



REVISED

**Cuyahoga County Board of Control Agenda
Monday, December 18, 2023 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
4th Floor, Committee Room B**

**This meeting is open to the public and may also be accessed via livestream using the following link:
<https://www.YouTube.com/CuyahogaCounty>**

I – CALL TO ORDER

II. – REVIEW MINUTES – 12/11/2023

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2023-819

Department of Public Works,

- a) Requesting authority to apply for grant funds from the Ohio Department of Natural Resources/ National Park Service in the amount of \$1,498,750.00 for the Beulah Park-Euclid Beach Connector Trail in connection with the Cuyahoga County Lakefront Public Access Plan in the City of Cleveland for the period 12/18/2023– 12/17/2025.
- b) Submitting a grant award with the Ohio Department of Natural Resources/National Park Service in the amount of \$1,498,750.00 for the Beulah Park-Euclid Beach Connector Trail in connection with the Cuyahoga County Lakefront Public Access Plan in the City of Cleveland for the period 12/18/2023– 12/17/2025.

Funding source: The \$1,498,750 grant award from the Ohio Department of Natural Resources / National Park Service is funded 100% by Federal funds. This grant is a 50/50 match. The County will be required to contribute \$1,498,750 of local share.

BC2023-820

Department of Public Works,

- a) Requesting authority to apply for grant funds from the Ohio Department of Natural Resources in the amount of \$70,000.00 for the Beulah Park-Euclid Beach Connector Trail in connection with the Cuyahoga County Lakefront Public Access Plan in the City of Cleveland for the period 12/18/2023–12/17/2025.
- b) Submitting a grant award with the Ohio Department of Natural Resources in the amount of \$70,000.00 for the Beulah Park-Euclid Beach Connector Trail in connection with the Cuyahoga County Lakefront Public Access Plan in the City of Cleveland for the period 12/18/2023–12/17/2025.

Funding Source: \$70,000.00 from the Ohio Department of Natural Resources. This grant is a 53.3 - 46.6% split. The County will be required to contribute \$80,000.00 of local share.

BC2023-821

Department of Public Works, submitting an amendment to Contract No. 2146 with Browning-Ferris Industries of Ohio, Inc. dba Republic Services for rubbish removal services at various County buildings for the period 1/1/2022 – 12/31/2023 to extend the time period to 12/31/2024 and for additional funds in the amount not-to-exceed \$240,000.00.

Funding Source: General Fund

BC2023-822

Department of Public Works, submitting an amendment to Contract No. 2592 with Precision Compaction Services, LLC for preventative maintenance and repair services on compactors, balers and dumpsters, located at various County buildings for the period 8/2/2022-8/1/2025 for additional funds in the amount not-to-exceed \$23,000.00.

Funding Source: General Fund

BC2023-823

Department of Public Works, submitting a Revenue Generating Agreement (via Contract No. 3901) with City of Seven Hills in the amount not-to-exceed \$400,000.00 for maintenance and repair of storm and sanitary sewers and pumping stations, located in County Sewer District No. 2 for the period 1/1/2024-12/31/2024.

Funding Source: Revenue Generating

BC2023-824

Department of Development, recommending an award and enter into Agreement No. 3993 with Cleveland State University in the amount not-to-exceed \$24,500.00 for research and analysis in areas related to Economic Development for the period 1/1/2024-12/31/2024.

Funding Source: Department of Development General Fund

BC2023-825

Department of Development,

- a) Submitting an RFP exemption, which will result in an award recommendation to The National Council for Community Development, Inc. dba Grow America in the amount not-to-exceed \$198,000.00 for economic development and technical assistance services for the period 1/1/2024 – 12/31/2025.
- b) Recommending an award and enter into Contract No. 3971 with The National Council for Community Development, Inc. dba Grow America in the amount not-to-exceed \$198,000.00 for economic development and technical assistance services for the period 1/1/2024 – 12/31/2025.

Funding Source: General Fund

BC2023-826

Department of Housing and Community Development, recommending a payment on Purchase Order No. 23005206 to City of Euclid in the amount of \$116,476.96 as final payment for reimbursement of FY2016 - 2018 U.S. Department of Housing and Urban Development Home Investment Partnership Program funds for HOME Qualified Activities provided under Contract No. AG1900185 during the term of the contract from 5/1/2019 – 4/30/2021.

