

RESOLUTION No.17-047

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

RESOLUTION APPROVING EXECUTION OF AMENDMENT NO. 3 TO THE RENEWAL STANDARD AGREEMENT NUMBER 16F-5029 WITH THE STATE DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT (CSD) FOR COMMUNITY SERVICES BLOCK GRANT (CSBG) FUNDING (RES. 16-006) (RES. 16-142) (RES. 16-269)

WHEREAS, per Resolution 16-006, on January 12, 2016, the Board approved execution of a renewal Standard Agreement Number 16F-5029 with the State Department of Community Services and Development (CSD) for Community Services Block Grant (CSBG) Funding in the maximum amount payable of \$67,684 for the term of January 1, 2016 through December 31, 2016; and

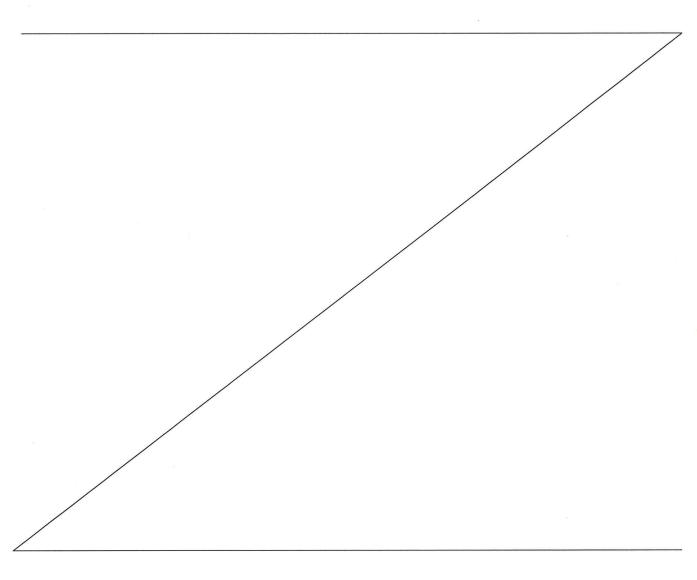
WHEREAS, per Resolution 16-142, on April 12, 2016, the Board approved execution of Amendment No. 1 to the renewal Standard Agreement Number 16F-5029 with the State Department of Community Services and Development (CSD) for Community Services Block Grant (CSBG) Funding increasing the maximum amount payable from \$67,684 to \$134,990 for the unchanged term of January 1, 2016 through December 31, 2016; and

WHEREAS, per Resolution 16-269, on June 21, 2016, the Board approved execution of Amendment No. 2 to the renewal Standard Agreement Number 16F-5029 with the State Department of Community Services and Development (CSD) for Community Services Block Grant (CSBG) Funding increasing the maximum amount payable from \$\$134,990 to \$269,979 for the unchanged term of January 1, 2016 through December 31, 2016; and

WHEREAS, Amendment No. 3 extends the contract termination date and replaces Article 6 and 425 Budget Series forms in their entirety.

NOW, THEREFORE, BE IT HEREBY RESOLVED by the Nevada County Board of Supervisors of the County of Nevada, State of California, that the Amendment No. 3 to the Standard Agreement No. 16F-5029 by and between the County and the State Department of Community Services and Development (CSD), for Community Services Block Grant (CSBG) funding, which extends the contract termination date from December 31, 2016 to May 31, 2017 and replaces Article 6 and 425 Budget Series forms in their entirety, in the maximum amount of \$269,979 to support services to improve the conditions of low-income residents, be and hereby is approved in substantially the form attached hereto and that the Chair of the Board of Supervisors be and is hereby authorized to execute the Amendment on behalf of the County of Nevada.

Funds to be deposited into revenue account: 1711-50602-451-2016/446690.



PASSED AND ADOPTED by the Board of Supervisors of the County of Nevada at a regular meeting of said Board, held on the <u>24th</u> day of <u>January</u>, <u>2017</u>, by the following vote of said Board:

Ayes:

Supervisors Heidi Hall, Edward Scofield, Dan Miller, Hank

Weston and Richard Anderson.

Noes:

None.

Absent:

None.

