

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

Requested Board Meeting Date: August 17, 2020

\* = Mandatory, information must be provided

or Procurement Director Award

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

Southern Arizona AIDS Foundation

# \*Project Title/Description:

Community Services Block Grant (CSBG) - Emergency Needs. Provide emergency housing assistance and 24-hour crisis hotline services. The contract and amendments can be found in OnBase by searching Contracts CR-21\*048 (formerly CS-19\*484) in Doc\_ID\_AMS.

#### \*Purpose:

CSBG funds will be used to provide social services to eligible individuals and families to assist in alleviating poverty. revitalizing communities and empowering low-income families to becoming self-sufficient.

This amendment will provide additional funding of \$29,967.00 for the period July 1, 2020 to June 30, 2021.

Attachment: Contract Number CT-CR-21-048 (Amendment 01)

#### \*Procurement Method:

Pursuant to Pima County Procurement Code 11.12.020, Competitive sealed proposals, RFP No. CAA-CSBG-2018-09 was conducted with delegated authority.

# \*Program Goals/Predicted Outcomes:

Southern Arizona AIDS Foundation will provide emergency services for low-income individuals:

Crisis Intervention through 24-hour hotline - 30 individuals

Emergency Temporary Shelter - 10 individuals

High Risk Case Management - 15 individuals

#### \*Public Benefit:

The benefit of the program is it helps support the safety and well-being of low-income families.

### \*Metrics Available to Measure Performance:

All activities and information sources in the management, fiscal, and service system of Awardee and any subcontracted parties, relating to performance of duties and obligations under this Contract are monitored. Quarterly reports on the National Results Oriented Management Accountability (ROMA)/National Performance Indicators and progress reports on each household and individual served.

#### \*Retroactive:

Yes. Due to budgets for subrecipients could not be written until the County receive the funding agreement from the State which was 06/19/20. The negative impact of not approving this amendment is low-income individuals will not receive emergency services for an additional year.

Revised 5/2020 725 - 4 (1) Page 1 of 2

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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 Procedur	re 22-10.
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Amendment / Revised Award Information	
Document Type: CT Department Code: CR	
Amendment No.: 1	AMS Version No.: 1
Commencement Date: 07/01/20	New Termination Date: 06/30/21
	Prior Contract No. (Synergen/CMS): CT-CS-19-484
♠ Expense or	Amount This Amendment: \$ 29,967.00
Is there revenue included?	f Yes \$
*Funding Source(s) required: Department of Health and Hur	nan Services / Arizona Department of Economic Security
Funding from General Fund? Yes • No	f Yes \$ %
Grant/Amendment Information (for grants acceptance an	d awards)
Grant/Amendment Information (for grants acceptance and Document Type: Department Code:	d awards)
Grant/Amendment Information       (for grants acceptance and Document Type:	d awards)
Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date Match Amount: \$	d awards)
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Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date Match Amount: \$ *All Funding Source(s) required:	Award Amendment Grant Number (i.e.,15-123):  Amendment Number: Revenue Amount: \$
Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date Match Amount: \$  *All Funding Source(s) required:  *Match funding from General Fund? (Yes (No Internal Fund))	Award Amendment Grant Number (i.e.,15-123):  Amendment Number: Revenue Amount: \$  f Yes \$%
Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date: Match Amount: \$  *All Funding Source(s) required:  *Match funding from General Fund? Yes No I	Award Amendment Grant Number (i.e.,15-123):  Amendment Number: Revenue Amount: \$  f Yes \$  f Yes \$  %
Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date Match Amount: \$   *All Funding Source(s) required:  *Match funding from General Fund? Yes No I   *Match funding from other sources? Yes No I   *Match funding from other sources? Yes No I   *Match funding from other sources?	Awards)
Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date Match Amount: \$  *All Funding Source(s) required:  *Match funding from General Fund? Yes No I *Match funding from other sources? Yes No I *Funding Source: *If Federal funds are received, is funding coming direct Federal government or passed through other organization.	Awards)
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Grant/Amendment Information (for grants acceptance and Document Type: Department Code: Commencement Date: Termination Date Match Amount: \$  *All Funding Source(s) required:  *Match funding from General Fund? Yes No I *Match funding from other sources? Yes No I *Funding Source: *If Federal funds are received, is funding coming direct Federal government or passed through other organization Contact: Rise Hart Department: Community & Workforce Development Department Director Signature/Date:	Award Amendment Grant Number (i.e.,15-123):  Amendment Number: Revenue Amount: \$  f Yes \$ % f Yes \$ %  tly from the tion(s)?
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Pima County Community & Workfor Community Action Agency Program		pment Dep	artmei	nt			
Project: Community Services Bloc	k Grant (0	CSBG) – En	nergen	су 1	Needs		
Awardee: Southern Arizona AIDS Foundation 375 South Euclid Avenue Tucson, AZ 85719-6644							
<b>Amount:</b> \$29,967.00							
Contract No.: CT-CS-19*484 (CT-C	CR-21-048	and after Jul	y 1, 20	20)			
Contract Amendment No.: One (1)							
Original Contract Term: Termination Date Prior Amendment: Termination Date This Amendment:	N	- 06/30/20 /A 80/21	Prior A	Ame	ntract Amou endments A endment An Total Amou	amount: nount:	\$29,967.00 N/A \$29,967.00 \$59,934.00
<b>DUNS No.:</b> 197335730 <b>SAM Registration Date:</b> 12/18/19							
Research or Development:							
Federal or State Contract No.:	120-0022	65	A	wa	rd Date:	2020	
Required Match:	No	Match Am	ount:				
Indirect Cost Rate:   17%	direct Cost Rate:   17%   NICR				de mi	nimis	☐ None
Status of Contractor:	Status of Contractor: Subrecipient				Contra	ctor	
			Т				Pima County