Funding Source: HOME Investment Partnership Grant

BC2023-827

Department of Housing and Community Development,

- a) Submitting an RFP exemption, which will result in an award recommendation to Court Community Service in the amount not-to-exceed \$110,000.00 for litter control services and oversight in selected urban communities for the period 1/1/2024 – 12/31/2025.
- b) Recommending an award and enter into Contract No. 3953 with Court Community Service in the amount not-to-exceed \$110,000.00 for litter control services and oversight in selected urban communities for the period 1/1/2024 – 12/31/2025.

Funding Source: Community Development Block Grant Fund

BC2023-828

Department of Housing and Community Development, recommending an award and enter into Agreement No. 3991 with Cleveland State University in the amount not-to-exceed \$65,000.00 for research and development of a comprehensive housing plan with metrics and recommendations, effective upon contract signatures of all parties through 10/31/2024.

Funding Source: General Fund - American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services

BC2023-829

Department of Information Technology, submitting an amendment to Contract No. 1096 with Tim Wauhop for Enterprise Resource Planning System support services for the period 3/22/2021 – 12/31/2023, to extend the time period to 12/31/2024, and for additional funds in the amount not-to-exceed \$98,800.00.

Funding Source: General Fund

BC2023-830

Department of Information Technology, submitting an amendment to Contract No. 2597 (fka Contract No. 601 and PO20001443) with DataBank IMX for OnBase software support and maintenance for the period 5/1/2020 – 12/31/2023 to extend the time period to 12/31/2024, to change the terms, effective upon contract signature of all parties, and for additional funds in the amount not-to-exceed \$282,496.00.

Funding Source: General Fund

BC2023-831

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Advizex Technologies in the amount not-to-exceed \$111,874.06 for a joint cooperative purchase of various licenses for Veeam software subscription services for various time periods, effective 12/26/2023 - 3/30/2025.
- b) Recommending an award on Purchase Order No. 23005164 to Advizex Technologies in the amount not-to-exceed \$111,874.06 for a joint cooperative purchase of various licenses for Veeam software subscription services for various time periods, effective 12/26/2023 -3/30/2025.

Funding Source: General Fund

BC2023-832

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to TEC Communications, Inc. in the amount not-to-exceed \$23,900.00 for a state contract purchase of (100) Cisco IP 8811 Phones.
- b) Recommending an award on Purchase Order No. 23005165 to TEC Communications, Inc. in the amount not-to-exceed \$23,900.00 for a state contract purchase of (100) Cisco IP 8811 Phones.

Funding Source: Capital Improvement project

BC2023-833

Department of Information Technology on behalf of the Sheriff's Department,

- a) Submitting an RFP exemption, which will result in an award recommendation to Integrated Precision Systems in the amount not-to-exceed \$8,462.75 for a state contract purchase of (1) Axis Dome Camera, (1) Zenitel Intercom, (1) card reader, various equipment needed for installation and programming of the intercom to be located in the Sheriff's Department Information Technology Office, and one (1) of maintenance and support.
- b) Recommending an award on Purchase Order No. 23005252 to Integrated Precision Systems in the amount not-to-exceed \$8,462.75 for a state contract purchase of (1) Axis Dome Camera, (1) Zenitel Intercom, (1) card reader, various equipment needed for installation and programming of the intercom to be located in the Sheriff's Department Information Technology Office, and one (1) year of maintenance and support.

Funding Source: General Fund

BC2023-834

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$16,734.00 for a state contract purchase of (8) HP ZBook Firefly mobile workstations, each to include HP Care Pack hardware support, 5-year warranty, HP Absolute Data & Device Security Premium – Subscription Licenses, (12) docking stations and (11) monitors for the Court of Common Pleas/Juvenile Court Division.
- b) Recommending an award on Purchase Order No. 23005258 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$16,734.00 for a state contract purchase of (8) HP ZBook Firefly mobile workstations, each to include HP Care Pack hardware support, 5-year warranty, HP Absolute Data & Device Security Premium – Subscription Licenses, (12) docking stations and (11) monitors for the Court of Common Pleas/Juvenile Court Division.

Funding Source: General Fund

BC2023-835

Department of Information Technology,

- a) Submitting an RFP Exemption, which will result in an award recommendation to OneSparQ, LLC in the amount not-to-exceed \$150,800.00 for staff augmentation services for the Enterprise Resource Planning System for the period 1/1/2024 – 12/31/2024.
- b) Recommending an award and enter into Contract No. 4001 with OneSparQ, LLC in the amount not-to-exceed \$150,800.00 for staff augmentation services for the Enterprise Resource Planning System for the period 1/1/2024 – 12/31/2024.

