

05/31/2002

45-R-02

**A RESOLUTION**

**Authorizing the City Manager to  
Sign an Intergovernmental Agreement  
With the Township of Evanston  
For Emergency Assistance Services**

WHEREAS, the City Council of the City of Evanston has determined it is in the best interest of the City to transfer Emergency Assistance Services to the Township of Evanston; and

WHEREAS, the City and Township are desirous of entering into an Intergovernmental Agreement for the Township to provide such services; and

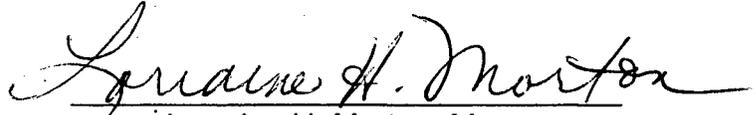
WHEREAS, the City Council of the City of Evanston has determined it is in the best interests of the City of Evanston to enter said Agreement,

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EVANSTON, COOK COUNTY, ILLINOIS:

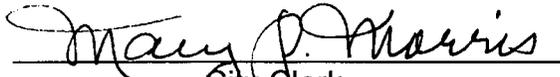
**SECTION 1:** That the City Manager is hereby authorized to sign and the City Clerk hereby authorized to attest to the Intergovernmental Agreement with the Township of Evanston for Emergency Assistance Services, attached as Exhibit A.

**SECTION 2:** That the City Manager is hereby authorized and directed to negotiate any additional conditions of the Intergovernmental Agreement as may be determined to be in the best interests of the City.

**SECTION 3:** That this Resolution shall be in full force and effect from and after its passage and approval in the manner provided by law.

  
\_\_\_\_\_  
Lorraine H. Morton, Mayor

ATTEST:

  
\_\_\_\_\_  
City Clerk

Adopted: June 10, 2002

**City of Evanston / Township of Evanston  
Emergency Assistance Services  
Intergovernmental Agreement**

This contract is comprised of the following:

- Section I. The scope of program services/agreement**  
**II. General requirement**  
**III. Reimbursement process and requirements**  
**IV. Specific program requirements**

**I. The scope of program services and agreement**

The Township of Evanston ("The Township") and The City of Evanston ("The City") desire to enter into an intergovernmental agreement. As the contractor, The Township, shall provide emergency assistance services for residents of Evanston in the manner defined herein:

The purpose of the Emergency Assistance Services (EAS) program is to provide relief to Evanston residents in times of hardship. EAS is a comprehensive program that provides: needs assessment, financial and other resource assistance, referral services and case management.

The EAS program provides short-term assistance to residents with an immediate/imminent financial crisis relating to basic food and other household needs. In addition, case managers provide referrals for clients needing other services in the community, helping them to stabilize their economic situations and meet their long term needs. EAS will also be part of a comprehensive effort to stabilize families and individuals and support the recipient's efforts to obtain self sufficiency.

**A. Length of Agreement**

April 1, 2002 - February 28, 2003

**B. Amount of Appropriation Funds to the Contractor**

The City agrees to reimburse the Township up to \$140,000 for services rendered during the budget year 2002-2003. Monies received will be based on monthly invoice totals paid as monthly reimbursements from the City. **For the initial \$50,000 of program expenditures, in lieu of payment to the Township the City can substitute the reduction of the debt that the Township still has outstanding with the City. The City Finance Director shall reconcile these amounts.**

- C. The City will reimburse The Township for the following:  
Maximum Benefits

Housing - Up to \$500 per household once every 12 months  
Utility - Up to \$125 per household once every 12 months  
Food - Must meet Federal Poverty Guidelines. See attachment "A".  
1. Applicant meeting 125% of federal poverty guidelines and/or  
2. EAS Case Management determination of need but not to exceed computation chart. See attachment "A".

- D. Requests for reimbursement, for service payments, will be submitted monthly by the Township. The reimbursement schedule is provided in attachment "B".

II. The general program requirements

- A. Services to be provided by The Township. All recipients of these services must be City of Evanston residents. Funds for the EAS program will be used to provide services for the following programs: (1) Housing-Rental Assistance; (2) Utility Services and (3) Emergency Food Voucher.

The Township staff will conduct a need(s) assessment of the applicants'. The EAS program staff will determine the amount of services and the outcome. The program criteria areas follows but not limited to:

Loss of income  
Income interruption  
Medical Interruption  
Pending Employment

Besides the need assessment/determination, the staff will make appropriate referrals to support agencies such as: Social Security, the Illinois Department of Human Services, Food Pantries, Homeless Shelters, etc. These support services should increase the recipient's knowledge regarding other social services and benefiting programs. The EAS staff will make referrals to other agencies for services in order to address the recipient's concern in areas of education, employment, child care and other needs.

