

**RESOLUTION NO. 2020-02-011R**

**A RESOLUTION ACCEPTING A CENSUS IMPLEMENTATION GRANT FROM  
THE CHAMPAIGN-URBANA PUBLIC HEALTH DISTRICT**

**WHEREAS**, the City of Urbana (“City”) is a home rule unit of local government pursuant to Article VII, Section 6, of the Illinois Constitution, 1970, and may exercise any power and perform any function pertaining to its government and affairs, and the passage of this Resolution constitutes an exercise of the City’s home rule powers and functions as granted in the Illinois Constitution, 1970; and

**WHEREAS**, the U.S. Census Bureau will carry out Census 2020 next spring; and

**WHEREAS**, the City encourages full participation of all residents to ensure the City receives its fair share of federal resources and Congressional representation; and

**WHEREAS**, the City is working cooperatively with the Champaign-Urbana Public Health District (CUPHD) to identify historically undercounted populations for Census 2020, including young children, immigrants, low-income households, people of color, renters and students; and

**WHEREAS**, the City has applied to the CUPHD for a grant to assist in Census 2020; and

**WHEREAS**, the CUPHD has approved a \$56,404 reimbursement grant for the City for the Census; and

**WHEREAS**, such grant will enable the City to strengthen its efforts to provide education, outreach, and communication to undercounted populations and establish and provide Census training to community leaders and organizations to increase Census participation; and

**WHEREAS**, funds are available to pay for Census 2020; and

**WHEREAS**, the City Council, after due consideration, finds that the acceptance of the grant, upon such rules and criteria as contained in the Subcontract Agreement attached hereto, promotes the fiscal welfare of the City, is in the best interests of the residents of the City, and is desirable for the welfare of the City’s government and affairs.

**NOW, THEREFORE, BE IT RESOLVED** by the City Council, of the City of Urbana, Illinois, as follows:

**Section 1.**

The City of Urbana, Illinois, hereby accepts a Census 2020 reimbursement grant in the amount of \$56,404, substantially upon such terms as contained in the copy of the Subcontract Agreement between the Champaign-Urbana Public Health District and the City of Urbana, attached hereto and hereby incorporated by reference.

**Section 2.**

The Mayor of the City of Urbana, Illinois, be and the same is hereby authorized to execute and deliver and the City Clerk of the City of Urbana, Illinois, be and the same is hereby authorized to attest to said execution of said agreement and all other documents necessary for the City to accept such grant as so authorized and approved for on and behalf of the City of Urbana, Illinois.

**Section 3.**

From and after the execution and delivery of such agreement, the Grants Manager, or her designee, is hereby authorized and directed to perform all acts necessary on behalf of the City of Urbana to carry out the purpose and intent of this Resolution.

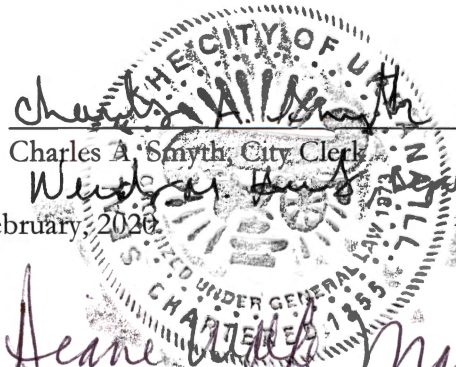
**PASSED BY THE CITY COUNCIL** this 10<sup>th</sup> day of February, 2020.

