



# DU PAGE COUNTY

## Human Services

### Final Summary

421 N. COUNTY FARM ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

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**Tuesday, December 5, 2023**

**9:30 AM**

**Room 3500A**

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1. **CALL TO ORDER**

9:30 AM meeting was called to order by Chair Greg Schwarze at 9:30 AM.

2. **ROLL CALL**

Other Board members present: Member Lucy Evans, Member Patty Gustin, and Member Yeena Yoo.

Staff in attendance: Renee Zerante (State's Attorney Office), Keith Jorstad (Finance), Gina Strafford-Ahmed and Julie Hamlin (Community Services).

<b>PRESENT</b> Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze
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3. **PUBLIC COMMENT**

No public comments were offered.

4. **CHAIR REMARKS - CHAIR SCHWARZE**

Chair Schwarze stated there was a large fire in one building at a West Chicago apartment complex on Saturday, December 2. This was the second fire in a year in this complex. This fire displaced about 100 residents, all 24 units in the building are uninhabitable. State Senator Karina Villa, from West Chicago, has led a coordination to help those in need. DuPage County's Office of Homeland Security Emergency Management and Community Services are involved in relief efforts, as well. County Board District 6 members Jim Zay, Sheila Rutledge, and I have been in multiple Zoom meetings and will continue to monitor this closely. There will be a multi-agency resource event Wednesday, December 6, from 10:00 a.m. through 6:00 p.m. at St. Andrews Church in West Chicago, in which our Community Services staff will participate with bi-lingual staff.

Chair Schwarze added that he has notified agencies involved that we may have resources to provide food.

The committee discussed agencies involved. Mary Keating stated Peoples Resource Center has a large food pantry in West Chicago, and they are involved in the coordination. The Salvation Army is involved in assistance. WeGo Together for Kids took specific clothing donations and do not need clothing any longer. They are only seeking financial donations. Pointe del Pueblo, a branch of the Wheaton Bible Church are providing toys.

Chair Schwarze mentioned that St. Vincent DePaul, Catholic Charities, ICNA Relief, Animal Services, and the Red Cross are all assisting. Member DeSart asked if there is one entity in charge, and who would be the primary contact? Mary Keating replied that it is a widely

coordinated effort. There are multiple agencies involved.

Gina Strafford-Ahmed stated they are assessing individual households for assistance from the Community Services Block Grant (CSBG). We can potentially assist with security deposits, rent assistance, and furniture. We will have to determine if residents are insured. If they relocate to another county, we can't support them, but we do have an avenue for that. Although CSBG funds can help, the challenge will be to find available units, particularly three to four bedrooms, and in the current school district.

Member LaPlante stated the fire was discussed at the Environmental Committee. Kay from Scarce is going to visit the area and take an inventory of needs and let county board members know.

The committee discussed the possible cause of the fire, ownership, and liability. They inquired about the rental prices and if these were subsidized units. Ms. Keating replied that some residents may have vouchers from DHA, but the building was not subsidized housing.

Member Yoo referred to the small loans through FEMA offered to victims of the Oak Brook Terrace fire last year and if the same would apply here. Mary answered that if so, the assistance would not be immediate.

Chair Schwarze announced the Human Services Committee meeting on January 2, 2024, will be cancelled, as are most other committee meetings scheduled for January 2. He previously discussed this with Mary Keating and Janelle Chadwick for consent.

However, the Community Development Commission (CDC) meeting will need to be held on January 2. Mary Keating stated the CDC is a 12-person committee. Seven people will have to be physically present to meet the quorum. Two municipal members and two DuPage County CDC board members have committed to attend. Ms. Keating explained the January meeting is the most important meeting of the year for the CDC Executive Committee, approving the projects for the year. Members DeSart and County Board Member Evans volunteered if needed. Mary asked Julie Hamlin to get a firm commitment from members regarding attendance.

Chair Schwarze wished all Happy Holidays and expressed his appreciation to all the committee members, Mary Keating, and Janelle Chadwick, for all they have accomplished in 2023.

## 5. APPROVAL OF MINUTES

### 5.A. [24-0053](#)

Human Services Committee - Regular Meeting - November 21, 2023

<b>RESULT:</b>	APPROVED
<b>MOVER:</b>	Dawn DeSart
<b>SECONDER:</b>	Paula Garcia

**6. LENGTH OF SERVICE AWARDS**

6.A. Length of Service Award - Lisa Gonzalez - 15 Years - Community Services

**7. COMMUNITY SERVICES - MARY KEATING**

7.A. [FI-R-0001-24](#)

Acceptance and appropriation of additional funding for the Illinois Department of Human Services (IDHS) Supportive Housing Grant PY24, Agreement No. FCSBH00352, Company 5000, Accounting Unit 1760, from \$137,747 to \$154,180 - an increase of \$16,433. (Community Services)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Dawn DeSart
<b>SECONDER:</b>	Michael Childress

7.B. [HS-P-0003-24](#)

Awarding Resolution issued to Optimum Management Resources, to provide technical assistance and consultation services to the DuPage County Homeless Continuum of Care (CoC), for Community Services, for the period of January 1, 2024 through December 31, 2024, for a contract total amount not to exceed \$34,860. (Community Services)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Michael Childress
<b>SECONDER:</b>	Kari Galassi

**8. DUPAGE CARE CENTER - JANELLE CHADWICK**

8.A. [FI-R-0004-24](#)

Acceptance and appropriation of the DuPage Care Center Foundation - Foundation Coordinator Grant PY24, Company 5000, Accounting Unit 2120, in the amount of \$30,128. (DuPage Care Center)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Michael Childress
<b>SECONDER:</b>	Kari Galassi

8.B. [FI-R-0005-24](#)

Acceptance of an extension of the DuPage Care Center Foundation - Foundation Coordinator Grant PY23 to January 31, 2024, Company 5000 - Accounting Unit 2120. (DuPage Care Center)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Michael Childress
<b>SECONDER:</b>	Dawn DeSart

8.C. [HS-P-0001-24](#)

Recommendation for the approval of a contract purchase order to Professional Medical & Surgical Supply, to furnish and deliver examination gloves, for the DuPage Care Center, for the period January 1, 2024 through December 31, 2024, for a total contract not to exceed \$63,380.10; per bid #23-102-DCC. (ARPA ITEM)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi

8.D. [HS-P-0002-24](#)

Recommendation for the approval of a contract purchase order to Music Speaks, LLC, for music therapy services for the residents at the DuPage Care Center, for the period January 12, 2024 through January 11, 2025, for a contract total not to exceed \$58,701; under RFP renewal #21-087-CARE, second of three (3) one (1) - year optional renewals. (DPCC Foundation funded)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Lynn LaPlante
<b>SECONDER:</b>	Michael Childress

## 9. INFORMATIONAL

9.A. [24-0054](#)

GPN 061-23 DuPage Care Center Foundation Coordinator Grant PY24 \$30,128. (DuPage Care Center)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi

**10. RESIDENCY WAIVERS - JANELLE CHADWICK**

No residency waivers were offered.

**11. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK**

Janelle Chadwick, Administrator of the DuPage Care Center, stated there is one unit, 3 Center, on covid outbreak with one active case of covid. All other staff and residents have been tested, with no additional cases.

The employee breakfast will be held on Wednesday, December 20, from 6:30 a.m. through 9:30 a.m. Ms. Chadwick asked for volunteers to assist serving staff, stating they can just show up at whatever time they have available.

Ms. Chadwick announced she had a presentation planned for the construction update of the Care Center. The resident cabinetry is due to be installed next week and Ms. Chadwick would like to include the additional slide for more impact, so she is rescheduling the presentation until the following Human Services meeting.

**12. COMMUNITY SERVICES UPDATE - MARY KEATING**

Mary Keating, Director of Community Services, announced that Julie Hamlin has been promoted to Community Development Administrator. Julie is a tremendous asset to the county and the department. Julie is taking leadership at the national level, joining the National Association for County Community and Economic Development (NACCED) board. Prior to this she was the Education Committee Chair of NACCED. Julie has embraced the mission of the work done through Community Development.

Ms. Keating added we are finally getting funds from the state for the 211 service. We received an agreement December 4, which will be presented at the Finance and County Board committees on December 12 for approval.. The first agreement is for \$90,000, the second agreement is for \$102,000. Both agreements provide similar functions. Some of the funds will be used to expand our marketing and initiate 211 text services.

**13. OLD BUSINESS**

No old business was discussed.

**14. NEW BUSINESS**

No new business was discussed.

**15. ADJOURNMENT**

There being no further business, Chair Schwarze requested a motion to adjourn. The meeting was adjourned at 10:00 a.m.

<b>RESULT:</b>	ADJOURNED
<b>MOVER:</b>	Lynn LaPlante
<b>SECONDER:</b>	Paula Garcia



## Minutes

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
[www.dupagecounty.gov](http://www.dupagecounty.gov)

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**File #:** 24-0053

**Agenda Date:** 12/5/2023

**Agenda #:** 5.A.

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# DU PAGE COUNTY

## Human Services

### Final Summary

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**Tuesday, November 21, 2023**

**9:30 AM**

**Room 3500A**

---

**1. CALL TO ORDER**

9:30 AM meeting was called to order by Chair Greg Schwarze at 9:30 AM.

**2. ROLL CALL**

Other Board members present: Member Lucy Chang Evans, Member Patty Gustin (9:45 AM).

Staff in attendance: Rene Zerante, Conor McCarthy (9:40 AM) (State's Attorney Office), Mary Catherine Wells, Gerald Smith, Keith Jorstad (Finance), Nickon Etminan (Procurement), Natasha Belli, Mary Keating (Community Services), and Janelle Chadwick (DuPage Care Center) (remote).

<b>PRESENT</b>	DeSart, Galassi, Garcia, LaPlante, and Schwarze
<b>LATE</b>	Childress

**3. PUBLIC COMMENT**

No public comments were offered.

**4. CHAIR REMARKS - CHAIR SCHWARZE**

Chair Schwarze read the new release that came out regarding the DuPage Care Center receiving another prestigious recognition. "The Center was named one of the 2024 U.S. News Best Nursing Homes by U.S. News and World Report. The Care Center is listed as High-Performing for both Short-Term Rehabilitation and Long-Term Care, making it one of just 3 percent of nursing homes nationwide to receive both designations."

"The Short-Term ratings are based on an assessment of 10 quality measures, including staffing levels, medical outcomes, and resident complaints. Similarly, the Long-Term ratings are based on an assessment of nine quality measures, including staffing, medical outcomes, resident complaints, vaccinations, and appropriate use of medications."

"The DuPage Care Center was also named the third-best nursing home in Illinois by Newsweek Magazine, based on performance data, peer recommendations, management of the COVID-19 situation, and accreditations from The Joint Commission and Commission on Accreditation of Rehabilitation Facilities. The Care Center ranked third among 750 nursing homes chosen by the magazine, based on key criteria that made the Care Center's quality of care stand out among more than 12,000 public and private facilities analyzed."

"Congratulations to the staff of the Care Center on these incredible achievements!"



**5. APPROVAL OF MINUTES****5.A. [23-3742](#)**

Human Services Committee - Regular Meeting - Tuesday, November 7, 2023

<b>RESULT:</b>	APPROVED
<b>MOVER:</b>	Lynn LaPlante
<b>SECONDER:</b>	Kari Galassi

**6. LENGTH OF SERVICE AWARDS**

Length of Service Award - Jeanie Moccio - 30 Years - Community Services

**7. COMMUNITY SERVICES - MARY KEATING****7.A. [FI-R-0272-23](#)**

Acceptance and appropriation of the Low-Income Home Energy Assistance Program HHS Grant PY24 Inter-Governmental Agreement No. 24-224028, Company 5000, Accounting Unit 1420, \$2,948,471. (Community Services)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Dawn DeSart

**7.B. [HS-R-0069-23](#)**

Approval of issuance of payments by DuPage County to energy assistance providers through the Low-Income Home Energy Assistance Program, HHS Grant PY24 Inter-Governmental Agreement No. 24-224028, in the amount of \$2,408,901. (Community Services)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi

Member Childress arrived at 9:45 AM.

7.C. [HS-P-0088-23](#)

Awarding resolution to Wellsky Corporation, for the renewal of the Homeless Management Information System Software and Cloud services contract, renewal of licenses, training, support, and custom programming, for Community Services, for a contract total amount of \$43,720.48. (PARTIAL ARPA ITEM)

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze

8. **DUPAGE CARE CENTER - JANELLE CHADWICK**

8.A. [HS-P-0089-23](#)

Recommendation for the approval of a contract purchase order to AirGas USA, LLC, to furnish and deliver liquid portable oxygen for the residents at the DuPage Care Center, for the period December 1, 2023 through November 30, 2024, for a contract total amount not to exceed \$48,000; under bid renewal #22-105-DCC, first of three, one-year optional renewals.

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze

8.B. [HS-P-0090-23](#)

Recommendation for the approval of a contract purchase order to Accelerated Care Plus, for leasing Physical Therapy Equipment, for the period January 1, 2024 through December 31, 2027, for an amount not to exceed \$35,859.36, per sole source.

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Lynn LaPlante
<b>SECONDER:</b>	Paula Garcia
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze

8.C. [23-3743](#)

HS-P-0051A-23 - Amendment to Resolution HS-P-0051-23, issued to Performance Foodservice, for secondary food, supplies and chemicals, for the DuPage Care Center, for the period March 1, 2023 through February 29, 2024, to increase encumbrance in the amount of \$20,000, a 27.45% increase.

<b>RESULT:</b>	APPROVED AND SENT TO FINANCE
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Lynn LaPlante
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze

## 9. BUDGET TRANSFERS

9.A. [23-3744](#)

Budget Transfer to transfer monies from 1200-2050/52220 (Wearing Apparel) to 1200-2050/54110 (Equipment & Machinery) in Nursing Services to allow for the purchase of a replacement of a Broda Shower Chair for the residents of the DuPage Care Center - \$1,935.00

<b>RESULT:</b>	APPROVED
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze

9.B. [23-3745](#)

Budget Transfer to transfer monies from 1200-2025/54110 (Dining Services) to 1200-20535/54110 (Housekeeping) to allow for the purchase of two (2) Duo R-Microplus Pro Mops to add to the current fleet for newly purchased Housekeeping trolley cart at the DuPage Care Center \$1,400.00.

<b>RESULT:</b>	APPROVED
<b>MOVER:</b>	Paula Garcia
<b>SECONDER:</b>	Kari Galassi
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze

**10. RESIDENCY WAIVERS - JANELLE CHADWICK**

No residency waivers were offered.

**11. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK**

Janelle Chadwick, Administrator of the DuPage Care Center announced the Care Center is on a Covid outbreak, with one unit finishing up on quarantine. Ms. Chadwick noted the community hospital covid admissions are on the rise, although DuPage County is still low. Staff are informing their resident families to be cognizant and if possible, wear masks over the holiday weekend as they always see an uptick in covid cases after huge family gatherings and holiday events.

Ms. Chadwick will have a slideshow presentation at the December 5, 2023, Human Services committee meeting showing the progress of the renovations at the Care Center. She is expecting the resident room cabinetry to be installed. She will show the completed bathroom renovations, walls, and hallway flooring. Ms. Chadwick added she is so excited; it looks like a whole new building.

