ARLINGTON COUNTY, VIRGINIA

AGREEMENT NO. 20-052-RFP-1-LW AMENDMENT NUMBER 1

This Amendment Number 1 is made on January 28, 2022 and amends Agreement Number 20-052-RFP-1-LW ("Main Agreement") dated February 26, 2021 between National Capital Treatment & Recovery ("Contractor") and the County Board of Arlington County, Virginia ("County").

The County and the Contractor agree to amend the Main Agreement as follows:

1. ADD CLAUSE NUMBER 55 TO THE CONTRACT AS FOLLOWS:

55. <u>COVID-19 VACCINATION POLICY FOR CONTRACTORS</u>:

Due to the COVID-19 pandemic, the County has taken various steps to protect the welfare, health, safety and comfort of the workforce and public at large. As part of these steps, the County has implemented various requirements with respect to health and safety including policies with respect to social distancing, the use of face-coverings and vaccine mandates. All County Contractors, entering County owned, controlled, or leased facilities or facilities operated by a contractor if the services provided at that location are exclusive to Arlington County Government or contractors with public facing responsibilities must adopt these policies for implementation with their employees and subcontractors working on County contracts.

Contractors are required to obtain and maintain the COVID-19 vaccine status of employees or subcontractors, require any unvaccinated or not fully vaccinated employees to follow a weekly testing protocol established by the Contractor to submit to weekly testing, and provide any accommodations as required by law. Contractor should submit the certification of compliance to the Purchasing Agent at the time of contract execution and within five working days of the end of each quarter (see Exhibits G and H). In addition, all Contractor and subcontractor employees subject to the requirements of this section must also comply with the County COVID-19 masking and social distancing protocols, as signed at each County location.

It is recognized that the COVID-19 pandemic is an ongoing health crisis. As such, requirements with respect to health and safety, including vaccines and face-coverings may change over time. Contractors are expected to adhere to the County requirements as they evolve in response to the crisis.

For questions, the Contractor may email <u>contractorvaccineinfo@arlingtonva.us</u>.

2. REPLACE CONTRACT CLAUSE 52 IN ITS ENTRIETY WITH THE FOLLOWING:

52. <u>SERVICE CONTRACT WAGE REQUIREMENTS</u>

a. <u>LIVING WAGE</u>

The County has determined that the provisions of Section 4-103 of the Arlington County Purchasing Resolution (regarding "Service Contract Wage" or "Living Wage") apply to this Contract. All employees of the Contractor and any subcontractors working on County-owned, County controlled property, facilities owned, or leased, and operated by a Contractor if services provided at that

> 1 Agreement No. 20-052-RFP-1-LW Amendment No. 1

location are exclusive to Arlington County, or contracts for home-based client services must be paid no less than the hourly Living Wage rate that is published on the County's web site.

b. COMPLAINTS BY AGGRIEVED EMPLOYEES

If the Contractor fails to pay the Living Wage rate, an aggrieved employee or subcontractor may file a complaint with the County Purchasing Agent within six months of the underpayment. If the Purchasing Agent determines that the Contractor has failed to comply with the Living Wage rate provisions of the Purchasing Resolution, the Contractor will be liable to the employee for the unpaid wages, plus interest at the judgment rate from the date originally due, and less any deductions required or permitted by Virginia law. The Contractor must not discharge, reduce the compensation of or otherwise retaliate against any employee who files a complaint with the County Purchasing Agent or takes any other action to enforce the requirements of this section.

c. <u>ADDITIONAL COMPLIANCE REQUIREMENTS</u>

At all times during the term of the Contract, the Contractor must:

- 1. Post the current Living Wage rate, in English and Spanish, in a prominent place at its offices and at each location where its employees perform services under this Contract Go (see sample notice in Attachment F);
- Within five days of an employee's request, provide a written statement of the applicable Living Wage rate, using the same form provided in Attachment F;
- 3. Include the provisions of this section in all subcontracts for work performed under the Contract; and
- 4. Submit to the Purchasing Agent, within five working days of the end of each quarter, certified copies of quarterly payroll reports for each employee, including subcontractor employees, working under the Contract during the quarter and a completed Arlington County Contractor Living Wage Quarterly Compliance Report (Attachment E).

d. <u>CONTRACTOR RECORD KEEPING</u>

The Contractor must preserve for five years after the expiration or termination of this Contract records of wages and benefits provided to each employee who worked under the Contract and must allow the County or its authorized agents to examine the documents during this period and during the Contract Term. The Contractor must provide any requested documents to the County for examination within 15 days of the request at the Contractor's expense.

e. <u>VIOLATIONS</u>

Violation of this section, as determined by the Purchasing Agent, will be a ground for termination of this Contract and suspension or debarment of the Contractor from consideration for future County contracts.

f. <u>QUESTIONS</u>

For questions regarding Living Wage, please email livingwage@arlingtonva.us.