AYES: Brown, Hazen, Jakobsson, Miller, Roberts Wu

NAYS:

ABSTENTIONS:

**APPROVED BY THE MAYOR** this 14<sup>th</sup> day of February, 2020

  
*Charles A. Smyth*  
Charles A. Smyth, City Clerk  
*Neelam...*  
*Diane Wolfe Marlin*  
Diane Wolfe Marlin, Mayor

**Subcontract Agreement between  
Champaign-Urbana Public Health District  
And  
City of Urbana**

This agreement, executed as of December 1st, 2019 by Champaign-Urbana Public Health District, the Regional intermediary Grantee, with its principal office at 201 W. Kenyon Rd., Champaign, Illinois 61820, hereinafter referred to as "CUPHD", and City of Urbana, with its principal office location at 404 South Vine St. Urbana, IL 61801 and payment address at 404 South Vine St. Urbana, IL 61801, here in after referred to as the "subcontractor", is for the provision of services per agreement number AJCYZ03062 between the Illinois Department of Human Services (IDHS) hereinafter referred to as "IDHS" and Champaign-Urbana Public Health District.

The subcontractor agrees to the following terms and conditions:

**I. SERVICES**

Services will be conducted in accord with contract number AJCYZ03062 between IDHS and CUPHD. All services will be provided between 12/01/2019-06/30/2020 and in accordance with CUPHD approved work plans, scopes, and budget on file with CUPHD. Services will be delivered in the county of the contracted "organization", unless otherwise approved by CUPHD.

**A. Services:**

1. Education, outreach, and communication with target populations in the City of Urbana
2. Data collection and reporting of deliverables to CUPHD on a monthly basis.
3. Direct engagement with the community providing direct access for hard-to-count populations for completing the 2020 Census
4. Organize and provide Census training to City of Urbana Leaders to disseminate to target populations within the City of Urbana
5. Partnering with Community Leaders and additional organizations in the community to increase Census participation
6. Work directly with the City of Urbana community to ensure their understanding of the importance of the 2020 Census and how to complete it.
7. Utilize social media and online platforms to disperse Census information throughout the City of Urbana
8. Provide Census material in a variety of languages to better serve the hard-to-count populations throughout the city.

**B. Reporting:** Subcontractor agrees to utilize the provided IDHS reporting tool for all monthly reporting requirements and make any necessary adaptations as requested by CUPHD or IDHS.

1. Monthly reporting of deliverables no later than the 10<sup>th</sup> of each month for the prior months administrative and financial information.
2. Deliverable explanation
3. Performance measures
4. Performance standard/ frequency
5. Results/ accomplishments in reporting period
6. Performance accomplishments correlated with reported expenses
7. Financial reports

**C. Reimbursement:**

1. The Total Estimated Contract Amount: \$56,404.
2. The Maximum Contract Amount is \$56,404.
3. The subcontract's finance office shall submit the CUPHD Uniform Budget Template. The budget is a detailed schedule of anticipated grant expenditures that is approved by CUPHD for carrying out the purposes of the Award.
4. Required Periodic Financial Reports. The subcontractor agrees to submit financial reports as requested and in the format required by CUPHD. The subcontractor shall file monthly reports

with CUPHD describing the expenditure(s) of the funds related thereto, unless more frequent reporting is required by IDHS/CUPHD pursuant to specific award conditions. 2 CFR 200.207. Monthly reports must be submitted no later than 25 calendar days following the period covered by the report. Failure to submit such required Performance Reports may cause a delay or suspension of funding 30 ILCS 705/1 et seq.

5. **Payment Method.** The payment method for this award is a grant payment, based upon CUPHD's approved budget and Expenditure Deliverable Confirmation Report (ECR) submitted monthly.
6. **Payment Processing.** As a grant-based award all payments processed for this contract are based upon an accepted IDHS /CUPHD approved budget and Expenditure Deliverable Confirmation Reports in accordance with all state and federal guidelines and required documentation. Such reports are submitted to CUPHD Department of Finance. Upon receipt of approval by the Program's Director, in regards to completion of program deliverables and the actual and necessary eligible costs and cash amount requested for reimbursement of those costs payment will be initiated.
7. **Grant payments from CUPHD Department of Finance to the subcontractor will be paid as follows:** A 20% payment given to the subcontractor from CUPHD upon CUPHD receiving payment from IDHS and thereafter, monthly payments equal to the full grant amount divided by the contract length minus the 20% paid up front.

