

Dane County Contract Cover Sheet

Res 390
Significant

Dept./Division	Human Services / HAA
Vendor Name	Catholic Charities, Inc., Diocese of Madison
Vendor MUNIS #	1227
Brief Contract Title/Description	POS contract – Increasing contract by \$200,000 to reflect City of Madison contribution.
Contract Term	January 1, 2021 - December 31, 2021
Total Contract Amount	\$200,000

Contract # Admin will assign	85135A/14317
Addendum	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Contract	
<input checked="" type="checkbox"/>	Dane County Contract
<input type="checkbox"/>	Grant
<input type="checkbox"/>	County Lessee
<input type="checkbox"/>	County Lessor
<input type="checkbox"/>	Intergovernmental
<input type="checkbox"/>	Purchase of Property
<input type="checkbox"/>	Property Sale
<input type="checkbox"/>	Other

Purchasing Authority	<input type="checkbox"/> \$11,000 or under – Best Judgment (1 quote required)	
	<input type="checkbox"/> Between \$11,000 – \$37,000 (\$0 – \$25,000 Public Works) (3 quotes required)	
	<input type="checkbox"/> Over \$37,000 (\$25,000 Public Works) (Formal RFB/RFP required)	RFB/RFP #
	<input type="checkbox"/> Bid Waiver – \$37,000 or under (\$25,000 or under Public Works)	
	<input type="checkbox"/> Bid Waiver – Over \$37,000 (N/A to Public Works)	
	<input type="checkbox"/> N/A – Grants, Leases, Intergovernmental, Property Purchase/Sale, Other	

MUNIS Req.	Org Code	Obj Code	Amount	\$
Req # 2021	Org Code	Obj Code	Amount	\$
Year 616	Org Code	Obj Code	Amount	\$

Resolution /Addendum Form	A resolution is required if the contract exceeds \$100,000 (\$40,000 Public Works). A copy of the Resolution must be attached to the contract cover sheet.		
	<input type="checkbox"/> Contract does not exceed \$100,000 (\$40,000 Public Works) – a resolution is not required.		
	<input checked="" type="checkbox"/> Resolution required and a copy is attached.		Res # 390
	<input type="checkbox"/> Addendum Form required.		Year 2020

Contract Review/Approvals				
Initials	Dept.	Date In	Date Out	Comments
MG	Received by DOA	3/25/21		
	Controller			approvals from all departments via email attached herein
	Purchasing			
N/A	Corporation Counsel			See "I" below
	Risk Management			
	County Executive			

Dane County Dept. Contact Info		Vendor Contact Info	
Name	Spring Larson, Contract Coord. Assistant	Name	Tom Merfeld, Interim CEO
Phone #	(608) 242-6391	Phone #	608-826-8000
Email	larsen.spring@countyofdane.com	Email	tmerfeld@ccmadison.org
Address	1202 Northport Drive, RM Gr42A, Madison WI 53704	Address	702 S High Point Rd, STE 201, Madison, WI 53719

Human Services Only	a. Dane County Res. #	N/A	Approvals	Initials	Date
	b. Budget/Personnel Required	YES	g. Accountant	DRS	3/11/2021
	c. Program Manager Name	BECKER	h. Supervisor	CW 54	3/15/2021
	d. Current Contract Amount	\$865,739	i. Corporation Counsel		03/19/2021
	e. Adjustment Amount	\$200,000	j. To Provider		
	f. Revised Contract Amount	\$1,065,739	k. From Provider		

Certification: The attached contract is a:	
<input type="checkbox"/>	Dane County Contract <u>without</u> any modifications.
<input type="checkbox"/>	Dane County Contract <u>with</u> modifications. The modifications have been reviewed by:
<input checked="" type="checkbox"/>	Non-standard contract.

