

Resolution # 341

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Community Resources wishes to apply for and accept an a grant from Illinois Association of Community Action Agencies for the PY2025 Employment Barrier Reduction Pilot Agreement program in the amount of approximately \$46,000.00; and

WHEREAS, this grant will allow Community Resources to provide funding for homelessness prevention, utilities, transportation, uniforms, tools/equipment and car repair; and

WHEREAS, as documented by the approval of this resolution, the Finance Committee has approved the Community Resources Department's request to apply for the PY2025 Employment Barrier Reduction grant and the committee recommends that the County Board approve the acceptance of this grant, if awarded by Illinois Association of Community Action Agencies.

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 10 day of December, 24, approves the acceptance of the PY2025 Employment Barrier Reduction grant, which is detailed above, if the grant is awarded to the County by Illinois Association of Community Action Agencies.

The County Administrator is authorized to sign required grant documents to execute the agreement for this grant.

RECEIVED
2660
NOV 12 2024

FILED
NOV 27 2024

ATTEST: Andy Goleman
SANGAMON COUNTY AUDITOR

Don J. Kray
Sangamon County Clerk

County Clerk

Chairman, Sangamon County Board

Approved by the Finance Committee December 10, 2024

_____, Chairman

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SANGAMON COUNTY - GRANT APPROVAL FORM

Requesting Department: Community Resources

Grant Program Title: PY2025 Employment Barrier Reduction Pilot Grant

This request is for: a new grant renewal or extension of an existing grant

Grantor: Illinois Association of Community Action Agencies

Brief description of the grant program and its benefits to Sangamon County:

This grant provides funding for supportive services expenses, including but not limited to expenses for homelessness prevention, utilities, transportation, uniforms, tools/equipment, car repair, and similarity purposed expenses for Sangamon County residents who are SNAP, TANF and Medicaid recipients. These services are designed to reduce barriers to gaining employment and to assist clients in securing and maintaining employment.

Anticipated Grant Revenue Amount: \$46,000.00

Are matching funds required? Yes No

If yes, please state the amount and the source of matching funds:


If this grant is approved, will any new personnel be hired: Yes No

If Yes, please indicate the number and cost of personnel:

Are there any *indirect* costs or *legal* requirements associated with this grant (i.e., increased workload on existing staff, requirements to continue specific programs after grant periods, etc.): Yes No

If Yes, please provide details. Include attachment if needed:

	Current FY	Current FY + 1	Current FY + 2
Number of Employees	2	0	0
Personnel Costs (in dollars)	\$3,900.00		
Fringe Benefit Cost	\$2,100.00		
Other Costs (Equipment, etc)	\$40,000.00		
Total Cost	\$46,000.00		

Requested by: 
(Department Head Signature)

Date: 11/20/24



PY2025 Employment Barrier Reduction Pilot Agreement

This Agreement is entered into by and between the Illinois Association of Community Action Agencies, a not-for-profit corporation of Illinois, (IACAA) and Sangamon County Community Resources , a department of an Illinois unit of government, hereinafter known as "Subrecipient." IACAA and Subrecipient hereby agree as follows:

IACAA and Subrecipient hereby enter into this agreement for the purpose of performing the 2025 DHS Employment Barrier Reduction Pilot Program, hereinafter known as the "Program." The Program provides funding for supportive services expenses, including but not limited to expenses for homelessness prevention, utilities, transportation/gas, uniforms, tools/equipment, and similarly purposed expenses as designated by IACAA, to SNAP, TANF, and Medicaid recipients and applicants for DHS services who are either identified by the Subrecipient or referred by the local Family and Community Resource Center (FCRC). These services are designed to reduce barriers to gaining employment and to assist customers in securing and maintaining employment. In addition, the Program provides access to resources that allow families to eliminate the need for TANF cash assistance or SNAP assistance and the opportunity to improve their overall financial well-being through employment. IACAA has been selected to be the Administrative Organization for the State of Illinois utilizing the Illinois Community Action Agency network to administer the Program, which is a pilot program.

Amount of Subaward	\$46,000.00
Direct Client Funds	\$40,000.00
Admin/Operating Funds	15.0% of Direct Client Services paid not to exceed \$6,000.00
Source of Funding	Federal Funds; CFDA: 93.558 TANF
Grant Agreement	FCSCG05509
Term of Agreement	Signature date through June 30, 2025

Term:

The term of this Agreement shall commence on the date the agreement is signed by both parties and shall terminate on June 30, 2025.

Purpose:

The Program focuses on individuals and families receiving SNAP, TANF, or Medicaid benefits who experience a barrier or multiple barriers to gaining or retaining employment or who are at risk of housing instability or another emergency situation that would create a further barrier to gaining or retaining employment. This fund would be available to anyone on SNAP, TANF, or Medicaid who would benefit from barrier reduction support.

