

INTERGOVERNMENTAL RELATIONS COMMITTEE

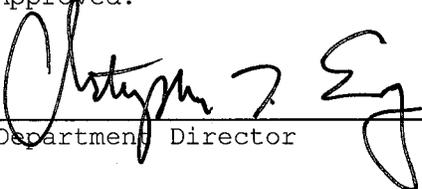
12-0355R

RESOLUTION ENTERING INTO AN AGREEMENT ACCEPTING A GRANT OF \$65,924.00 FROM SENIOR SERVICE AMERICA, INC. TO OPERATE THE SENIOR AIDES PROGRAM FROM JULY 1, 2012 THROUGH SEPTEMBER 30, 2012.

CITY PROPOSAL:

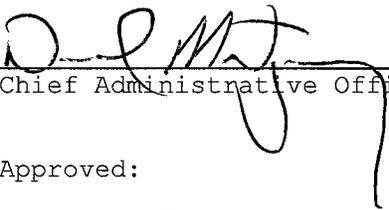
RESOLVED, that proper city officials are hereby authorized to enter into an agreement, substantially in the form of that on file with the office of the city clerk as Public Document No. _____, with senior service America, inc. (ssai) to serve Duluth residents age 55 and older with work experience training and services in the amount of \$65,924.00 for the period of July 1, 2012 through September 30, 2012. Monies received shall be deposited into Senior Programs Fund 270, Grants Division Agency 031, SCSEP SSAI Federal Organization 6330.

Approved:

DA


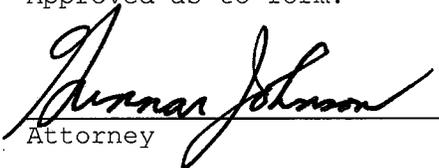
Department Director

Approved for presentation to council:



Chief Administrative Officer

Approved as to form:



Attorney

Approved:



Auditor

DWD DRH:met 07/06/2012

STATEMENT OF PURPOSE: This resolution is to authorize city officials to accept a grant of \$65,924.00 from the Senior Service America, Inc. (SSAI) to provide

funds to service Duluth residents age 55 and over with work experience training and employment services.

The grant requires a local contribution of \$8,641.00. This entire amount will be provided through in-kind contributions of local agencies and city supervisory time and/or indirect costs. Monies received shall be deposited into Senior Programs Fund 270, Grants Division Agency 031, SCSEP SSAI Federal Organization 6330.

These funds are allocated under Title V of the Older American Act. The fund will provide part-time work experience and training for a minimum of 32 senior citizens. The grant period is July 1, 2012 through September 30, 2012. Although this is normally a 12 month contract, the U.S. Department of Labor has split the 'program year' into two parts. This contract is for the first part, running for three months.

Senior Service America, Inc. (SSAI)

SCSEP Sponsor Agreement

Grant Period July 1, 2012 – September 30, 2012

Who we are – a National Grantee for Title V of the Older Americans Act

Senior Service America, Inc. (SSAI)
8403 Colesville Road, Suite 1200
Silver Spring, Maryland 20910-3314

This agreement refers to Senior Service America, Inc. as *we* or *us*.

Who you are – a Subgrantee/Sponsor

City of Duluth Workforce Development
332 City Hall
411 West First Street
Duluth, MN 55802-1102

This agreement refers to City of Duluth Workforce Development as *Sponsor*.

This Agreement (Agreement) is between Senior Service America, Inc. (SSAI) and City of Duluth Workforce Development (Sponsor).

SSAI is a national grantee under the Senior Community Service Employment Program (SCSEP) administered by the U.S. Department of Labor (DOL) and has made application to DOL in response to the SCSEP Solicitation for Grant Application (SGA), Funding Opportunity Number SGA/DFA PY-11-04, for grant funds under Title V of the Older Americans Act (OAA), as amended, Pub. L. No. 109-365.

The DOL has advised SSAI that the grant funding will be divided into two separate periods for PY2012, mainly July 1, 2012 through September 30, 2012 and October 1, 2012 through June 30, 2013.

The term of this grant agreement is for the period July 1, 2012 through September 30, 2012.

SSAI and Sponsor parties require a separate Agreement and separate, proportional budget for the period of this grant, it is therefore agreed:

1. SSAI and Sponsor adopt and agree to each and every substantive term and condition contained in the parties' SCSEP Sponsor Agreement currently in effect and due to expire by its own terms on June 30, 2012, excluding Paragraph I. sections "Period of this Agreement", "Funding for this agreement", and "What you agree to do";

Senior Service America, Inc. (SSAI)

2. Such adopted and agreed to terms and conditions specifically include but are not limited to the document and DOL regulations compliance sections, reporting section, recordkeeping section, spending and enrollment section, liability section, non-Federal match section, program staffing, data breach section and Assurances and Certifications section, and Cancellation section;
3. DOL TEGL 16-11, 2012 Federal Poverty Guidelines, effective January 26, 2012, is an added regulation that is made part of this agreement.

The terms of this agreement

I. Period of this Agreement: July 1, 2012 to September 30, 2012.

You must fulfill your duties within this time period unless we both agree in writing to extend the deadline.

Funding for this agreement: \$65,924 Federal, that we provide.

8,641 Non-Federal, that you provide. (20 CFR 41.809)

\$74,565 Total funding.