Contract Cover Sheet Signature

Dept. Head / Authorized Designee	Signature	Date
	<i>Shawn Tessmann</i>	3/25/2021
	Printed Name	
	Shawn Tessmann, Director of Human Services	

Contracts Exceeding \$100,000

Major Contracts Review – DCO Sect. 25.11(3)

Director of Administration	Signature	Date
	<i>Greg Brockmeyer</i>	4/1/21
	Comments	
Corporation Counsel	Signature	Date
	<i>Marcia MacKenzie</i>	3/19/21
	Comments	

Goldade, Michelle

From: Goldade, Michelle
Sent: Tuesday, March 30, 2021 8:41 AM
To: Hicklin, Charles; Krohn, Margaret; Gault, David; Lowndes, Daniel; Clow, Carolyn
Cc: Stavn, Stephanie; Oby, Joe
Subject: Contract #14317
Attachments: 14317.pdf

Tracking:	Recipient	Read	Response
	Hicklin, Charles		
	Krohn, Margaret		Approve: 3/30/2021 11:48 AM
	Gault, David	Read: 3/30/2021 9:03 AM	Approve: 3/30/2021 9:06 AM
	Lowndes, Daniel		Approve: 3/30/2021 9:03 AM
	Clow, Carolyn		Approve: 3/30/2021 8:55 AM
	Stavn, Stephanie		
	Oby, Joe		

Contract #14317

Department: Human Services

Vendor: Catholic Charities

Contract Description: Addendum to add operation of The Beacon Day Resource Center (Res 390)

Contract Term: 1/1/21 – 12/31/21

Contract Amount: \$200,000

Please review the contract and indicate using the vote button above if you approve or disapprove of this contract.

Thanks much,
Michelle

Michelle Goldade

Administrative Manager
Dane County Department of Administration
Room 425, City-County Building
210 Martin Luther King, Jr. Boulevard
Madison, WI 53703
PH: 608/266-4941
Fax: 608/266-4425
TDD: Call WI Relay 711

Please Note: I currently have a modified work schedule...I am in the office Mondays and Wednesdays and working remotely Tuesdays, Thursdays and Fridays in accordance with COVID 19 response guidelines.

2020 RES –390

AUTHORIZING RECEIPT OF FUNDS FROM THE CITY OF MADISON CONTRIBUTING TO OPERATIONS OF THE BEACON DAY RESOURCE CENTER DCDHS – HAA DIVISION

Dane County is involved in a public-private partnership between the City of Madison, The United Way, and Catholic Charities, Inc., Diocese of Madison to operate The Beacon day resource center for individuals experiencing homelessness in Dane County.

This resolution is to authorize the receipt of the City of Madison’s 2021 contribution of \$200,000 to this collaborative partnership and to amend the contract for Catholic Charities, Inc., Diocese of Madison for the corresponding amount.

NOW, THEREFORE, BE IT RESOLVED that Dane County authorizes the receipt of \$200,000 from the City of Madison to support operations of The Beacon day resource center in 2021; and

BE IT FURTHER RESOLVED that the contract with Catholic Charities, Inc., Diocese of Madison be amended and that the County Executive and County Clerk are hereby authorized and directed to sign the amendment on behalf of Dane County; and

BE IT STILL FURTHER RESOLVED that the following revenue account be added to the Housing Access & Affordability section of the Department of Human Services and that the revenue increase be credited to the County General Fund and transferred from the General Fund to the following expenditure account in the Department of Human Services:

Revenue		
<u>Account Number</u>	<u>Account Title</u>	<u>Amount</u>
80366 86430	City of Madison - Beacon	\$200,000
Expenditure		
<u>Account Number</u>	<u>Account Title</u>	<u>Amount</u>
80366 36205	Shelter Operations	\$200,000

BE IT FINALLY RESOLVED that the following contract be amended and that the County Executive and the County Clerk are hereby authorized and directed to sign the agreement on behalf of Dane County.

<u>Vendor</u>	<u>Amendment Amount</u>
Catholic Charities, Inc., Diocese of Madison	\$200,000

85135A/14317

APPROVED
CORPORATION COUNSEL
MAM; 03/19/2021

ADDENDUM

THIS ADDENDUM is made and entered into by and between the County of Dane (hereinafter referred to as "COUNTY") and **Catholic Charities, Inc., Diocese of Madison** (hereinafter "PROVIDER") as of the date representatives of both parties have affixed their respective signatures.

WHEREAS the COUNTY and PROVIDER have previously entered into a Purchase of Service Agreement No. **85135** (hereinafter the "Master Agreement"), pursuant to which PROVIDER has agreed to provide the COUNTY certain services more fully described in the Master Agreement; and

WHEREAS COUNTY and PROVIDER now wish to amend said Master Agreement,

NOW, THEREFORE, in consideration of the above premise and the mutual covenants of the parties the receipt and sufficiency of which is hereby acknowledged by each party for itself, the COUNTY and PROVIDER do agree that the Master Agreement shall continue in full force and effect unchanged in any matter by this addendum, except as specifically set forth herein. This addendum consists of two (2) pages.