These funds are intended to provide benefits to clients that complement other benefits received from other sources or for which the client is unable to obtain from other sources.

Obligations of IACAA:

IACAA agrees to the following:

1. IACAA will implement a plan which includes the following components:
 - a. Identification of Subrecipients and methodology of fund allocation,
 - b. Accept and process applications for supportive services by SNAP, TANF, and Medicaid participants through Subrecipients,
 - c. Approve applications for services described and supported by application and verify client eligibility,
 - d. Distribute funds to Subrecipients on a bi-monthly basis based on payment documentation received for the two-week prior in accordance with #5 below,
 - e. Receive payment documentation and supporting documentation from Subrecipients for disbursing of funds,
 - f. Invoice IDHS on a monthly basis with documentation to support disbursements and a reconciliation of funds spent toward funds received of the total grant award,
 - g. Provide documentation, analysis and reporting to DHS in the form of monthly reports on the number and types of applications, approvals, distributions, the geography of where funds were distributed, and through which subrecipient,
 - h. Maintain a master list of all program direct client services provided by Subrecipients.
2. This plan will be a collaborative effort utilizing the plans and input of the subrecipients.
3. IACAA will collect monthly program data based on the requirements of the DHS Workforce office.
4. IACAA will distribute administrative/program funds on a monthly basis based on 15.0% of the payment documentation verified in the month prior in accordance with #5 below.

5. IACAA will receive funds and disburse funds, in accordance with and in amounts not to exceed the requirements or guidelines of the Program, to each participating subrecipient as funds are received from DHS.
6. IACAA will collect monthly expenditure reports to reimburse subrecipients of costs incurred for the program.
7. IACAA will ensure that subrecipients follow GATA rules for reporting.
8. IACAA will conduct virtual meetings with subrecipients on an as-needed basis as deemed effective or desirable by IACAA, in order to provide updates from the workforce office and for subrecipients to share best practices.
9. IACAA will make reasonable efforts to ensure that the subrecipients have the training and technical assistance they need to be effective.
10. IACAA will work with subrecipients to establish approvals of the purchase of gift cards, if applicable.
11. IACAA will provide client benefit tracking and data collection software for subrecipients to enter the required client data and upload payment documentation and other backup documentation.
12. IACAA will perform regular program monitoring to assure program goals are on track with all subrecipients and reconcile agency reports to Master List in collaboration with Subrecipient,
13. IACAA will monitor the Subrecipients through participation in desk audits.

Obligations of Subrecipient:

Subrecipient agrees as follows:

1. Ensure that staff involved in the Program fully understand requirements of the program as outlined in the Program Manual and the grant agreement.
2. Ensure all staff involved in the Program have successfully passed a background check and understand the importance of client confidentiality.
3. Provide a budget, work plan and internal controls for the Program, aligned with the funding award, as Appendix A & B (Page 7 and 8) at the end of this document.
4. Develop community outreach plan to promote the program which includes a detailed description of the program, hours of operation, and eligibility requirements within 1 month of services. All publications/materials must be approved by DHS.
5. Develop a linkage agreement or MOU with other community services agencies, IDHS FCRSs, and other outreach entities available for inspection by IDHS.
6. Develop a referral process that assists program participants with enrollment into other public benefit programs such as TANF, Supplemental Nutrition Assistance Program (SNAP), medical and disability assistance, as well as other resources that address the needs of the population targeted for service.
7. Identify eligible recipients of funding based on the following criteria:

