

BOARD OF SUPERVISORS AGENDA ITEM REPORT CONTRACTS / AWARDS / GRANTS

C Award C Contract G Grant

Requested Board Meeting Date: June 21, 2022

* = Mandatory, information must be provided

or Procurement Director Award \Box

*Contractor/Vendor Name/Grantor (DBA):

Arizona Department of Housing

*Project Title/Description:

Pima County Links Rapid Re-Housing

*Purpose:

The Arizona Department of Housing (ADOH) awarded \$901,800.00 for Pima County Links, which is an employment and housing program administered by Pima County to assist people experiencing homelessness. This amendment is to reallocate funds and change the termination date from 6/30/22 to 12/01/22.

This is a no-cost amendment to reallocate funds.

There is no indirect cost due to ADOH Housing Program Fund (HPF) regulations.

Attachment: ADOH - Pima County Links Rapid Re-Housing Agreement 560-19 (Amendment 6)

*Procurement Method:

Not applicable to grant awards.

*Program Goals/Predicted Outcomes:

The program provides homeless short-term rapid rehousing rental assistance to stabilize long-term homeless participants before moving into permanent housing.

*Public Benefit:

The program provides a pathway for homeless individuals and families to obtain housing and employment and become self-sufficient.

*Metrics Available to Measure Performance:

ADOH requires client tracking and weekly performance reports in the Homeless Management Information System.

*Retroactive:

Yes. County received the amendment from ADOH on May 11, 2022. The negative impact of this amendment not being approved is Pima County homeless residents would not receive resources for employment and housing.

(My offinial) rous

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?	CYes CNo If Yes \$		%
Contract is fully or partially funde	ed with Federal Funds?	☐ Yes	□No
If Yes, is the Contract to a ven	dor or subrecipient?		
Were insurance or indemnity cla	uses 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 I	nformation		
			Contract Number (i.e.,15-123):
			ersion No.:
Commencement Date:			rmination Date:
		-	ontract No. (Synergen/CMS):
C Expense or C Revenue	C Increase C Decrease		: This Amendment: \$
•		Yes\$	
*Funding Source(s) required:			
Funding from General Fund?	CYes CNo If	/es \$	%
Grant/Amendment Information	(for grants acceptance and	awards)	C Award
Document Type: GTAM	Department Code: CR		Grant Number (i.e.,15-123): 22-098
Commencement Date: 7/1/21	Termination Date: 1	2/01/22	Amendment Number: 6
Match Amount: \$		⊠ Reve	enue Amount: \$ 0.00
*All Funding Source(s) require	d: Arizona Department of Hous	sing	
*Match funding from General F	Fund? (Yes @No If	Yes \$	%%
*Match funding from other sou	on		%
*Funding Source:			
*If Federal funds are received, Federal government or passed			e
Contact: Rise Hart/Jenifer Dark	and		
Department: Community & Wo	rkforce Development		Telephone: 724-5723/724-7312
Department Director Signature	· · · · · /// /	6/0	1/20
Deputy County Administrator S			1 = 6 June 2022
County Administrator Signature	e/Date:	200	a le retr

Contract No.:

Termination Date:

560-19 06/30/2022 12/01/2022

Amendment No.

6

AMENDMENT TO A STATE HOUSING FUND AGREEMENT Between STATE OF ARIZONA DEPARTMENT OF HOUSING and

PIMA COUNTY COMMUNITY SERVICES

This Agreement is made and entered into by and between the State of Arizona, Department of Housing (HOUSING), and Pima County Community Services (Recipient).

Whereas, HOUSING and Recipient have entered into a Contract, stipulating to an award through the State Housing Trust Fund by HOUSING to Recipient for the purpose as outlined in the above referenced HOUSING Agreement; and

Whereas, a revision to said Agreement is necessary, and;

Whereas, HOUSING and Recipient agree that the revision is in the best interest of all parties, including beneficiary low-income households; HOUSING and Recipient hereby agree to amend the subject agreement as follows:

Funding Agreement - Section 4. DURATION:

This Agreement shall be effective beginning on the date of execution by ADOH and shall remain in effect until 06/30/2020, **extended through 12/01/2022**, unless sooner terminated, extended or otherwise amended in accordance with the terms of this Agreement.

Attachment A - Scope of Work:

Amended to add, "Through the remainder of the contract (December 1, 2022), Subrecipient shall accommodate RRH eligibility to assist individuals with a Service Prioritization Decision Assistance Tool (SPDAT) score range of 7-9."

Term: The term of this Agreement shall be for one year, unless otherwise amended in accordance with the terms of this Agreement, commencing 07/01/2019 to 06/30/2020 and amended to extend through 12/01/2022.

Attachment C - Budget revised with the following increases to each line item-

- Rapid Rehousing line item decrease by \$17,000.00 for a total of \$533,087.00 allocated
- Support Services line item increased by \$17,000.00 for a total of \$296,881.00 allocated

The total contract budget remains at \$901,800.00.

