



Lake County Forest Preserves

General Offices
1899 West Winchester Road
Libertyville, Illinois 60048
847-367-6640 • Fax: 847-367-6649
www.LCFPD.org

DATE: December 9, 2021

MEMO TO: Julie Simpson, Chair
Finance Committee

Agenda Item# 10.2

FROM: Michael Tully
Chief Operations Officer

RECOMMENDATION: Recommend approval of a Resolution approving Change Order No. 2 to the Contract with Perspectives, LTD. for Leadership Coaching Services and Assessment, increasing the contract amount by \$1,950.00.

STRATEGIC DIRECTION SUPPORTED: Organizational Sustainability

FINANCIAL DATA: Consulting services are included as part of the budget.

BACKGROUND: In June, the District engaged Perspectives for leadership coaching and assessment services for the members of the Public Safety Command Staff. This engagement included individual coaching and assessments and Department group coaching.

After the first phase, Command staff was surveyed about their engagement and interest in continuing with the program. The group expressed unanimous opinion that the sessions were valuable and there was interest in continuing; therefore, a second phase was entered into (change order #1). To complete the process and receive a final assessment of the program, the District would need to approve change order #2 authorizing the expenditure of additional hours by Perspectives.

REVIEW BY OTHERS: Director of Finance, Purchasing Manager, Manager of Human Resources & Risk, Corporate Counsel.

**LAKE COUNTY FOREST PRESERVE DISTRICT
LAKE COUNTY, ILLINOIS**

**A RESOLUTION APPROVING CHANGE ORDER NO. 2 TO A CONTRACT WITH
PERSPECTIVES, LTD. FOR LEADERSHIP COACHING SERVICES
AND ASSESSMENT**

WHEREAS, as of June 21, 2021, the Lake County Forest Preserve District (the "District") and Perspectives LTD (the "Consultant") entered into a contract (the "Contract") for Leadership Coaching Services and Assessment (the "Services"); and

WHEREAS, the District desires to increase the final Contract price by \$1,950.00 for additional Services to the District (the "Additional Services"), all as provided in Change Order No. 2 attached hereto ("Change Order No. 2");

NOW, THEREFORE, BE IT RESOLVED by the Board of Commissioners of the Lake County Forest Preserve District, Lake County, Illinois, **THAT**:

Section 1. Recitals. The recitals set forth above are incorporated as a part of this Resolution by this reference.

Section 2. Approval of Change Order No. 2. Change Order No. 2, in substantially the form attached hereto, is approved for the following reasons:

- a. The circumstances necessitating the Change Order were not reasonably foreseeable at the time the Contract was signed; and
- b. The Change Order is germane to the Contract, as signed; and
- c. The Change Order is in the best interest of the District and is authorized by law.

Section 3. Placement in Contract File. This resolution and Change Order No. 2 shall be preserved in the permanent District file of the Contract. This Resolution shall constitute the written determination required by Section 33E-9 of the Illinois Criminal Code, 720 ILCS 5/33E-9.

Section 4. Effective Date. This Resolution shall be in full force and effect from and after its passage and approval in the manner provided by law.

PASSED this _____ day of _____, 2021

AYES:

NAYS:

APPROVED this _____ day of _____, 2021

Angelo D. Kyle, President
Lake County Forest Preserve District

ATTEST:

Julie Gragnani, Secretary
Lake County Forest Preserve District

Exhibit No. _____

Purchase Order Change Order



Lake County
Forest Preserves

1899 West Winchester Road
Libertyville, Illinois 60048
PurchasingDept@LCFPD.org
847-367-6640

Date: 12/03/2021	Change Order Number (Please use drop down)* 2	Department:(Please use drop down)* Administration
Fiscal Year 2021	Purchase Order Number: * 20210324-02	Account Code: * 19214000-701500
		Administrative Assistant Email * SMEYERS@LCFPD.ORG

Project Information

Project or Bid Number:	Contractor Name: * Prespectives LTD	Completed
Project Name: * Consulting and Coaching Services	Contractor Email * JEISLER@PERSPECTIVESLTD.COM	Original Contract Date: * 06/18/2021
Site:	Contractor Admin Email jeisler@perspectivesltd.com	Contract Type: * <input checked="" type="radio"/> Lump Sum Contract <input type="radio"/> Unit Price Contract

To the Contractor: You are hereby authorized to make the following changes, subject to the Contract provisions.