The Care Center has completed their annual surveys for both health and life safety codes. They both went well. They have submitted everything requested for clearance from the Illinois Department of Public Health.

Member Garcia asked if most of the residents have received current covid vaccines. Ms. Chadwick responded the pharmacist is at the Care Center today giving vaccines.

Member Childress asked if the Care Center will receive a plaque for the award they just received. Ms. Chadwick replied they are not allowed to use the World News emblems in their marketing materials without licensing fees, which she is working on obtaining. A plaque will come with it.

**12. COMMUNITY SERVICES UPDATE - MARY KEATING**

Mary Keating, Director of Community Services, reminded the committee that the equipment grant application is still open for food pantries through mid-December. She stated they will send a reminder to the food pantries. Ms. Keating stated the Finance staff reported that they have not received many applications. Ms. Keating told them in her experience, most people wait until shortly before the deadline to submit. She will keep the committee posted on the applications as they come in.

Ms. Keating mentioned the Length of Service Award, specifically the job share program that DuPage County once had, which was eliminated about six years ago. This was not two part-time positions, rather it was two people doing the same job. This required that two people worked well together and both offered the same expertise in the position. This policy was beneficial in retaining employees, allowing them greater flexibility while still retaining full benefits.

The committee discussed the benefits of the job share program in the current employment market. The driving force in the current job market is flexibility, the ability to work remotely has changed our current work force. The committee discussed how reinstating this policy could work towards better retention of employees. They discussed about how this policy could be revisited.

**13. OLD BUSINESS**

Chair Schwarze thanked all for the support of the small business grants, remarking the presentation went well at County Board. He expressed his appreciation to the Finance staff for their hard work.

Chair Schwarze added that it is in the proposed budget for 2024 to continue the program for three additional years, which County Board will vote on at the November 28, 2023 meeting. He will meet in January with Vice Chair Garcia, Finance Chair Chaplin, Finance Vice Chair Krajewski, Finance staff, Community Services staff, and the Assistant States Attorney to improve on the issues we had this year. Member LaPlante asked if committee could have input. Chair Schwarze requested committee members send concerns and/or feedback to him or Vice Chair Garcia.

Mr. Schwarze expressed his appreciation to all for supporting the extra \$1.14M ARPA interest funds going towards food in 2024, that will be on the County Board agenda next week. He thanked County Board Chair Conroy to include an additional \$1.5 M, considering in 2023 we spent over \$4M in food assistance and people are still going hungry. That will increase the \$1.5 to \$2.64 M, which is needed.

DeSart asked if there have been any additional complaints regarding the produce from Northern Illinois Food Bank (NIFB). Greg Schwarze and Mary Keating replied that only two out of 22 pantries complained, and they chose to opt out of the NIFB program.

**14. NEW BUSINESS**

No new business was discussed.

**15. ADJOURNMENT**

With no further business, Chair Schwarze requested a motion to adjourn. The meeting was adjourned at 9:53 AM on a voice vote, all ayes.

<b>RESULT:</b>	APPROVED
<b>MOVER:</b>	Lynn LaPlante
<b>SECONDER:</b>	Dawn DeSart
<b>AYES:</b>	Childress, DeSart, Galassi, Garcia, LaPlante, and Schwarze



## Finance Resolution

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

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**File #:** FI-R-0001-24

**Agenda Date:** 12/5/2023

**Agenda #:** 10.A.

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ACCEPTANCE AND APPROPRIATION OF ADDITIONAL FUNDING  
FOR THE ILLINOIS DEPARTMENT OF HUMAN SERVICES (IDHS)  
SUPPORTIVE HOUSING GRANT PY24  
AGREEMENT NO. FCSBH00352  
COMPANY 5000 - ACCOUNTING UNIT 1760  
FROM \$137,747 to \$154,180  
(AN INCREASE OF \$16,433)

(Under the administrative direction of the Community Services Department)

WHEREAS, the County of DuPage heretofore accepted and appropriated the IDHS Supportive Housing Grant PY24, Company 5000 Accounting Unit 1760 pursuant to Resolution FI-R-0169-23 for the period July 1, 2023 through June 30, 2024; and

WHEREAS, the County of DuPage has been notified by the Illinois Department of Human Services (IDHS) that additional grant funds in the amount of \$16,433 (SIXTEEN THOUSAND, FOUR HUNDRED THIRTY-THREE AND NO/100 DOLLARS) are available to assist low-income eligible families with supportive services; and

WHEREAS, to receive said grant funds, the County of DuPage must enter into amended Grant Agreement No. FCSCH00352 with the Illinois Department of Human Services, a copy of the amended approved budget is attached to and incorporated as a part of this resolution by reference (ATTACHMENT II); and

WHEREAS, no additional County funds are required to receive the additional funding; and

WHEREAS, acceptance of the additional funding does not add any additional subsidy from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional funds creates an emergency within the meaning of the Counties Act, Budget Division, (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the additional funding in the amount of \$16,433 (SIXTEEN THOUSAND, FOUR HUNDRED THIRTY-THREE AND NO/100 DOLLARS) be and is hereby accepted; and

BE IT FURTHER RESOLVED that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$16,433 (SIXTEEN THOUSAND, FOUR HUNDRED THIRTY-THREE AND NO/100 DOLLARS) be made and added to the IDHS Homeless Prevention Grant PY24, Company 5000 - Accounting Unit 1760 and that the program continue as originally approved in all other respects; and

BE IT FURTHER RESOLVED by the DuPage County Board that the Director of Community Services is approved as the County's Authorized Representative; and

BE IT FURTHER RESOLVED that should state and/or federal funding cease for this grant, the Human Services Committee shall review the need for continuing the specified program and related head count; and

BE IT FURTHER RESOLVED that should the Human Services Committee determine the need for other funding is appropriate, it may recommend action to the County Board by Resolution.

Enacted and approved this 12<sup>th</sup> day of December, 2023 at Wheaton, Illinois.

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DEBORAH A. CONROY, CHAIR  
DU PAGE COUNTY BOARD

Attest: \_\_\_\_\_

JEAN KACZMAREK, COUNTY CLERK

ATTACHMENT I

ADDITIONAL APPROPRIATION FOR THE  
ILLINOIS DEPARTMENT OF HUMAN SERVICES  
SUPPORTIVE HOUSING PROGRAM GRANT PY24  
INTER-GOVERNMENTAL AGREEMENT NO. FCSCH00352  
COMPANY 5000 – ACCOUNTING UNIT 1760  
\$16,433

REVENUE

41400-0002 - State Operating Grant - IDHS \$ 16,433

TOTAL ANTICIPATED REVENUE \$ 16,433

EXPENDITURES

PERSONNEL

50000-0000 - Regular Salaries \$ 14,102

51010-0000 - Employer Share I.M.R.F. 1,096

51030-0000 - Employer Share Social Security 1,079

TOTAL PERSONNEL \$ 16,277

CONTRACTUAL

53815-0005 - IDHS Transportation \$ 156

TOTAL CONTRACTUAL \$ 156

TOTAL ADDITIONAL APPROPRIATION \$ 16,433



## AMENDMENT TO THE GRANT AGREEMENT



BETWEEN  
THE STATE OF ILLINOIS, DEPARTMENT OF HUMAN SERVICES  
AND  
DUPAGE COUNTY DEPARTMENT OF

The State of Illinois (State), acting through the undersigned agency (Grantor) and

DUPAGE COUNTY DEPARTMENT OF \_\_\_\_\_ (Grantee)

(collectively, the "Parties" and individually, a "Party") agree that this Amendment (Amendment) will amend the Grant Agreement (Agreement) referenced herein. All terms and conditions set forth in the original Agreement and any subsequent amendment, but not amended herein, shall remain in full force and effect as written. In the event of conflict, the terms of this Amendment shall prevail.

**The Parties or their duly authorized representatives hereby execute this Amendment.**

## DEPARTMENT OF HUMAN SERVICES

## DUPAGE COUNTY DEPARTMENT OF

By: \_\_\_\_\_

Signature of Dulce Quintero, Secretary

Date: \_\_\_\_\_

Designee Name: \_\_\_\_\_

Designee Title: Contract Obligations Analyst

By: \_\_\_\_\_

Signature of Second Grantor Approver, if applicable

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Title: \_\_\_\_\_

Second Grantor Approver

By: \_\_\_\_\_

Signature of Authorized Representative

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Title: \_\_\_\_\_

E-mail: mary.keating@dupageco.org

FEIN: 366006551

By: \_\_\_\_\_

Signature of Second Grantee Approver, if Applicable

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Title: \_\_\_\_\_

Second Grantee Approver  
(optional at Grantee's discretion)

**ARTICLE I**  
**AWARD AND AMENDMENT INFORMATION AND CERTIFICATION**

1.1. Original Agreement. The Agreement, numbered FCSCH00352, with an original term from 07/01/2023 to 06/30/2024.

1.2. Prior Amendments. Below is the list of all prior amendments to the Agreement (mark N/A if none):  
N/A

1.3. Item(s) Altered. Identify which of the following Agreement elements are amended herein (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Exhibit A (Project Description)       | <input type="checkbox"/> Award Term                            |
| <input type="checkbox"/> Exhibit B (Deliverables / Milestones) | <input checked="" type="checkbox"/> Award Amount               |
| <input type="checkbox"/> Exhibit C (Contact Information)       | <input type="checkbox"/> PART TWO (Grantor - Specific Terms)   |
| <input type="checkbox"/> Exhibit D (Performance Measures/Std.) | <input type="checkbox"/> PART THREE (Project - Specific Terms) |
| <input type="checkbox"/> Exhibit E (Specific Conditions)       | <input type="checkbox"/> Funding Source                        |
| <input type="checkbox"/> Others (specify)                      |  |

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1.4. Effective Date. This Amendment shall be effective on 07/01/2023. If an effective date is not identified in this Paragraph, the Amendment shall be effective upon the last dated signature of the Parties.

1.5. Certification. Grantee certifies under oath that (1) all representations made in this Amendment are true and correct and (2) all Grant Funds awarded pursuant to the Agreement shall be used only for the purpose(s) described therein, including all subsequent amendments. Grantee acknowledges that the Award is made solely upon this certification and that any false statements, misrepresentations, or material omissions shall be the basis for immediate termination of the Agreement and repayment of all Grant Funds.

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**ARTICLE II  
AMENDMENTS**

Award Amount has been modified. Please see "Exhibit A: CSFA Summary" for the Award Amount modification.

**PURPOSE OF AMENDMENT:**

Family and Community Services grant for Supportive Housing funding. COLA increase

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**EXHIBIT A**  
**PROJECT DESCRIPTION**

ACCOUNT\_LINE(s) SUMMARY:

Acct.Line#: 1  
FY: 2024  
CSFA Number: 444-80-0658  
Appropriation Code: 0001.44480.4900.001800NE  
WBS Element: 444SUPHS24-SSCTH320-SNMT  
Sponed. Prog: SSCT  
Appropriation Amount: \$90,768.00  
These funds are Used/Reported by the Provider as Federal Funds: No  
Use by DHS as Maintenance of Effort (MOE): No  
Use by DHS as Matching Funds: No  
CFDA: - CFDA Name:  
FAIN Number: - FAIN Award Agency:  
FAIN Award Date: N/A

Acct.Line#: 2  
FY: 2024  
CSFA Number: 444-80-0658  
Appropriation Code: 0365.44480.4400.004500NE  
WBS Element: 444SUPHS24-SSCTH320-SNMT  
Sponed. Prog: SSCT  
Appropriation Amount: \$46,979.00  
These funds are Used/Reported by the Provider as Federal Funds: No  
Use by DHS as Maintenance of Effort (MOE): No  
Use by DHS as Matching Funds: No  
CFDA: - CFDA Name:  
FAIN Number: - FAIN Award Agency:  
FAIN Award Date: N/A

Acct.Line#: 3  
FY: 2024  
CSFA Number: 444-80-0658  
Appropriation Code: 0001.44480.4900.002600NE  
WBS Element: 444HMIL024-SSCTH320-SNMT  
Sponed. Prog: SSCT  
Appropriation Amount: \$16,433.00  
These funds are Used/Reported by the Provider as Federal Funds: No  
Use by DHS as Maintenance of Effort (MOE): No  
Use by DHS as Matching Funds: No  
CFDA: - CFDA Name:  
FAIN Number: - FAIN Award Agency:

EXHIBIT A  
PROJECT DESCRIPTION

FAIN Award Date: N/A

----- END OF CFDA SUMMARY -----



State of Illinois  
UNIFORM GRANT BUDGET TEMPLATE

Agreement Numbers. FCSCH00352

State Agency Illinois Department of Human Services  
Grantee DUPAGE COUNTY DEPARTMENT OF  
Data Universal Number System (DUNS) Number 135836026  
Catalog of State Financial Assistance (CSFA) Number 444-80-0658  
Catalog of Federal Domestic Assistance (CFDA) Number N/A

FY. 2024  
Notice of Funding Opportunity (NOFO) Number. N/A  
FEIN 366006551  
CSFA Short Description. SUPPORTIVE HOUSING  
CFDA Short Description. N/A

Section A: State of Illinois Funds

REVENUES	Total
State of Illinois Requested:	\$154,180.00
<b>Budget Expenditure Categories</b>	
1. Personnel (200.430)	\$111,519.20
2. Fringe Benefits (200.431)	\$32,489.09
3. Travel (200.475)	N/A
4. Equipment (200.439 and 200.436(a))	N/A
5. Supplies (200.1 and 200.453)	N/A
6. Contractual Services/Subawards (200.318 and 200.1)	N/A
7. Consultant (200.459)	N/A
8. Construction	N/A
9. Occupancy - Rent and Utilities (200.465 and 200.436(a))	N/A
10. Research and Development (R & D) (200.1)	N/A
11. Telecommunications	N/A
12. Training and Education (200.473)	N/A
13. Direct Administrative Costs (200.413)	N/A
14. Other or Miscellaneous Costs	N/A
15. Grant Exclusive Line Item(s)	\$10,171.71
16. Total Direct Costs (add lines 1-15) (200.413)	\$154,180.00
17. Indirect Cost (200.414)	N/A
Rate %: N/A	
Base: N/A	
18. Total Costs State Grant Funds Lines 16 and 17 <b>MUST EQUAL REVENUE TOTALS ABOVE</b>	\$154,180.00
<b>Note: Total may be adjusted for rounding.</b>	

Contract Published Date Time: 2023.11.14.09.27.23 707



State of Illinois  
UNIFORM GRANT BUDGET TEMPLATE

Agreement Numbers. FCSCH00352

State Agency Illinois Department of Human Services

FY. 2024

Grantee DUPAGE COUNTY DEPARTMENT OF

Notice of Funding Opportunity (NOFO) Number. N/A

Data Universal Number System (DUNS) Number 135836026

FEIN 366006551

Catalog of State Financial Assistance (CSFA) Number 444-80-0658

CSFA Short Description. SUPPORTIVE HOUSING

Catalog of Federal Domestic Assistance (CFDA) Number N/A

CFDA Short Description. N/A

Section B: Non-State of Illinois Funds

REVENUES	Total
Grantee Match Requirement %: 25.00	
b) Cash	\$38,545.00
c) Non-Cash	N/A
d) other Funding and Contributions	N/A
Total Non-State Funds (lined b through d)	\$38,545.00
Budget Expenditure Categories	
1. Personnel (200.430)	\$33,395.43
2. Fringe Benefits (200.431)	\$5,149.58
3. Travel (200.475)	N/A
4. Equipment (200.439 and 200.436(a))	N/A
5. Supplies (200.1 and 200.453)	N/A
6. Contractual Services/Subawards (200.318 and 200.1)	N/A
7. Consultant (200.459)	N/A
8. Construction	N/A
9. Occupancy - Rent and Utilities (200.465 and 200.436(a))	N/A
10. Research and Development (R & D) (200.1)	N/A
11. Telecommunications	N/A
12. Training and Education (200.473)	N/A
13. Direct Administrative Costs (200.413)	N/A
14. Other or Miscellaneous Costs	N/A
15. Grant Exclusive Line Item(s)	N/A
16. Total Direct Costs (add lines 1-15) (200.413)	\$38,545.01
17. Indirect Cost (200.414)	N/A
Rate %: N/A	
Base: N/A	
18. Total Costs Non-State Grant Funds Lines 16 and 17 <b>MUST EQUAL REVENUE TOTALS ABOVE</b>	\$38,545.00

Note: Total may be adjusted for rounding.