Funding Source: General Fund

BC2023-836

Department of Law, submitting an amendment to Contract No. 2317 (fka CE1800177) with RELX, Inc. dba LexisNexis, a division of RELX Inc. for online legal research services for various County departments and agencies for the period 1/1/2018 - 12/31/2023 to extend the time period to 12/31/2024 and for additional funds in the amount not-to-exceed \$249,380.32.

Funding Source: General Fund

BC2023-837

Court of Common Pleas/Corrections Planning Board, submitting an amendment to Contract No. 2165 with Oriana House, Inc. for Cognitive Behavioral Therapy utilizing the “Thinking for Change” Model for the period 7/1/2021 – 6/30/2023 to extend the time period to 6/30/2024, to change the terms, effective 7/1/2023 and for additional funds in the amount not-to-exceed \$272,800.00.

Funding Source: Ohio Department of Rehabilitation and Correction Community Corrections Act Grant Funds

BC2023-838

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 1993 with Mizanin Reporting Service, Inc. for court transcription services for the period 1/1/2022 – 12/31/2023 for additional funds in the amount not-to-exceed \$10,000.00.

Funding Source: General Fund

BC2023-839

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Rising.Over. Situations.Evaluating. Self. (R.O.S.E.S.) Mentoring in the amount not-to-exceed \$30,714.00 for community based and social based mentoring services for court referred females ages 12 to 17 for the period 7/1/2023 – 6/30/2024.
- b) Recommending an award and enter into Contract No. 3933 with Rising.Over. Situations.Evaluating. Self. (R.O.S.E.S.) Mentoring in the amount not-to-exceed \$30,714.00 for community based and social based mentoring services for court referred females ages 12 to 17 for the period 7/1/2023 – 6/30/2024.

Funding Source: RECLAIM Grant

BC2023-840

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Sports and Spine Physical Therapy, Inc. in the amount not-to-exceed \$57,576.96 for educational and vocational support services for Court-referred youths ages 15 to 17 with high risk for recidivism for the period 7/1/2023-6/30/2024.
- b) Recommending an award and enter into Contract No. 3934 with Sports and Spine Physical Therapy, Inc. in the amount not-to-exceed \$57,576.96 for educational and vocational support services for Court-referred youths ages 15 to 17 with high risk for recidivism for the period 7/1/2023-6/30/2024.

Funding Source: RECLAIM Grant

BC2023-841

Court of Common Pleas/Juvenile Court Division, recommending awards and enter into agreements with various municipalities in the total amount not-to-exceed \$3,300.00 for Community Diversion Program services for the period 1/1/2024 – 12/31/2024.

- a) Agreement No. 3980 with City of Shaker Heights in the amount not-to-exceed \$3,000.00.
- b) Agreement No. 3996 with Village of Orange in the amount not-to-exceed \$300.00.

Funding Source: Health and Human Services Levy Fund

BC2023-842

Department of Public Safety and Justice Services on behalf of the Medical Examiner’s Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Kiesler Police Supply in the amount not-to-exceed \$4,725.92 for a state contract purchase of (17) cases of forensic ballistics ammunition for the Firearms Lab.

- b) Recommending an award on Purchase Order No. 23005192 to Kiesler Police Supply in the amount not-to-exceed \$4,725.92 for a state contract purchase of (17) cases of forensic ballistics ammunition for the Firearms Lab.

Funding Source: American Rescue Plan Act Crime Lab Backlog Grant

BC2023-843

Department of Public Safety and Justice Services on behalf of the Medical Examiner’s Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Vance Outdoors, Inc. dba Vance's Law Enforcement in the amount not-to-exceed \$9,999.75 for a state contract purchase of (49) cases of forensic ballistics ammunition for the Firearms Lab.

- b) Recommending an award on Purchase Order No. 23005238 to Vance Outdoors, Inc. dba Vance's Law Enforcement in the amount not-to-exceed \$9,999.75 for a state contract purchase of (49) cases of forensic ballistics ammunition for the Firearms Lab.

Funding Source: American Rescue Plan Act Crime Lab Backlog Grant

BC2023-844

Sheriff’s Department, recommending an award on RQ13429 and enter into Contract No. 3989 with GPI Enterprises Inc. (16-2) in the amount not-to-exceed \$75,000.00 for (2) temporary full-time clerical employees as needed for the Commissary Division for the period 1/1/2024 - 6/30/2024.

Funding Source: General Fund

BC2023-845

Department of Public Safety and Justice Services,

- a) Submitting an RFP Exemption, which will result in an award recommendation to West Publishing Corporation dba Thomson Reuters aka Thomson Reuters Enterprise Centre GmbH in the amount not-to-exceed \$43,526.40 for the purchase of (1) Clear Plus investigative software and (8) each Clear LE Plus, Criminal Justice Arrest Gateway and License Plate Reader user licenses for the Northeast Ohio Regional Fusion Center for the period 1/1/2024 – 12/31/2024.