CFDA	Grant Program	National Funding	Pima County Award
93.569	CSBG	\$740,000,000.00	\$815,464.00

### **GRANT FUNDED AGREEMENT – AMENDMENT ONE (1)**

### 1. BACKGROUND AND PURPOSE.

#### 1.1. Background.

- 1.1.1. On June 18, 2019, Pima County ("County") and Southern Arizona AIDS Foundation ("Awardee"), entered into the above-referenced contract to provide supportive services to low-income families in Pima County.
- 1.1.2. County, as Grantee, receives CSBG Program funds from the Arizona Department of Econmic Security to provide social services for eligible families.

# 1.2. County Organization. Effective July 1, 2020:

- 1.2.1. Pima County Community Services, Employment and Training Department and Pima County Community Development and Neighborhood Conservation Department are restructured to form the Community and Workforce Development Department.
- 1.2.2. This Agreement will be renumbered to CT-CR-21-048, but all terms and conditions, except as amended herein, remain unchanged.
- 1.2.3. Any reference in the Agreement to Community Services; Community Services, Employment and Training Department; or CSET, will mean Community and Workforce Development Department ("CWD").

### 1.3. Purpose.

- 1.3.1. The United States Department of Health and Human Services ("HHS") funds this Agreement and has, pursuant to County's Comprehensive Plan, awarded CSBG Program to County for an additional year of CSBG social services to low-income familes.
- 1.3.2. County finds that it is in the best interests of the Pima County residents to continue to provide CSBG services to the residents of Pima County.
- 1.3.3. Pursuant to HHS guidelines, Awardee is a "Subrecipient" of these CSBG Program funds and will conduct all activities under this Agreement accordingly.
- 2. <u>TERM AND EXTENSIONS</u>, SECTION 2. Pursuant to paragraph 2.2, County exercises the one available Extension Option. This contract terminates on <u>June 30, 2021</u>.
- 3. SCOPE OF SERVICES, SECTION 3. The Commencement Date for the provisions set forth in this Amendment No. 1 is July 1, 2020.
- 4. COMPENSATION AND PAYMENT, SECTION 4.0, paragraph 4.1 is amended to increase "the Maximum Allocated Amount":