Contract Published Date Time: 2023.11.14.09.27.23 707



State of Illinois  
UNIFORM GRANT BUDGET TEMPLATE

Agreement Numbers. FCSCH00352

State Agency Illinois Department of Human Services

FY. 2024

Grantee DUPAGE COUNTY DEPARTMENT OF

Notice of Funding Opportunity (NOFO) Number. N/A

Data Universal Number System (DUNS) Number 135836026

FEIN 366006551

Catalog of State Financial Assistance (CSFA) Number 444-80-0658

CSFA Short Description. SUPPORTIVE HOUSING

Catalog of Federal Domestic Assistance (CFDA) Number N/A

CFDA Short Description. N/A

**Budget Narrative Summary**

When you have completed the budget Category pages, the totals for each category should appear in the corresponding rows below. Additionally, the amount of State requested funds and non-State funds that will support the project are also listed. Verify the amounts and the Total Project Costs.

Budget Category	State	Non-State	Total
1. Personnel	\$111,519.20	\$33,395.43	\$144,914.63
2. Fringe Benefits	\$32,489.09	\$5,149.58	\$37,638.67
3. Travel	N/A	N/A	N/A
4. Equipment	N/A	N/A	N/A
5. Supplies	N/A	N/A	N/A
6. Contractual Services	N/A	N/A	N/A
7. Consultant (Professional Services)	N/A	N/A	N/A
8. Construction	N/A	N/A	N/A
9. Occupancy (Rent and Utilities)	N/A	N/A	N/A
10. Research and Development (R & D)	N/A	N/A	N/A
11. Telecommunications	N/A	N/A	N/A
12. Training and Education	N/A	N/A	N/A
13. Direct Administrative Costs	N/A	N/A	N/A
14. Other or Miscellaneous Costs	N/A	N/A	N/A
15. GRANT EXCLUSIVE LINE ITEM(S)	\$10,171.71	N/A	\$10,171.71
16. Total Direct Costs (add lines 1-15) (200.413)	\$154,180.00	\$38,545.01	\$192,725.01
17. Indirect Cost	N/A	N/A	N/A
State Request	\$154,180.00		
Non-State Amount		\$38,545.00	
<b>TOTAL PROJECT COSTS</b>			\$192,725.00

Note: Total may be adjusted for rounding.

Contract Published Date Time: 2023.11.14.09.27.23 707





## HS Requisition \$30,000 and Over

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

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**File #:** HS-P-0003-24

**Agenda Date:** 12/5/2023

**Agenda #:** 15.C.

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AWARDING RESOLUTION TO  
OPTIMUM MANAGEMENT RESOURCES  
TO PROVIDE TECHNICAL ASSISTANCE AND  
CONSULTATION SERVICES  
(CONTRACT TOTAL AMOUNT \$34,860)

WHEREAS, an agreement has been negotiated in accordance with County Board policy; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract purchase order to Optimum Management Resources, for professional services to provide technical assistance and consultation services to the DuPage County Homeless Continuum of Care (CoC), for the period January 1, 2024 through December 31, 2024, for Community Services through the HUD CoC Planning Grant.

NOW, THEREFORE BE IT RESOLVED, that County Contract covering said, for professional services to provide technical assistance and consultation services to the DuPage County Homeless CoC, for the period January 1, 2024 through December 31, 2024, for Community Services through the HUD CoC Planning Grant, be, and it is hereby approved for issuance of a contract purchase order by the Procurement Division to Optimum Management Resources, 1513 North Columbia, Naperville, Illinois 60563, for a contract total amount not to exceed \$34,860.

BE IT FURTHER RESOLVED, that the County Clerk transmit copies of this resolution and any documents attached and made a part hereof, to Peg White-Lijewski, 1513 North Columbia, Naperville, IL 60563, the Finance Department, and Community Services.

Enacted and approved this 12<sup>th</sup> day of December, 2023 at Wheaton, Illinois.

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DEBORAH A. CONROY, CHAIR  
DU PAGE COUNTY BOARD

Attest: \_\_\_\_\_

JEAN KACZMAREK, COUNTY CLERK



**Procurement Review Comprehensive Checklist**  
**Procurement Services Division**  
 This form must accompany all Purchase Order Requisitions

### SECTION 1: DESCRIPTION

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$34,860.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 12/05/2023	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$34,860.00
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD:
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Optimum Management Resources	VENDOR #: 11548	DEPT: Community Services	DEPT CONTACT NAME: Joan Fox
VENDOR CONTACT: Peg White Lijewski	VENDOR CONTACT PHONE: 630-357-9595	DEPT CONTACT PHONE #: 630-407-6426	DEPT CONTACT EMAIL: joan.fox@dupagecounty.gov
VENDOR CONTACT EMAIL: peglijewski@gmail.com	VENDOR WEBSITE:	DEPT REQ #:	
<i>Overview</i>			
<p><b>DESCRIPTION</b> Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Purchase of specialized professional services to assist our Continuum of Care compete for over \$7.37 million annually for DuPage Agencies to provide services to homeless persons. Awards are for programs such as Permanent Supportive, Rapid and Transitional Housing for homeless persons. In addition the awards allow for Continuum Planning and data management through our Homeless Management Information System which assists our Continuum move toward our goal of making the condition of homelessness infrequent, brief and a one-time occurrence.</p> <p><b>JUSTIFICATION</b> Summarize why this procurement is necessary and what objectives will be accomplished          DuPage County Community Services is the lead agency for the DuPage Continuum of Care. Much of our staffing related to the competitive funding process comes from the Continuum consultant. Optimum Management Resources (OMR) which has been providing professional services to the Continuum since it started in 1999. This is a highly specialized field and requires familiarity with complex HUD regulations and processes. The amount of funding received is based on performance. Therefore, the consultant must be familiar with the working of the HUD system and be able to guide the Continuum's planning and development to maximize the DuPage Continuum of Care's Score on its annual application to HUD. OMR is a local entity with the special knowledge and expertise necessary to prepare our continuum agencies to be in the best position possible for the competition and possesses the ability to complete the research, engagement, and tasks of completing the HUD Continuum of Care application components.</p>			

### SECTION 2: DECISION MEMO REQUIREMENTS

DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.
OTHER PROFESSIONAL SERVICES (DETAIL SELECTION PROCESS ON DECISION MEMO)	

### SECTION 3: DECISION MEMO

STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact. QUALITY OF LIFE
SOURCE SELECTION	Describe method used to select source. Source of Selection--OMR is the local entity with the special knowledge and expertise necessary to provide Continuum services in preparation of the application to HUD. It is important to have a local entity to provide these services, as attendance is required at various meetings of the Continuum, Regional planning groups and the necessity to provide training and technical assistance to Continuum agencies. OMR has a proven track record of success with the Continuum since 1999 and has been instrumental in the DuPage Continuum receiving approximately \$6.4 Million from HUD for 2023.
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action). Recommendation - Proceed with OMR P.O. Alt 1.) Hire additional staff to assist with the NOFO Process 2.) Authorize Overtime

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
<b>MARKET TESTING</b>	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
<b>AVAILABILITY</b>	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

## SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Optimum Management Resources	Vendor#: 11548	Dept: Community Services	Division: Housing Supports and Self-Sufficiency
Attn: Peg White Lijewski	Email: peglijewski@gmail.com	Attn: Joan Fox	Email: joan.fox@dupagecounty.gov
Address: 1512 N. Columbia	City: Naperville	Address: 421 N. County Farm Rd.	City: Wheaton
State: IL	Zip: 60563	State: IL	Zip: 60187
Phone: 630-357-9595	Fax:	Phone: 630-407-6426	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor:	Vendor#:	Dept:	Division:
Attn:	Email:	Attn:	Email:
Address:	City:	Address:	City:
State:	Zip:	State:	Zip:
Phone:	Fax:	Phone:	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jan 1, 2024	Contract End Date (PO25): Dec 31, 2024
Contract Administrator (PO25):			

Purchase Requisition Line Details											
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Contract purchase order for professional services to provide technical assistance and consultation services to the DuPage County Homeless Continuum of Care for the period of January 1, 2024 through December 31, 2024	FY24	5000	1510	53090	IL184IL5T1 42200	34,860.00	34,860.00
<b><i>FY is required, assure the correct FY is selected.</i></b>										Requisition Total	\$ 34,860.00

Comments	
HEADER COMMENTS	Provide comments for P020 and P025.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.

The following documents have been attached:    ☒ W-9            ☒ Vendor Ethics Disclosure Statement



## OPTIMUM MANAGEMENT RESOURCES

Resource Development Services

Making Your Vision A Reality

Ms. Mary Keating, Director  
Ms. Joan Fox, Administrator  
DuPage County Community Services  
421 N. County Farm Road, 3<sup>rd</sup> Floor  
Wheaton, IL 60187

Dear Mary and Joan,

I would like to propose a contract as Continuum of Care Consultant for the DuPage County Homeless Continuum of Care effective for 2024.

**The total amount of the proposed renewal contract is \$34,860.** The total hours of deliverables will increase from 400 to 415 and specifics are noted on the following pages. This will include additional support for the Neighborly platform related to the CoC and increased time with the CoC Planner. The hourly rate will increase 5% from \$80 to \$84. The Continuum Planner and I will collaborate on all aspects of the NOFO competition. I will work in coordination with the Continuum Planner to provide training and continuity of process. This proposal will provide the CoC lead agency with ongoing oversight and consultation on all components of the annual HUD CoC competition. The components include application questions module, attachments, project eligibility and review, technical assistance to applicants, strategic funding decisions and the project priority listing module. It will also include a feasibility analysis of any additional NOFOs related to the DuPage Homeless Continuum. The contract deliverables focus specifically on the tasks necessary to complete the HUD Continuum of Care competition process.

The Continuum of Care (CoC) competition process involves over \$6 million in funding and 16-18 projects. New projects are also applied for each year. The application is submitted into the HUD esnaps internet based grants management system. Updates and enhancements in NOFO requirements, project types and esnaps require ongoing training.

I will continue to provide technical assistance on funding strategies for the most effective use of HUD funds and on recommendations moving forward in order to secure maximum points on the annual Continuum Consolidated application.

Thank you for your consideration. Please feel free to contact me at 630-926-5238 to discuss the proposal or e-mail me with any questions or comments. I appreciate the opportunity to work with you toward the continued success of the DuPage Homeless Continuum.

Sincerely,

Signature on File

Peg White Lijewski  
President  
Optimum Management Resources, Inc.

<b>2024 NOFO DELIVERABLES</b>	<b>HOURS</b>
1. Prepare Annual Notice of Request for CoC new and renewal Project Applications each year with guidelines and deadlines.	10
2. Prepare schedule of CoC competition deadlines.	10
3. Prepare annual HUD project renewal list with amounts and project descriptions after awards are announced.	5
4. Review and analyze the Homeless Populations data on the master HMIS PIT report and in HDX prior to submission. Consult with HMIS and CoC Planner on data revisions/questions, notes and methodology sections.	25
5. Review and analyze the Housing Inventory data on the master HIC HMIS report with comparisons/explanations and new projects verification prior to entry in HDX	15
6. Prepare Housing Inventory reports by Housing type for website.	10
7. Prepare Populations Charts for posting on website.	10
8. Complete PIT Comparison Summary report for the CoC after final submissions in HDX.	10
9. Complete 2024 HUD Grants Inventory Worksheet, ensuring all projects are included with correct funding amounts and completing any change forms to HUD field office.	20
10. Complete the annual CoC registration process and confirmation of geography and funding amounts in Esnaps.	5
11. Complete registration summary in Esnaps for final approval.	5
12. Review the update of the Continuum Applicant Profile in esnaps.	5
13. Complete a thorough reading and review of the 2024 HUD CoC Notice of Fund Opportunity and all Detailed Instructions modules. Complete a draft of all CoC application questions in Word to work outside of esnaps.	20
14. Prepare Continuum NOFO Notice of Local Competition after it is announced; including Bonus project rules and re-allocation rules based on complete review of HUD CoC Program Section.	10
15. Consult with applicants on the types of projects which are eligible, project budgets, and match requirements.	10
16. Prepare an esnaps Project application template for both new and renewal projects for agency applicants based on Continuum NOFO requirements.	10
17. Provide consultation and training to the project applicants on electronic application procedures, accurate completion of project application; leveraging questions; and the application submission process.	20
18. Provide a review of each HUD project application template with written feedback to applicants on corrections or additions via email prior to electronic data entry.	25
19. Provide complete Project List with tiering amounts to Leadership committee meeting.	5
20. Assist in reviewing project applications and provide technical assistance on tiering at the Leadership Committee Tiering meeting for determining project tiering order for the Project Priorities.	5
21. After Leadership decisions, complete final Project Tiering List, Projects Accepted memo, and Projects Rejected-Reduced memo with rationale for approval by CoC Lead.	15
22. Compile all required aggregate information from project applications and other sources needed for the consolidated CoC application.	10
23. Review all project submissions into Esnaps for accuracy and send back for amendment any project that requires corrections. Continue to review submissions till 100% accurate.	10
24. Obtain all required attachment documents, create cover pages, and review them to ensure they meet requirements.	15

25. Coordinate all required public postings of documents with Continuum Planner. Compile documents for the required public postings with instructions for the posting including dates and wording on the website. Work in coordination with CoC lead agency staff to provide training and continuity of the CoC application process.	15
26. Ensure complete electronic entry of the HUD Project Priority Listings module in esnaps in accordance with all guidelines and requirements. Ensure that projects submitted are accurately listed in funding priority order. Work in coordination with CoC lead agency staff to provide training and continuity of this process.	10
27. Ensure completion of the HUD Continuum Consolidated application and documentation requirements in accordance with all guidelines and attachment requirements. Work in coordination with CoC lead agency staff to provide training and continuity of process.	40
28. Complete any necessary revisions or modifications to all project applications, CoC Consolidated application, and Project Priority Listing and coordinate final electronic submission with CoC Lead. Work in coordination with CoC lead agency staff to provide training and continuity of this process.	10
29. Consultation with HUD regarding interpretation of regulations as necessary. Submit questions to help desk as needed in order to ensure correct interpretation of instructions and regulations and to correct glitches in esnaps.	5
30. Complete CoC Annual NOFO Report with recommendations and performance results after completion of the CoC application.	10
31. Based on NOFO, provide consultation and feedback to Leadership committee on revisions to the next year CoC Ranking Criteria to be consistent with HUD priorities. Consult with Planner on revisions to Business Plans and Cost Forms for next year.	5
32. Provide HUD grantees with ongoing technical assistance throughout application process.	10
33. Ongoing consultation with Continuum Planner and the designated staff in the DuPage County Dept of Community Services.	20
34. Oversight and review of Neighborly platform for the CoC Business Plan applications.	5
<b><i>TOTAL</i></b>	<b>415 HOURS</b>
415 X \$84 = 34,860	

#### SCHEDULE OF FEES

The total project cost will not exceed \$34,860 without an approved revision to this contract. Payments will be billed as activities are completed. All requests for payment will be accompanied by a detailed list of the scope of work for that time period. Invoices shall be paid within 45 days of submission.

