Dane County Contract

Res 001 Significant

BAF # 23035 Acct: Seitz
Mgr: Mennig Budget Y/N: Y

Addan	diim	COVARG	ihaa	+					
Revised 06/2021	uull	Cover S		.			Contract #		082 / 86604A
Dept./Div	/ision	Human Service	es /HAA		Vendor I	Name	Catholic Charities	s, Inc. Dic	ceses of Madison
		Increasing cont	ract by \$	5200,000 (City of	Vendor M	UNIS#	1227		
Brief Add Title/Desc		Madison 2020 C			Addendun	n Term	1/1/2023 - 12/	31/2023	
110/200	лірасіі	1 Togram 6 140 i	Day Nes	ource Certier.	Amoun	t (\$)	\$ 200,000.00		
Denartme	nt Con	tact Information	nn .		Vendor Co	ntact Ir	nformation		
Contact				nation Assistant	Contact	intaot ii	Shawn Ca	rnev CF	=0
Phone #	- - 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-	608-24			Phone #		608-82		
Email	dc	dhscontracts@d			Email		scarney@cc		n.org
Purchasi	l				-				9
		- Maintenance	1					1 + -	
	∕lainten: 'O#	ance Needed 20230505		80366	Obj: 3620		Proj: Proj:	\$ 20	00,000.00
			Org:	s addendum do				f the co	ntract
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	eq#	- q ca.s	Org:		Obj:		Proj:		
Budget A	monda	aont							
_			een re	quested via a Fi	unds Transfe	er or Re	solution. Upon	addend	dum approval
	•			, the departmer			•		
Total Con	tracted	Amount – List	the Orio	ginal contract info	then subseq	uent adde	enda including th	nis new a	addendum
10101		Addendum #	011	Term		ount		Resolut	
A resolution	on is	Original	1/1/20	023 - 12/31/2023			None	Res#	
required wh	acted	A		023 - 12/31/2023	+ ,		None	Res#	2023 - 001
amount f exceeds \$10		, ,	., .,	12,01,202	Ψ 200,0	30.00	None	Res#	2020 001
Addition	-						None	Res#	
resolutions a	enever						None	Res#	
the sum(s) additional ad	ldenda						None	Res#	
exceed(s) \$1	00,000	Total Co	ntracte	ed Amount	\$ 879,28	RO 00			
		Total Go	iitiaot	ou Amount	Ψ 07 3,20	30.00			
Contract	Langua	ige Pre-Approv	val – pr	ior to internal ro	uting, this c	ontract h	nas been reviev	ved/app	roved by:
☐ Corpora	ation Cou	ınsel:		Risl	k Managemei	nt:		□N	o Pre-Approval
	APPR	OVAL					ts Exceeding	\$100,0	000
Dept. Hea	d / Auth	orized Designe	е	Director of	Administration	on	Corpora	ation Co	ounsel

Iheukumere, Astra	Digitally signed by Iheukumere, Astra Date: 2023.04.17 19:11:32 -05'00'	Areg Bro	DRG 032823
APPROVAL -	Internal Contract I	Review – Routed	d Electronically – Approvals Will Be Attached

APPRO'	/AL – Internal Cont	tract Review – Routed	Electronically – Approvals Will Be Attached
DOA:	Date In: 4/18/23	Date Out:	Controller, Purchasing, Corp Counsel, Risk Management

Goldade, Michelle

From: Goldade, Michelle

Sent: Thursday, April 20, 2023 9:25 AM

To: Hicklin, Charles; Rogan, Megan; Lowndes, Daniel

Cc: Oby, Joe

Subject: Contract #15082

Attachments: 15082.pdf

Tracking: Recipient Read Response

 Hicklin, Charles
 Read: 4/20/2023 10:07 AM
 Approve: 4/20/2023 10:07 AM

 Rogan, Megan
 Read: 4/20/2023 9:26 AM
 Approve: 4/20/2023 9:26 AM

 Lowndes, Daniel
 Read: 4/20/2023 3:37 PM
 Approve: 4/20/2023 3:38 PM

Oby, Joe

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

Contract #15082

Department: Human Services Vendor: Catholic Charities

Contract Description: Contribution to operation of the Day Resource Center (Res 001)

Contract Term: 1/1/23 – 12/31/23 Contract Amount: \$200,000.00

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.

1		2023 RES - 001	
2 3 4 5 6		OF FUNDS FROM THE CITY OF MADI NS OF THE BEACON DAY RESOURC DCDHS – HAA DIVISION	
7 8 9 10	partnership between the City	Human Services (DCDHS) is involved in of Madison, The United Way, and Catle eacon day resource center for individuality.	holic Charities, Inc., Diocese
12 13 14 15		e the receipt of the City of Madison's 20 hip and to amend the contract for Catho ading amount.	
16 17		RESOLVED that Dane County authoriz support operations of The Beacon day r	
18 19 20 21 22	Access and Affordability (HA revenue increase be credited	D that the following revenue account be A) Division of the Department of Huma do to the County General Fund and trans liture account in the Department of Hun	n Services and that the sferred from the General
24 25 26 27	Revenue <u>Account Number</u> 80366 86430 (NEW)	Account Title City of Madison - Beacon	<u>Amount</u> \$200,000
28 29 30 31	Expenditure Account Number 80366 36205	Account Title Day Resource Center – Shelter Opera	Amount ations \$200,000
32 33 34 35	Executive and the County Cl	that the following contract be amended erk are hereby authorized and directed hat the Controller is authorized to make	to sign the agreement on
36 37	Vendor Catholic Charities, Inc., Dioc		Amendment Amount \$200,000

