



BOARD OF SUPERVISORS AGENDA ITEM REPORT

CONTRACTS / AWARDS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: August 6, 2019

*** = Mandatory, information must be provided**

or Procurement Director Award ☐

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

U.S. Department of Housing and Urban Development (HUD)

***Project Title/Description:**

Continuum of Care Program (CoC) - Homeless Management Information System (HMIS)

***Purpose:**

HMIS as required by HUD for the CoC program for homeless individuals. The county was awarded \$200,000.00 from HUD for HMIS.

Indirect cost does not apply at this time.

Attachments: AZ0168L9T011803 Scope of Work and Resolution

***Procurement Method:**

Not applicable to grant awards.

***Program Goals/Predicted Outcomes:**

Collection of data and report preparation as required by HUD for CoC.

***Public Benefit:**

The HMIS system supports the community by tracking the delivery of services for the homeless in Pima County.

***Metrics Available to Measure Performance:**

HUD required reports submitted accurately and in a timely manner.

***Retroactive:**

No.

6MIS Approved 7/24/19 ES

Revised 5/2018

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

Amendment No.: _____ AMS Version No.: _____

Effective Date: _____ New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

☐ Expense or ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ _____Is there revenue included? ☐ Yes ☐ No If Yes \$ _____***Funding Source(s) required:**Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____**Grant/Amendment Information** (for grants acceptance and awards) ☒ Award ☐ Amendment

Document Type: GTAW Department Code: CS Grant Number (i.e.,15-123): 19-121

Effective Date: 11/1/19 Termination Date: 10/31/20 Amendment Number: _____

☒ Match Amount: \$ 50,000.00 ☒ Revenue Amount: \$ 200,000.00***All Funding Source(s) required:** U.S. Department of Housing and Urban Development***Match funding from General Fund?** ☒ Yes ☐ No If Yes \$ 50,000.00 % _____***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)?**

Federal government

Contact: Dan Sullivan

Department: Community Services Telephone: 724-7309

Department Director Signature/Date: _____ 7-1-19

Deputy County Administrator Signature/Date: _____ 7-22-2019

County Administrator Signature/Date: _____ 7/23/19
(Required for Board Agenda/Addendum Items)

GRANT APPLICATION APPROVAL REQUEST

Instructions: Fill out the top section of this form completely. Contact the program Grants Management & Innovation (GMI) Lead if you require assistance (724-2240). Email your completed request to: GMI@pima.gov. Your request will be forwarded to County Administration for review. Notification of approval requests should be submitted at least 15 business days prior to the application's submission deadline (AP 5-1 Procedure).

Requesting department or entity:	CSET	Date: 6/19/19
Contact information:	Name: Rise Hart	Telephone: 724-5723
Funding opportunity title:	U.S. Dept of HUD Continuum of Care Program-Homeless Management Information System	
Link to opportunity:	https://www.hudexchange.info/programs/coc/	
Funding agency:	U.S. Department of Housing and Urban Development	
Amount to be requested:	\$ 200,000.00	
Due date and time:	7/1/2019	AM
What are you going to spend the money on?	<p>Housing Management Information System is a Housing and Urban Development Continuum of Care program administered by Pima County. System provides data information for people experiencing homelessness in Pima County.</p> <p>HUD has directed them not to request indirect because it wasn't on schedule in original application. In a couple months when next NOFO comes out, the new application will have indirect costs in the schedule. Per Dan Sullivan <i>(PK)</i></p>	
What will be the benefit to Pima County?	<p>Data collection system provides data to aid decision makers in housing stability program for people experiencing homelessness in Pima County. <i>(HMIS)</i></p>	
Indirect costs - check one:	<p><input checked="" type="checkbox"/> indirect not allowed at this time <i>(PK)</i></p> <p><input type="checkbox"/> I will be requesting indirect costs. Indirect-cost rate to be requested: _____ %</p> <p><input type="checkbox"/> I have attached a request for waiver of indirect costs (GMI Intranet)</p> <p><input type="checkbox"/> I need help understanding indirect costs</p>	
By: <i>(Signature)</i>	Date: 7-1-19	
Department Director or Designee		

GRANT COST/BENEFIT ANALYSIS**To be completed by GMI staff**

CFDA No. 14.267

Competitive Criteria:

N/A Grant provides for FY 2019-2020 existing data system

Other Factors:

Number of Awards:

N/A

Total amount to be awarded: \$ 200,000.00

Match Required: ☒ Yes ☐ No If required what is the amount/percent: 25%

Terms Notes (e.g. unusual restrictions, reporting burdens, etc.):

project number AZ0168L9T011803
Project Period 11-01-2019 to 10-31-2020

Will this project require additional office/project space?