- B. The Township must insure those services provided by the Township; General Assistance program and Emergency Assistance Services are not duplicated internally and with other social service providers.
- C. The Township agrees to comply with all provisions of the American's With Disabilities Act of 1990 (ADA).
- D. The Township will assist in providing written and verbal translation during the application for services as well as case management for all residents of Evanston with limited English language proficiency.

III. Reimbursement process and requirements

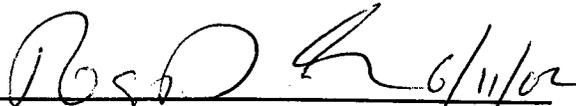
- A. Monthly Payments. Reimbursements are made to the Township monthly for the cost of each invoice amount. The invoices will be submitted according to the schedule/dates shown in attachment "B". Payments to the Township will be issued every 30 days.
- B. Monthly Reporting. The Township will submit reports no later than the fifth day of each month and include the following:
- See attachment "C"
  - Submit information from attachment "C" on a disc in Excel. Use attachment "C" format.
1. Total itemized expenditures for: housing, utilities and food.
  2. Total number of recipients serviced/benefited.
  3. Names, dates, voucher numbers, etc.
- C. Record Keeping. The Township will maintain records in accordance with the following guidelines.
1. The Township EAS staff will maintain confidentiality of all recipient records and will only share information with other service providers in seeking additional service for the recipient.
  2. Recipients must sign authorization for the release of information and that document must stay on file.
  3. The Township of Evanston & The City of Evanston, Department of Health & Human Services agrees to be available and mutually supportive of each other in the implementation of the terms of this contract.
  4. The Township agrees to cooperate in any monitoring program implemented or developed by the City as it relates to the EAS program.
  5. The **City** will provide to the Township a computer data listing of all past history emergency assistance services. Evanston will provide a disc with such information to the Township for a means of transferring data information.
  6. The **Township** will provide the City on a monthly basis with a computer disc in excel. Using the data information listed in attachment "C".
  7. The Township will maintain computerized demographic data on all EAS program recipients. The information will include name, social security number, current address, ward, date of birth, gender, ethnicity, date of last service received, services needed and number of members in household.

IV. The specific program requirements

Funds not used by the Township in FY 2002-2003 will not carry over.

*IN WITNESS, WHEREOF the parties have executed this agreement*

**City of Evanston:**

  
Roger Crum  
City Manager

6/11/02  
Date

**Contractor:**

  
Patricia A. Vance  
Township Supervisor

5/3/02  
Date

Attachment A

**EMERGENCY ASSISTANCE SERVICES  
COMPUTATION CHART BREAKDOWN  
FOOD ASSISTANCE**

	<u>MONTH</u>	<u>TWO WEEK</u>	<u>ONE WEEK</u>	<u>DAY</u>
1 =	\$135.00	\$67.50	\$33.75	\$6.75
2 =	\$248.00	\$124.00	\$62.00	\$12.40
3 =	\$356.00	\$178.00	\$89.00	\$17.80
4 =	\$452.00	\$226.00	\$113.00	\$22.60
5 =	\$537.00	\$269.00	\$134.00	\$26.80
6 =	\$644.00	\$322.00	\$161.00	\$32.20
7 =	\$712.00	\$356.00	\$178.00	\$35.60
8 =	\$814.00	\$407.00	\$204.00	\$41.00
9 =	\$916.00	\$458.00	\$229.00	\$46.00
10 =	\$1,018.00	\$509.00	\$255.00	\$51.00

**Attachment B**

<b>Request for Reimbursement</b>	<b>Intergovernmental Agreement Reference</b>	<b>Due Dates and Designation</b>
Monthly invoices submitted to the City the fifth day of each month,	Section III. - A, B, C	April 5, 2002 <u>A Dean</u> May 6, 2002 June 5, 2002 July 5, 2002 August 5, 2002 September 5, 2002 October 7, 2002 November 7, 2002 December 5, 2002 January 6, 2002 February 5, 2002 March 5, 2002

Monthly Reports	Section III - B, C	April 5, 2002 <u>A Dean</u> May 6, 2002 June 5, 2002 July 5, 2002 August 5, 2002 September 5, 2002 October 7, 2002 November 5, 2002 December 5, 2002 January 6, 2003 February 5, 2003 March 5, 2003
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