Any and all portions of subject Agreement that are not herein specifically amended shall remain unchanged.

In Witness Whereof, **HOUSING** and **Recipient** have executed this Amendment that shall become effective when signed by **HOUSING**.

THE STATE OF ARIZONA,

DEPAR	TMENT OF HOUSING	RECIPIENT	
BY:		BY:	-
TITLE:	Thomas M. Simplot Director	Sharon Bronson TITLE: Chair, Board of Supervisors	
DATE:		DATE:	_

PIMA COUNTY COMMUNITY SERVICES

AMENDMENT No. 6 STATE HOUSING FUND AGREEMENT Between STATE OF ARIZONA DEPARTMENT OF HOUSING and PIMA COUNTY COMMUNITY SERVICES

SIGNATURES continued

APPROVED AS TO CONTENT

Daniel Sullivan, Director

Community & Workforce Development

APPROVED AS TO FORM

June 1, 2022

Deputy County Attorney

ATTACHMENT A PIMA COUNTY COMMUNITY SERVICES ADOH #560-19 HPF Pima County Links RRH – Pima County

Scope of Work

Recipient shall administer a Rapid Rehousing Program (RRH) in accordance with the application documents submitted to the Arizona Department of Housing in response to a Request for Proposals for Rapid Rehousing in the Balance of State geographic region. Recipient shall provide RRH for 25 new units/households and no more than 15 carryover units/households, scattered site, in Pima County for individuals/families who meet the Category One and Category Two definitions of homeless as defined by HUD. Through the remainder of the contract (December 1, 2022), Subrecipient shall accommodate RRH eligibility to assist individuals with a Service Prioritization Decision Assistance Tool (SPDAT) score range of 7 – 9 (see Amendment 6).

Recipient agrees to operate this RRH project in accordance with the Special Needs Housing Manual, revised November 2019.

By the signing of this contract, **Recipient** is certifying that the agency is not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from covered transactions by any federal or state debarment agency.

Term:

The term of this Agreement shall be for one year, unless otherwise amended in accordance with the terms of this Agreement, commencing 07/01/2019 to 06/30/2020 and amended to extend through 12/01/2022.

Use of Funds:

RRH funds are only eligible to help program participants pay for the following:

- short-term rental assistance (up to three (3) months)
- medium-term rental assistance (four (4) to twelve (12) months)
- security deposits (up to two (2) months)
- first and last month's rent
- property damage (equal to one (1) month's rent)
- supportive services (see 24 CFR 578.53)

NOTE: RRH funds are not eligible to pay for any mortgage costs or other fees associated with retaining homeowners' housing.

Homeless Definitions:

Consistent with 24 CFR Part 578 HEARTH Continuum of Care Program: Interim Final Rule, July 31, 2012, **Recipient** must obtain and maintain appropriate documentation certifying that program participants meet the definitions of homelessness including chronic.

Housing First:

All RRH projects must follow a Housing First model and cannot place preconditions or eligibility requirements-beyond this contract's eligibility requirements-on persons entering housing, nor can it require program participants to participate in supportive services activities or make other rules, such as sobriety, a condition of housing. **Recipient** may offer and encourage program participants to participate in services, but there may be no time limit as to when he/she must do so.

Support Services See 24 CFR 578.53 for a complete list of eligible supportive services.

Administrative Costs See 24 CFR 578.59 for a complete list of eligible administrative costs.

Performance Measures

- 1. Fifty percent (50%) of households served will move into housing within 45 days of referral to the program.
- 2. Eighty percent (80%) of the planned contracted amount of new households will be housed within the first eight months of the contract year.
- 3. Seventy-five percent (75%) of households will remain housed six months after rental subsidy ends.
- **4.** Seventy-five percent (75%) of households will increase or maintain their incomes through employment or receipt of benefits.
- 5. No more than 20% of households will be carried into a new contract year.

Expenditure Rate

Recipient shall submit Request for Payments monthly.

Recipient acknowledges that the rate of expenditure will be monitored closely and if deemed necessary grant funds may be reallocated.

Leverage:

Recipient is responsible for all costs of operating the permanent housing program beyond the ADOH grant funding.

Homeless Management Information System (HMIS):

Recipient agrees to enter client data into HMIS accurately, completely and timely, in accordance with the TPCH HMIS Data Quality Plan and the data quality standards as defined by HUD. Accurate maintenance of reporting program data into HMIS is required through the term of this contract.

The Recipient shall provide an HMIS Data Completeness Report. The expectation is that a grade of at least an "A" will be maintained throughout the term of this contract. Information contained on the rent rolls submitted with the Requests for Payment will be compared to data in HMIS. If discrepancies are found, rent on any leased/rented unit(s) will not be paid until discrepancies are rectified.

Reporting Requirements

APRs and a Recidivism Report will be due to ADOH on October 31st, January 31st and April 30th and a final report no later than July 31st. All verification of information is the responsibility of the Recipient.