Abstain:

None.

ATTEST:

JULIE PATTERSON HUNTER Clerk of the Board of Supervisors

1/24/2017 cc:

DSS (2) AC* (Hold) Hank Weston, Chair

STANDARD AGREEMENT

STD. 213 A (Rev. 6/03)

CONTRACT SERVICES UNIT

| AGREEMENT NUMBER | AMENDMENT NUMBER |
|---------------------|------------------|
| 16F-5029 | 3 |
| REGISTRATION NUMBER | |

2017 FEB -3 PM 2: 43

| 1. | This Agreement is ente | ered into between the State Agency and the | ne Contractor named below | | | |
|----|--|--|---|--|--|--|
| - | STATE AGENCY'S NAME | | | | | |
| | Department of Comm | nunity Services and Development | | | | |
| _ | CONTRACTOR'S NAME | | | | | |
| | Nevada County Department of Housing and Community Services | | | | | |
| 2. | The term of this | January 1, 2016 through May 31, 2017 | | | | |
| | Agreement is: | January 1, 2010 unough May 31, 2017 | | | | |
| 3. | The maximum amount | Total \$269,979.00 | | | | |
| | of this Agreement is: | 10tai \$209,979.00 | | | | |
| 4. | The portion mutually as | rea to this amendment as follows All as | ctions noted below are by this reference made a | | | |

- The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:
 - A. The term of this Agreement is changed from January 1, 2016 through December 31, 2016 to January 1, 2016 through May 31, 2017.
 - B. Article 6 Financial Reporting is deleted in its entirety and replaced with the attached Article 6 Financial Reporting.
 - C. 425 Budget Series (Forms CSD 425.S, CSD 425.1.1, CSD 425.1.2, CSD 425.1.3, and CSD 425.1.4.) are deleted in their entirety and replaced with the attached 425 Budget Series (Forms CSD 425.S, CSD 425.1.1, CSD 425.1.2, CSD 425.1.3, and CSD 425.1.4.)

All other terms and conditions shall remain unchanged.

| IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto. | |
|---|--|
| CONTRACTOR | CALIFORNIA Department of General Services Use Only |
| CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.) | |
| Nevada County Department of Housing and Community Services | "I hereby certify that all |
| BY (Authorized Signature) DATE SIGNED (Do not type) 1/24/2017 | conditions to with, and this |
| PRINTED NAME AND TITLE OF PERSON SIGNING | |
| HANK WESTON, CHAIR, BOARD OF SUPERVISORS | andio 4 or . |
| ADDRESS | which Met |
| 950 Maidu Avenue, Nevada City, CA 95959 | W No |
| STATE OF CALIFORNIA | |
| AGENCY NAME | |
| Department of Community Services and Development | |
| BY (Authorized Signature) Halvestadt DATE SIGNED (Do not type) DATE SIGNED (Do not type) 2917 | |
| PRINTED NAME AND TITLE OF PERSON SIGNING | |
| Cindy Halverstadt, Deputy Director, Administrative Services | |
| ADDRESS | |
| 2389 Gateway Oaks Drive, Suite 100, Sacramento, California 95833 | Exempt per |

STANDARD AGREEMENT PARTS I & II – ENTIRE CONTRACT

ARTICLE 6 - FINANCIAL REPORTING

6.1 Monthly/ Bimonthly Fiscal Reports

- A. Contractor shall elect to report and be reimbursed on either a monthly or bimonthly basis by selecting the appropriate box on the CSD 425.S and submitting it with the signed Agreement. The reimbursement cycle cannot be changed and will be in effect throughout the term of this Agreement.
- B. Contractor shall complete and submit to CSD a monthly or bimonthly (as specified by Contractor on the CSD 425.S) CSBG CAA Expenditure/Activity Report by entry onto the web-based Expenditure Activity Reporting System (EARS) on or before the twentieth (20th) calendar day following the report period, regardless of the amount of expenditure(s) in the report period. For specific due dates, refer to the CSD provider web site at http://providers.csd.ca.gov.
- C. For those agencies granted an extension on Monthly/Bimonthly Fiscal Reports, see specific due dates below.

| Monthly Reporting | Due Date |
|-------------------|--------------------------|
| January | February 20, 2017 |
| February | March 20, 2017 |
| March | April 20, 2017 |
| April | May 20, 2017 |
| May | June 20, 2017 |

| Bimonthly Reporting | Due Date |
|-----------------------|-----------------------|
| January/February | March 20, 2017 |
| March/April | May 20, 2017 |
| May 1-31, 2017 | June 20, 2017 |

6.2 Close-Out Report

Contractor shall complete and submit all CSD close-out forms within ninety (90) calendar days after the expiration date of this Agreement.