15082/86604A

APPROVED CORPORATION COUNSEL

DRG 032823

ADDENDUM

"COUNTY") and Catholic Charities, Inc., Diocese of Mad (hereinafter "PROVIDER") as of the date representations.	ison	
WHEREAS the COUNTY and PROVIng the "Master Agreement certain services more fully described in the Master Agreement to the Mast	"), pursuant to which PROVIDER	a Purchase of Service Agreement No. has agreed to provide the COUNTY
WHEREAS COUNTY and PROVIDE	R now wish to amend said Master	Agreement,
NOW, THEREFORE, in consideration and sufficiency of which is hereby acknowledge the Master Agreement shall continue in full for specifically set forth herein. This addendum continue is sufficiently set forth herein.	ed by each party for itself, the COU orce and effect unchanged in any	JNTY and PROVIDER do agree that
Current Cost A	ddendum Amount	Revised Maximum Cost for 2023
\$ \$ 679,280	\$ \$200,000	\$ \$879,280
IN WITNESS WHEREOF, COUNTY addendum and its attachments, if any, to be extended their respective signatures, as indicated below.	and PROVIDER, by their respective cuted, effective as of the date by	ve authorized agents, have caused this which all parties hereto have affixed
Date Signed: 4/11/23	FOR PROVIDER: Signature SHAWN P. CA. Print Name and Title of Sig	RNEY, EXEC. DIRECTOR
Date Signed:	Signature	
	Print Name and Title of Sig	ner
Date Signed: 4//7/2023	ASTRA IHEUKUMERE, I Department of Human Serv	
Date Signed:	JOE PARISI, County Executive (when applicable)	utive
Date Signed:	SCOTT MCDONELL, Cou	anty Clerk

Created	Created: 9/22/2022			Contract #: 86604	86604				Provider:	Provider: Catholic Charities, Inc., Dioceses of Madison	nc., Dioceses of Ma	dison	
Revised	Revised: 2/16/2023			Division: HAA	HAA			Fur	nding Period:	Funding Period: January 1, 2023 through December 31, 2023	ough December 31,	2023	
Contract Ma	Contract Maximum Service	Costs: Subject to the	provisions specified	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.	ummarizes	and sets forth t	he rates ar	nd maximum paym	nents available t	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
8140		80366	36205	Day Resource Center	106			\$1,670.20	365	\$ 609,623		\$ 609,623	Specific
8143	6945	80366	22637	Transportation Services	107			\$32.82	1,039	\$ 34,130		\$ 34,130	Specific
8148	8148	80366	36300	Direct Assistance	106			\$284.76	09	\$ 17,086		\$ 17,086	Specific
8159	8159	80000	36604	Housing Case Management	106			\$35.00	6,241	\$ 218,441		\$ 218,441	Specific
									Total		69	\$ 879,280.00	
The section	of si woled o	The section below is to be used to further define the information above	lefine the informati	on above						*Other Revenue-Inc program:	Other Revenue-Include here the source and related amount for each orogram:	e and related amou	ınt for each
Juit costs a	ire calculated b	y the provision of shell on the County Exec's	ter 365 days a year a	funds for 7.5 FTE ed for additional se	ional costs	to provide Day I	Resource C	and operational costs to provide Day Resource Center program. Includes an sourity.	ncludes an	\$200,000 from City of Madison.	/ of Madison.		
Juit costs	Unit costs include funds for	s for .5 FTE to opera	ate shuttle service	Unit costs included for the contract of the co	d 4pm - 5	pm. Includes a	ın increas	e of \$2818 base	ed on the				
Juit cost es	stimates a max \$1411 based of	imum of \$250 in direct in the County Exec's 2	t assistance provided	John Cost estimates a maximum of \$250 in direct assistance provided a guest per year. Some assistance could be less, which would provide additional units. Includes a COLA increase of \$1411 based on the County Exec's 2023 budget.	d be less, w	vhich would prov	ride addition	nal units. Includes	s a COLA				
Juit costs	Unit costs include funds for Scounty Exec's 2023 budget	s for 3.0 FTE and op-	perational costs to	Unit costs include funds for 3.0 FTE and operational costs to provide housing navigation services County Exercis 2023 budget	program.	Includes CO	LA increa:	n services program. Includes COLA increase of \$18,036 included in the	ncluded in the				
		s.		je.									
Standard	Program Cat	Standard Program Category (SPC) Code Description:	<u>Description:</u>										
	a, 106 Housing/Energ b, 107 Transportation	a, 106 Housing/Energy Assistance b. 107 Transportalion		c, 106 Housing/Energy Assistance d. 106 Housing/Energy Assistance	o" 🚅			о т			₹	2.3.	
Contract I Melissa Me	Contract Manager(s)/Programs: Melissa Mennig - Menig.Melissa@	rograms: Melissa@countyofdam	le.com -(The Beacon	Contract Manager(s)/Programs: Melissa Mennig - Mening Melissa@countyofdane.com -(The Beacon and related programs only)				Accountant(s) Dylan Seitz - Se	Accountant(s)/Programs: Dylan Seitz - Seitz.Dylan@countyofdane.com	ntyofdane.com			
Jenna Wt	uthrich - wuth	Jenna Wuthrich - wuthrich@countyotdane.com (Housing Navigation only)	.com (Housing Na	vigation only)									