

Dane County Contract Addendum Cover Sheet

Revised 06/2021

RES 018
SIGNIFICANT

BAF # 22054
Acct: DRS
Mgr: BECKER
Budget Y/N: Y

Contract # Admin will assign	14564A/85534A
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Dept./Division	Human Services /HAA	Vendor Name	Equitable Social Solutions, LLC
Brief Addendum Title/Description	Contract term extended and funding increased	Vendor MUNIS #	32491
		Addendum Term	1/1/2022 - 9/30/2022
		Amount (\$)	\$ 393,310.00

Department Contact Information		Vendor Contact Information	
Contact	Spring Larson, Contract Coordination Assistant	Contact	Mark Douglass, President
Phone #	608-242-6391	Phone #	502-394-2100
Email	dcdhscontracts@countyofdane.com	Email	mark@equusworks.com
Purchasing Officer			

Purchase Order – Maintenance or New PO					
<input type="checkbox"/>	PO Maintenance Needed	Org: 80000	Obj: 30026	Proj:	\$ 378,310.00
	PO# 20220599	Org: 80000	Obj: 30026	Proj:	\$ 15,000.00
<input type="checkbox"/>	No PO Maintenance Needed – this addendum does not change the dollar amount of the contract.				
<input type="checkbox"/>	New PO / Req. Submitted	Org:	Obj:	Proj:	
	Req#	Org:	Obj:	Proj:	

Budget Amendment	
<input type="checkbox"/>	A Budget Amendment has been requested via a Funds Transfer or Resolution. Upon addendum approval and budget amendment completion, the department shall update the requisition in MUNIS accordingly.

Total Contracted Amount – List the Original contract info, then subsequent addenda including this new addendum					
<p>A resolution is required when the total contracted amount first exceeds \$100,000.</p> <p>Additional resolutions are then required whenever the sum(s) of any additional addenda exceed(s) \$100,000</p>	Addendum #	Term	Amount	Resolution	
	Original	1/1/2022 - 6/30/2022	\$ 1,049,346.00	<input type="checkbox"/> None	Res# 2021 - 284
	A	1/1/2022 - 9/30/2022	\$ 393,310.00	<input type="checkbox"/> None	Res# 2022 - 018
				<input type="checkbox"/> None	Res#
				<input type="checkbox"/> None	Res#
				<input type="checkbox"/> None	Res#
				<input type="checkbox"/> None	Res#
Total Contracted Amount			\$ 1,442,656.00		

Contract Language Pre-Approval – prior to internal routing, this contract has been reviewed/approved by:		
<input type="checkbox"/> Corporation Counsel:	<input type="checkbox"/> Risk Management:	<input type="checkbox"/> No Pre-Approval

APPROVAL
Dept. Head / Authorized Designee
<i>Shawn Tessman</i>

APPROVAL – Contracts Exceeding \$100,000	
Director of Administration	Corporation Counsel
<i>Greg Brockmeyer</i>	DH 5/11/2022

APPROVAL – Internal Contract Review – Routed Electronically – Approvals Will Be Attached			
DOA:	Date In: 5/25/22	Date Out: _____	<input checked="" type="checkbox"/> Controller, Purchasing, Corp Counsel, Risk Management

Goldade, Michelle

From: Goldade, Michelle
Sent: Thursday, May 26, 2022 1:35 PM
To: Hicklin, Charles; Rogan, Megan; Lowndes, Daniel
Cc: Oby, Joe
Subject: Contract #14564A
Attachments: 14564A.pdf

Tracking:	Recipient	Read	Response
	Hicklin, Charles	Read: 5/27/2022 8:54 AM	Approve: 5/27/2022 8:54 AM
	Rogan, Megan	Read: 5/26/2022 2:00 PM	Approve: 5/26/2022 2:00 PM
	Lowndes, Daniel	Read: 5/26/2022 1:55 PM	Approve: 5/26/2022 2:12 PM
	Oby, Joe		

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

Contract #14564A
Department: Human Services
Vendor: Equitable Social Solutions
Contract Description: Increase contract and extend term to provide non-congregate isolation/quarantine shelter (Res 018)
Contract Term: 1/1/22 – 9/30/22
Contract Amount: \$393,310.00

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.

48 average number of people served by this program at any given time fluctuates based on
49 COVID-19 spread at any given time.

50 Data collection will minimally include the number of and demographics for the people served by
51 the program.

52 **NOW, THEREFORE, BE IT RESOLVED** that the following contract be amended (term of July 1
53 1, 2022 – September 30, 2022) and that the County Executive and County Clerk are hereby
54 authorized and directed to sign the agreement on behalf of Dane County, and that the Controller
55 is authorized to make payments related to the execution of the amendment.