- b) Recommending an award and enter into Contract No. 3863 with West Publishing Corporation dba Thomson Reuters aka Thomson Reuters Enterprise Centre GmbH in the amount not-to-exceed

\$43,526.40 for the purchase of (1) Clear Plus investigative software and (8) each Clear LE Plus, Criminal Justice Arrest Gateway and License Plate Reader user licenses for the Northeast Ohio Regional Fusion Center for the period 1/1/2024 – 12/31/2024.

Funding Source: FY22 State Homeland Security Program Grant

BC2023-846

Department of Health and Human Services/Cuyahoga Job and Family Services,

- a) Submitting an RFP exemption, which will result in payments to various providers in the total amount-not-to-exceed \$82,402.23 as final payment for SNAP (Supplemental Nutrition Assistance Program) to Skills Employment and Training services for the period 10/1/2020 – 9/30/2023.
 - 1) Purchase Order No. 23004843 with The Centers for Families and Children in the amount not-to-exceed \$9,260.84.
 - 2) Purchase Order No. 23004844 with Cuyahoga County Public Library in the amount not-to-exceed \$2,264.24.
 - 3) Purchase Order No. 23004845 with Lutheran Metropolitan Ministry in the amount not-to-exceed \$12,407.08.
 - 4) Purchase Order No. 23004846 with Towards Employment in the amount not-to-exceed \$6,558.53.
 - 5) Purchase Order No. 23004847 with Cleveland Center for Arts & Technology dba NewBridge Cleveland in the amount not-to-exceed \$15,474.98.
 - 6) Purchase Order No. 23004848 with West Side Catholic Center in the amount not-to-exceed \$35,038.57.
 - 7) Purchase Order No. 23004849 with Urban League of Greater Cleveland in the amount not-to-exceed \$1,397.99.

- b) Recommending payments to various providers in the amount-not-to-exceed \$82,402.23 as final payment for SNAP (Supplemental Nutrition Assistance Program) to Skills Employment and Training services for the period 10/1/2020 – 9/30/2023.
 - 1) Purchase Order No. 23004843 with The Centers for Families and Children in the amount not-to-exceed \$9,260.84.
 - 2) Purchase Order No. 23004844 with Cuyahoga County Public Library in the amount not-to-exceed \$2,264.24.
 - 3) Purchase Order No. 23004845 with Lutheran Metropolitan Ministry in the amount not-to-exceed \$12,407.08.
 - 4) Purchase Order No. 23004846 with Towards Employment in the amount not-to-exceed \$6,558.53.
 - 5) Purchase Order No. 23004847 with Cleveland Center for Arts & Technology dba NewBridge Cleveland in the amount not-to-exceed \$15,474.98.
 - 6) Purchase Order No. 23004848 with West Side Catholic Center in the amount not-to-exceed \$35,038.57.

- 7) Purchase Order No. 23004849 with Urban League of Greater Cleveland in the amount not-to-exceed \$1,397.99.

Funding Source: Federal Food Assistance Employment and Training

BC2023-847

Department of Health and Human Services/Division of Children and Family Services, recommending an award on RQ13102 and enter into Contract No. 4026 with Circle Health Services dba The Centers (114-4) in the amount not-to-exceed \$450,000.00 for residential placement for up to 58 children and young adults for high quality childcare for children in custody in connection with the Child Wellness Campus project, effective upon contract signatures of all parties for a period of six (6) months.

Funding Source: Health and Human Services Levy

BC2023-848

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Emerald Development and Economic Network, Inc. in the amount not-to-exceed \$425,000.00 for acquisition costs for property located at 2710 Walton Avenue for temporary, emergency housing for 104 quests currently residing at Norma Herr Women’s Center effective upon contract signatures of all parties for a period of three (3) years.
- b) Recommending an award and enter into Contract No. 4027 with Emerald Development and Economic Network, Inc. in the amount not-to-exceed \$425,000.00 for acquisition costs for property located at 2710 Walton Avenue for temporary, emergency housing for 104 quests currently residing at Norma Herr Women’s Center effective upon contract signatures of all parties for a period of three (3) years.