☐ Yes☒ No

Will this project require staff time that cannot be paid for by the grant?

☐ Yes☒ No

Will your project require any equipment items over \$5,000 per item?

☐ Yes☒ No

Does the proposal use a fixed price contract?

☐ Yes☒ No

Is this project subject to Human Subjects compliance?

☐ Yes☒ No

Does this project involve subrecipients?

☐ Yes☒ No

Is there a Statutory Funding Preference from the funding agency?

☐ Yes☒ No

Allowable Indirect Rate: See above If Indirect is not allowed, attach documentation.

List any other proposal or funder specific requirements:

This is a renewal

GMI notes & recommendations:

GMI recommends approval of the contract.

By:



GMI Director

Date:

7/19/19

County Administrator Approval RequestApproved: ☒Not Approved: ☐Subject to Further Review: ☐ Yes ☐ No

If your project is subject to further review, please contact your GMI Lead to discuss necessary revisions prior to resubmission of the Grant Approval Application Request.

By:



County Administrator or Designee

Date:

7/19/2019

RESOLUTION 2019 - _____

**RESOLUTION OF THE BOARD OF SUPERVISORS OF PIMA COUNTY, ARIZONA
AUTHORIZING THE APPROVAL OF THE "SCOPE OF WORK for FY2018 COMPETITION"
FROM THE U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT ("HUD")
PROVIDING FUNDING FOR HMIS OPERATIONS DURING FEDERAL FISCAL YEAR 2019**

The Board of Supervisors of Pima County, Arizona finds:

1. Pima County ("County"), through its Department of Community Services, Employment and Training ("CSET"), administers several federal and local grant programs to benefit people experiencing homelessness in Pima County.
2. The Tucson Pima Collaboration to End Homelessness ("TPCH") is the HUD-mandated, community-based coalition Continuum of Care ("CoC") tasked with developing strategies to end homelessness in Pima County.
3. County is the lead agency administering the Homeless Management Information System ("HMIS") on behalf of TPCH.
4. As lead agency, County annually renews the HMIS grant funding for CoC activities through HUD's competitive Continuum of Care Notice of Funding Availability process.
5. On August 18, 2018, County submitted the renewal application to HUD seeking funds to continue to operate HMIS.
6. On April 25, 2019, HUD issued the "SCOPE OF WORK for FY2018 COMPETITION" awarding County, as Grantee, \$200,000.00 under Federal Grant No. **AZ0168L9T011803**. The funds are to be used to operate the local HMIS.
7. In order to receive these funds on behalf of the CoC, County must execute the "SCOPE OF WORK for FY2018 COMPETITION" attached to this Resolution as **Exhibit A**. This is the only document that HUD will issue related to the provision of grant funds for HMIS operations.
8. It is in the best interests of the residents of Pima County, to accept the FY2019-2020 renewal grant funds being provided under Federal Grant No. **AZ0168L9T011803**.

NOW, THEREFORE, BE IT RESOLVED:

- A. The Chairman of the Pima County Board of Supervisors is authorized to sign the "SCOPE OF WORK for FY2018 COMPETITION" (Federal Grant No. **AZ0168L9T011803**) accepting the FY2019-2020 renewal grant funds for HMIS operations.
- B. The Director of CSET or his designee is authorized and directed to, on behalf of the Pima County Board of Supervisors, electronically enter acceptance of the renewal grant for HMIS operations as directed by HUD.

- C. The Chairman is authorized to execute, as necessary, all applicable federal documents associated with the renewal grant for HMIS operations, including, but not limited to, required HUD budget forms and descriptive grant narratives.
- D. The Director of CSET or his designee is authorized and directed, on behalf of the Pima County Board of Supervisors, to submit any such documents to HUD, including completing any electronic approvals and submissions required by HUD.

Passed and adopted, this _____ day of _____, 2019.