AGREEMENT BETWEEN THE COUNTY OF DUPAGE, ILLINOIS  
AND OPTIMUM MANAGEMENT RESOURCES  
FOR PROFESSIONAL CONSULTING SERVICES  
(\$34,860.00)

AGREEMENT, is entered into as of the 1<sup>st</sup> day of January, 2024 between the COUNTY OF DUPAGE, a body politic and corporate, with offices at 421 North County Farm Road, Wheaton, Illinois (hereinafter referred to as the COUNTY) and Optimum Management Resources, a corporation licensed to do business in the State of Illinois, with offices at 1513 N. Columbia, Naperville, IL 60563 (hereinafter referred to as the CONSULTANT).

R E C I T A L S

WHEREAS, the Illinois General Assembly has granted the County of DuPage authority to make all contracts and do all other acts in relation to the property and concerns of the county necessary to the exercise of its corporate powers (Illinois Compiled Statutes, Chapter 55, paragraphs 5/5-1005) and to enter into agreements for the purposes of receiving funds from the United States government under the “Housing and Community Development Act of 1974”, and other subsequent housing acts, and may disburse those funds and other county funds for community development and other housing program activities (Illinois Compiled Statutes, Chapter 55, paragraph 5/5-1093 et. seq.); and

WHEREAS, the COUNTY is the facilitator and a participant in the DuPage County Homeless Continuum of Care, which is a collaboration of public and private agencies organized to work together toward the mission of ending homelessness in DuPage County; and

WHEREAS, the COUNTY requires professional services to prepare the application for funding to assist said Continuum of Care in its mission; and

WHEREAS, Optimum Management Resources (“CONSULTANT”) has experience and expertise in this area, is in the business of providing such professional services and is willing to perform the required services for an amount not to exceed Thirty-Four Thousand Eight Hundred Sixty and 00/100 Dollars (\$34,860.00); and

NOW, THEREFORE, in consideration of the promises, the mutual covenants, terms, and conditions herein set forth, and the understandings of each party to the other, the parties do hereby mutually covenant, promise and agree as follows:

**1.0 INCORPORATION AND CONSTRUCTION**

- 1.1 All recitals set forth above are incorporated herein and made part thereof, the same constituting the factual basis for this AGREEMENT.



- 1.2 The headings of the paragraphs and subparagraphs of this Agreement are inserted for convenience of reference only and shall not be deemed to constitute part of this AGREEMENT or to affect the construction hereof.

## **2.0 SCOPE OF SERVICES**

- 2.1 Services are to be provided by the CONSULTANT according to the specifications in the scope of work, specified as Exhibit "A", attached hereto, which is hereby incorporated by reference.
- 2.2 The relationship of CONSULTANT to COUNTY is that of independent contractor, and nothing in this AGREEMENT is intended nor shall be construed to create an agency, employment, joint venture relationship, or any other relationship allowing COUNTY to exercise control or direction over the manner or method by which CONSULTANT or its subcontractors provide services hereunder.
- 2.3 The COUNTY may, from time to time, request changes in the Scope of Services. Any such changes, including any increase or decrease in the CONSULTANT'S fees shall be documented by an amendment to this AGREEMENT in accordance with Article 14.0 below.

## **3.0 NOTICE TO PROCEED**

- 3.1 Authorization to proceed with tasks described in Exhibit "A" shall be given on behalf of the COUNTY by the Director of Community Services of the COUNTY, (hereinafter referred to as the "Director"), in the form of a written notice to proceed following execution of the AGREEMENT by the County Board Chairman.
- 3.2 In addition to the Notice to Proceed, the Director, or his/her designee, may, on behalf of the COUNTY, approve, deny, receive, accept or reject any submission, notices or invoices from or by CONSULTANT, as provided for in this AGREEMENT, including, but not limited to, acts performed in accordance with Paragraphs 4.1, 5.2, 6.4, 7.1, 8.2 and 8.3.

## **4.0 TECHNICAL SUBCONSULTANTS**

- 4.1 The prior written approval of the COUNTY shall be required before CONSULTANT hires any technical subconsultants to complete COUNTY ordered tasks, which consent shall not be unreasonably withheld.
- 4.2 Any subconsultant(s) hired by the CONSULTANT shall be supervised by the CONSULTANT and the CONSULTANT shall be solely responsible for any and all work performed by said subconsultant, or subconsultants, in the same manner and with the same liability as if performed by the CONSULTANT.

## **5.0 TIME FOR PERFORMANCE**

- 5.1 The CONSULTANT shall commence work no later than five (5) working days after the execution of this AGREEMENT, or on January 1, 2024, whichever is later, unless delayed by the submittal of a schedule as required in subparagraph 5.2. Under this AGREEMENT, the COUNTY is not liable and will not pay the CONSULTANT for any work performed before January 1, 2024.
- 5.2 Unless otherwise defined in the Scope of Services or attached hereto as Exhibit B, the CONSULTANT shall submit a schedule for completion of the project within ten (10) days of commencement under subparagraph 5.1. The submittal of said schedule shall be at the discretion of the COUNTY and is subject to approval by the COUNTY. All of the services required hereunder shall be completed in accordance with the schedule as accepted, but in no event later than December 31, 2023, unless the term of this AGREEMENT is extended in accord with Paragraph 14.1 below.

## **6.0 COMPENSATION**

- 6.1 The COUNTY shall pay the CONSULTANT for services rendered during the term of this AGREEMENT and shall only pay in accordance with the provisions of this AGREEMENT. The COUNTY shall not be obligated to pay for any services not in compliance with this AGREEMENT. Unless this AGREEMENT is terminated pursuant to Article 16.0, all Services shall be completed and deliverables submitted on or before December 31, 2024. In the event of early termination of this AGREEMENT, the COUNTY shall only be obligated for any fees incurred up to the date of termination. In no event shall the COUNTY be liable for any costs incurred or Services performed after the termination date.
- 6.2 For work performed, the COUNTY shall pay CONSULTANT in accord with the Schedule of Fees attached and incorporated hereto as Exhibit "C" and as set forth in the following paragraphs. The CONSULTANT may not charge the COUNTY for direct expenses not provided for in the Schedule of Fees. If CONSULTANT overcharges, in addition to all other remedies, the COUNTY is entitled to a refund in the amount of the overcharges, plus interest at the rate of one percent (1%) per month from the date the overcharge was paid by the COUNTY until the date refund is made. The COUNTY has the right to offset any overcharge against any amounts due to CONSULTANT under this or any other AGREEMENT between CONSULTANT and the COUNTY, and at the COUNTY'S sole option, the right to declare CONSULTANT in default under this AGREEMENT.
- 6.3 The CONSULTANT shall submit its progress reports/invoices for tasks completed and services rendered to the COUNTY on a not more often

than a monthly basis. Each progress report/invoice shall summarize the tasks performed and the hours spent and the corresponding money being billed.

- 6.4 Total payments to the CONSULTANT under the terms of this AGREEMENT shall not under any circumstances exceed Thirty-Four Thousand Eight Hundred Sixty and 00/100 Dollars (\$34,860.00). In the event the COUNTY directs CONSULTANT to do work which would cause the stated amount to be exceeded, the CONSULTANT shall not be responsible for such work unless this AGREEMENT is modified pursuant to Article 14.0.
- 6.5 Upon receipt, review and approval of properly documented progress reports, the COUNTY shall pay, or cause to be paid, to the CONSULTANT the amounts requested, provided that the amounts requested together with the amounts of previous partial payments do not exceed the total compensation specified in this AGREEMENT. The COUNTY may not deny a properly documented claim for compensation, in whole or in part, without cause. The COUNTY reserves the right to hold back a sum equal to not more than five (5%) percent of the total contract sum, being One Thousand Five Hundred and 00/100 Dollars (\$1,500.00) to ensure performance. The COUNTY shall not be required to pay CONSULTANT more often than monthly.
- 6.6 Upon receipt, review and acceptance of all deliverables specified in Exhibit "B" of this AGREEMENT, final payment shall be made to the CONSULTANT.

## **7.0 DELIVERABLES**

- 7.1 The CONSULTANT shall provide the COUNTY on or before the termination of this AGREEMENT, the deliverables specified in Exhibit "B" of this AGREEMENT, attached hereto, which is hereby incorporated by reference. The deliverables shall be furnished in accordance with the schedule accepted under Article 5.0 above, and in any event, shall be promptly delivered to the COUNTY upon expiration or termination of the AGREEMENT.

## **8.1 CONSULTANT'S INSURANCE**

- 8.1 The CONSULTANT shall maintain, at its sole expense, insurance coverage including:
  - 8.1.a Worker's Compensation Insurance in the statutory amounts.
  - 8.1.b Commercial (Comprehensive) General Liability Insurance, (including contractual liability) with limits of not less than One Million and 00/100 dollars (\$1,000,000.00) per occurrence bodily

injury/property damage combined single limit; Two Million and 00/100 dollars (\$2,000,000.00) excess liability coverage in the annual aggregate injury/property damage combined single limit.

- 8.2 It shall be the duty of the CONSULTANT to provide to the COUNTY, copies of the CONSULTANT'S Certificates of Insurance before commencing work. The CONSULTANT shall provide copies of the above Insurance Policies upon the request of the COUNTY.
- 8.3 The insurance required to be purchased and maintained by CONSULTANT shall be provided by an insurance company acceptable to the COUNTY, and licensed to do business in the State of Illinois; and shall include at least the specific coverage and be written for not less than the limits of the liability specified herein or required by law or regulation whichever is greater; and shall contain a provision or endorsement that the coverage afforded will not be canceled, materially changed, or renewal refused until at least thirty (30) days prior written notice has been given to COUNTY.
- 8.4 CONSULTANT'S insurance required by Paragraphs 8.1.b, above, shall name the COUNTY, its officers, employees and agents as additional insured parties. The Certificate of Insurance shall state: "The County of DuPage, its officers, employees and agents are named as additional insureds as defined in the Commercial (Comprehensive) General Liability Insurance policy with respect to claims arising from CONSULTANT'S performance under this AGREEMENT."

## **9.0 INDEMNIFICATION**

- 9.1 The CONSULTANT shall indemnify, hold harmless and defend the COUNTY, its officials, officers, employees, and agents from and against all liability, claims, suits, demands, proceedings and actions, including costs, fees and expense of defense, arising from, growing out of, or related to, any loss, damage, injury, death, or loss or damage to property resulting from, or connected with, the CONSULTANT'S negligent or willful acts, errors or omissions in its performance under this AGREEMENT.
- 9.2 Nothing contained herein shall be construed as prohibiting the COUNTY, its officials, directors, officers, agents and employees, from defending through the selection and use of their own agents, attorneys and experts, any claims, suits, demands, proceedings and actions brought against them. Pursuant to Illinois law, 55 ILCS 5/3-9005, any attorney representing the COUNTY, under this paragraph or paragraph 9.1, is to be appointed a Special Assistant State's Attorney, as provided in 55 ILCS 5/3-9008. The COUNTY'S participation in its defense shall not remove CONSULTANT'S duty to indemnify, defend, and hold the COUNTY harmless, as set forth above.

- 9.3 Any indemnity as provided in this Agreement shall not be limited by reason of the enumeration of any insurance coverage herein provided. CONSULTANT'S indemnification of COUNTY shall survive the termination, or expiration, of this AGREEMENT.

## **10.0 SATISFACTORY PERFORMANCE**

- 10.1 The CONSULTANT'S, and subconsultant(s), standard of performance under the terms of this AGREEMENT shall be that which is to the satisfaction of the COUNTY and meets or exceeds the quality and standards commonly accepted in the industry.
- 10.2 The CONSULTANT'S services shall be performed in a manner consistent with the customary skill and care of its profession.
- 10.3 If any errors, omissions, or acts, intentional or negligent, are made by the CONSULTANT, or subconsultant(s), in any phase of the work, the correction of which requires additional field or office work, the CONSULTANT shall be required to perform such additional work as may be necessary to remedy same without undue delay and without charge to the COUNTY.
- 10.4 Acceptance of the work shall not relieve the CONSULTANT of the responsibility for the quality of its work, nor its liability for loss or damage resulting therefrom.

## **11.0 CONFLICT OF INTEREST**

- 11.1 The CONSULTANT covenants that it has no conflicting public or private interest and shall not acquire directly or indirectly any such interest which would conflict in any manner with the performance of CONSULTANT'S services under this AGREEMENT.

## **12.0 OWNERSHIP OF DOCUMENTS**

- 12.1 The CONSULTANT agrees that all survey data, reports, drafting, studies, specifications, estimates, maps, computations and all other deliverables prepared for the COUNTY under the terms of this AGREEMENT shall be properly arranged, indexed and delivered to the COUNTY as provided in Paragraph 7.1. In the event any of the above items are lost or damaged while in CONSULTANT'S possession, such items shall be restored or replaced at CONSULTANT'S expense.
- 12.2 The documents and materials made or maintained under this AGREEMENT shall be and will remain the property of the COUNTY which shall have the right to use same without restriction or limitation and

without compensation to the CONSULTANT other than as provided in this AGREEMENT.

- 12.3 In the performance of Services, CONSULTANT may have access to certain information that is not generally known to others ("CONFIDENTIAL INFORMATION"). CONSULTANT agrees not to use or disclose to any third party, except in the performance of Services, any CONFIDENTIAL INFORMATION or any records, reports or documents prepared or generated as a result of this AGREEMENT without the prior written consent of the COUNTY. CONSULTANT shall not issue publicity news releases or grant press interviews, except as may be required by law, during or after the performance of the Services, nor shall CONSULTANT disseminate any information regarding Services without the prior written consent of the COUNTY. CONSULTANT agrees to cause its personnel, staff and/or subcontractors, if any, to undertake the same obligations of confidentiality agreed to by CONSULTANT under this AGREEMENT. The terms of this Paragraph shall survive the expiration or termination of this AGREEMENT.
- 12.3 The COUNTY acknowledges that the use of information that becomes the property of the COUNTY pursuant to Paragraph 12.2, for purposes other than those contemplated in this AGREEMENT, shall be at the COUNTY'S sole risk.
- 12.4 The CONSULTANT may, at its sole expense, reproduce and maintain copies of deliverables provided to COUNTY

### **13.0 COMPLIANCE WITH STATE AND OTHER LAWS**

- 13.1 The CONSULTANT, and subconsultant(s), shall comply with Federal, State, COUNTY and local statutes, ordinances and regulations, and will obtain permits, or other mandated approvals, whenever applicable, in the performance of Services under this AGREEMENT. Further, CONSULTANT shall comply with all COUNTY policies and rules, including, but not limited to, criminal background checks.
- 13.2 The CONSULTANT, and subconsultant(s), shall not discriminate against any worker, job applicant, employee or any member of the public, because of race, creed, color, sex, age, handicap, or national origin, or otherwise commit an unfair employment practice. CONSULTANT shall comply with Executive Order 11246, entitled "Equal Employment Opportunity", as amended by U.S. Department of Labor regulations (41 CFR Part 60) and the provisions of the Illinois Human Rights Act, as amended, 775 ILCS 5/-101, et seq., and with all rules and regulations established by the Department of Human Rights.