Funding Source: Public Assistance Fund

C. – Exemptions

BC2023-849

Sheriff’s Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed \$32,000.00 for various purchases for food service operations in the Jail Kitchen for the period 1/1/2024 – 12/31/2024:

- a) W.W. Grainger, Inc. in the amount not-to-exceed \$10,000.00
- b) Joshen Paper and Packaging in the amount not-to-exceed \$7,000.00
- c) Dean Supply Company in the amount not-to-exceed \$9,000.00
- d) Gordon Food Supply in the amount not-to-exceed \$6,000.00

Funding Source: General Fund

BC2023-850

Sheriff’s Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed \$71,000.00 for various equipment repairs in the Jail facilities for the period 1/1/2024 – 12/31/2024:

- a) Belenky, Inc. in the amount not-to-exceed \$10,000.00
- b) Cleveland Communications, Inc. in the amount not-to-exceed \$39,000.00
- c) General Parts, LLC in the amount not-to-exceed \$15,000.00
- d) Toyota Material Handling Ohio in the amount not-to-exceed \$7,000.00

Funding Source: General Fund

BC2023-851

Department of Health and Human Services, recommending an alternative procurement process, which will result in payments to Treasurer, State of Ohio for various invoices in the total amount not-to-exceed \$250,000.00 for technical support services to County employees in connection with the Tech Service Support Policy for the period 1/1/2024-12/31/2024.

Funding Source: Health and Human Services Levy

BC2023-852

Department of Health and Human Services/Cuyahoga Job and Family Services, recommending an alternative procurement process, which will result in various award recommendations to various providers in the total amount not-to-exceed \$120,000.00 for non-emergency client transportation services for the period 1/1/2024-12/31/2024.

- a) ABC Taxi in the total amount not-to-exceed \$60,000.00
- b) Ace Taxi in the total amount not-to-exceed \$60,000.00

Funding Source: Health and Human Services Levy Fund fully reimbursable by Federal Medicaid Funds

D. – Consent Agenda

BC2023-853

Department of Public Works, submitting an amendment to a Master Contract with various providers for can liners for various County buildings for the period 11/30/2022-11/29/2023 to extend the time period to 12/31/2024; no additional funds required.

- a) Contract No. 2837 Joshen Paper & Packaging Co., Inc.
- b) Contract No. 2853 Speedy Office Supply, Inc.

Funding Source: General Fund

BC2023-854

Department of Information Technology, recommending to declare excess County computers and IT Equipment as surplus County-owned property, no longer needed for public use; requesting authority to sell surplus property to Info@Ret3.org. for a fee in the amount of \$1.00 for the month of November 2023 in accordance with E02012-0001.

Funding Source: Revenue Generating

BC2023-855

Fiscal Department, presenting proposed travel/membership requests for the week of 12/18/2023:

Dept:	Public Safety and Justice Services							
Event:	Foundations of Intelligence Analysis Training							
Source:	International Association of Law Enforcement Intelligence Analysts							
Location:	Phoenix, AZ							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Melanie Molzan	01/14/2024-01/20/2024	\$750.00	\$342.00	\$1,122.00	\$430.00	\$500.00	\$3,144.00	UASI Grant

*Paid to host

**Staff reimbursement

*** Airfare will be covered by a contract with the County’s Travel Vendor

Purpose:

The Foundations of Intelligence Analysis Training is mandatory for intelligence analysts at the Northeast Ohio Regional Fusion Center within the first year of employment. The goal of the training is to provide a foundation of knowledge and understanding of analysis. It is a five-day introduction to the basics of law enforcement intelligence analysis. It is designed to be an entry-level curriculum and meets the educational requirements for the IALEIA Criminal Intelligence Certified Analysts process.

Department	Organization	Membership Dues	Dates of Membership	Funding Source
Medical Examiner’s Office	Association for the Advancement of Blood & Biotherapies (AABB)	\$10,575.00	1/1/2024 – 12/31/2024	General Fund – Medical Examiners Lab Fund

Purpose of Membership:

American Association of Blood Banks (AABB) is the accrediting body for the Toxicology Laboratory at the Medical Examiner’s Office.

BC2023-856

Department of Purchasing, presenting proposed purchases for the week of 12/18/2023:

Direct Open Market Purchases
(Purchases between \$5,000 - \$49,999.99 unless requiring assistance from
the Department of Purchasing – See Below):

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23005139	(1) year subscription to Thinkst Canary Active Defense software	Department of Information Technology	Above & Beyond Electronics, LLC	\$12,299.74	General Fund
23005188	(48) Level B personal protective equipment (PPE) suits for use by Cuyahoga County HazMat teams	Department of Public Safety and Justice Services	FarrWest Environmental Supply	\$7,983.44	FY2021 State Homeland Security Grant Program Fund

