NOTICE OF AWARD OF CONTRACT

TO: ASPAN
PO BOX 100731
ARLINGTON, VA 22210

DATE ISSUED: APRIL 1, 2011
CURRENT REFERENCE NO: 104-11
CONTRACT TITLE: EMERGENCY WINTER SHELTER
PRIOR REFERENCE NO: 267-10

THIS IS A NOTICE OF AWARD OF CONTRACT AND NOT AN ORDER. NO WORK IS AUTHORIZED UNTIL THE VENDOR RECEIVES A VALID COUNTY PURCHASE ORDER ENCUMBERING CONTRACT FUNDS.

Your firm is awarded the above referenced contract. The contract term covered by this Notice of Award is effective APRIL 1, 2011 and expires on MARCH 31, 2012.

This is the THIRD year award notice of a possible FIVE year contract.

The contract documents consist of the terms and conditions of Agreement No. 330-09, including any exhibits, attachments or amendments thereto.

CONTRACT PRICING:

REFER TO AGREEMENT NO. 330-09

ATTACHMENTS:

AGREEMENT NO. 330-09 AMENDMENT NO. 3

EMPLOYEES NOT TO BENEFIT:

NO COUNTY EMPLOYEE SHALL RECEIVE ANY SHARE OR BENEFIT OF THIS CONTRACT NOT AVAILABLE TO THE GENERAL PUBLIC.

<table>
<thead>
<tr>
<th>VENDOR CONTACT: KATHLEEN SIBERT</th>
<th>VENDOR TEL. NO.: 703-820-4357</th>
</tr>
</thead>
<tbody>
<tr>
<td>VENDOR PAYMENT TERMS: NET 30 DAYS</td>
<td>VENDOR FAX NO.: 703-820-4405</td>
</tr>
<tr>
<td>EMAIL ADDRESS: <a href="mailto:ksibert@a-span.org">ksibert@a-span.org</a></td>
<td></td>
</tr>
<tr>
<td>TAX IDENTIFICATION NUMBER (EIN/SSN): 54-1615993</td>
<td></td>
</tr>
<tr>
<td>COUNTY CONTACT: NANCY HART</td>
<td>COUNTY TEL. NO.: 703-228-1327</td>
</tr>
</tbody>
</table>

CONTRACT AUTHORIZATION

IVETTE GONZALEZ
Procurement Officer

DISTRIBUTION

BID FOLDER: 1
ARLINGTON COUNTY, VIRGINIA
AGREEMENT NO. 330-09

AMENDMENT NUMBER 2

NEW REFERENCE NO. 267-10

This Amendment Number 2 (Amendment) is made on the date of execution of the Amendment by the County and amends Agreement Number 330-09 as amended by Amendment No. 1 (Main Agreement) and made between Arlington Street People’s Assistance Network, Inc. (Contractor”) a 501© (3) non-profit, non-stock corporation authorized to do business in the Commonwealth of Virginia, and the County Board of Arlington County, Virginia (“County”).

Whereas the County and the Contractor desire to amend the work called for and the amounts to be paid under the Main Agreement, the Contractor and the County, in consideration of the promises and other good and valuable consideration specified in this Amendment, amend the Main Agreement as follows.

In addition to the work and payment called for under the Main Agreement, the Contractor agrees to perform the work called for under this Amendment in return for the payment called for in this Amendment.

CONTRACT TERM
Work under this Agreement will commence upon execution of this Agreement and be completed no later than March 31, 2011 ("Initial Contract Term"), subject to any modifications as provided for in the Contract Documents. Upon satisfactory performance by seasonal service by the Contractor and with the concurrence of the Contractor, the County may, through issuance of a Notice of Award, authorize continued operations of the Contractor for not more than four (4) additional five (5) month periods from November 1, 2010 to March 31, 2014 (each period is referred to as "Subsequent Contract Term"). Notwithstanding anything herein to the contrary, the Contract amount for each extension period shall be in an amount not to exceed the funds appropriated for the Contract by the County for each Subsequent Contract Term.