A. The close-out report shall include the following forms: Close-Out Checklist and Certification of Documents Transmitted (CSD 715), Close-Out Program Income/Interest Earned Expenditure Report (CSD 715C), Close-Out Equipment Inventory Schedule (CSD 715D). The latest version of the close-out forms is available on the Provider's Website at http://providers.csd.ca.gov/CSBG/Forms.aspx.

STANDARD AGREEMENT PARTS I & II – ENTIRE CONTRACT

- B. Final expenditures must be submitted by entry onto EARS.
- C. All adjustments must reflect the actual expenditure period and be submitted by entry onto EARS.
- D. Subsequent payments for expenditures under any open CSBG contract and the issuance of other CSD contracts shall be contingent upon timely submission of the closeout report.

6.3 Transparency Act Reporting

- A. In accordance with requirements of the Federal Funding Accountability and Transparency Act (FFATA), Contractors that 1) are not required by the IRS to annually file a Form 990 federal return, 2) receive at least 80% of their annual gross revenues from federal sources (excluding any ARRA funds), and 3) have annual gross revenues totaling \$25,000,000.00 or more from federal grants, contracts, or other federal sources (excluding any ARRA funds), shall provide to CSD a current list of names and total compensation of Contractor's top five (5) highly compensated officials/employees. The list shall be provided with the executed copy of the Agreement returned to CSD. This requirement applies only to Contractors that fall within all three categories set forth in this paragraph.
- B. Pursuant to the FFATA reporting requirements (2 CFR 170) CSD is required to report information regarding Contractors (sub-awardees) receiving CSBG funds. Contractor must complete CSD form 279, located in Subpart H, and return with the contract Part I to ensure compliance.
 - CSD may issue guidance and/or Amendment(s) to this Agreement, establishing additional reporting requirements as necessary to ensure compliance with the FFATA or other Federal and State regulations, as applicable.

S:\Admin\CSU\Contracts 5-11-2015\Community Services Block Grant\2016 Community Services Block Grant\Nevada Co DHCS 16F-5029 Amd 3\2016 CSBG Article 6 Amendment 3 Final.Docx

State of California
DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT
CSBG Contract Budget Summary
CSD 425.S (Rev.9/14)

| Ex | penditure Reporting: |
|----|----------------------|
| X | Bi-Monthly |
| | Monthly |