Chairman, Pima County Board of Supervisors

ATTEST:

Clerk of the Board

APPROVED AS TO FORM:



Karen S. Friar, Deputy County Attorney

Recipient Name: Pima County
Grant Number: AZ0168L9T011803
Tax ID Number: 86-6000543
DUNS Number: 033738662 - 4000

**SCOPE OF WORK for
FY2018 COMPETITION
(funding 1 project in CoCs with multiple recipients)**

1. The project listed on this Scope of Work is governed by the Act and Rule, as they may be amended from time to time. The project is also subject to the terms of the Notice of Funds Availability for the fiscal year competition in which the funds were awarded and to the applicable annual appropriations act.
2. HUD designations of Continuums of Care as High-performing Communities (HPCS) are published in the HUD Exchange in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Grant Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for this grant was designated an HPC for the applicable fiscal year.
3. Recipient is not a Unified Funding Agency and was not the only Applicant the Continuum of Care designated to apply for and receive grant funds and is not the only Recipient for the Continuum of Care that designated it. HUD's total funding obligation for this grant is \$ 200000 for project number AZ0168L9T011803. If the project is a renewal to which expansion funds have been added during this competition, the Renewal Expansion Data Report, including the Summary Budget therein, in e-snaps is incorporated herein by reference and made a part hereof. In accordance with 24 CFR 578.105(b), Recipient is prohibited from moving more than 10% from one budget line item in a project's approved budget to another without a written amendment to this Agreement. The obligation for this project shall be allocated as follows:

a. Continuum of Care planning activities	\$ 0
b. Acquisition	\$ 0
c. Rehabilitation	\$ 0
d. New construction	\$ 0
e. Leasing	\$ 0
f. Rental assistance	\$ 0
g. Supportive services	\$ 0
h. Operating costs	\$ 0
i. Homeless Management Information System	\$ 181825
j. Administrative costs	\$ 18175
k. Relocation Costs	\$ 0

1. HPC homelessness prevention activities:

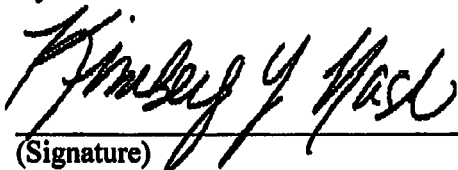
Housing relocation and stabilization services	\$ 0
Short-term and medium-term rental assistance	\$ 0

4. Performance Period in number of months: 12. The performance period for the project begins 11-01-2019 and ends 10-31-2020. No funds for new projects may be drawn down by Recipient until HUD has approved site control pursuant to §578.21 and §578.25 and no funds for renewal projects may be drawn down by Recipient before the end date of the project's final operating year under the grant that has been renewed.
5. If grant funds will be used for payment of indirect costs, the Recipient is authorized to insert the Recipient's and Subrecipients' federally recognized indirect cost rates on the attached Federally Recognized Indirect Cost Rates Schedule, which Schedule shall be incorporated herein and made a part of the Agreement. No indirect costs may be charged to the grant by the Recipient if their federally recognized cost rate is not listed on the Schedule. If no federally recognized indirect cost rate is listed on the Schedule for a project funded under this Agreement, no indirect costs may be charged to the project by the subrecipient carrying out that project.
6. The project has not been awarded project-based rental assistance for a term of fifteen (15) years. Additional funding is subject to the availability of annual appropriations.

This agreement is hereby executed on behalf of the parties as follows:

**UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development**

By:



(Signature)

Kimberly Y Nash, Director

(Typed Name and Title)

April 24, 2019

(Date)

RECIPIENT

Pima County

(Name of Organization)

By:

(Signature of Authorized Official)

(Typed Name and Title of Authorized Official)

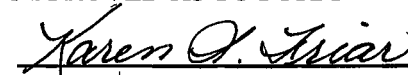
(Date)

APPROVED AS TO CONTENT



Community Services, Employment &
Training Director

APPROVED AS TO FORM



Karen S. Friar, Deputy County Attorney

Tax ID No.: 86-6000543
CoC Program Grant Number: AZ0168L9T011803
Effective Date: 4/24/2019
DUNS No.: 033738662 - 4000

FEDERALLY RECOGNIZED INDIRECT COST RATE SCHEDULE

<u>Grant No.</u>	<u>Recipient Name</u>	<u>Indirect cost rate</u>	<u>Cost Base</u>
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