CONTRACT AMOUNT
The County will pay the Contractor an amount not to exceed $109,638.23 ("Contract Amount"). This amount will be disbursed in two installments by the County to the Contractor after receipt of an invoice requesting the payment amount. An advance payment of $94,819.11 may be requested by the Contractor on November 1, 2009. Upon receipt of a request from the Contractor, the County will make payment within fifteen (15) business days. A second payment of $94,819.11 may be requested by the Contractor no sooner than January 15, 2011. Prior to payment of the 2nd request, the Contractor shall submit evidence of compliance with the Collaborative Services System of Arlington ("CSSA"), actual expenditures, and be current in the submission of all the required reports to the County for the State EWS Grant. The sufficiency and adequacy of these submissions will be evaluated by the County and in its sole discretion until sufficient evidence of compliance is accepted the County is not required to make payment. Contractor shall expend the amount provided under this Agreement strictly in accordance with the budget attached hereto as Exhibit C, or any amendments thereto approved in writing by both the County
and the Contractor, and to repay all funds unexpended as of June 30, 2011, to the County. Such funds will be repaid on or before August 1, 2011. This provision shall apply mutatis mutandis to June 30 and August 1 following every Subsequent Contract Term.

GENERAL PROJECT DESCRIPTION

The Contractor shall be responsible for provision of emergency overnight shelter and services to Arlington residents for up to 73 residents each night during the Emergency Winter Shelter season, November 1st, 2010 through March 31, 2011. Non Arlington residents will be re-directed to shelters in their home jurisdictions, although those who are Virginia residents can be served as long as space is available in the shelter.

CHANGES TO THE SCOPE OF WORK

1. Add a second bullet to read: The referral of non-Arlington residents to shelter able to serve them, preferably in their home jurisdiction.

2. Change case management bullet to read: Case management services to help Arlington residents achieve independence. If capacity permits, residents of other Virginia jurisdictions may also be served.

3. Add a bullet to read: The maintenance of accurate entry/exit information in CSSA for all residents.

CHANGES TO PART II: EWS OPERATION AND MANAGEMENT

1. Change A to read "The EWS shall be open daily for clients from 4:00 PM to 9:00 AM from November 1st through March 31st. Resident admission will close at 10:00 PM with exceptions made by the Contractor."

2. Insert a new letter B read: The shelter serves Arlington residents. To the extent that space is available, residents of other Virginia jurisdictions may also be served. See Section IX.

3. Insert new Letter C: "The Shelter Intake Form, the Homeless Certification Form, all needed CSSA information, and Releases of Information must be completed for each client spending the night. To the extent possible, this information will be contained in the CSSA system."

4. Adjust the subsequent letters to accommodate the above, e.g. current c becomes D.

5. Change (new) item D narrative to read: "Twenty hours of case management services will be available to Arlington residents and residents of Virginia when there is capacity. The hours worked will be agreed upon by the Contractor and the County. The case manager will work with other shelter staff to identify and engage clients who might benefit from housing-focused case management. It is anticipated that 20 percent of eligible residents will engage with the case manager and 40 percent of these will follow their service plan. All clients served by the case manager will have their information entered into the CSSA APR. The case manager will: the 10 items following this remain as in the current contract.

6. Add an item U to read: In unseasonably cold or stormy weather, generally daytime temperatures below 32 degrees, the Contractor may contact the County to obtain permission to keep the shelter open during the day. This change may necessitate a contract addendum with additional funding.
CHANGES TO PART III: EWS OPERATION AND MANAGEMENT

1. Change H to read:
   a. Provide assistance to non-Arlington, non-Virginia residents to locate a shelter able to serve them, preferably in their home jurisdiction when the shelter is full or before the client has reached a cumulative 96 hours in the shelter. This assistance may take place at the EWS or at Opportunity Place. If the shelter is full, provide assistance to residents of other Virginia jurisdictions to locate another shelter.

   b. Provide wrap-around housing focused case management to Arlington residents and other Virginia residents if capacity in the program permits.

CHANGES TO PART IV: SERVICES BY ARLINGTON COUNTY

1. Part B, add item 3 to read, "Clean the building daily before 4PM including weekend and holidays."

CHANGES TO PART IX: ELIGIBILITY AND HOMELESS EWS ADMISSION CRITERIA

1. Add a new #2, to read: "As space is available, the shelter will admit all homeless coming for service who meet the admission criteria within the following parameters.
   a. Clients shall be screened for Arlington residency according to the information obtained and verified in Exhibit D. Arlington residents may be served by the shelter through the season
   b. Clients who are residents of Virginia, based on verified information, may be admitted and served as space allows.
   c. Shelter visitors who are neither Arlington nor Virginia residents may be sheltered for no more than a total of 96 hours in the season, during which time the Contractor shall work with the resident, if wished, to locate appropriate shelter for the client, preferably in his jurisdiction.