CSBG CONTRACT BUDGET SUMMARY

| Contra | actor Name: | Nevada County Housing & Community Services | Contract Number: 16F-5029 | Amendment 3 Number: |
|---------------------------|---|--|--|--|
| Prepa | red By: | Rebecca Fischer | Contract Term: 01/01/16 - 12/31/1 | 6 |
| Telepi | hone Number: | (530) 265-1287 | Contract Amount: \$269,979 | |
| Date: | | 7/18/2016 | E-mail Address: rebecca.fischer@c | o.nevada.ca.us |
| | | SECTION 10: AE | DMINISTRATIVE COSTS | |
| | | Line Item | | CSBG Funds (round to the nearest dollar) |
| 1 | Salaries an | d Wages | | \$39,961.00 |
| 2 | Fringe Ben | efits | | \$22,854.00 |
| 3 | Operating E | Expenses | | |
| 4 | Equipment | | | |
| 5 | Out-of-State | e Travel | | Annual Control of the |
| 6 | Contract/Co | onsultant Services | | \$10,000.00 |
| 7 | Other Costs | 5 | | \$66,750.00 |
| Subto | otal Section 10 | : Administrative Costs (cannot exceed 12% o | of the total operating budget in Section 80) | \$139,565.00 |
| | | SECTION 20: | PROGRAM COSTS | |
| | | Line Item | | CSBG Funds (round to the nearest dollar) |
| 1 | Salaries and | d Wages | | \$26,533.00 |
| 2 | Fringe Benefits | | | |
| 3 | | | | \$15,174.00 |
| 3 | Operating E | | | \$15,174.00 \$1,707.00 |
| 4 | Operating E | | | |
| | | xpenses | | |
| 4 | Equipment Out-of-State | xpenses | | |
| 4 5 | Equipment Out-of-State | e Travel tor/Consultant Services | | \$1,707.00 |
| 4 5 6 7 | Equipment Out-of-State Subcontract Other Costs | Expenses Travel tor/Consultant Services | Subtotal Section 20: Program Costs | \$1,707.00 |
| 4 5 6 7 SECTI | Equipment Out-of-State Subcontract Other Costs ON 40: Total | e Travel tor/Consultant Services | | \$1,707.00 \$87,000.00 |
| 4 5 6 7 SECTI canno | Equipment Out-of-State Subcontract Other Costs ON 40: Total t exceed alloc | e Travel tor/Consultant Services | Sections 10 and 20) Note: Total | \$1,707.00 \$87,000.00 \$130,414.00 |
| 4 5 6 7 SECTI | Equipment Out-of-State Subcontract Other Costs ON 40: Total t exceed alloc ON 70: Enter | e Travel tor/Consultant Services CSBG Budget Amount (Sum of Subtotal cation amount. | Support CSBG | \$1,707.00 \$87,000.00 \$130,414.00 \$269,979.00 |

CSBG BUDGET SUPPORT -- PERSONNEL COSTS

| Contractor I | Name: Nevada County Housing & Community Services | Contract Number: | 16F-5029 | Amendment Nu | ımber: 3 |
|---------------------------------------|--|--|--|---|---|
| Prepared By | | Contract Term: | 01/01/16 - 12/31/ | 16 | |
| Telephone I | Number: (530) 265-1287 | Contract Amount: | \$269,979 | | |
| Date: | 7/18/2016 | E-mail Address: | rebecca.fischer@ | co.nevada.ca.us | |
| | Section 10 ADMINISTRA | TIVE COSTS S | ALARIES AND | WAGES | |
| A No. of Positions | B Position Title | C Total Salary for each position | D Percent (%) of CSBG time allocated for | E Number of CSBG months allocated | F Total CSBG Funds budgeted |
| , contactio | And the state of t | | each position | for each position | for each position |
| 1 | Administrative Services Associate | \$68,120.00 | 32.12% | 12 | \$21,880.14 |
| 1 | Accountant | \$61,000.00 | 14.44% | 12 | \$8,808.40 |
| 1 | Administrative Services Officer | \$92,456.00 | 8.75% | 12 | \$8,089.90 |
| 1 | Senior Accounting Assistant | \$47,320.00 | 2.50% | 12 | \$1,183.00 |
| | | | | | |
| Tot | al (must match Section 10: Administrative Cos | | | | - 1520 (27 SHOPE C. N.) |
| | SECTION 20 PROGRA | Property and the state of the s | | | |
| 1 | Administrative Services Associate Accountant | \$68,120.00 \$61,000.00 | 35.52% 3.83% | 12 12 | \$24,196.22 \$2,336.30 |
| | | | | | |
| | Total (must match Section 20: Program Cost | ts line item 1 on the | CSD 425.S Budg | et Summary form) | \$26,533 |
| | FRII | NGE BENEFITS | | | |
| | cription of Fringe Benefits. Please include the perc paid in Benefits. (Examples: FICA, SSI, Health I Etc.) | | Percentage | Section 10 Administrative Costs List CSBG funds Budgeted Line 2 | Section 20 Program Costs List CSBG funds Budgeted Line 2 |
| Medical De | ntal Vision Unemployment | | 14.69% | \$5,870.27 | \$3,897.70 |
| Medical, Dental, Vision, Unemployment | | 41.00% | \$16,384.42 | \$10,878.53 | |
|) ativamant | ODED | | | | |
| | | | | \$599.43 | \$398.00 |
| Retirement, Worker's Co | | | 1.50% | \$599.43 | \$398.00 |