- 13.3 The CONSULTANT, by its signature on this AGREEMENT, certifies that it has not been barred from being awarded a contract or subcontract under the Illinois Procurement Code, 30 ILCS 500/1-1, et seq.; and further certifies that it has not been barred from contracting with a unit of State or local government as a result of a violation of Section 33E-3 or 33E-4 of the Illinois Criminal Code (Illinois Compiled Statutes, Chapter 720, paragraph 5/33E-3).

#### **14.0 MODIFICATION OR AMENDMENT**

- 14.1 The parties may modify or amend terms of this AGREEMENT only by a written document duly executed by both parties.
- 14.2 The CONSULTANT acknowledges receipt of a copy of the COUNTY'S Purchasing Procedures and Guidelines Ordinance, which is hereby incorporated in this AGREEMENT, and has had an opportunity to review it. CONSULTANT agrees to submit change orders in accordance with said Ordinance.

#### **15.0 TERM OF THIS AGREEMENT**

- 15.1 The term of this AGREEMENT shall begin on the date the AGREEMENT is fully executed, and shall continue in full force and effect until the earlier of the following occurs:
- (a) The termination of this AGREEMENT in accordance with the terms of Article 16.0, or
  - (b) December 31, 2024, or to a new date agreed upon by the parties.
  - (c) The completion by the CONSULTANT and COUNTY of their respective obligations under this AGREEMENT, in the event such completion occurs before December 31, 2024.
- 15.2 The CONSULTANT shall not perform any work under this AGREEMENT after the expiration date set forth in Paragraph 15.1(b), above. The COUNTY is not liable and will not pay the CONSULTANT for any work performed after the expiration or termination of this AGREEMENT.

#### **16.0 TERMINATION**

- 16.1 Except as otherwise set forth in this AGREEMENT, either party shall have the right to terminate this AGREEMENT for any cause upon serving thirty (30) days' prior written notice upon the other party, except in the event of CONSULTANT'S insolvency, bankruptcy or receivership, in

which case termination shall be effective immediately upon receipt of notice.

16.2 Upon such termination, the liabilities of the parties to this AGREEMENT shall cease, but they shall not be relieved of the duty to perform their obligations up to the date of termination.

16.3 Upon termination of this AGREEMENT, all data, work products, reports and documents produced, because of this AGREEMENT shall become the property of the COUNTY. Further, CONSULTANT shall provide all deliverables within fourteen (14) days of termination in accordance with the other provisions of this AGREEMENT.

#### **17.0 ENTIRE AGREEMENT**

17.1 This AGREEMENT, including matters incorporated herein, contains the entire agreement between the parties.

17.2 There are no other covenants, warranties, representations, promises, conditions or understandings, either oral or written, other than those contained herein.

17.3 This AGREEMENT may be executed in one or more counterparts, each of which shall for all purposes be deemed to be an original and all of which shall constitute the same instrument.

17.4 In event of a conflict between the terms or conditions of this AGREEMENT and any term or condition found in any exhibit or attachment, the terms and conditions of this AGREEMENT shall prevail.

#### **18.0 ASSIGNMENT**

18.1 This AGREEMENT may be assigned by either party provided; however, such assignment shall be first approved, in writing, by the other party.

#### **19.0 SEVERABILITY**

19.1 In the event, any provision of this AGREEMENT is held to be unenforceable or invalid for any reason, the enforceability thereof shall not affect the remainder of the AGREEMENT. The remainder of this AGREEMENT shall be construed as if not containing the particular provision and shall continue in full force, effect, and enforceability, in accordance with its terms.

#### **20.0 GOVERNING LAW**

20.1 This AGREEMENT shall be governed by the laws of the State of Illinois as to both interpretation and performance.



- 20.2 The venue for resolving any disputes concerning the parties' respective performance, or failure to perform, under this AGREEMENT, shall be the 18th Judicial Circuit Court, DuPage County, Wheaton, Illinois.

## **21.0 NOTICES**

- 21.1 Any required notice shall be sent to the following addresses and parties:

County of DuPage  
421 North County Farm Road  
Wheaton, IL 60187  
Fax: 630-407-6501  
Email: [mary.keating@dupageco.org](mailto:mary.keating@dupageco.org)

Attn: Mary A. Keating, Director of Community Services

Optimum Management Resources  
1513 N. Columbia  
Naperville, IL 60563  
Fax: 630-357-9494  
Email: [peglijewski@gmail.com](mailto:peglijewski@gmail.com)  
Attn: Margaret White Lijewski, President

- 21.2 All notices required to be given under the terms of this AGREEMENT shall be in writing and either (a) served personally during regular business hours; (b) served by facsimile transmission during regular business hours; (c) served by email with a return acknowledgement of receipt by the receiver; or (d) served by certified or registered mail, return receipt requested, properly addressed with postage prepaid. Notices served personally, by facsimile transmission, or by email shall be effective upon receipt and acknowledgement, and notices served by mail shall be effective upon receipt as verified by the United States Postal Service. Each party may designate a new location for service of notices by serving notice thereof in accordance with the requirements of this Paragraph, and without compliance to the amendment procedures set forth in Paragraph 14.1, above.

## **22.0 WAIVER OF/FAILURE TO ENFORCE BREACH**

- 22.1 The parties agree that the waiver of, or failure to enforce, any breach of this AGREEMENT by the remaining party shall not be construed, or otherwise operate, as a waiver of any future breach of this AGREEMENT.

Further, the failure to enforce any particular breach shall not bar or prevent the remaining party from enforcing this AGREEMENT with respect to a different breach.

### **23.0 FORCE MAJEURE**

- 23.1 Neither party shall be liable for any delay or non-performance of their obligations caused by any contingency beyond their control including but not limited to Acts of God, war, civil unrest, strikes, walkouts, fires or natural disasters.

### **24.0 REPRESENTATIONS AND WARRANTIES OF CONSULTANT**

- 24.1 CONSULTANT represents and warrants that the following shall be true and correct as of the effective date of this AGREEMENT and shall continue to be true and correct during the Term of this AGREEMENT.
- 24.2 Licensed Professionals. Services required to be performed by professionals shall be performed by professionals licensed to practice by the State of Illinois in the applicable professional discipline.
- 24.3 Good Standing. CONSULTANT is not in default and has not been deemed by the COUNTY to be in default under any other AGREEMENT with the COUNTY during the five (5) year period immediately preceding the effective date of this AGREEMENT.
- 24.4 Authorization. In the event CONSULTANT is an entity other than a sole proprietorship, CONSULTANT represents that it has taken all action necessary for the approval and execution of this AGREEMENT, and execution by the person signing on behalf of the CONSULTANT is duly authorized by CONSULTANT and has been made with complete and full authority to commit CONSULTANT to all terms and conditions of this AGREEMENT which shall constitute valid, binding obligations of CONSULTANT.
- 24.5 Gratuities. No payment, gratuity or offer of employment, except as permitted by the Illinois State Gift Ban Act, was made by, on behalf of, or to CONSULTANT in relation to this AGREEMENT or as an inducement for award of this AGREEMENT. IN WITNESS OF, the parties set their hands and seals as of the date first written above.

COUNTY OF DUPAGE

OPTIMUM MANAGEMENT  
RESOURCES

BY: \_\_\_\_\_

BY: \_\_\_\_\_

DEBORAH A. CONROY  
CHAIR, DUPAGE COUNTY BOARD

MARGARET WHITE LIJEWSKI  
PRESIDENT, OMR

ATTEST BY:

ATTEST BY:

\_\_\_\_\_  
Jean Kaczmarek, COUNTY CLERK

\_\_\_\_\_  
NAME:  
TITLE:

## **EXHIBIT A**

### **SCOPE OF SERVICES**

This Exhibit includes the scope of work for the services of Optimum Management Resources for preparation of the application to receive funds under the federal Continuum of Care program and the research and engagement necessary to prepare such an application. DuPage County, as recipient of CDBG funds, has stated the importance of the Continuum of Care and the CoC application for funding in its Consolidated Plan, demonstrating that such an activity is necessary to achieve its community development objectives.

Optimum Management Resources will fully prepare, for submission, the Continuum of Care funding application in the HUD internet-based grants management systems, e-snaps. This preparation includes using systems of e-snaps, SAGE, including any updates, training and multiple review of each applicant's application for accuracy. This will entail review of each applicant's Annual Performance Report for information needed to be used in the Consolidated Application process.

The Consultant will continue to provide technical assistance on funding strategies for most effective use of HUD funds, and ensure that tasks necessary for maximum points on the annual Continuum Consolidation application are completed throughout the year in a timely manner. In addition, the Consultant will be a liaison, in coordination with designated DuPage County Staff, with the HUD personnel in the Chicago regional office and in Washington, D.C. and provide technical assistance to all continuum members as necessary. There will be ongoing communication with the Housing Supports and Self-Sufficiency Unit Administrator, the Continuum Planner, CoC Committee Chairs, Continuum members, the Regional Roundtable Coordinator, and the Community Development Department staff.

## EXHIBIT B

### DELIVERABLES

This task shall consist of the following specific activities.

- Prepare Annual Notice of Request for CoC new and renewal Project Applications each year with guidelines and deadlines.
- Prepare schedule of CoC competition deadlines.
- Prepare annual HUD project renewal list with amounts and project descriptions after awards are announced.
- Review and analyze the Homeless Populations data on the master HMIS PIT report and in HDX prior to submission. Consult with HMIS and CoC Planner on data revisions/questions, notes and methodology sections.
- Review and analyze the Housing Inventory data on the master HIC HMIS report with comparisons/explanations and new projects verification prior to entry in HDX
- Prepare Housing Inventory reports by Housing type for website.
- Prepare Populations Charts for posting on website.
- Complete PIT Comparison Summary report for the CoC after final submissions in HDX.
- Complete 2024 HUD Grants Inventory Worksheet, ensuring all projects are included with correct funding amounts and completing any change forms to HUD field office.
- Complete the annual CoC registration process and confirmation of geography and funding amounts in Esnaps.
- Complete registration summary in Esnaps for final approval.
- Review the update of the Continuum Applicant Profile in esnaps.
- Complete a thorough reading and review of the 2024 HUD CoC Notice of Fund Opportunity and all Detailed Instructions modules. Complete a draft of all CoC application questions in Word to work outside of esnaps.
- Prepare Continuum NOFO Notice of Local Competition after it is announced; including Bonus project rules and re-allocation rules based on complete review of HUD CoC Program Section.
- Consult with applicants on the types of projects which are eligible, project budgets, and match requirements.
- Prepare an esnaps Project application template for both new and renewal projects for agency applicants based on Continuum NOFO requirements.
- Provide consultation and training to the project applicants on electronic application procedures, accurate completion of project application; leveraging questions; and the application submission process.
- Provide a review of each HUD project application template with written feedback to applicants on corrections or additions via email prior to electronic data entry.
- Provide complete Project List with tiering amounts to Leadership committee meeting.
- Assist in reviewing project applications and provide technical assistance on tiering at the Leadership Committee Tiering meeting for determining project tiering order for the Project Priorities.
- After Leadership decisions, complete final Project Tiering List, Projects Accepted memo, and Projects Rejected-Reduced memo with rationale for approval by CoC Lead.
- Compile all required aggregate information from project applications and other sources needed for the consolidated CoC application.

- Review all project submissions into Esnaps for accuracy and send back for amendment any project that requires corrections. Continue to review submissions till 100% accurate.
- Obtain all required attachment documents, create cover pages, and review them to ensure they meet requirements.
- Coordinate all required public postings of documents with Continuum Planner. Compile documents for the required public postings with instructions for the posting including dates and wording on the website. Work in coordination with CoC lead agency staff to provide training and continuity of the CoC application process.
- Ensure complete electronic entry of the HUD Project Priority Listings module in esnaps in accordance with all guidelines and requirements. Ensure that projects submitted are accurately listed in funding priority order. Work in coordination with CoC lead agency staff to provide training and continuity of this process.
- Ensure completion of the HUD Continuum Consolidated application and documentation requirements in accordance with all guidelines and attachment requirements. Work in coordination with CoC lead agency staff to provide training and continuity of process.
- Complete any necessary revisions or modifications to all project applications, CoC Consolidated application, and Project Priority Listing and coordinate final electronic submission with CoC Lead. Work in coordination with CoC lead agency staff to provide training and continuity of this process.
- Consultation with HUD regarding interpretation of regulations as necessary. Submit questions to help desk as needed in order to ensure correct interpretation of instructions and regulations and to correct glitches in esnaps.
- Complete CoC Annual NOFO Report with recommendations and performance results after completion of the CoC application.
- Based on NOFO, provide consultation and feedback to Leadership committee on revisions to the next year CoC Ranking Criteria to be consistent with HUD priorities. Consult with Planner on revisions to Business Plans and Cost Forms for next year.
- Provide HUD grantees with ongoing technical assistance throughout application process.
- Ongoing consultation with Continuum Planner and the designated staff in the DuPage County Dept of Community Services.
- Oversight and review of Neighborly platform for the CoC Business Plan applications.

## **EXHIBIT C SCHEDULE OF FEES**

The CONSULTANT will bill the COUNTY for all tasks, assignments, and work performed in accordance with the following project costs and payment terms.

### **Project Cost:**

Total Project cost shall not exceed Thirty-Four Thousand Eight Hundred Sixty and 00/100 Dollars (\$34,860.00). COUNTY shall be responsible for payment to CONSULTANT for said cost.

### **Payment Terms:**

Payments will be billed as activities are completed. All requests for payment shall be accompanied by a list describing scope of work accomplishments for the time period covered by the request.



# Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Date: Nov 21, 2023

Bid/Contract/PO #:

Company Name: Optimum Management Resources, Inc.	Company Contact: Margaret White Lijewski
Contact Phone: 630-926-5238	Contact Email: peglijewski@gmail.com

## The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

- Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of \$25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

☒ **NONE (check here) - If no contributions have been made**

Recipient	Donor	Description (e.g. cash, type of item, in-kind services, etc.)	Amount/Value	Date Made

- All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

☒ **NONE (check here) - If no contacts have been made**

Lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid	Telephone	Email

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

### Continuing disclosure is required, and I agree to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

### The full text for the county's ethics and procurement policies and ordinances are available at:

<http://www.dupageco.org/CountyBoard/Policies/>

### I hereby acknowledge that I have received, have read, and understand these requirements.

Authorized Signature Signature on File

Printed Name Margaret White Lijewski

Title President

Date Nov 21, 2023

Attach additional sheets if necessary. Sign each sheet and number each page. Page 1 of 1 (total number of pages)





## Finance Resolution

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

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**File #:** FI-R-0004-24

**Agenda Date:** 12/5/2023

**Agenda #:** 10.D.

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ACCEPTANCE AND APPROPRIATION OF  
THE DUPAGE CARE CENTER FOUNDATION -  
FOUNDATION COORDINATOR GRANT PY24  
COMPANY 5000 - ACCOUNTING UNIT 2120  
\$30,128

(Under the administrative direction of  
the DuPage Care Center)

WHEREAS, the County of DuPage has been notified by the DuPage Care Center Foundation that grant funds in the amount of \$30,128 (THIRTY THOUSAND, ONE HUNDRED TWENTY-EIGHT AND NO/100 DOLLARS) are available to be used to provide partial funding for a part-time Foundation Coordinator whose responsibilities include planning and coordination of fundraising events, promoting community awareness, pursuing grant and sponsorship funding, and management of donations; and

WHEREAS, to receive said grant funds, the County of DuPage on behalf of the DuPage Care Center must accept a letter dated November 2, 2023 from the DuPage Care Center Foundation, a copy of which is attached to and incorporated as a part of this resolution by reference (ATTACHMENT II); and

WHEREAS, the term of the grant award is from December 1, 2023, through November 30, 2024; and

WHEREAS, no additional County funds are required to receive this funding; and

WHEREAS, acceptance of this grant award does not add any additional subsidy from the County; and

WHEREAS, the DuPage County Board finds that the need to appropriate said funds creates an emergency within the meaning of the Counties Act, Budget Division, (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$30,128 (THIRTY THOUSAND, ONE HUNDRED TWENTY-EIGHT AND NO/100 DOLLARS) be made to establish the DuPage Care Center Foundation - Foundation Coordinator Grant PY24, Company 5000 - Accounting Unit 2120, for the period of December 1, 2023 to November 30, 2024; and

BE IT FURTHER RESOLVED by the DuPage County Board that the Administrator of the DuPage Care Center is approved as the County's Authorized Representative; and

BE IT FURTHER RESOLVED by the DuPage County Board, that should local funding cease for this grant, the Human Services Committee shall review the need for continuing the specified program; and

BE IT FURTHER RESOLVED, that should the Human Services Committee determine the need for other funding is appropriate, it may recommend action to the County Board by resolution.

Enacted and approved this 12<sup>th</sup> day of December, 2023 at Wheaton, Illinois.

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DEBORAH A. CONROY, CHAIR  
DU PAGE COUNTY BOARD

Attest: \_\_\_\_\_

JEAN KACZMAREK, COUNTY CLERK

ATTACHMENT I

ADDITIONAL APPROPRIATION TO ESTABLISH  
DUPAGE CARE CENTER FOUNDATION - FOUNDATION COORDINATOR GRANT PY24  
COMPANY 5000 – ACCOUNTING UNIT 2120  
\$30,128

REVENUE

46009-0000 - Private Grants	\$	<u>30,128</u>
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TOTAL ANTICIPATED REVENUE	\$	<u><u>30,128</u></u>
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EXPENDITURES

PERSONNEL

50040-0000 - Part Time Help	\$	23,511
51010-0000 - Employer Share I.M.R.F.		1,933
51030-0000 - Employer Share Social Security		1,798
51040-0000 - Employee Med & Hosp Insurance		<u>2,886</u>

TOTAL PERSONNEL	\$	<u>30,128</u>
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TOTAL ADDITIONAL APPROPRIATION	\$	<u><u>30,128</u></u>
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*DuPage Care Center*  
**FOUNDATION**

November 2, 2023

**President**

Diane Marr

Mr. Geoffery Kinczyk & Ms. Hetal Shah

**Vice President**

Debra Giampoli

The County of DuPage

Wheaton, Illinois

**Secretary**

Maronica Gibson

RE: Foundation Coordinator Grant

**Directors**

Babs Cleary

Grant Dates: 12/1/2023 – 11/30/2024

Mark De Iorio

Grant Award: \$30,128.00

Maronica Gibson

Robert Kliebhan

Mr. Kinczyk & Ms. Shah,

Kenneth Moy

Tony Reyes

**Foundation**

**Coordinator**

Connor Brown

Please be advised that the DuPage Care Center Foundation (DCCF) Board of Directors approved the Grant Award of \$30,128.00 funding through 11/30/2024 as referenced above for the Foundation Coordinator. This represents an increase of \$2,245.96 in the grant amount from the prior fiscal year. The Foundation Board approved the funding of this grant at the quarterly DCCF Board meeting on 10/17/2023. The DCCF Board is continuing the payment schedule as approved for the DCCF Fiscal Year 2024. When the DCCF Fiscal Year 2025 Budget is approved, a new payment schedule will be submitted with an adjustment to match the grant award amount.

Respectfully submitted,

CB

 Signature on File

Diane Marr, DCCF President

Cc: Janelle Chadwick

Shauna Berman

Christine Kliebhan



## Finance Resolution

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

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**File #:** FI-R-0005-24

**Agenda Date:** 12/5/2023

**Agenda #:** 10.E.

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ACCEPTANCE OF AN EXTENSION OF THE  
DUPAGE CARE CENTER FOUNDATION-  
FOUNDATION COORDINATOR GRANT PY23  
COMPANY 5000 - ACCOUNTING UNIT 2120

(Under the administrative direction of  
the DuPage Care Center)

WHEREAS, the County of DuPage heretofore accepted and appropriated the DuPage Care Center Foundation-Foundation Coordinator Grant PY23, Company 5000 - Accounting Unit 2120, pursuant to Resolution FI-R-0107-23 for the period December 1, 2022 through November 30, 2023, as amended; and

WHEREAS, the County of DuPage has been notified by the DuPage Care Center Foundation that the grant may be extended to January 31, 2024.

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the expiration date of this grant be extended until January 31, 2024.

Enacted and approved this 12<sup>th</sup> day of December, 2023 at Wheaton, Illinois.

---

DEBORAH A. CONROY, CHAIR  
DU PAGE COUNTY BOARD

Attest: \_\_\_\_\_

JEAN KACZMAREK, COUNTY CLERK

*DuPage Care Center*  
**FOUNDATION**

**President**

Diane Marr

Date: November 27, 2023

To: Geoffery Kinczyk & Ms. Hetal Shah

**Vice President**

Debra Giampoli

From: Diane Marr, DPCC Foundation Board President

RE: Foundation Coordinator Grant (#DCCFFCG23) Extension to 1/31/2024

**Secretary**

Maronica Gibson

Mr. Kinczyk & Ms. Shah,

**Directors**

Babs Cleary

Mark De Iorio

Maronica Gibson

Robert Kliebhan

Kenneth Moy

Tony Reyes

Please be advised that the DuPage Care Center Foundation would like to extend the Foundation Coordinator grant (Grant # DCCFFCG23) to 1/31/2024.

Thank you for your time in this matter. If there are any additional questions or concerns, please feel free to contact Christine Kliebhan at x4208 and she will be able to assist you.

**Foundation**

**Coordinator**

Connor Brown

Respectfully submitted,

Signature on File



Diane Marr, DCCF President

Cc: Janelle Chadwick

Shauna Berman

Barbara Hyde



## Care Center Requisition \$30,000 and Over

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

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**File #:** HS-P-0001-24

**Agenda Date:** 12/5/2023

**Agenda #:** 15.A.

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AWARDING RESOLUTION ISSUED TO  
PROFESSIONAL MEDICAL & SURGICAL SUPPLY  
FOR EXAMINATION GLOVES  
FOR THE DUPAGE CARE CENTER  
(CONTRACT TOTAL AMOUNT \$68,380.10)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract to Professional Medical & Surgical, for examination gloves, for the period of January 1, 2024 through December 31, 2024, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that said contract is for examination gloves, for the period of January 1, 2024 through December 31, 2024 for the DuPage Care Center, be, and it is hereby approved for issuance of a contract by the Procurement Division to Professional Medical & Surgical, 1917 Garnet Court, New Lenox, Illinois 60451, for a contract total amount not to exceed \$68,380.10, per lowest responsible bid #23-102-DCC.

Enacted and approved this 12th day of December, 2023 at Wheaton, Illinois.

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DEBORAH A. CONROY, CHAIR  
DU PAGE COUNTY BOARD

Attest: \_\_\_\_\_

JEAN KACZMAREK, COUNTY CLERK



Procurement Review Comprehensive Checklist  
Procurement Services Division  
This form must accompany all Purchase Order Requisitions

### SECTION 1: DESCRIPTION

<b>General Tracking</b>		<b>Contract Terms</b>	
FILE ID#: 23-3715	RFP, BID, QUOTE OR RENEWAL #: 23-102-DCC	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$63,380.10
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 12/05/2023	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$253,520.40
	CURRENT TERM TOTAL COST: \$63,380.10	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: INITIAL TERM
<b>Vendor Information</b>		<b>Department Information</b>	
VENDOR: Professional Medical & Surgical Supply	VENDOR #: 11409	DEPT: DuPage Care Center	DEPT CONTACT NAME: Vinit Patel
VENDOR CONTACT: Alan Ferry	VENDOR CONTACT PHONE: 800-648-5190	DEPT CONTACT PHONE #: 630-784-4273	DEPT CONTACT EMAIL: vinit.patel@dupagecounty.gov
VENDOR CONTACT EMAIL: alanf@promedsupply.com	VENDOR WEBSITE:	DEPT REQ #: 7427	
<b>Overview</b>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Furnish and deliver examination gloves for the DuPage Care Center, for the period January 1, 2024 through December 31, 2024, for a total contract amount of \$63,380.10, per bid #23-102-DCC. (ARPA ITEM)			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished By using examination gloves, the spread of communicable disease and bacteria is minimized. Using gloves protects the residents, staff and visitors of the DuPage Care Center from the spread of disease.			

### SECTION 2: DECISION MEMO REQUIREMENTS

DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. LOWEST RESPONSIBLE QUOTE/BID (QUOTE < \$25,000, BID ≥ \$25,000; ATTACH TABULATION)
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

### SECTION 3: DECISION MEMO

STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact.
SOURCE SELECTION	Describe method used to select source.
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action).



SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION	
<b>JUSTIFICATION</b> Select an item from the following dropdown menu to justify why this is a sole source procurement.	
<b>NECESSITY AND UNIQUE FEATURES</b>	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
<b>MARKET TESTING</b>	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
<b>AVAILABILITY</b>	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

SECTION 5: Purchase Requisition Information			
<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Professional Medical & Surgical Supply	Vendor#: 11409	Dept: DuPage Care Center	Division: DuPage Care Center/Clinical
Attn: Alan Ferry	Email: alanf@profmedsupply.com	Attn: Vinit Patel	Email: vinit.patel@dupagecounty.gov
Address: 1917 Garnet Ct.	City: New Lenox	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60451	State: IL	Zip: 60187
Phone: 800-648-5190	Fax: 866-726-7416	Phone: 630-784-4273	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Professional Medical & Surgical Supply	Vendor#: 11409	Dept: DuPage Care Center	Division: DuPage Care Center/Clinical
Attn: Alan Ferry	Email: alanf@profmedsupply.com	Attn:	Email:
Address: 1917 Garnet Ct.	City: New Lenox	Address: 400 N. County Farm Road	City: Wheaton
State: IL	Zip: 60451	State: IL	Zip: 60187
Phone: 800-648-5190	Fax: 866-726-7416	Phone: 630-784-4273	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): January 1, 2024	Contract End Date (PO25): December 31, 2024
Contract Administrator (PO25): Christine Kliebhan			

Purchase Requisition Line Details											
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		examination gloves	FY24	1100	1215	52320	Covid-19- DCC	63,380.10	63,380.10
<b><i>FY is required, assure the correct FY is selected.</i></b>										Requisition Total	\$ 63,380.10

Comments	
HEADER COMMENTS	Provide comments for P020 and P025. Furnish and deliver examination gloves for the DuPage Care Center, for the period January 1, 2024 through December 31, 2024, for a total contract amount of \$63,380.10, per bid #23-102-DCC. (ARPA ITEM)
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. December 5, 2023 Human Services Committee      December 12, 2023 County Board
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.

The following documents have been attached:    ☐ W-9    ☒ Vendor Ethics Disclosure Statement



THE COUNTY OF DUPAGE  
FINANCE - PROCUREMENT  
EXAMINATION GLOVES 23-102-DCC  
BID TABULATION

✓

NO.	ITEM	UOM	QTY	Professional Medical & Surgical Supply		Interboro Packaging Corp.		Uweport		Omni Medical Supply	
				PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
1	Vinyl Exam Gloves, Small	CS	12	\$ 16.95	\$ 203.40	\$ 19.80	\$ 237.60	\$ 24.00	\$ 288.00	\$ 21.35	\$ 256.20
2	Vinyl Exam Gloves, Medium	CS	12	\$ 16.95	\$ 203.40	\$ 19.80	\$ 237.60	\$ 24.00	\$ 288.00	\$ 21.35	\$ 256.20
3	Vinyl Exam Gloves, Large	CS	12	\$ 16.95	\$ 203.40	\$ 19.80	\$ 237.60	\$ 24.00	\$ 288.00	\$ 21.35	\$ 256.20
4	Vinyl Exam Gloves, X-Large	CS	12	\$ 16.95	\$ 203.40	\$ 19.80	\$ 237.60	\$ 24.00	\$ 288.00	\$ 21.35	\$ 256.20
5	Medi Pak Performance, Small	BX	1,120	\$ 2.08	\$ 2,324.00	\$ 2.34	\$ 2,620.80	\$ 2.49	\$ 2,788.80	\$ 2.89	\$ 3,236.80
6	Medi Pak Performance, Medium	BX	12,300	\$ 2.08	\$ 25,522.50	\$ 2.34	\$ 28,782.00	\$ 2.49	\$ 30,627.00	\$ 2.89	\$ 35,547.00
7	Non-sterile Nitrile Performance, Large	BX	12,600	\$ 2.08	\$ 26,145.00	\$ 2.34	\$ 29,484.00	\$ 2.49	\$ 31,374.00	\$ 2.89	\$ 36,414.00
8	Non-sterile Nitrile Performance, X-Large	BX	1,000	\$ 2.08	\$ 2,075.00	\$ 2.34	\$ 2,340.00	\$ 2.49	\$ 2,490.00	\$ 2.89	\$ 2,890.00
9	Non-sterile Latex, X-Large	BX	1,000	\$ 6.50	\$ 6,500.00	\$ 2.90	\$ 2,900.00	\$ 4.49	\$ 4,490.00	No Bid	
GRAND TOTAL					\$ 63,380.10		\$ 67,077.20		\$ 72,921.80		\$ 79,112.60

NOTES

1. Medline amount per case or box has been updated to reflect number of boxes per case or gloves per box.
2. Wilburn Medical Inc. is deemed non-responsive in providing pricing to include shipping and special delivery fees.
3. Shamrock Manufacturing Company is deemed non-responsive in providing a minimum of 120 cases per order.