56	<u>Vendor</u>	<u>Amendment Amount</u>
57	Equitable Social Solutions, LLC	\$393,310

58 **BE IT FINALLY RESOLVED** that the County Board requests quarterly reports be shared with
59 the members of the County Board, and that the Health and Human Needs Committee review
60 the reports on a quarterly basis and discuss how the information presented addresses
61 anticipated program outcomes.

APPROVED
CORPORATION COUNSEL
DH 5/11/22

ADDENDUM

THIS ADDENDUM is made and entered into by and between the County of Dane (hereinafter referred to as "COUNTY") and Equitable Social Solutions, LLC (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. 85534 (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 six (6) pages.

This Addendum extends the term of the Master Agreement to 9/30/2022.

<u>Current Cost</u> <u>for 2022</u>	<u>Addendum Amount</u>	<u>Revised Maximum</u> <u>Cost for 2022</u>
\$1,049,346	\$393,310	\$1,442,656

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: 5/20/2022

FOR PROVIDER:

Signature
Mark Douglas, President
Print Name and Title of Signer

Date Signed: _____

Signature

Print Name and Title of Signer

Date Signed: _____

FOR COUNTY:

JOE PARISI, County Executive
(when applicable)

Shawn Tessmann

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

Program Summary Form

Created: 12/9/2022 Revised: 4/21/2022		Contract #: 85634 Division: HAA	Provider: Equitable Social Solutions, LLC Funding Period: January 1, 2022 through September 30, 2022										
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	Org.	Obj.	Program Name	SPC	# of Clients	# of Slots	Unit Cost	Unit Quantity	County Cost	Other Revenue*	Total Cost	Reporting
a.	6704	80000	30026	ARP Iso/Quarantine Shelter	106			\$41.70	33,996	\$ 1,417,656		\$ 1,417,656	See Sch A
b.	6704	80000	30026	ARP Iso/Quarantine Direct Assistance	106			\$41.66	600	\$ 25,000		\$ 25,000	See Sch A
c.													
d.													
e.													
f.													
g.													
h.													
i.													
j.													
Total										\$ 1,442,656.00	\$ -	\$ 1,442,656.00	

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

a.	A unit is an hour of direct client service. Unit costs include administration and program costs. 4/11/22 Increased costs \$378,310 to extend services through 9/30/22.
b.	A unit is a household. Number of guests served and average amount of assistance provided may vary based on actual guest needs. 4/11/22 Increased costs \$15,000 to extend services through 9/30/22.
c.	
d.	
e.	
f.	
g.	
h.	
i.	
j.	

Standard Program Category (SPC) Code Description:	
a. 106 Housing/Energy Assistance	g.
b. 106 Housing/Energy Assistance	h.
	i.
	j.
	k.

Contract Manager(s)/Programs: Casey Becker - becker.casey@countyoofdane.com
 Accountant(s)/Programs: Dylan Seitz - Seitz.Dylan@countyoofdane.com

Schedule A
Equitable Social Solutions, LLC
Isolation and Quarantine Shelter Operations
Program #8211, Program #8212
2022

Service Description:

Staffing and direct assistance to support operation of an isolation and quarantine shelter serving households experiencing homelessness who must medically quarantine or isolate due to COVID-19.

Services provided include 24/7 intake and referral management, behavioral health crisis response, on-site services for ICQ guests to connect them to community resources and supports, symptom monitoring, transportation for testing and discharge, and provision of personal hygiene and other basic needs to help guests successfully maintain their medical isolation or quarantine.

(SPC: 106 Housing)

I. PROVIDER shall:

- A. Collaborate and coordinate with other program partners including, but not limited to, Public Health Madison-Dane County (PHMDC), management and staff, food vendor, and security vendor (when applicable).
- B. Process referrals for intake into the program with 24/7 staff coverage to answer calls with one Referral Specialist during the day and overnight. If calls are not answered immediately, calls will be returned within 30 minutes.
- C. Communicate referrals process, and/or any changes to the referral process with program partners, including homeless day resource center, overnight shelter providers, an institutional partners (jail, corrections, health care systems).
- D. Provide one (1) 1.0 FTE Program Coordinator to supervise staff and program logistics.
- E. Provide 24/7 on-site staffing coverage with at least three on-site Supportive Services Specialists at any given time. Supportive Services Specialist shall:
 - I. Conduct needs assessment for guests.
 - II. Conduct regular welfare checks for guests, including monitoring for worsening of COVID-19 symptoms.

- III. Assist guests with maintaining quarantine in their rooms.
- IV. Assist guests who are discharged from the program with accessing transportation.
- V. Assist guests with accessing basic needs.
- VI. Connect guests to community resources as needed.
- VII. Work on-site with hotel staff to minimize conflict, diffuse potential crises, and monitor symptoms and behaviors of residents.
- VIII. Arrange testing for guests and transportation to testing.
- IX. Connect guests to emergency care if condition worsens.
- X. Follow policies and procedures developed by Public Health Madison Dane County (PHMDC).
- XI. Process program referrals/intake.