<u>Current Cost for 2021</u>	<u>Addendum Amount</u>	<u>Revised Maximum Cost for 2021</u>
\$865,739	\$200,000	\$1,065,739

IN WITNESS WHEREOF, COUNTY and PROVIDER, by their respective authorized agents, have caused this addendum and its attachments, if any, to be executed, effective as of the date by which all parties hereto have affixed their respective signatures, as indicated below.

Date Signed: 3/24/2021

FOR PROVIDER:
DocuSigned by:
Thomas J Merfeld
Signature
Thomas J Merfeld President & CEO
Print Name and Title of Signer

Date Signed: _____

Signature

Print Name and Title of Signer

Date Signed: _____

FOR COUNTY:

JOE PARISI, County Executive
Shawn Tessmann

SHAWN TESSMANN, Director,
Department of Human Services
(when applicable)

Date Signed: 3/25/2021

Program Summary Form

Created: 9/14/2020 Revised: 1/21/2021	Contract #: 85135 Division: HAA	Provider: Catholic Charities, Inc., Dioceses of Madison Funding Period: January 1, 2021 through December 31, 2021											
Contract Maximum Service Costs: Subject to the provisions specified elsewhere in this contract, the following summarizes and sets forth the rates and maximum payments available for services under this contract.													
Program Number	Program Group	Orig.	Obj.	Program Name	SPC	# of Clients	# of Slots	Unit Cost	Unit Quantity	County Cost	Other Revenue*	Total Cost	Reporting
a. 8140	6945	80366	36205	Day Resource Center	106			\$654.79	670	\$ 439,000		\$ 439,000	See Sch A
b. 8143	6945	80366	22637	Transportation Services	107			\$28.81	1,040	\$ 29,964		\$ 29,964	See Sch A
c. 8148	8148	80366	36300	Direct Assistance	106			\$250	60	\$ 15,000		\$ 15,000	See Sch A
d. 8159	8159	80000	36604	Housing Case Management	106			\$30.73	6,240	\$ 191,775		\$ 191,775	See Sch A
e. 8165	8165	80000	21870	COVID Housing Assistance	106			\$37.76	3,840	\$ 145,000		\$ 145,000	See Sch A
f. 8165	8165	80000	21870	COVID Direct Assistance	106			\$6,000.00	40	\$ 245,000		\$ 245,000	See Sch A
g.													
h.													
i.													
j.													
Total										\$ 1,065,739.00	\$ -	\$ 1,065,739.00	

*Other Revenue-Include here the source and related amount for each program:

a.	The section below is to be used to further define the information above.
b.	Unit costs are calculated by the provision of shelter 365 days a year and include funds for 7.5 FTE and operational costs to provide Day Resource Center program.
c.	Unit costs include funds for .5 FTE to operate shuttle service 7 days a week from 7:30a - 8:30a and 4pm - 5pm.
d.	Unit cost estimates a maximum of \$250 in direct assistance provided a guest per year. Some assistance could be less, which would provide additional units.
e.	Unit costs include funds for 3.0 FTE and operational costs to provide housing navigation services program.
f.	1/11/21 - Unit costs include funds for 4.0 FTE to provide housing navigation services at temporary hotel shelters serving guests placed there due to COVID-19 pandemic. From -1/1/2021 until 6/30/2021.
g.	1/11/21 - Unit costs determined by the estimated maximum amount of assistance provided (up to 6 months). Actual assistance provided will vary based on client needs. Funds provide direct rental/housing stability assistance to guests staying in shelter or who are unsheltered and experiencing homelessness.
h.	
i.	
j.	

Standard Program Category (SPC) Code Description:	
a. 106 Housing/Energy Assistance	
b. 107 Transportation	
c. 106 Housing/Energy Assistance	g.
d. 106 Housing/Energy Assistance	h.
e. 106 Housing/Energy Assistance	j.
f. 106 Housing/Energy Assistance	k.

Contract Manager(s)/Programs:
 Casey Becker - becker.casey@countyoofdane.com - 608.286.1446 (The Beacon and related programs only)
 Jenna Wuthrich - wuthrich@countyoofdane.com (Housing Navigation only)
 Accountant(s)/Programs:
 Dylan Seitz - Seitz.Dylan@countyoofdane.com