State of California
DEPARTMENT OF COMMUNITY SERVICES AND DEVELOPMENT
CSBG Budget Support -- Non Personnel Costs
CSD 425.1.2 (Rev. 9/14)

CSBG BUDGET SUPPORT -- NON PERSONNEL COSTS

| Contractor Name: | Nevada County Housing & Community Services | Contract Number: | 16F-5029 | Amendment Number: 3 |
|-------------------|--|------------------|-----------------------|---------------------|
| Prepared By: | Rebecca Fischer | Contract Term: | 01/01/16 - 12/31/16 | |
| Telephone Number: | (530) 265-1287 | Contract Amount: | 269,979 | |
| Date: | 7/18/2016 | E-mail Address: | rebecca.fischer@co.ne | evada.ca.us |

Hit Alt & Enter at the same time to begin a new line or paragraph within the cell. CSBG LIST EACH LINE ITEM Section 20: Totals must match CSD 425.S Budget Summary form Section 10: Attach additional sheet(s) if necessary **Administrative Costs Program Costs** sum should equal total on line item 3 of sum should equal total on line item 3 of List all Operating Expenses 3 CSD 425.S Budget Summary form CSD 425.S Budget Summary form Central Service: Mail Distribution \$537, Audit Costs \$1,205 \$1,707 sum should equal total on line item 4 of sum should equal total on line item 4 of List all Equipment Purchases CSD 425.S Budget Summary form CSD 425.S Budget Summary form sum should equal total on line item 5 of List all Out-of-State Travel: Name of conference; Specify location; Cost sum should equal total on line item 5 of CSD 425.S Budget Summary form CSD 425.S Budget Summary form per trip sum should equal total on line item 6 of List all Contract/Consultant Services 6 CSD 425.S Budget Summary form Consultant (to be determined) \$10,000 sum should equal total on line item 6 of List all Subcontractor/Consultant Services CSD 425.S Budget Summary form - To be determined through RFF \$87,000 Other Costs - List each line item (i - iv): Any additional Other Section 20: Program Cost Section 10: Administrative Costs Costs (attach additional sheet if necessary): County of Nevada Cost Allocation (A-87) charge \$26,750 HHSA Agency Program Support \$40,000 iii sum should equal total on line item 7 of sum should equal total on line item 7 of Total Other Costs (Sum of i, ii, iii, iv): CSD 425.S Budget Summary form CSD 425.S Budget Summary form \$66,750.00

CSBG Budget Support -- Other Agency Operating Funds

| Contractor Name: | Nevada County Housing & Community Services | Contract Number: 16F-5029 | Amendment Number: 3 | |
|----------------------|---|---|---------------------|--|
| Prepared By: | Rebecca Fischer | Contract Term: 01/01/16 - 12/31/16 | | |
| Felephone Number | | Contract Amount: \$269,979 | | |
| Date: | 7/18/2016 | E-mail Address: rebecca.fischer@ | co.nevada.ca.us | |
| | Funding Source (DO NOT ABBREVIATE) | Funding Type Federal, State, Local, Private Other | Funding Amount | |
| Community Initiative | e Fund | Local | \$15,000 | |
| HOME - TBRA/FTH | В | Federal | \$1,000,000 | |
| CDBG Public Servic | ces | Federal | \$1,935,973 | |
| CalHome Program I | Income | State | \$450,000 | |
| HPG | | Federal | \$65,000 | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| - | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 3, 13, 13, 13 | * | | | |
| | Agency Operating Funds to Support CSBG (Total s | | \$3,465,973 | |

CSBG CONTRACT BUDGET NARRATIVE

| Contractor Name: | Contract Amount: | Date: |
|--|---------------------|----------------------------------|
| Nevada County Housing & Community Svcs | \$269,979 | 11/15/2016 |
| Prepared By: | Contract Number: | Amendment Number: |
| James Kraywinkel | 16F-5029 | 3 |
| Telephone Number: | Contract Term: | E-mail Address: |
| (530) 470-2415 | 01/01/16 - 12/31/16 | James.Kraywinkel@co.nevada.ca.us |

This budget assumes four active staff working regularly for the CSBG program. The limited amount of staffing assumes that two positions will be involved in administrative and program activities, and the remaining two will be administrative staff. The revised budget assumes some split time, but staff will time study to each area to determine how actual costs will be allocated. Current staffing changes have caused efficiencies which will allow more of the budget to be shifted to subcontractor expense in support of at risk clients.