- a. Currently receiving SNAP, TANF or Medicaid benefits or part of an active SNAP household,
 - b. Eligible to receive SNAP, TANF, or Medicaid benefits and application is pending, or
8. Process payments to service providers for expenses related to services indicated within the Employment Barrier Reduction Program Manual and within the maximum allotments assigned therein not to exceed the approved amount of the approved application.
 9. Have safeguards in place to ensure that duplicative services are not provided to the same person through different funding sources and that the household has not received more than the allowed \$2,000 benefit amount per program year through utilization of the State of Illinois STARS tracking system.
 10. Enter Direct Client Services in the State of Illinois STARS tracking system and provide reports to IACAA on a monthly basis no later than the 5th of the month following.
 11. Have safeguards in place to ensure that duplicative household expenses are not paid to different individuals of the same household unless prior approval is obtained.
 12. Split household expenses in a pro rata amount between all SNAP, TANF, and Medicaid eligible adults residing within the household or automobile expenses between SNAP, TANF and Medicaid eligible adults who share the automobile.
 13. Have safeguards in place to ensure the protection of client personal identifying information (PII).
 14. Gift cards may be purchased for Fuel Cards where a check to vendor is not applicable. In those cases:
 - a. Include the request for gift card use within the application.
 - b. After approval, utilize funds to purchase gift card.
 - c. Follow Internal Controls in regards to Gift card storage and client issue.
 15. Provide the following required documentation in support of client expenditures: within 2 days of the payment made to client/vendor
 - a. Provide supporting documentation making the case for that expense is directly related to employment or homelessness;
 - b. Itemized receipts, invoices or other forms of expense documentation for all expenses and copy of check or credit card payment;
 - c. Complete "Gift Card Pick-up/ Payment Documentation Form" in its entirety, gift card details, check numbers and payment delivery information.
 - d. Signatures are required for processing.
 16. Maintain a record of payments authorized for customer expenses for audit purposes. The record will include, at minimum, an application Form, the applicant(s) name, type of employment expense(s) issued by Subrecipient, stated need and proof of need, the amount(s) of payment issued, entity payment was issued to (including address for which payment is intended if for household expense), and the date issued.

- 17. Provide requested information needed for fiscal and programmatic monitoring on a monthly basis to IACAA no later than the 10th day of the following month.
- 18. Otherwise cooperate with IACAA's actions and guidance to effectively perform the obligations of the Program.
- 19. Provide all service request applications by June 15st, 2025 to ensure enough time for payment documentation to be submitted by June 30, 2025 end of Program year.

Reallocation of Funds:

If Subrecipient is unable or unwilling to meet the requirements of this Agreement, IACAA reserves the right to terminate or amend the Agreement immediately and reallocate funds to another subrecipient. Should the DHS Workforce Office revise the funding and requirements of the program to IACAA, this Agreement with Subrecipient will be modified to reflect the proportional changes based on ratio of direct client funding spent or encumbered at the time.

Amendment to Agreement:

In the event that Subrecipient identifies an increased or decreased need within the program, the amount of award under this Agreement may be amended by a signature of both parties to increase (subject to available funding) or decrease the award amount to reflect the local need. In order to increase the contract amount, Subrecipient must have spent or encumbered 85% of their current contract amount. Any change in direct client amount will increase or decrease the amount of the administrative/operational funds proportionately.

Termination:

Either party may terminate this Agreement without cause upon thirty (30) days prior written notice. IACAA may also terminate this Agreement for cause immediately, if Subrecipient fails to correct failures described by IACAA in a Written Notice to Correct within 10 calendar days of giving Subrecipient such notice (mail, fax or electronic delivery shall constitute written notice). Upon such termination, IACAA will pay Subrecipient a pro-rata amount of the award amount set forth above to compensate Subrecipient for time and approved expenses incurred prior to termination. In the event of early termination, IACAA will have all rights to any materials developed for the Program through the date of termination and Subrecipient shall provide to IACAA all materials as requested by IACAA. In the event that IACAA exercises any form of termination, Subrecipient shall have no further remedy of any type whatsoever against IACAA except pro-rata payment of approved expenses as described in this provision.

Debarment and Suspension (Executive Orders 12549 and 12689):

—A contract award (see 2 CFR 180.220) must not be made to parties listed on the government-wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp., p. 189) and 12689 (3 CFR part 1989 Comp., p. 235), "Debarment and Suspension." SAM Exclusions contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549.

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Governing Law and Jurisdiction:

This Agreement is subject to the laws of the State of Illinois, and the parties hereto agree that only the courts of Sangamon County, Illinois shall have jurisdiction to hear and address any disputes that arise heretofore.

Additional Agreements:

In addition to the items above, attached to this agreement is the Grant Agreement No. FCSCG05509 PY2025, the Employment Barrier Reduction Program Manual and the Billing Instructions the contents of which are a part of this agreement.

Liability:

No party shall have liability to the other for actions or efforts made in good faith and consistent with this Agreement. If a party to this Agreement acts in contradiction to this Agreement, the contradicting party shall be liable to the non-contradicting party for all the non-contradicting party's court cost and reasonable attorney fees incurred enforcing or defending this Agreement. This agreement shall be in full force and effect beginning with the date of signatures of both parties through June 30, 2025.

Illinois Association of Community Action Agencies

By: _____

Roger Pavey

Its: President and CEO

Date: Click or tap to enter a date.

Subrecipient: Sangamon County Community Resources

By: _____

Dave MacDonna

Its: Executive Director

Date: Click or tap to enter a date.

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APPENDIX A (*attach Work Plan
from STARS and Budget Plan*)

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APPENDIX B

(Attach Internal Controls)