2. Adjust subsequent letters to accommodate the above

CHANGE EXHIBIT B: EMERGENCY WINTER SHELTER RULES OF OPERATION

1. Change # 1 to read: "normal EWS hours are from 4:00 PM to 9:00 AM with admissions after 10:00 PM made on an exception basis.

REPLACE EXHIBIT C (BUDGET) WITH THE ATTACHED EXHIBIT.

REPLACE EXHIBIT E (OUTPUT AND OUTCOME MEASUREMENTS) WITH THE ATTACHED EXHIBIT.
### AGREEMENT NO. 330-09

**EXHIBIT C - BUDGET**

**NEW REFERENCE NO. 267-10**

<table>
<thead>
<tr>
<th>POSITION</th>
<th>FTE</th>
<th>HOURS/WEEK</th>
<th>TOTAL HOURS</th>
<th>WAGE/HR</th>
<th>SALARY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Director, Operations (25%)</td>
<td>0.25</td>
<td>10</td>
<td>220</td>
<td>27.00</td>
<td>$5,940.00</td>
</tr>
<tr>
<td>Volunteer Coordinator (15%)</td>
<td>0.15</td>
<td>6</td>
<td>132</td>
<td>16.11</td>
<td>$2,126.52</td>
</tr>
<tr>
<td>Shelter Director</td>
<td>1.0</td>
<td>40</td>
<td>880</td>
<td>20.00</td>
<td>$17,600.00</td>
</tr>
<tr>
<td>Case Manager</td>
<td>0.5</td>
<td>20</td>
<td>440</td>
<td>16.59</td>
<td>$7,299.60</td>
</tr>
<tr>
<td>Lead Monitor</td>
<td>2.275</td>
<td>91</td>
<td>2002</td>
<td>16.59</td>
<td>$33,213.18</td>
</tr>
<tr>
<td>Shelter Monitor</td>
<td>5.600</td>
<td>224</td>
<td>4928</td>
<td>12.75</td>
<td>$62,832.00</td>
</tr>
<tr>
<td>Overcapacity Shelter Monitor (35 nights)</td>
<td>0.088</td>
<td>385</td>
<td>12.75</td>
<td>$4,908.75</td>
<td></td>
</tr>
</tbody>
</table>

**Total Salary** $133,920.05

**FICA** $10,244.88

**TOTAL PERSONNEL COSTS** $144,164.93

### DIRECT OPERATING COSTS

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dinner</td>
<td>18,920.30</td>
</tr>
<tr>
<td>Breakfast</td>
<td>2,644.00</td>
</tr>
<tr>
<td>Supplies</td>
<td>3,109.00</td>
</tr>
<tr>
<td>Office Equipment</td>
<td>2,160.00</td>
</tr>
<tr>
<td>Postage/Printing</td>
<td>50.00</td>
</tr>
<tr>
<td>Client Special Assistance</td>
<td>1,000.00</td>
</tr>
</tbody>
</table>

**TOTAL OPERATING COSTS** $27,883.30

### INDIRECT COSTS

| Professional Fees:                             |        |
| Audit/Accounting                               | 4,000.00 |
| Insurance                                     | 5,000.00 |
| **Total Professional Fees**                   | 9,000.00 |

**MANAGEMENT FEE (5%)** $8,590.00

**TOTAL INDIRECT COSTS** $17,590.00

**TOTAL PERSONNEL, OPERATING, AND INDIRECT COSTS** $189,638.23
START UP COSTS FOR 6 WEEKS OF $8,042 WILL BE PAID BY A-SPAN
Start Up Costs for EWS

6-Week Start Up Phase
1. Hire and Train Shelter Staff
2. Building Readied
3. Operationally Ready

Costs

Shelter Director 40 hours/week for 6 weeks @ $20/hr = $4,800
Director of Operations 10 hours/week for 6 weeks @ $27/hr = $1,620
Volunteer 6 hours/week for 6 weeks @ $16.11/hr = $580
Training Sessions 4 hours X 9 SHELTER MONITORS @ $12.75/hr = $459
Training Sessions 4 hours X 3 LEAD MONITORS @ $16.59/hr = $200
Management Costs @ 5% = $383
TOTAL COSTS FOR START UP $8,042
Arlington Emergency Winter Shelter Intake Form