Section 10 - ADMINISTRATIVE COSTS

Administrative Services Associate - .3212 FTE of \$68,120 for 12 months

Responsible for general fiscal management. Reviews all checks, authorizes all disbursements, reviews financial statements, reviews and signs reports to CSD, reviews and approves payments to subcontractors, and is primary contact for CSBG program with intra-department staff and inter-department staff. Reviews all program reports before submission to CSD.

Administrative Services Officer - .0875 FTE of 92,456 for 12 months

Responsible for overall fiscal management. Primary contact with Auditor/Controller, CEO and Treasurer offices. Reviews and signs all fiscal documents before being forwarded to the previously state offices for processing, and reviews fiscal documents before submission to state CSD. Reviews all documents submitted to the Board of Supervisors for approval

Accountant - .1444 FTE of \$61,000 for 12 months

Prepares disbursement checks, compares supporting documents to checks drawn, prepares client payments/deposits for Treasurer, records client payments and disbursements into county accounting system, reviews all payroll submissions and reports, prepares budgets and supporting documents, and is secondary backup to walk-in clients.

Senior Accounting Assistant - .025 FTE of \$47,320 for 12 months

Prepares disbursement checks, submits client payments/deposit to Treasurer's office. Encumbers and tracks contract balances

FRINGE BENEFITS - \$22,854 - 57.19% of salaries

Fringe Benefits include Medical, Dental, Vision and Unemployment benefits at a rate of 14.69% of Salaries. Retirement benefits include PERS (32.2% of salaries) and Other Post Employee Benefits (8.8% of salaries), and Worker's Comp is 1.5% of salaries.

OTHER COSTS - \$66,750

County of Nevada A-87 expense is determined by cost assignments as submitted by Nevada County Auditor/Controller and approved by the State Controller's Office. The \$26,750 represents the CSBG portion of the total assigned to the

Nevada County Housing department.

Health & Human Services Agency staff support the Housing program. The \$40,000 represents the anticipated amount of time that HHSA staff will be using to support various Housing programs for the year.

SECTION 20 - PROGRAM COSTS

Administrative Services Associate - .35.52 FTE of \$68,120 for 12 months

Manager of all direct client services for all Housing programs. Representative to the Tri-Partite Board (AFSC), is secondary backup to walk-in clients and reviews all activities in CSD/Housing programs. Works with direct providers to clarify program questions, assists staff in department activities, works with non-profits and subcontractors to verify compliance.

Accountant - .03.83 FTE of \$53,165 for 12 months

Prepares disbursement checks, compares supporting documents to checks drawn, prepares client payments/deposits for Treasurer, records client payments and disbursements into county accounting system, and is secondary backup to walk-in clients.

FRINGE BENEFITS - \$15,174 - 57.19% of salaries

Fringe Benefits include Medical, Dental, Vision and Unemployment benefits at a rate of 14.69% of Salaries. Retirement benefits include PERS (32.2% of salaries) and Other Post Employee Benefits (8.8% of salaries), and Worker's Comp is 1.5% of salaries.

OPERATING EXPENSE - Section 3 - \$1,707

Operating Expenses will include the various day to day expenses incurred to maintain and support the various Housing program activities. These include, but not be limited to office, postage, copying, fleet charges, phone and internet connections, and other various charges by the county to the Housing program.

Subcontractor Expense - Section 6 - \$87,000

Available funds will be used to support various community providers of services to at-risk clients to help reduce poverty, address needs of the homeless and elderly, and provide educational services in making better use of local opportunities in the reduction of poverty.