- 3. ADD EXHIBIT F LIVING WAGE FORMS INCLUDED AS AN ATTACHMENT TO THIS AMENDMENT 1.
- 4. ADD EXHIBIT G CONTRACTOR COVID-19 VACCINATION CERTIFICATION INCLUDED AS AN ATTACHMENT TO THIS AMENDMENT 1.
- 5. ADD EXHIBIT H CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION INCLUDED AS AN ATTACHMENT TO THIS AMENDMENT 1.
- 6. PURSUANT TO CLAUSE NUMBER 4. CONTRACT TERM, EXERCISE THE FIRST SUBSEQUENT CONTRACT TERM FROM MARCH 1, 2022 TO FEBRUARY 28, 2023.

All other terms and conditions of the Main Agreement remain in effect.

WITNESS these signatures:

THE COUNTY BOARD OF ARLINGTON	NATIONAL CAPITAL TREATMENT & RECOVERY
COUNTY, VIRGINIA	
AUTHORIZED SIGNATURE:	AUTHORIZED
NAME: <u>Kaylin Schreiber</u>	NAME:
TITLE: Procurement Officer	TITLE:
DATE:	DATE:

EXHIBIT F

LIVING WAGE FORMS

WAGE NOTICE

THE HOURLY RATE FOR EMPLOYEES OF THE CONTRACTOR AND ANY SUBCONTRACTORS WORKING ON COUNTY-OWNED, COUNTY-CONTROLLED PROPERTY, FACILITIES OWNED, OR LEASED, AND OPERATED BY A CONTRACTOR IF SERVICES PROVIDED AT THAT LOCATION ARE EXCLUSIVE TO ARLINGTON COUNTY, OR CONTRACTS FOR HOME-BASED CLIENT SERVICES MUST NOT BE LOWER THAN

<u>\$17.00 PER HOUR</u>

REFERENCE: ARLINGTON COUNTY PURCHASING RESOLUTION SECTION 4-103

FOR INFORMATION CONTACT:

ARLINGTON COUNTY OFFICE OF THE PURCHASING AGENT 2100 CLARENDON BOULEVARD, SUITE 500 ARLINGTON, VA 22201 703-228-3410

> 4 Agreement No. 20-052-RFP-1-LW Amendment No. 1

<u>AVISO de SALARIO</u> <u>MINIMO</u>

LA TARIFA HORARIA DE LOS EMPLEADOS DEL CONTRATISTA, Y DE CUALQUIER SUBCONTRATISTA QUE TRABAJE EN PROPIEDADES DEL CONDADO, EN INSTALACIONES PROPIAS/ALQUILADAS Y OPERADAS POR UN CONTRATISTA SI LOS SERVICIOS PRESTADOS EN ESE LUGAR SON EXCLUSIVOS DEL CONDADO DE ARLINGTON, O EN CONTRATOS DE SERVICIOS DOMICILIARIOS A CLIENTES, NO DEBE SER INFERIOR A

<u>\$17.00 POR HORA</u>

REFERENCIA: SECCIÓN 4-103, DE LA RESOLUCIÓN DE LA OFICINA DEL AGENTE DE COMPRAS DEL CONDADO DE ARLINGTON. (ARLINGTON COUNTY PURCHASING RESOLUTION SECTION 4-103)

PARA OBTENER MAS INFORMACIÓN, LLAME A:

LA OFICINA DEL AGENTE DE COMPRAS DEL CONDADO DE ARLINGTON. 703-228-3410.

PARA INFORMACION EN PERSONA DIRIJASE A:

2100 CLARENDON BOULEVARD, OFICINA No 500 ARLINGTON, VA 22201

> 5 Agreement No. 20-052-RFP-1-LW Amendment No. 1

EXHIBIT G

CONTRACTOR COVID-19 VACCINATION CERTIFICATION

□ I hereby certify that all National Capital Treatment & Recovery_employees and subcontractors who will be working on Contract No. 20-052-RFP-1-LW are fully vaccinated against COVID- 19, or being tested on a weekly basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

Please do not include any of your employees' medical documentation, including vaccination records or test results.

Date: ______
Signature: ______

Printed Name: ______

Title:

<u>EXHIBIT H</u>

CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION

By Email: Please complete the report below and return it to: <u>contractorvaccineinfo@arlingtonva.us</u>.

□ I hereby certify that all National Capital Treatment & Recovery employees and subcontractors working on Contract No. 20-052-RFP-1-LW are fully vaccinated against COVID-19, or being tested on a weekly basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

Please do not include any of your employees' medical documentation, including vaccination records or test results.

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