



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

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: 12/04/2018

** = Mandatory, information must be provided*

or Procurement Director Award ☐

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

University of Arizona

***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 program evaluation services for the Drug Alternative to Prison (DTAP) Program. Amendment #4 is to extend the contract for one year, add funding and change funding source.

***Procurement Method:**

Direct Select. D 29.6 III. - C.

***Program Goals/Predicted Outcomes:**

The evaluation team will provide evaluation services in order to assess the implementation and outcomes of the DTAP Program. In addition, the evaluation team will work with the DTAP staff and partners to identify and prioritize specialized evaluation reports based on program needs.

***Public Benefit:**

The DTAP program reduces recidivism, saves taxpayer dollars, saves lives and reunites 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 program.

***Retroactive:**

Yes. Received Grantor approval on 10/19/2018 and 11/09/2018 to utilize the current DTAP contracts for an additional year using new Grant funds awarded 10/01/2018.

*To: COB. 11- -18
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(1)*

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**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 22-73.***Amendment / Revised Award Information**Document Type: CT Department Code: PCA Contract Number (i.e., 15-123): 15-132Amendment No.: 4 AMS Version No.: 17Effective Date: 09/30/2018 New Termination Date: 9/29/2019

Prior Contract No. (Synergen/CMS): _____

☒ Expense or ☐ Revenue ☒ Increase ☐ Decrease Amount This Amendment: \$ 60,000.00Is there revenue included? ☐ Yes ☒ No If Yes \$ _____***Funding Source(s) required:** Drug Treatment Alternative to Prison Program (DTAP) Substance Abuse and Mental Health Services SAMHSA (\$60,000.00)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 VillanesDepartment: County Attorney Telephone: 520-724-5631Department Director Signature/Date: David Smith 11/16/18

Deputy County Administrator Signature/Date: _____

County Administrator Signature/Date: C. Duckert 11/16/18
(Required for Board Agenda/Addendum Items)

<p>Pima County Attorney's Office</p> <p>Project: Ongoing Evaluation of the Drug Treatment Alternative to Prison Program</p> <p>Contractor: The Arizona Board of Regents, University of Arizona on behalf of John & Doris Norton School of Family and Consumer Sciences PO Box 210158, Rm 510 Tucson, AZ 85721-0158</p> <p>Contract No.: CT-PCA-15-132</p> <p>Contract Amendment No.: Four (#4)</p>	<table border="1"> <tr> <td align="center" colspan="2">CONTRACT</td> </tr> <tr> <td>NO.</td> <td><u>CT-PCA-15-132</u></td> </tr> <tr> <td>AMENDMENT NO.</td> <td><u>04</u></td> </tr> <tr> <td colspan="2">This number must appear on all invoices, correspondence and documents pertaining to this contract.</td> </tr> </table> <p align="center">(STAMP HERE)</p>	CONTRACT		NO.	<u>CT-PCA-15-132</u>	AMENDMENT NO.	<u>04</u>	This number must appear on all invoices, correspondence and documents pertaining to this contract.	
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Orig. Contract Term: 10/01/2014 – 09/30/2015	Orig. Amount:	\$ 25,000.00
Termination Date Prior Amendment: 09/30/2018	Prior Amendments Amount:	\$146,000.00
Termination Date This Amendment: 09/29/2019	This Amendment Amount:	\$ 60,000.00
	Revised Total Amount:	\$231,000.00

CONTRACT AMENDMENT

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

1. Background and Purpose.

- 1.1. Background. On October 1, 2014 County and Contractor entered into the above referenced agreement to provide Ongoing Evaluation of the Drug Treatment Alternative to Prison Program.
- 1.2. Purpose. To provide program evaluation services for the Drug Alternative to Prison (DTAP) Program.

1. Term. The Contract terminates on September 29, 2019.

2. Maximum Payment Amount. The maximum amount the County will spend under this Contract, as set forth in Article III is increased by \$60,000.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$231,000.00.

The effective date of this Amendment is September 30, 2018.

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

PIMA COUNTY

Chairman, Board of Supervisors

Date

CONTRACTOR

Arizona Board of Regents
University of Arizona

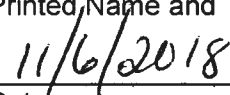


Authorized Officer Signature

Mark A. Drury

Contracts Manager

Printed Name and Title



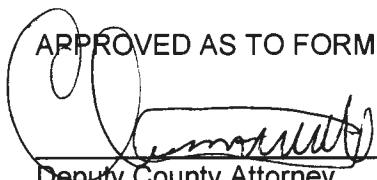
Date

ATTEST

Clerk of the Board

Date

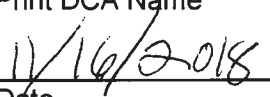
APPROVED AS TO FORM



Deputy County Attorney

CHRISTOPHER STRAUB

Print DCA Name



Date

APPROVED AS TO CONTENT



Department Head



Date