HPF Pima County Links RRH

Attachment C Page 33

Budget								
Recipient	Pima County Comn	Date						
Contract No./File No. 560-19			Revision No.					
Activity	HPF Admin, Rapid	Re-Housing, Preve						
Recipient Address	2797 E. Ajo Way		City	Tucson				
Contact Person	Dan Sullivan		W.F. (970)		Fax	520-724-2799		
Phone	520-724-7309	Email	daniel.sullivan@p	ima.gov	Zip Code	85713		
Program Specialist	Connie Howell		Connie, Howell@a	County				
а	С	d	е	f	g	h		
Budget Line Item or	HPF	HPF	HPF					
Activity No.	2019	2020	2021					
Administration	\$ 30,156.00	\$ 30,000.00	\$ 11,676.00					
Rapid Re-Housing	\$ 244,663.00	\$ 227,000.00	\$ 61,424.00			·		
revention								
Supportive Services	\$ 125,181.00	\$78,000.00	\$93,700.00					
l'otal	\$ 400,000.00	\$ 335,000.00	\$ 166,800.00	\$901,800.00				

REV. 8-2013



HPF Pima County Links RRH

Attachment D Page 34

III I'I IIII COUNTY												_	Attachment		age o x
ARIZONA DEPAR	RTMEN	ΤO	F HOUSIN	GR	EQUEST F	OR	PAYMEN7	SI	UMMARY	SHEET PAGE	1	OF 2			
Recipient			County Com			-							Date		
Contract No	560-19		ract Period: fr		· · · · · · · · · · · · · · · · · · ·								Pay Req. No/Mo		
Activity		HPF	Administration	on, R	apid Re-Hous	ing,	Prevention, S	upp	ort Services				Direct Wire Dep		Yes No
Recipient Address		2797	E. Ajo Way					1 1					City	Tuc	son
Contact Person		Dan	Sullivan							in the second			ZIP	857	13
Phone		520-7	724-7309				iel.sullivan@r	oima	a.gov				Fax	520	-724-2799
Program Specialist			nie Howell				nnie.Howell						County	Pin	na .
Itemized Payment Sta								s of	f invoices, cas	hed checks, and	ot	her backup			
documentation. ORIG	INAL SI	GNA	TURES are re	quir	ed for proces	sing	•						-		
a ·	b		С		d		е		f	g		h	i		j
Budget Line Item or	IDIS		HPF		HPF		HPF		Total	Total Amount		Balance in	Amount of this		New
Activity No.	Act No.		2019		2020		2021		Award	Req. to Date	L	Account	Request		Balance
Administration		\$	30,156.00		30,000.00		11,676.00	\$	71,832.00		\$	71,832.00		\$	71,832.00
Rapid Re-Housing		\$	244,663.00	\$	227,000.00	\$	61,424.00	\$	533,087.00		\$	533,087.00		\$	533,087.00
Prevention								\$	•		\$	-		\$	-
Support Services		\$	125,181.00	\$	78,000.00	\$	93,700.00	\$	296,881.00		\$	296,881.00		\$	296,881.00
											\$	-		\$	-
											\$	-		\$	-
					_						\$	-		\$	-
											\$	-		\$	-
											\$	-		\$	-
						<u> </u>					\$. . '.		\$	-
											\$	-		\$	-
Total		\$	400,000.00	\$	335,000.00	\$	166,800.00	\$	901,800.00	\$ -	\$	901,800.00	\$ -	\$	901,800.00
										•					
	<u>.</u>														
Recipient Authorized S	Signature	!		Date						Title					
Recipient Authorized															11
out in accordance with						ot p	reviously sub	mıt	ted. Attach al	ternate mailing	ado	tress if necess	ary.		
Performance Reports		Cui	rrent 📙	ot C	urrent 🛚										
	· · · · · ·							1 12							
ADOH Program Specialist Approval			Date			ADOH Program Administrator Approval						Date	e		



HPF Pima County Links RRH

Pima County Community Serv	ices			Date		
560-19	Contract Period: from 7/01/201	19 to 6/30/20	022	Pay Req. No		
			(6) 1 "	,		
Description of Expense (List in according to funding source)	Paid (or Payable) to	Paid	Check # Invoice PO	Amount Charged to COC/HTF	Balance paid by other source	Name of other source
	Description of Expense (List in according to	Description of Paid (or Payable) to Expense (List in according to	Description of Paid (or Payable) to Date Expense (List in according to	Description of Paid (or Payable) to Date Check # Expense (List in according to PO	Contract Period: from 7/01/2019 to 6/30/2022 Pay Req. No Description of Expense (List in according to Paid (or Payable) to Date Check # Invoice Paid Invoice Amount PO Charged to PO Poid (Poid Payable) to Poid (Po	Contract Period: from 7/01/2019 to 6/30/2022 Pay Req. No