FROM: \$29,967.00 TO: \$59,934.00

# 5. **ISRAEL BOYCOTT CERTIFICATION**, **SECTION 36.0** is added to read:

Pursuant to A.R.S. § 35-393.01, if Awardee engages in for-profit activity and has 10 or more employees, and if this Agreement has a value of \$100,000.00 or more, Awardee certifies it is not currently engaged in, and agrees for the duration of this Agreement to not engage in, a boycott of goods or services from Israel. This certification does not apply to a boycott prohibited by 50 U.S.C. § 4842 or a regulation issued pursuant to 50 U.S.C. § 4842.

#### 6. **EXHIBIT A – SCOPE OF WORK** is amended as follows:

6.1. OUTCOMES - AWARDEE, SECTION 6, the table is deleted in there entirety and replaced with the following:

NPI	Emergency Assistance	Agency Spe (Househol	
		2019-2020	2020-2021
2.3.B	Crisis Intervention through 24 hour hotline	30	30
6.2.C	Emergency Temporary Shelter	10	10
6.2.E	High-Risk Case Management	15	15

#### REMAINDER OF PAGE INTENTIONALLY LEFT BLANK

6.2. BUDGET, SECTION 7, the table is deleted in its entirety and replaced with the following:

D 1.0	Amount		
Description	2019-2020	2020-2021	
Personnel/ERE	\$1,108.00	\$832.00	
Professional Services & Outside Services	-0-	-0-	
Travel	\$134.00	\$267.00	
Space (Rent/Utilities)	\$50.00	\$51.00	
Materials and Supplies	\$23.00	\$153.00	
Operating Services	\$26.00	\$35.00	
Indirect (Administrative Costs cannot exceed 15% of grant) award	\$3,906.00	\$3,909.00	
CSBG Vouchers for Direct Client Expenses	\$24,720.00	\$24,720.00	
Total Budget	\$29,967.00	\$29,967.00	

 EXHIBIT A-1, COMMUNITY ACTION AGENCY – 2021 FEDERAL POVERTY INCOME GUIDELINES, is attached to this Amendment 1 and is incorporated into and made a part of this Agreement.

Agreement.	
All other provisions of this Agreement, be binding upon the parties.	not specifically changed by this amendment, will remain in effect and
IN WITNESS WHEREOF, the parties of terms of this Amendment and of the ori	lo hereby affix their signatures and do hereby agree to carry out the ginal Contract cited herein:
PIMA COUNTY	AWARDEE
	Dom Coloura

PIMA COUNTY	AWARDEE
	Down Codered
Chairman, Board of Supervisors	Authorized Signature
Date:	Path Caldwell Interim Executive Dise-
ATTEST:	Date: 7/24/20
Clerk of the Board	<u> </u>
APPROVED AS TO CONTENT:	
(A)	

APPROVED AS TO FORM:

Karen S. Friar, Deputy County Attorney

Director, Community & Workforce Development



#### **COMMUNITY ACTION AGENCY**

2021 Federal Poverty Income Guidelines

Gross Monthly Income

To be used to determine eligibility for Community Services Block Grant Funds (CSBG) Effective July 1, 2020 through June 30, 2021

<u>Household Size</u>	30 Day Gross Income Limit		
1	\$2,127		
2	\$2,873		
3	\$3,620		
4	\$4,367		
5	\$5,113		
6	\$5,860		
7	\$6,607		
8	\$7,353		
9	\$8,100		
10	\$8,847		
11	\$9,593		
12	\$10,340		

# For each additional household member, add \$746

Figures derived from information dated May 14, 2020 from Arizona Department of Economic Security, Division of Aging & Adult Services Community Services Unit.

I,	, declare that I meet the above income guidelines under
	I am also aware of the Agency's Grievance Procedures, Confidentiality of Information Policy.
Signature & Date	



COMMUNITY SERVICES, EMPLOYMENT AND TRAINING DEPARTMENT 2797 E. Ajo Way
Tucson, AZ 85713
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