Bid Opening 9/26/2023 @ 2:30 PM	VC, RJ
Invitations Sent	54
Total Vendors Requesting Documents	7
Total Bid Responses	17

EXAMINATION GLOVES 23-102-DCC

School Health		Omni Medical Supply		The Glove Box		Performance Safety Group		Nashville EMS Supply		Medline	
PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
\$ 26.20	\$ 314.40	\$ 21.35	\$ 256.20	\$ 33.17	\$ 398.04	\$ 49.99	\$ 599.88	\$ 45.00	\$ 540.00	\$ 35.94	\$ 287.52
\$ 26.20	\$ 314.40	\$ 21.35	\$ 256.20	\$ 33.17	\$ 398.04	\$ 49.99	\$ 599.88	\$ 45.00	\$ 540.00	\$ 35.94	\$ 287.52
\$ 26.20	\$ 314.40	\$ 21.35	\$ 256.20	\$ 33.17	\$ 398.04	\$ 49.99	\$ 599.88	\$ 45.00	\$ 540.00	\$ 35.94	\$ 287.52
\$ 26.20	\$ 314.40	\$ 21.35	\$ 256.20	\$ 33.17	\$ 398.04	\$ 49.99	\$ 599.88	\$ 45.00	\$ 540.00	\$ 35.94	\$ 287.52
\$ 3.13	\$ 3,505.60	\$ 3.43	\$ 3,841.60	\$ 3.27	\$ 3,662.40	\$ 3.59	\$ 4,020.80	\$ 3.85	\$ 4,312.00	\$ 14.74	\$ 5,512.76
\$ 3.13	\$ 38,499.00	\$ 3.43	\$ 42,189.00	\$ 3.27	\$ 40,221.00	\$ 3.59	\$ 44,157.00	\$ 3.85	\$ 47,355.00	\$ 14.74	\$ 60,434.00
\$ 3.13	\$ 39,438.00	\$ 3.43	\$ 43,218.00	\$ 3.27	\$ 41,202.00	\$ 3.59	\$ 45,234.00	\$ 3.85	\$ 48,510.00	\$ 14.74	\$ 61,908.00
\$ 3.13	\$ 3,130.00	\$ 3.43	\$ 3,430.00	\$ 3.27	\$ 3,270.00	\$ 3.59	\$ 3,590.00	\$ 3.85	\$ 3,850.00	\$ 14.74	\$ 5,896.00
\$ 6.23	\$ 6,230.00	No Bid		\$ 4.57	\$ 4,570.00	\$ 4.99	\$ 4,990.00	\$ 7.90	\$ 7,900.00	\$ 8.20	\$ 9,118.40
	\$ 92,060.20		\$ 93,703.40		\$ 94,517.56		\$ 104,391.32		\$ 114,087.00		\$ 144,019.24

Ebisu Supplies LLC		Omnicare Group		Medfirst Healthcare Supply		Sida Medical		TLB Holdings, Inc.	
PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
\$ 25.65	\$ 307.80	\$ 42.00	\$ 504.00	\$ 31.00	\$ 372.00	\$ 20.80	\$ 249.60	\$ 95.00	\$ 1,140.00
\$ 25.65	\$ 307.80	\$ 42.00	\$ 504.00	\$ 31.00	\$ 372.00	\$ 20.80	\$ 249.60	\$ 95.00	\$ 1,140.00
\$ 25.65	\$ 307.80	\$ 42.00	\$ 504.00	\$ 31.00	\$ 372.00	\$ 20.80	\$ 249.60	\$ 95.00	\$ 1,140.00
\$ 25.65	\$ 307.80	\$ 42.00	\$ 504.00	\$ 31.00	\$ 372.00	\$ 20.80	\$ 249.60	\$ 95.00	\$ 1,140.00
\$ 7.96	\$ 8,915.20	\$ 6.00	\$ 6,720.00	\$ 9.08	\$ 10,169.60	\$ 10.90	\$ 12,208.00	\$ 17.75	\$ 19,880.00
\$ 7.96	\$ 97,908.00	\$ 6.00	\$ 73,800.00	\$ 9.08	\$ 111,684.00	\$ 10.90	\$ 134,070.00	\$ 17.75	\$ 218,325.00
\$ 2.55	\$ 32,130.00	\$ 6.00	\$ 75,600.00	\$ 9.08	\$ 114,408.00	\$ 10.90	\$ 137,340.00	\$ 17.75	\$ 223,650.00
\$ 2.55	\$ 2,550.00	\$ 6.00	\$ 6,000.00	\$ 9.08	\$ 9,080.00	\$ 10.90	\$ 10,900.00	\$ 17.75	\$ 17,750.00
\$ 2.55	\$ 2,550.00	\$ 6.00	\$ 6,000.00	\$ 5.19	\$ 5,190.00	No Bid		No Bid	
	\$ 145,284.40		\$ 170,136.00		\$ 252,019.60		\$ 295,516.40		\$ 484,165.00

EXAMINATION GLOVES 23-102-DCC

**SECTION 9 - MANDATORY FORM  
EXAMINATION GLOVES 23-102-DCC**

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Full Name of Bidder	Professional Medical & Surgical Supply, Inc.		
Main Business Address	1917 Garnet Ct.		
City, State, Zip Code	New Lenox, IL 60451		
Telephone Number	800-648-5190	Email Address	alanf@promedsupply.com
Bid Contact Person	Alan Ferry		

The undersigned certifies that he is:

☐ the Owner/Sole Proprietor     
 ☐ a Member authorized to sign on behalf of the Partnership     
 ☒ an Officer of the Corporation     
 ☐ a Member of the Joint Venture

Herein after called the Bidder and that the members of the Partnership or Officers of the Corporation are as follows:

Terry Barnes (President or Partner)      \_\_\_\_\_ (Vice-President or Partner)  
 \_\_\_\_\_ (Secretary or Partner)      \_\_\_\_\_ (Treasurer or Partner)

Further, the undersigned declares that the only person or parties interested in this bid as principals are those named herein; that this bid is made without collusion with any other person, firm or corporation; that he has fully examined the proposed forms of agreement and the contract specifications for the above designated purchase, all of which are on file in the office of the Procurement Officer, DuPage County, 421 North County Farm Road, Wheaton, Illinois 60187, and all other documents referred to or mentioned in the contract documents, specifications and attached exhibits, including

Addenda No. 1, \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ issued thereto.

Further, the undersigned proposes and agrees, if this bid is accepted, to provide all necessary machinery, tools, apparatus, and other means of construction, including transportation services necessary to furnish all the materials and equipment specified or referred to in the contract documents in the manner and time therein prescribed.

Further, the undersigned certifies and warrants that he is duly authorized to execute this certification/affidavit on behalf of the Bidder and in accordance with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Bidder and is true and accurate.

Further, the undersigned certifies that the Bidder is not barred from bidding on this contract as a result of a violation of either 720 Illinois Compiled Statutes 5/33 E-3 or 5/33 E-4, bid rigging or bid-rotating, or as a result of a violation of 820 ILCS 130/1 et seq., the Illinois Prevailing Wage Act.

The undersigned certifies that he has examined and carefully prepared this bid and has checked the same in detail before submitting this bid, and that the statements contained herein are true and correct.

If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)

Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

**CONTRACT ADMINISTRATION INFORMATION:**

CORRESPONDENCE TO CONTRACTOR:		REMIT TO CONTRACTOR:	
NAME	Professional Medical	NAME	Professional Medical
CONTACT	Alan Ferry	CONTACT	Alan Ferry
ADDRESS	1917 Garnet Ct	ADDRESS	1917 Garnet Ct.
CITY ST ZIP	New Lenox, IL. 60451	CITY ST ZIP	New Lenox, IL. 60451
TX	800-648-5190	TX	800-648-5190
FX	816-726-7416	FX	816-726-7416
EMAIL	alanf@promedsupply.com	EMAIL	alanf@promedsupply.com
COUNTY BILL TO INFORMATION:		COUNTY SHIP TO INFORMATION:	
DuPage County Care Center 400 North County Farm Road Wheaton, IL 60187 TX: (630) 407-4273		DuPage County Care Center 400 North County Farm Road Wheaton, IL 60187 TX: (630) 407-4273 EMAIL: vinit.patel@dupageco.org	

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DESTINATION, DELIVERED AND INSTALLED  
(FREIGHT INCLUDED IN PRICE)



The County of DuPage  
Finance – Procurement 3-400  
421 North County Farm Road  
Wheaton, Illinois 60187-3978

NO	ITEM	MANUFACTURER	P/N	UOM	QTY	PRICE	EXTENDED PRICE
1	Vinyl Exam Gloves, Small	International Direct	600-VIII-CS	CS	12	\$ 16.95	\$ 203.40
2	Vinyl Exam Gloves, Medium	International Direct	600-VII2-CS	CS	12	\$ 16.95	\$ 203.40
3	Vinyl Exam Gloves, Large	International Direct	600-VII3-CS	CS	12	\$ 14.95	\$ 203.40
4	Vinyl Exam Gloves, X-Large	International Direct	600-VII4-CS	CS	12	\$ 16.95	\$ 203.40
5	Medi Pak Performance, Small	International Direct	600-NW11	BX	1,120	\$ 2.075	\$ 2,324.00
6	Medi Pak Performance, Medium	International Direct	600-NW12	BX	12,300	\$ 2.075	\$ 25,522.50
7	Non-sterile Nitrile Performance, Large	International Direct	600-NW13	BX	12,600	\$ 2.075	\$ 26,145.00
8	Non-sterile Nitrile Performance, X-Large	International Direct	600-NW14	BX	1,000	\$ 2.075	\$ 2,075.00
9	Non-sterile Latex X-Large, McKesson #14-320	International Direct	600-1114	BX	1,000	\$ 6.50	\$ 6,500.00
GRAND TOTAL							\$ 63,380. <sup>10</sup>
GRAND TOTAL (In words)		Sixty-three thousand, three hundred eighty dollars and ten cents.					





The County of DuPage  
Finance – Procurement 3-400  
421 North County Farm Road  
Wheaton, Illinois 60187-3978

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EXAMINATION GLOVES#23-102-DCC  
ADDENDUM 1

1. The County has included an additional glove within the spec. The Bid Form Pricing has been updated. When returning your submittal, include Bid Form Pricing located on page three (3).

McKesson - XL Latex Gloves #14-320

Non-Sterile Latex Standard Cuff Length Smooth Ivory

2. Advise if the County intend to award this bid to one (1) vendor who bids most or all items.

Answer: The County may award one (1) or multiple vendors if it is in the best interest of the County. In the past, the county has awarded one (1) vendor.

3. Although it is noted in the bid that orders will be placed on an as-needed basis, based on previous ordering history, provide an estimate of how often the County is intending to order.

Answer: Delivery of Gloves shall occur on an as-needed basis per the department's request. Quantities listed are provided as estimate usage and not a guaranteed of shipment. There will be multiple shipments throughout the contract, not a one-time delivery.

4. Provide the previous Bid Tab / Pricing.

Answer: The County issued a bid for Vinyl Gloves in July 2020. The Bid Tab is located on page 3.

5. Provide The County's current makes / models of gloves you are currently purchasing and price?

Answer: International Direct, (Vinyl Exam Gloves, Powder Free, Seamless, Non-Sterile, Beaded Cuff, Ambidextrous ) Part#500-V111, 500-V112, 500-V113, 500-V114, also McKesson 46541300, McKesson 65021300, McKesson 14-654, McKesson 14-620

6. Provide specs of Nitrile Exam Gloves the County is requesting.

Answer:

- McKesson Confiderm® 3.5C Nitrile Exam Gloves (Small, Medium, Large, EX-Large)
- Powder-free
- Tested for use with Chemotherapy Drugs using ASTM D6978-05. Gloves used for protection against chemotherapy drug exposure must be selected specifically for the type of glove being used.
- Textured fingertips provide excellent tactile sensitivity and dexterity.
- Improved conformability provides superior fit and extended wear comfort.
- Reduces hand fatigue.
- Blue



The County of DuPage  
Finance – Procurement 3-400  
421 North County Farm Road  
Wheaton, Illinois 60187-3978

- 
- Beaded Cuff
  - Non-Sterile
  - Ambidextrous
  - Single use only
  - Not made with natural rubber latex.

7. Is 2.5mil an acceptable thickness?

Answer: The acceptable thickness range is between 2.5 mil to 4 mil.

8. What is the mil thicknessing the County is needing for the glove?

Answer: 2.5 mil to 4 mil Range

9. Does the County want gloves to be chemo rated?

Answer: No

10. The items numbers may be incorrect on the items you listed. Provide the correct numbers for McKesson.

Answer: The thickness of the gloves is 4.5C. The corrected product number is listed below.

Small – #14-654C

Medium – #14-656C

Large – #14-658C

X-Large - #14-660C

X-Large - #14-320

11. Confirm that all gloves requested are required to be Medical Exam Grade.

Answer: Yes



## Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Date: 9/21/23

Bid/Contract/PO #:

Company Name: Professional Medical & Surgical	Company Contact: Alan Ferry
Contact Phone: 800-1048-5190	Contact Email: alanf@promedsupply.com

### The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of \$25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

☒ NONE (check here) - If no contributions have been made

Recipient	Donor	Description (e.g. cash, type of item, in-kind services, etc.)	Amount/Value	Date Made

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

☒ NONE (check here) - If no contacts have been made

Lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid	Telephone	Email

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

### Continuing disclosure is required, and I agree to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text for the county's ethics and procurement policies and ordinances are available at:

<https://www.dupageco.org/CountyBoard/Policies>

I hereby acknowledge that I have received, have read, and understand these requirements.

Signature on File

Authorized Signature

Printed Name

Title

Date

Alan Ferry  
COO  
9.21.23

Attach additional sheets if necessary. Sign each sheet and number each page. PAGE 1 OF 1 (total number of pages)



## Care Center Requisition \$30,000 and Over

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
www.dupagecounty.gov

---

**File #:** HS-P-0002-24

**Agenda Date:** 12/5/2023

**Agenda #:** 15.B.

---

AWARDING RESOLUTION ISSUED TO  
MUSIC SPEAKS, LLC  
TO PROVIDE MUSIC THERAPY  
FOR THE DUPAGE CARE CENTER  
(CONTRACT TOTAL AMOUNT \$58,701.00)

WHEREAS, proposals have been taken and processed in accordance with County Board policy; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract to Music Speaks, LLC, to provide music therapy services, for the period of January 12, 2024 through January 11, 2025, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that said contract is to provide music therapy services, for the period of January 12, 2024 through January 11, 2025, for the DuPage Care Center, be, and it is hereby approved for issuance of a contract by the Procurement Division to Music Speaks, LLC, Post Office Box, 986, Marion, Iowa, 53202, for a contract total amount not to exceed \$58,701.00, per RFP #21-087-CARE, second of three (3) one (1) year optional renewal.

Enacted and approved this 12th day of December, 2023 at Wheaton, Illinois.