Of the Federal funds that we provide, you must spend at least

\$58,186 for SCSEP Wages and Fringe Benefits. The maximum to be spent on Administrative Costs is \$5,346 (of \$7,738 funds available for Administrative and Program/Other Costs). At your discretion, and in the best interests of the SCSEP Program, the balance of the Federal funds may be spent as follows:

1. on additional Participant Wages and Fringe Benefits (PWFB);
or
2. on Program/Other Costs (not Participant Wages and Fringe Benefits); or
3. on a maximum of \$5,346 for Administrative Costs; or,
4. on any combination of the three (3) options above.

You agree to provide the non-Federal share in the amount of \$8,641, and you agree to use this amount to support the SCSEP Program. You have agreed to do this voluntarily and you acknowledge that this obligation is not a condition of entering into this subgrant.

Senior Service America, Inc. (SSAI)

Funding for this Agreement may be changed by SSAI. SSAI may modify the budget with our Agreement Modification document. See *SSAI SCSEP Program Policy and Procedure Manual*.

What you agree to do:

According to Title 20 of the Code of Federal Regulations, Part 641, Subpart C-Grant Operations, as amended, and subsequent to the Department of Labor mandated freeze on SCSEP new participant enrollments from July 15 – September 30, 2012, you agree to serve at least 75% of 32 eligible persons during the program period. You agree to assign these eligible, low-income persons 55 years of age and older into part-time community service positions at rates and hours set forth in the Older Americans Act and consistent with their assessments and individual employment plans.

If you are able to enroll, you are to give priority enrollment to individuals who are veterans and eligible spouses of veterans, 65 years of age or older; or have a disability; have limited English proficiency or low literacy skills; reside in a rural areas; have low employment prospects; have failed to find employment after utilizing services provided under Title I of the Workforce Investment Act; or are homeless or at risk for homelessness. Attached is a listing of counties in your state to be served by you (Attachment 1).

You agree to fully expend but not exceed the PWFB funds available in the budget outlined on page 2 of this agreement, or amended budget, and to achieve the program outcomes (enrollment and unsubsidized employment) as reflected in your Program Performance Plan (PPP) which you are required to create at the start of the program year and update after each pay period.

Complete all follow-up activity for participants and document in the SSAI webtools.

Respond timely and thoroughly to performance review reports and technical assistance plans.

Attend conferences and training as designated by SSAI.

Require subcontractors you use to follow the terms of this agreement.

SSAI Financial Forms:

SSAI / SCSEP financial forms for this three-month subgrant can be found on the SSAI website (For Our Partners).

Senior Service America, Inc. (SSAI)

AGREED to:

City of Duluth Workforce Development

By

(Signature)

Name

(Print)

(Title)

(Date)

(E-mail Address)

Senior Service America, Inc.

By

(Signature)

Name

Anthony R. Sarmiento
President and Executive Director
Senior Service America, Inc.

(Date)

City of Duluth

ATTEST FOR THE CITY:

Mayor

City Clerk

Approved:

Manager, Workforce Development

Approved:

Auditor

Approved as to form:

City Attorney

Senior Service America, Inc. (SSAI)

Sponsor Counties to be Served

Program Year 2012a

City of Duluth Workforce Development

Project No. 116

You are authorized to serve the counties listed below . Next to each county is the number of authorized positions. A modified position is the basis for calculating the following: the number of participants served; the number of participants who must transition to unsubsidized employment; and other performance goals specified in your SCSEP Sponsor Agreement.

St. Louis County - Minnesota	32
Total Authorized (1 county)	32
Total Modified	32

Sponsor Budget Proposal *

Grant Period July 1, 2012 – September 30, 2012

Sponsor Name: City of Duluth Workforce Development
Project No.: 116

FEDERAL SHARE		
Participant Wages	_____	
Participant Fringe Benefits		
FICA	_____	
Unemployment / Disability, if applicable	_____	
Worker's Compensation	_____	
Physical Exam	_____	
Total Participant Wages / Fringe Benefits		\$ _____ -
Program - Other Costs		
Transportation	_____	
Training	_____	
Incidentals	_____	
Subgrantee Staff Cost	_____	
Other Program Costs	_____	
Total Program / Other Costs		\$ _____ -
Project Administration		
Subgrantee Staff Cost	_____	
Other Admn. Costs	_____	
Total Project Admin.		\$ _____ -
	TOTAL FEDERAL SHARE:	\$ _____ -
NON-FEDERAL SHARE		
Cash Component	_____	
Indirect Component	_____	
In-Kind Component	_____	
	TOTAL NON-FEDERAL SHARE:	\$ _____ -
<p>I hereby certify (a.) this budget is true in all aspects; (b.) all non-federal share of costs will be made in accordance with the agreement; (c.) receipts, records, and accounts as required by the agreement and the U.S. Department of Labor rules and regulations will be sufficient to document these costs for which credit is claimed and are available for inspection; (d.) these costs will be from non-federal sources with the exception of general revenue-sharing funds; (e.) these costs will not be claimed on any other federal programs.</p>		
Name and Title of Auth. Official		
Signature and Date		

*AN ELECTRONIC VERSION OF THIS FORM IS AVAILABLE ON THE SSAI WEBSITE (FOR OUR PARTNERS) OR SEND REQUEST TO sa1funds@ssa-i.org.