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23005185	Concrete for various county projects*	Department of Public Works	Contractors Choice Ready Mix	\$8,606.61	Road and Bridge Fund
23005234	Out-of-home emergency placement services for the period 11/1/2023 – 11/30/2023**	Division of Children and Family Services	Mimique Homes, Inc. dba A Mother’s Dream	\$5,700.00	66% Health and Human Services Levy Fund and 34% Title IV-E Reimbursement Fund

*Approval No. BC2023-751, dated 11/20/2023, which amended various Board approvals on various dates authorizing an alternative procurement process and resulted in various award recommendations in the total amount not-to-exceed \$320,000.00 for the purchase of concrete materials on an as-needed basis for repair and maintenance projects throughout Cuyahoga County for the time period 12/19/2022 - 12/18/2024 for additional funds in the amount not-to-exceed \$200,000.00.

**Approval No. BC2023-561, dated 9/5/2023, which amended Approval No. BC2022-767, dated 12/12/2022, which approved an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to various licensed providers in the total amount not-to-exceed \$250,000.00 for reimbursement for out-of-home care placement services for the period 12/1/2022 – 12/31/2024, by changing the amount not-to-exceed amount from \$250,000.00 to \$500,000.00.

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Court of Common Pleas/Corrections Planning Board,

a) Requesting authority to apply for grant funds from U.S. Department of Justice, Office on Violence Against Women in the amount of \$1,000,000.00 for the High-Risk Domestic Violence Court Enhancement Initiative in connection with the FY2023 Improving Criminal Justice Responses to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Grant Program for the period 10/1/2023 – 9/30/2027.

b) Submitting a grant award from U.S. Department of Justice, Office on Violence Against Women in the amount of \$1,000,000.00 for the High-Risk Domestic Violence Court Enhancement Initiative in connection with the FY2023 Improving Criminal Justice Responses to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Grant Program for the period 10/1/2023 – 9/30/2027.

Funding Source: FY2023 U.S. Department of Justice, Office on Violence Against Women

Item No. 2

Court of Common Pleas/Corrections Planning Board,

a) Requesting authority to apply for grant funds to U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance in the amount of \$950,000.00 for the expansion of Veterans Treatment Court Program in connection with the FY23 Veterans Treatment Court Discretionary Grant Program for the period 10/1/2023 – 9/30/2027.

b) Submitting a grant award from U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance in the amount of \$950,000.00 for the expansion of the Veterans Treatment Court Program in connection with the FY23 Veterans Treatment Court Discretionary Grant Program for the period 10/1/2023 – 9/30/2027.

Funding Source: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance

Item No. 3

Contracts \$0.00 – \$4,999.99 – Processed and executed (no vote required)

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
RQ 8737	Amend Contract No. 2977	YMCA of Greater Cleveland	Rental assistance and supportive services in connection with alternative housing and related services and support for COVID Recovery	\$-0-	Community Initiatives Division/Office of Homeless Services	1/1/2023 – 12/31/2023 to extend the time period to 12/31/2024	(Original) General Fund – American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services	12/11/2023 (Executive) 12/7/2023 (Law)
RQ 8737	Amend Contract No. 2871	CHN Housing Partners	Construction project in connection with the alternative housing and relates services and support for COVID Recovery – Continuum of Care program	\$-0-	Community Initiatives Division/Office of Homeless Services	1/1/2023 – 12/31/2023 to extend the time period to 12/31/2024	(Original) General Fund – American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services	12/11/2023 (Executive) 12/8/2023 (Law)

LPA Agreements – Processed and executed (no vote required)

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2023-0196	Replacement of Schaaf Road Bridge No. 02.89 over West Creek in the City of Independence – Council District 6	\$2,405,600.00	\$3,210,000.00	\$1,924,480.00 – Federal Fund \$481,120.00 – Road and Bridge Fund	12/11/2023 (Executive)
R2023-0105	Replacement of Ridgewood Drive Bridge No. 03.50 over West Creek in the City of Parma – Council Districts 4	\$2,500,000.00	\$2,675,000.00	\$2,000,000.00 – Federal Fund \$500,000.00 – Road and Bridge Fund	12/11/2023 (Executive)