Increase

The following items are added to the contract documents (additional unforeseen costs required to complete project): Additional assessment	Increase Amount: \$1,950.00
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Decrease

The following items are deducted from the contract documents (project completed under budget-credit to the contract):	Decrease Amount (enter as a negative number):
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Time Extension

Change to Scope that results in time extension or no additional costs:
Work to be performed within two weeks of 12/14/2021.

**Change in Contract Price
from this Change Order:**
\$1,950.00

Revised Completion Date:
12/28/2021

Change in Contract Price

Original Contract Price:* \$12,500.00	Contract Price prior to this Change Order (as amended by <i>previous</i> Change Orders, if any):* \$23,825.00	Net Change from original Contract Price resulting from this Change Order and all previous Change Orders: \$13,275.00	New Contract Price \$25,775.00
		Net Percentage Change from original Contract Price resulting form this Change Order and all previous Change Orders: 106.000000%	

Change in Contract Time

Original Contract Time	Contract Time (as amended by <i>previous</i> Change Orders, if any)	New Contract Time
Commencement Date: 06/18/2021	Commencement Date: 09/01/2021	Commencement Date: 12/14/2021
Completion Date: 08/31/2021	Completion Date: 11/30/2021	Completion Date 12/28/2021

Notes to Vendor


Please type your notes to the Vendor below:

Project Manager Recommendation

Project Manager*
LDIVER

Date of Recommendation:
12/14/2021

Signature:



Department Director Approval

Department Director:
Mary Kann

Signature:



Date of Approval:

12/03/2021

Mary E. Hann

By their approval of this Change Order, Owner's Department Director and/or Standing Committee(s) hereby determine:

1. The circumstances necessitating the Change Order were not reasonably foreseeable at the time the Contract was signed;
2. The Change Order is germane to the original Contract, as signed; and
3. The Change Order is in the best interest of the Owner and is authorized by law.

This Written Determination and this Change Order shall (i) be preserved in the Owner's file for the Contract and open to the public for inspection and (ii) constitute the Written Determination required by 720 ILCS 5/33E-9.

Contractor Approval

*By signing below, Contractor also certifies that this Change Order will not cause or result in an increase in the price of any subcontract under the Contract that is 50% or more of such original subcontract's price.

Name:

Jonathan Eisler

Please click on the Signature box - Sign your name with your mouse. Then click **Save**. Click the Return to LCFPD button to send the item back to Lake County Forest Preserves.

Title:

Vice President, Organizational Consulting

Signature:

Date of Approval:

12/03/2021

Jonathan Eisler

Consultant Disclosure Statement

Each **Consultant** (bold/italicized words are defined in Section II below) proposing to perform **Covered Services** for the Lake County Forest Preserve District (the "District") is required, by the District's Purchasing Policy, to complete this form and make disclosures (i) on its behalf, unless it is a **Publicly Traded Consultant**, (ii) on behalf of its **Disclosure-Covered Owners**, unless it is a **Publicly Traded Consultant**, and (iii) on behalf of its **Disclosure-Covered Employees**, even if it is a **Publicly Traded Consultant**. If **Consultant** is a **Publicly Traded Consultant**, please complete Sections I, III, and V. If **Consultant** is not a **Publicly Traded Consultant**, please complete Sections I, IV, and V.

I. Identification of Consultant and Related Parties:

Consultant Name:	Perspectives LTD
Consultant Address:	20 N Clark St, Ste 2650, Chicago IL, 60602
Person Certifying Statement for Consultant , including Phone # and Email Address:	Jonathan Eisler, Vice President of Organizational Consulting 312.636.6609 JEisler@Perspectivesltd.com
Covered Services:	Consulting and meeting facilitation with board members.
Names of Disclosure-Covered Owners (if none, please insert "N/A"):	N/A
Names of Disclosure-Covered Employees (if none, please insert "N/A"):	Wes Becton

II. Defined Terms:

- a) "**Campaign Contribution**" is defined in Section 9-1.4 of the Illinois Election Code, 10 ILCS 5/9-1.4.
- b) "**Candidate Political Committee**" is defined in Section 9-1.8(b) of the Illinois Election Code, 10 ILCS 5/9-1.8(b).
- c) "**Consultant**" is a person or entity that submits a proposal to enter into a contract with the District, or a proposal for a change order to such a contract, that calls for the person or entity to perform **Covered Services** for the District.
- d) "**Covered Services**" are the "Covered Services" identified above by District staff, which have an expected price greater than \$25,000.00, taking into account the original contract price for the **Covered Services** plus the prices of all change orders to such original contract.

