County Administrator Signature: _____ Date: 5/14/2025

Pima County Department of Community & Workforce Development

Project: Emergency Eviction Legal Services Emergency Housing – Rehousing Assistance

Contractor: Compass Affordable Housing, Inc.

Contract No.: CT_2400000000000000468 (formerly CT-CR-24-468)

Contract Amendment No.: 01

Orig. Contract Term: 6/1/2024 – 6/30/2026	Orig. Amount:	\$1,055,106.00
Termination Date Prior Amendment: N/A	Prior Amendments Amount:	\$ 0.00
Termination Date This Amendment: 6/30/2026	This Amendment Amount:	\$ 0.00
	Revised Total Amount:	\$1,055,106.00

CONTRACT AMENDMENT

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

1. Background and Purpose.

1.1. Background. On June 1, 2024, County and Contractor entered into the above referenced agreement to provide Emergency Eviction Legal Services Emergency Housing – Rehousing Assistance.

1.2. Purpose. County requires a modification to the project budget to permit Contractor to continue to effectively provide rehousing services for the remainder of the contract period.

2. Compensation and Payment. The parties have revised the project budget as described in **Exhibit B (1 page)** to the Contract as follows:

Rehousing Assistance Payments	\$836,006 \$773,006
Case Management Staff – Salaries	\$150,000 \$199,880
Case Management Staff – Fringe	\$21,000 \$29,120
Mileage	\$4,200
Program Supplies	\$2,800 \$7,800
Administration	\$23,100
Indirect	\$18,000
Total	\$1,055,106

3. Heat Injury and Illness Prevention and Safety Plan. Pursuant to Pima County Procurement Code 11.40.030, Contractor hereby warrants that if Contractor's employees perform work in an outdoor environment under this Contract, Contractor will keep on file a written Heat Injury and Illness Prevention and Safety Plan. At County's request, Contractor will provide a copy of this plan and documentation of heat safety and mitigation efforts implemented by Contractor to prevent heat-related illnesses and injuries in the workplace. Contractor will post a copy of the Heat Injury and Illness Prevention and Safety Plan where it is accessible to employees.

Contract No.: CT_2400000000000000468 Amd 1

1

Revised 9/19/24

Contractor will further ensure that each subcontractor who performs any work for Contractor under this Contract complies with this provision.

4. **Effective Date.** This Contract Amendment is effective on the date it is executed by the last party to sign it.

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

CONTRACTOR


Authorized Officer Signature

Maryann Beeding, CEO
Printed Name and Title

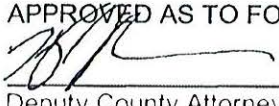
5-2-25
Date

ATTEST

Clerk of the Board

Date

APPROVED AS TO FORM


Deputy County Attorney

Kyle Johnson
Print DCA Name

5/1/2025
Date

APPROVED AS TO CONTENT


Department Head

5/13/2025
Date