Item No. 4

**Purchases Processed
Not-to-Exceed \$5,000.00
For the period 11/1/2023 – 11/30/2023
(No Vote Required)**

PO Number	Date	Vendor	Description	Accounting Unit	Amount	Status
23004928	11/01/2023	TIM LALLY CHEVROLET INC	REAR END AND AXEL WORK	MAINTENANCE GARAGE	\$4254.17	Approved
23004942	11/02/2023	CUMMINS SALES AND SERVICE	OXYGEN SENSOR	SANITARY OPERATING	\$1914.30	Approved
23004943	11/02/2023	BOB BARKER CO INC	EVA Sandal Color: Black Siz	LEGAL	\$340.80	Approved
23004943	11/02/2023	BOB BARKER CO INC	EVA Sandal Color: Black Siz	LEGAL	\$340.80	Approved
23004943	11/02/2023	BOB BARKER CO INC	EVA Sandal BLACK SIZE: 13/14	LEGAL	\$340.80	Approved
23004946	11/02/2023	CORE & MAIN LP	Catch Basin	SANITARY DISTRICTS	\$1018.68	Approved
23004946	11/02/2023	CORE & MAIN LP	Clay Pipe W/4" Hole	SANITARY DISTRICTS	\$60.43	Approved
23004946	11/02/2023	CORE & MAIN LP	12 Clay Pipe PE2'	SANITARY DISTRICTS	\$52.43	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Bagels, White Whole Grain, Fro	LEGAL	\$159.15	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	French Toast Sticks, Frozen, 0	LEGAL	\$185.04	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Waffles, Homestyle, Round, Fro	LEGAL	\$92.49	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Pancake, Whole Grain, Frozen #	LEGAL	\$81.36	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Small Wedge Potatoes, Refriger	LEGAL	\$195.99	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Cheese Sticks, Mozzarella, Bre	LEGAL	\$138.02	Approved

23004948	11/02/2023	SYSCO CLEVELAND INC	Biscuits, Buttermilk, Sliced,	LEGAL	\$79.48	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Slider Sandwiches, Smoked Turk	LEGAL	\$241.23	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Sandwiches, Peanut Butter & St	LEGAL	\$173.28	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Pita Bread, White, 6 Inch, Poc	LEGAL	\$48.04	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Breadsticks, Italian Garlic &	LEGAL	\$122.40	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Crusts, Pizza, 1/2 Sheet, Trad	LEGAL	\$152.52	Approved
23004948	11/02/2023	SYSCO CLEVELAND INC	Maple-Battered Turkey Pancake	LEGAL	\$106.50	Approved
23004958	11/02/2023	DELL MARKETING LP	TEAMS ROOM PRO	ENGINEERING SERVICES	\$1389.60	Unreleased
23004964	11/03/2023	GORDON FOOD SERVICE	Lima Beans, Baby, Grade A, IQF	LEGAL	\$57.40	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Cut Green Beans, Mixed Sieve,	LEGAL	\$258.50	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Broccoli Cuts, Grade A, IQF, 3	LEGAL	\$240.30	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Gordon Choice Cauliflower Flor	LEGAL	\$81.42	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Cut Corn, Grade A, IQF, 30 Lb	LEGAL	\$217.40	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Green Peas, Grade A, IQF, 30 L	LEGAL	\$233.35	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Chopped Spinach, Grade A, Froz	LEGAL	\$69.38	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Brussels Sprouts, Medium, Grad	LEGAL	\$75.18	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Capri Vegetable Blend, IQF, 4	LEGAL	\$75.02	Approved
23004964	11/03/2023	GORDON FOOD SERVICE	Italian Vegetable Blend, IQF,	LEGAL	\$86.22	Approved

23004964	11/03/2023	GORDON FOOD SERVICE	Cob Corn, Grade A, IQF, 96/Cas	LEGAL	\$117.48	Approved
23004970	11/03/2023	MNJ TECHNOLOGIES DIRECT INC	Surface Pro for County Sheriff	LAW ENFORCEMENT - SHERRIFF	\$2215.00	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Heavy Duty, multi-purpose clean	LEGAL	\$180.52	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Rational Cleaner tabs (OVEN)	LEGAL	\$205.30	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Rational Rinse tabs (OVEN)	LEGAL	\$192.46	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Heavy Duty Pot and Pan Deterge	LEGAL	\$449.80	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Boil Out Fryer Cleaner 26/8oz	LEGAL	\$67.33	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Clean Quick, sanitizer quat, b	LEGAL	\$64.26	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Live Bacteria Drain Additive,	LEGAL	\$143.06	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Floor Cleaner/concentrate/Heav	LEGAL	\$161.30	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Drain Maintainer/Cleaner, 6/3	LEGAL	\$54.22	Approved
23004972	11/03/2023	ARIES DISTRIBUTION	Sanitizer/Low Temp 4/1 gal jug	LEGAL	\$123.36	Approved
23004976	11/06/2023	A BETTER TRUCK CAP INC	TONNEAU COVER	SANITARY OPERATING	\$1304.99	Approved
23004980	11/06/2023	ECHOGRAPHICS	SMALL & LARGE SEALS & FREIGHT	GENERAL (CONSUMER AFFAIRS)	\$2407.50	Approved
23004989	11/06/2023	STACIE HOWARD-CROWELL	Respite	FCFC OTHER SOCIAL SERV GRANTS	\$1500.00	Approved
23005001	11/07/2023	BROWN ENTERPRISE SOLUTIONS LLC	firewall	STATE HOMELAND SECURITY PROJE	\$4291.48	Approved
23005001	11/07/2023	BROWN ENTERPRISE SOLUTIONS LLC	shipping	STATE HOMELAND SECURITY PROJE	\$0.00	Approved