Date: __________________________

Name: ____________________________________________________________

Gender: MALE      FEMALE      Date of Birth: ______________________

Where did you spend last night? ______________________________________

Primary Race (American Indian, Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, other, other-multiparacial, White)  please circle one:

Secondary Race (American Indian, Alaska Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, other, other-multiparacial, White)  Please circle one

Hispanic/Latino:  Yes/No are you a veteran?  Yes/No

Social security number: _______-_______-_________  Chronically

Homeless?  Yes/No

Do you receive Social Security benefits?  If yes, amount SSI $______

SSDI $_______

Address you use for Social Security? ________________________________

Employed?  Yes/No  Where _________  Weekly Pay: __________

Address you receive your mail: __________________________________________

Food Stamps?  Yes/No  Amount ($): _______  From Where? _________

Medicaid?  Yes/No  From Where? ______________________________________

Currently receive services from the Drewry Center: Yes/No  Worker’s Name

Received services from Crisis Assistance of DHS in the past three months: Yes/No

Received services from A-SPAN for the last three consecutive months: Yes/No

Failure to sign the Release of Information needed to verify the above may result in failure to be considered a resident of Arlington.
### Output and Outcome Measurements

<table>
<thead>
<tr>
<th>Output</th>
<th>Measurement</th>
<th>How assessed</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accurate Information in CSSA</td>
<td>Information entered at least weekly</td>
<td>DHS monitoring</td>
<td>100%</td>
</tr>
<tr>
<td>Stability of Staff</td>
<td>Percent of Staff remaining with program for full season</td>
<td>Payroll reports</td>
<td>80%</td>
</tr>
<tr>
<td>Occupancy</td>
<td>Number of occupied bed nights</td>
<td>Based on CSSA client entry and exit information</td>
<td>100%</td>
</tr>
<tr>
<td>Safety of shelter</td>
<td>Incident free nights</td>
<td>Incidents reports</td>
<td>85% of nights free of incidents needing to be reported to Homeless Coordinator</td>
</tr>
</tbody>
</table>

### Outcomes

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Measurement</th>
<th>How Assessed</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case management services will be provided to assess barriers to housing, develop and implement a service plan</td>
<td>Appropriate plans are developed and completed assessment and service plan in records/CSSA.</td>
<td>CSSA and Case record readings</td>
<td>20% of eligible residents</td>
</tr>
<tr>
<td>Completion of service plan</td>
<td>Client met goals in the plan</td>
<td>CSSA and Case record readings</td>
<td>40% of those receiving case management services</td>
</tr>
<tr>
<td>Establishing identity documents (for those served by case manager)</td>
<td>Obtaining needed identity documents; birth certificates, picture ID, social security cards, TIN numbers.</td>
<td>Case Management Notes</td>
<td>50% of documents needed</td>
</tr>
<tr>
<td>Increased wealth (for those served by case manager)</td>
<td>Households leaving with employment income or increased employment income</td>
<td>CSSA APR</td>
<td>Tracked through APR, standard not established</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
<td>----------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Households leaving with additional mainstream benefits to which they are entitled</td>
<td></td>
<td>100% of case managed clients</td>
</tr>
<tr>
<td>Permanent housing (for those served by case manager)</td>
<td>Number of persons who move into permanent housing</td>
<td>CSSA APR</td>
<td>15 cients</td>
</tr>
</tbody>
</table>
Terms and Conditions
The work and payment called for under this Amendment shall be subject to all terms and conditions of the Agreement. All terms and conditions of the Agreement shall remain in full force and effect for the work covered by this Amendment unless specifically changed by the terms and conditions of this Amendment.

WITNESS THESE SIGNATURES:

THE COUNTY BOARD OF ARLINGTON COUNTY, VIRGINIA

SIGNED BY: [Signature]
PRINT NAME RICHARD D. WARREN, JR.
AND TITLE: PURCHASING AGENT
DATE: 9/21/10

ARLINGTON STREET PEOPLE ASSISTANCE NETWORK

TAXPAYER ID (SSN/EIN) 54-1615993
SIGNED BY: [Signature]
PRINT NAME KATHLEEN SIBERT
AND TITLE: EXECUTIVE DIRECTOR, A-SAN
DATE: 9/10/2010