**II. TERM:** The period of this subcontract agreement is **12/01/2019-06/30/2020**; however, it may be terminated at any time during this period by either party upon giving written notice to the other party thirty (30) calendar days in advance of the actual termination date. Upon termination, the subcontractor shall be paid for work satisfactorily completed prior to the date of termination.

### **III. COMPENSATION:**

- A. The amount of payment shall not exceed **\$56,404** and must be billed to CUPHD by **July 15, 2020**. Any sum in default of 100% of the total award not billed out by July 15, 2020 will be returned to CUPHD.
- B. Obligations of IDHS and CUPHD will cease immediately without penalty of further payment being required if the Illinois General Assembly or federal funding source fails to appropriate or otherwise make available sufficient funds for this subcontract agreement.
- C. The subcontractor will comply with all 2CFR200 requirements and Federal Funding restrictions (<https://www.govinfo.gov/content/pkg/CFR-2014-title2-vol1/pdf/CFR-2014-title2-vol1-part200.pdf>).
- D. The subcontractor hereby certifies its organizational registration with the Illinois Secretary of State (SOS) is currently in good standing. Proof of SOS registration and ICQ completion will be provided to CUPHD prior to final agreement
- E. IDHS through CUPHD will compensate the subcontractor on the following basis:
  1. The Subcontractor shall be reimbursed for amounts expended in providing the services described in Section I up to the maximum amount of \$56,404, subject to compliance with contractual requirements for delivery of services and continued availability of funds.
  2. The subcontractor will provide its prevention services in accordance with the scopes of service on file with the lead agency.


**IV. NOTICES:** All legal notices affecting a material element of this subcontract agreement required or desired to be made by either party to this subcontract shall be sent by certified mail to the following respective addresses:

*To the Illinois Department of Human Services:*  
Illinois Department of Human Services  
100 South Grand Avenue East  
Springfield, IL 62762  
Attention: Secretary

*To the Regional Intermediary Grantee:*  
Champaign-Urbana Public Health District  
201 W. Kenyon Rd.  
Champaign, IL 61820  
Attention: Julie Pryde

To the Subcontractor:  
City of Urbana  
404 South Vine St.  
Urbana, IL 61801  
Attention: Sheila Dodd

For Regional Intermediary Grantee:

  
\_\_\_\_\_  
Chairperson, CUPHD Board of Health

1/13/20  
Date

For Subcontractor:

  
\_\_\_\_\_  
Signature, Subcontractor

2/12/2020  
Date

**Illinois Dept. of Human Services  
 Census 2020 Regional Grant  
 Sub-grantee Budget Detail**

<b>Grantee Name</b>	City of Urbana	<b>Preparer's Name</b>	Sheila Dodd
<b>City</b>	Urbana	<b>Preparer's E-mail</b>	<a href="mailto:sedodd@urbanaininois.us">sedodd@urbanaininois.us</a>
<b>FEIN Number</b>	37-6000524	<b>Preparer's Phone #</b>	217-384-2441

<b>Line Item</b>	<b>Amount Requested</b>	<b>Applicant Match of In-Kind Contribution</b>
<b>Salary &amp; Wages</b>	<b>\$41,904</b>	<b>\$0</b>
<b>Fringe Benefits</b>	<b>\$0</b>	<b>\$0</b>
<b>Contractual Costs</b>	<b>\$0</b>	<b>\$0</b>
<b>Travel</b>	<b>\$0</b>	<b>\$0</b>
<b>Printing</b>	<b>\$5,000</b>	<b>\$0</b>
<b>Equipment</b>	<b>\$2,000</b>	<b>\$1,000</b>
<b>Telecommunications</b>	<b>\$0</b>	<b>\$0</b>
<b>Supplies</b>	<b>\$7,500</b>	<b>\$0</b>
<b>Indirect Costs</b>	<b>\$0</b>	<b>\$0</b>
<b>Grand Total</b>	<b>\$56,404</b>	<b>\$1,000</b>

**Justification**

**Sheila Dodd**

Signature - Authorized Sub-Grantee Official

11/15/2019

Date