- F. Provide 24/7 hours of security coverage overnight 7 days a week.
- G. Restock basic needs items, personal protection equipment (PPE), and other supplies needed to administer the program.
- H. Provide orientation to guests before check-in to review guest responsibility agreement.
- I. Provide crisis stabilization as needed to program guests.
- J. Participate in regular organizational meetings with the program partners.
- K. Work with vended meal provider, funded by COUNTY, to distribute meals to guests, and communicate meal levels/changes if necessary.
- L. Provide basic needs items to guests as needed. PROVIDER shall make every reasonable attempt to secure donated basic needs items before using COUNTY funds. Provision of basic needs items will be limited to the list below unless authorized in writing by PROVIDER'S COUNTY contract manager:
 - I. Over the counter medication requested and approved by PHMDC.
 - II. Socks.
 - III. Underwear.
 - IV. Personal hygiene products.
 - V. Formula.
 - VI. Diapers or training pants.

II. PROVIDER'S performance will be assessed using the following goals:

- a. 100% of participants will be assisted with accessing and supporting basic needs.

III. Reporting

PROVIDER shall provide a monthly narrative report to COUNTY by the 15th of the following month that details:

- i. Number of individuals/households served broken down by isolating or quarantining.
- ii. Guest referral source (shelter, outreach, health care, etc.)

IV. Miscellaneous

- a. Services will begin on January 1st, 2022 and continue until at least September 30th, 2022. Contract will be evaluated to track trends in service need levels and adjust services as needed. Contract will sunset when guests are no longer lodging in hotels as a result of COUNTY's contract by hotels being cancelled, available funding, or other events that could lead to the program ceasing operations.
- b. COUNTY will negotiate with its hotel partners to secure office space/lodging space for PROVIDER at each service location as applicable.

SCHEDULE C REPORTING REQUIREMENTS

The Agreement requires some reports to be filed upon request and other reports to be filed at a particular time. The following reports have specific due dates as provided below:

REPORT	WHERE SUBMITTED	DUE DATE
Affirmative Action Plan (Unless PROVIDER is exempt)	Contract Compliance Specialist Office of Equity & Inclusion 210 Martin Luther King, Jr. Blvd. Rm. 356 Madison, WI 53703 oby.joe@countyofdane.com	January 15, 2022 (15 days after Agreement effective date.)
Civil Rights Compliance Plan (Unless PROVIDER is exempt)	Contract Compliance Specialist Office of Equity & Inclusion 210 Martin Luther King, Jr. Blvd. Rm. 356 Madison, WI 53703 oby.joe@countyofdane.com	On or before the effective date of the Agreement
NLRB or WERC complaints or findings that PROVIDER has violated labor standards.	Contract Compliance Specialist Office of Equity & Inclusion 210 Martin Luther King, Jr. Blvd. Rm. 356 Madison, WI 53703 oby.joe@countyofdane.com	Within 10 days of complaint or findings
Certificate of Insurance listing Dane County as additional insured.	Dane County Department of Human Services Contract Coordination Assistant 1202 Northport Dr. Madison, WI 53704 dcdhscontracts@countyofdane.com	At the time the Agreement is signed
Program Budget and Supporting Personnel Schedule (Unless PROVIDER is exempt)	Dane County Department of Human Services Accounting, Ground Floor 1202 Northport Dr. Madison, WI 53704	February 26, 2022 (56 days after Agreement effective date) Final Revisions due October 25, 2022
Quarterly Expense Reports (Unless PROVIDER is exempt)	Dane County Department of Human Services Accounting, Ground Floor 1202 Northport Dr. Madison, WI 53704	February 25, March 25, April 25, May 25, June 25, July 25, August 25, September 25, October 25, 2022
Annual Audit (Unless PROVIDER is exempt)	Dane County Department of Human Services Accounting, Ground Floor 1202 Northport Dr. Madison, WI 53704	June 30, 2023, or 180 days after the end of PROVIDER's fiscal year
Notice of Financial Instability	Dane County Department of Human Services Accounting, Ground Floor 1202 Northport Dr. Madison, WI 53704	Upon triggering event occurring that requires notice
Client Registration/Client Services Reports.	Client Registration is faxed to 608-242-6288. Client Services Reports are submitted electronically to your assigned keyer.	February 10, March 10, April 10, May 10, June 10, July 10, August 10, September 10, October 10, November 10, December 10, 2022; and January 5, 2023
Quarterly Client Services Reports	County Designee	May 1, 2022, August 1, 2022, November 1, 2022 and final quarter due April 1, 2023