



AGENDA MATERIAL

DATE 3-21-23 ITEM NO. RA#27

BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: March 21, 2023

* = Mandatory, information must be provided

or Procurement Director Award: ☐

*Contractor/Vendor Name/Grantor (DBA):

United Way of Tucson and Southern Arizona, Inc.

*Project Title/Description:

Employees Care About Pima County (ECAP) Campaign

*Purpose:

United Way administers Pima County's ECAP campaign by providing agency education, ECAP trainings, and materials as well as the accounting and distribution of County employees' financial contributions to charitable agencies and organizations. These contributions include a one-time donation(s) and/or payroll deduction of funds from participating employees. Employee participation is voluntary. These employee-selected agencies will receive 100 percent of the employees' ECAP contribution.

The purpose of Amendment Four (4) is to update contractual language, extend the contract for one year, and add funding to allow United Way to continue to provide ECAP organization, implementation and fiscal administration services.

*Procurement Method:

Pursuant to D 29.6.C., Direct Selection approved by the County Administrator

*Program Goals/Predicted Outcomes:

United Way will provide County agency information and associated informational and fiscal administrative services for the 2023 ECAP Campaign and Defined Contribution Period. Pima County employee-selected charitable agencies will receive donations from employees through United Way.

*Public Benefit:

For 53 years, the ECAP program has provided funding for various assistance to our community. Pima County residents will continue to receive much-needed assistance through funds donated by County employees and distributed by United Way to employee-selected charitable agencies and organizations

*Metrics Available to Measure Performance:

United Way will provide quarterly, mid-year, and annual reports including:

1. Total dollar amounts collected from County employees and distributed to employee-selected charitable agencies and organizations.
2. Total numbers and percentages of participating employees by County Department.
3. Total Amounts of funding distributed to each agency within Pima County.

*Retroactive:

Yes, the December 2022 ECAP pledge deadline was extended to accommodate employee participation opportunities. The final pledge totals were made available to the County in late January, resulting in this amendment being retroactive to January 1, 2023. After final pledge calculations and amendment four (4) reviews and signatures, County staff placed this amendment on the next available Board of Supervisors meeting agenda

MAR 20 2023 10:34 PM CLK (B) min

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: CT Department Code: CED Contract Number (i.e., 15-123): 19*401
Amendment No.: 04 AMS Version No.: 16
Commencement Date: 01/01/2023 New Termination Date: 12/31/2023
Prior Contract No. (Synergen/CMS): _____

☒ Expense ☐ Revenue ☒ Increase ☐ Decrease Amount This Amendment: \$ 39,647.85

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

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

Funding from General Fund? ☒ Yes ☐ No If Yes \$ 39,647.85 % 100

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: Marchelle Pappas

Department: Human Resources

Telephone: 724-2732

Department Director Signature: _____

Date: 3/1/23

Deputy County Administrator Signature: _____

Date: _____

County Administrator Signature: _____

Date: 3/1/23