---

DEBORAH A. CONROY, CHAIR  
DU PAGE COUNTY BOARD

Attest: \_\_\_\_\_

JEAN KACZMAREK, COUNTY CLERK



Procurement Review Comprehensive Checklist  
Procurement Services Division  
This form must accompany all Purchase Order Requisitions

### SECTION 1: DESCRIPTION

General Tracking		Contract Terms	
FILE ID#: 23-3780	RFP, BID, QUOTE OR RENEWAL #: 21-087-CARE	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$47,124.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 12/05/2023	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$220,825.00
	CURRENT TERM TOTAL COST: \$58,701.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: SECOND RENEWAL
Vendor Information		Department Information	
VENDOR: Music Speaks, LLC	VENDOR #: 20683	DEPT: DuPage Care Center/Recreation	DEPT CONTACT NAME: Susan Coblentz
VENDOR CONTACT: Stephanie Johnson	VENDOR CONTACT PHONE: 563-249-5781	DEPT CONTACT PHONE #: 630-784-4302	DEPT CONTACT EMAIL: Susan.coblentz@dupagecounty.gov
VENDOR CONTACT EMAIL: stephanie@musicspeakstherapy.com	VENDOR WEBSITE:	DEPT REQ #: 7428	
Overview			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Music Therapy Services for the residents at the DuPage Care Center, for the period 01/12/24 through 01/11/25, for a contract amount not to exceed \$58,701.00, under RFP renewal #21-087-CARE, second of three (3) one (1)-year optional renewal.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Music Therapy is an established healthcare profession that uses music to address physical, emotional, cognitive, and social needs of individuals of all ages. Music is used with elderly persons to increase or maintain their level of physical, mental and social/emotional functioning. The sensory and intellectual stimulation of music can help maintain a person's quality of life. With the advancements in medicine and the increased number of independent and assisted living facilities available to residents that fall into that category, the long term care industry is caring for a population that is more medically compromised. Residents are less able to meet their own needs independently and are requiring more assistance to do so. IDPH Regulations require stimulation with lower functioning residents. (DuPage Care Center Foundation Funded)			

### SECTION 2: DECISION MEMO REQUIREMENTS

DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
RENEWAL	
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

### SECTION 3: DECISION MEMO

STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact.
SOURCE SELECTION	Describe method used to select source.
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action).

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
<b>MARKET TESTING</b>	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
<b>AVAILABILITY</b>	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

## SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Music Speaks, LLC	Vendor#: 20683	Dept: DuPage Care Center	Division: Recreation
Attn: Stephanie Johnson	Email: stephanie@musicspeakstherapy.com	Attn: Susan Coblenz	Email: susan.coblenz@dupagecounty.gov
Address: PO Box 986	City: Marion	Address: 400 N. County Farm Road	City: Wheaton
State: IA	Zip: 53202	State: IL	Zip: 60187
Phone: 563-249-5781	Fax:	Phone: 630-784-4302	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Music Speaks, LLC	Vendor#: 20683	Dept: DuPage Care Center	Division: Recreation
Attn: Stephanie Johnson	Email: stephanie@musicspeakstherapy.com	Attn: Susan Coblenz	Email: susan.coblenz@dupagecounty.gov
Address: 315 E. 5th Street	City: Waterloo	Address: 400 N. County Farm Road	City: Wheaton
State: IA	Zip: 50703	State: IL	Zip: 60187
Phone: 563-249-5781	Fax:	Phone: 630-784-4302	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): January 12, 2024	Contract End Date (PO25): January 11, 2025
Contract Administrator (PO25): Christine Kliebhan			

Purchase Requisition Line Details											
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		music therapy	FY24	5000	2120	53090	DCCFMTG2 2	53,809.25	53,809.25
2	1	EA		music therapy	FY25	5000	2120	53090	DCCFMTG2 2	4,891.75	4,891.75
<b><i>FY is required, assure the correct FY is selected.</i></b>										Requisition Total	\$ 58,701.00

Comments	
HEADER COMMENTS	Provide comments for P020 and P025. Music Therapy Services for the residents at the DuPage Care Center, for the period 01/12/24 through 01/11/25, for a contract amount not to exceed \$58,701.00 under RFP renewal #21-087-CARE, second of three (3) one (1)-year optional renewal.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. 12/05/23 HS Committee    12/12/2023 County Board
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.

The following documents have been attached:    ☐ W-9    ☒ Vendor Ethics Disclosure Statement



## AMENDMENT FOR CONTRACT RENEWAL

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Music Speaks LLC, located at PO Box 986, Marion, IA 52302, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #21-087-CARE which became effective on 01/12/2022 and which will expire 01/11/2024. The contract is subject to a second of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature, and shall terminate on 01/11/2025.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

### CONTRACTOR

### THE COUNTY OF DUPAGE

  
\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

Stephanie Johnson  
\_\_\_\_\_  
PRINTED NAME

Donna Weidman  
\_\_\_\_\_  
PRINTED NAME

Chief Executive Officer  
\_\_\_\_\_  
PRINTED TITLE

Buyer II  
\_\_\_\_\_  
PRINTED TITLE

11/29/23  
\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE





THE COUNTY OF DUPAGE  
FINANCE - PROCUREMENT  
MUSIC THERAPY 21-087-CARE  
BID TABULATION

Criteria	Available Points	MUSIC SPEAKS
PROPOSED SERVICES	40	39
COMPLIANCE WITH RFP INSTRUCTION	20	20
REFERENCES	10	10
PRICE (Scored by Procurement)	30	30
Total	100	99

Fee and Rate Proposal	\$ 55,331.12
Percentage of points	100%
Points awarded (wtd against lowest price)	30

NOTES

Bid Opened On 11/19/2021, 2:00 CST by	NE, DW
Invitations Sent	11
Total Requesting Documents	0
Total Bid Responses Received	1



**Proposal: Music Therapy Services with DuPage Care Center**  
**Music Speaks, LLC**  
**Invitation #: 21-087-CARE**

## ***Pricing Proposal:***

### **Service of direct care music therapist to DPCC:**

The weekly rate for music therapy services includes: treatment sessions, data collection and documentation, session preparation, staff and family communication, staff music therapy education, and Music Speaks' administration. Further services not listed here or in proposal packet may be discussed at the time of need. Music Speaks requests ongoing conversations about how the music therapist(s) will be use their time.

### **Compensation:**

	<b><u>RFP/Current Proposed Services</u></b>	<b><u>Proposed Services</u></b>
<b><u>Pricing</u></b>	<ul style="list-style-type: none"> <li>• 2022 - \$1,064.06/wk</li> <li>• 2023 - \$1,095.98/wk</li> <li>• 2024 - \$1,128.86/wk</li> <li>• 2025 - \$1,162.73/wk</li> </ul>	<ul style="list-style-type: none"> <li>• 2022 - \$1,064.06/wk</li> <li>• 2023 - \$1,095.98/wk</li> <li>• 2024 - \$1,128.86/wk</li> <li>• 2025 - \$1,162.73/wk</li> </ul>
<b><u>Total resident contact time per week</u></b>	8 hrs 20 min	8 hrs 30 min
<b><u># of residents served</u></b>	35-40 residents per year	80-100 residents per year (potential)
<b><u>Sessions/ week</u></b>	6-8 groups/wk 1-2 1:1 sessions/wk	10-12 sessions/ wk (groups + 1:1)
<b>Group Referrals</b>	Same residents each week	Same residents each week; more emphasis on re-eval quarterly for appropriateness
<b>Group session duration</b>	50 min	50 min
<b>1:1 Referrals</b>	1-2 same residents each week.	Triage referrals based on resident needs for the day. Can be same or different referrals each week.
<b>Individual session duration</b>	50 min	30-50 min average, though can vary more greatly for clinical need.



Proposal: Music Therapy Services with DuPage Care Center  
Music Speaks, LLC  
Invitation #: 21-087-CARE

***Pricing Proposal Continued:***

- In the event the facility is inclined to cancel a week of services at any time, rescheduling or virtual service will be encouraged and agreed upon by both parties to maintain treatment consistency. If group sessions are cancelled, 1:1 sessions may also take that time during the week. Sessions that are successfully rescheduled and completed prior to the next scheduled session will not incur any additional charges. Service that cannot be rescheduled or held virtually may be cancelled with a minimum of 24 hours notice for a \$700/ week time slot reservation fee. Full rate will be charged for cancellations made with less than 24 hour notice. No charges will incur for sessions cancelled by the Music Therapy Provider or if a scheduled session falls on a federal holiday. Music Speaks would welcome further discussion on this topic.

**SECTION 8 - PROPOSAL FORM**  
**MUSIC THERAPY 21-087-CARE**  
(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Full Name of Offeror	Music Speaks, LLC
Main Business Address	315 E 5th Street
	STE 202
City, State, Zip Code	Waterloo, IA 50703
Telephone Number	(563) 249-5781
Fax Number	(866) 283-3639
Proposal Contact Person	Stephanie Johnson
Email Address	stephanie@musicspeakstherapy.com

The undersigned certifies that she is:  
☒ the Owner/Sole Proprietor      ☐ a Member of the Partnership      ☐ an Officer of the Corporation      ☐ a Member of the Joint Venture

herein after called the Offeror and that the members of the Partnership or Officers of the Corporation are as follows:

<u>Stephanie Johnson</u> (President or Partner)	<u>N/A</u> (Vice-President or Partner)
<u>N/A</u> (Secretary or Partner)	<u>N/A</u> (Treasurer or Partner)

Further, the undersigned declares that the only person or parties interested in this Proposal as principals are those named herein; that this Proposal is made without collusion with any other person, firm or corporation; that he has fully examined the proposed forms of agreement and the contract specifications for the above designated purchase, all of which are on file in the office of the Procurement Manager, DuPage Center, 421 North County Farm Road, Wheaton, Illinois 60187, and all other documents referred to or mentioned in the contract documents, specifications and attached exhibits, including Addenda No. N/A, \_\_\_\_\_, and \_\_\_\_\_ issued thereto;

Further, the undersigned proposes and agrees, if this Proposal is accepted, to provide all necessary machinery, tools, apparatus and other means of construction, including transportation services necessary to furnish all the materials and equipment specified or referred to in the contract documents in the manner and time therein prescribed. Further, the undersigned certifies and warrants that he is duly authorized to execute this certification/affidavit on behalf of the Offeror and in accordance with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Offeror and is true and accurate.

Further, the undersigned certifies that the Offeror is not barred from proposing on this contract as a result of a violation of either 720 Illinois Compiled Statutes 5/33 E-3 or 5/33E-4, proposal rigging or proposal-rotating or as a result of a violation of 820 ILCS 130/1 et seq., the Illinois Prevailing Wage Act.

The undersigned certifies that he has examined and carefully prepared this proposal and has checked the same in detail before submitting this proposal, and that the statements contained herein are true and correct.

If a Corporation, the undersigned further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed, nor modified and that the same remain in full force and effect. (Offeror may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)

Further, the offeror certifies that he has provided services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the offeror, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the cost schedule.

**PROPOSAL AWARD CRITERIA**

This proposal will be awarded to the most responsive, responsible vendor meeting specifications based upon the highest score compiled during evaluation of the proposals outlined in the selection process.

The Contractor agrees to provide the service described above and in the contract specifications under the conditions outlined in attached documents for the amount stated.

**Signature on File**

X \_\_\_\_\_  
(Signature and Title)

CORPORATE SEAL  
(If available)

**PROPOSAL MUST BE SIGNED FOR CONSIDERATION**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ AD, 2020

\_\_\_\_\_

My Commission Expires: \_\_\_\_\_  
(Notary Public)



## Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Date: \_\_\_\_\_

Bid/Contract/PO #: \_\_\_\_\_

Company Name: <b>Music Speaks, LLC</b>	Company Contact: <b>Stephanie Johnson</b>
Contact Phone: <b>563-249-5781</b>	Contact Email: <b>stephanie@musicspeakstherapy.com</b>

### The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of \$25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

☒ **NONE (check here) - If no contributions have been made**

Recipient	Donor	Description (e.g. cash, type of item, in-kind services, etc.)	Amount/Value	Date Made

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

☒ **NONE (check here) - If no contacts have been made**

Lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid	Telephone	Email

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

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- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text for the county's ethics and procurement policies and ordinances are available at:

<https://www.dupageco.org/CountyBoard/Policies/>

I hereby acknowledge \_\_\_\_\_ understand these requirements.

Authorized Signature

Printed Name

**Stephanie Johnson**

Title

**Chief Executive Officer**

Date

**11/29/23**

Attach additional sheets if necessary. Sign each sheet and number each page. **PAGE 1 OF 1 (total number of pages)**



## Grant Proposal Notifications

421 N. COUNTY FARM  
ROAD  
WHEATON, IL 60187  
[www.dupagecounty.gov](http://www.dupagecounty.gov)

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**File #:** 24-0054

**Agenda Date:** 12/5/2023

**Agenda #:** 9.C.1.

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## Grant Proposal Notification

GPN Number: 061-23  
(Completed by Finance Department)

Date of Notification: 11/17/2023  
(MM/DD/YYYY)

Parent Committee Agenda Date: 12/05/2023  
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: \_\_\_\_\_  
(MM/DD/YYYY)

Name of Grant: DuPage Care Center Foundation Coordinator Grant PY24

Name of Grantor: DuPage Care Center Foundation

Originating Entity: \_\_\_\_\_  
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: DuPage Care Center

Department Contact: Shauna Berman, Assistant Administrator, x4261  
(Name, Title, and Extension)

Parent Committee: Health & Human Services

Grant Amount Requested: \$ 30,128.00

Type of Grant: Project  
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: ☐ Yes ☒ No

Source of Grant: ☐ Federal ☐ State ☒ Private ☐ Corporate

If Federal, provide CFDA: \_\_\_\_\_ If State, provide CSFA: \_\_\_\_\_





## Grant Proposal Notification

1. Justify the department's need for this grant.

Grant allows the facility the needed internal and external outreach needed to support and raise funds for the DuPage Care Center Foundation. This allows a direct impact on quality care and services provided to the residents and impacts resident quality of life.

2. Based on the County's Strategic Plan, which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Quality of Life-supports the operational strategy to provide the best possible living environment for the residents that reside at the DuPage Care Center.

3. What is the period covered by the grant?

12/01/2023 to: 11/30/2024  
(MM/DD/YYYY) (MM/DD/YYYY)

- 3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. \_\_\_\_\_ and \_\_\_\_\_  
(MM/YY) (Duration)

4. Will the County provide "seed" or startup funding to initiate grant project? (Yes or No)

No

- 4.1. If yes, please identify the Company-Accounting Unit used for the funding

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront) ☒

5.2. After expenditure of costs (reimbursement-based) ☐

## Grant Proposal Notification

6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$59,471.36 Percentage covered by grant 39.58%

6.1.2. Total fringe benefits \$16,640.74 Percentage covered by grant 39.58

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

1200-2080

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temporary \_\_\_\_\_

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit?                       
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

## Grant Proposal Notification

6.3. Does the grant award require the positions to be retained beyond the grant term? (Yes or No)

No

6.3.1. If yes, please answer the following:

6.3.1.1. How many years beyond the grant term?

6.3.1.2. What Company-Accounting Unit(s) will be used?

6.3.1.3. Total annual salary

6.3.1.4. Total annual fringe benefits

7. Does the grant allow for direct administrative costs? (Yes or No)

No

7.1. If yes, please answer the following:

7.1.1. Total estimated direct administrative costs for project

7.1.2. Percentage of direct administrative costs covered by grant

7.1.3. What percentage of the grant total is the portion covered by the grant

8. What percentage of the grant funding is non-personnel cost / non-direct administrative cost?

0%

9. Are matching funds required? (Yes or No):

No

9.1. If yes, please answer the following:

9.1.1. What percentage of match funding is required by granting entity?

9.1.2. What is the dollar amount of the County's match?

## Grant Proposal Notification

---

9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? \_\_\_\_\_

10. What amount of funding is already allocated for the project? \$0.00

10.1. If allocated, in what Company-Accounting Unit are the funds located? \_\_\_\_\_

10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): No

11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$30,128.00