- e) **"Disclosure-Covered Owner"** is (i) a natural person who is a **Consultant** or (ii) a person or entity that, directly or indirectly (including without limitation ownership through a corporation, limited liability company, joint venture, or partnership) owns at least 7.5% of a **Consultant** that is not a **Publicly Traded Consultant**.
- f) **"Disclosure-Covered Employee"** is (i) a natural person who is a **Consultant** or (ii) a Consultant employee or independent contractor who will receive a direct financial benefit (including without limitation a commission, bonus, or salary increase) if the District awards the proposed contract or change order to the **Consultant**.
- g) **"Family Member"** is a person related as a parent; child; sibling; uncle or aunt; great aunt or great uncle; first cousin; nephew or niece; spouse or civil union partner; grandparent; grandchild; parent-in-law, child-in-law, sibling-in-law, or grandparent-in-law, whether that in-law relationship is created by marriage or civil union; stepparent; stepchild; stepsibling; half sibling; and fiancé or fiancée.
- h) **"Publicly Traded Consultant"** is a **Consultant** whose common stock is traded on a nationally recognized securities market.

III. Required Disclosures for Publicly Traded Consultant:

- a) **Securities Market:** Please identify the nationally recognized securities market on which **Consultant's** common stock is traded and identify the stock "ticker" symbol under which the **Consultant** is traded:
Exchange: _____; Symbol: _____.
- b) **Campaign Contribution Disclosure:** Please disclose each **Campaign Contribution** made by your **Disclosure-Covered Employees** to the following persons/entities within the two (2) years preceding the date on which the **Consultant's** proposal for **Covered Services** was submitted to the District:
 - i. a Lake County Board member in his or her capacity as either a County Board member, a District Commissioner, or both; or
 - ii. a **Candidate Political Committee** of a Lake County Board member.

Donor/ Disclosure-Covered Employee	Recipient of Donation	Donation Type (e.g., cash, in-kind service,)	Amount of Donation	Date of Donation

- c) **Familial Relationship Disclosure:** Please disclose each **Family Member** of your **Disclosure-Covered Employees** who is either a District Commissioner or employed by the District as an Executive Director, Chief Operations Officer, Department Director, or Manager.

Name of Family Member	Family Member's Position with District	Name of Disclosure-Covered Employee Related to Family Member	Relationship of Disclosure-Covered Covered Employee to Family Member

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IV. Required Disclosures for Consultants that are Not Publicly Traded Consultants:

- a) **Campaign Contribution Disclosure:** Please disclose each **Campaign Contribution** made by your **Disclosure-Covered Owners** or **Disclosure-Covered Employees** to the following persons/entities within the two (2) years preceding the date on which the **Consultant's** proposal for **Covered Services** was submitted:
- i. a Lake County Board member in his or her capacity as either a County Board member, a District Commissioner, or both; or
 - ii. a **Candidate Political Committee** of a Lake County Board member.

Donor/ Disclosure-Covered Owner or Disclosure-Covered Employee	Recipient	Description (cash, item, in-kind service, etc.)	Amount/ Value	Date Made

- b) **Familial Relationship Disclosure:** Please disclose each **Family Member** of a **Disclosure-Covered Owner** or **Disclosure-Covered Employee** who is either a District Commissioner or employed by the District as an Executive Director, Chief Operations Officer, Department Director, or Manager.

Name of Family Member	Family Member's Position with District	Name of Disclosure-Covered Owner or Disclosure-Covered Employee Related to Family Member	Relationship of Disclosure-Covered Owner or Disclosure Covered Employee to Family Member

V. Consultant Certification and Signature:

By signing below, I certify that (i) I am authorized to make the disclosures above on behalf of **Consultant, Consultant's Disclosure-Covered Owners, and Consultant's Disclosure-Covered Employees**, (ii) I have read and understand this Consultant Disclosure Statement, (iii) the above disclosures are accurate and complete, to the best of my knowledge after making reasonable inquiry, and (iv) my signature below, if electronic, is intended to authenticate this writing and to have the same force and effect as a manual signature.

Jonathan Eisler
Name

12-3-2021
Date