23005002	11/07/2023	VECTOR CONSTRUCTION INC	encumbrance request	SANITARY OPERATING	\$2070.00	Approved
23005008	11/08/2023	A BETTER TRUCK CAP INC	DECKED DRAWER SYSTEM	SANITARY OPERATING	\$1809.99	Approved
23005015	11/08/2023	ELANCO US INC	Emergency antibodies for parvo	DICK GODDARD BEST FRIENDS FUND	\$1200.00	Approved
23005016	11/08/2023	UNIVERSITY ENTERPRISES INC	Oper & Maint Wastewater Vol 1	SANITARY OPERATING	\$1000.00	Approved
23005016	11/08/2023	UNIVERSITY ENTERPRISES INC	Oper & Maint Wastewater Vol 2	SANITARY OPERATING	\$1000.00	Approved
23005016	11/08/2023	UNIVERSITY ENTERPRISES INC	Coll Sys Evaluating & Improve	SANITARY OPERATING	\$160.00	Approved
23005016	11/08/2023	UNIVERSITY ENTERPRISES INC	Coll Sys Oper & Maint Videos	SANITARY OPERATING	\$200.00	Approved
23005020	11/09/2023	PREMIER AUTO BODY & COLLISION	BODY REPAIRS	MAINTENANCE GARAGE	\$2787.80	Approved
23005021	11/09/2023	ARC DOCUMENT SOLUTIONS	Encumbrance Request	SANITARY OPERATING	\$1326.30	Approved
23005029	11/09/2023	NATIONAL ASSOCIATION FOR COUNT	ANNUAL MEMBERSHIP 1/1/2024 - 12/31/2024	ECONOMIC DEVELOPMENT	\$3540.00	Approved
23005034	11/13/2023	SPITZER BUICK GMC PARMA LLC	AC REPAIRS	MAINTENANCE GARAGE	\$1786.56	Approved
23005040	11/14/2023	SITETECH INC	encumbrance request	SANITARY OPERATING	\$1890.00	Approved
23005043	11/14/2023	PROGRESS SOFTWARE CORPORATION	DEVCRRAFT APPLICATION BUILDER Nov 23 - Nov 24	ELECTRONIC VOTING CONSULTATION	\$1169.00	Approved
23005057	11/14/2023	BRINKS INC	Acct: 10000149679	JAIL OPERATIONS	\$1650.52	Unreleased
23005054	11/15/2023	TEC COMMUNICATIONS INC	BOE Call Center 2023	BOARD OF ELECT ADMINISTRATION	\$2237.89	Approved
23005055	11/15/2023	CW DESIGNS INC	Goldberg Arb Invoice	LAW DEPARTMENT	\$3416.87	Approved

23005058	11/15/2023	JEFFREY A BELKIN LLC	Belkin Arb Invoice - Gageham	LAW DEPARTMENT	\$3000.00	Approved
23005059	11/15/2023	HPM BUSINESS SYSTEMS INC	11" Trifold pressure seal form	LEGAL	\$4729.50	Approved
23005072	11/16/2023	BEST TRUCK EQUIPMENT INC	SNOW PLOW CUTTING EDGES	FAC-BUILDING SERVICES	\$1119.96	Approved
23005073	11/16/2023	UNITED BUSINESS SUPPLY	Ruled Desk Pad, 22 in x 17 in,	LEGAL	\$1417.68	Approved
23005073	11/16/2023	UNITED BUSINESS SUPPLY	Monthly Planner, 9 in x 11 in,	LEGAL	\$1082.88	Approved
23005073	11/16/2023	UNITED BUSINESS SUPPLY	Daily Appointment Book with15-	LEGAL	\$799.50	Approved
23005073	11/16/2023	UNITED BUSINESS SUPPLY	Desk Calendar Refill, 3 1/2 in	LEGAL	\$47.84	Approved
23005073	11/16/2023	UNITED BUSINESS SUPPLY	8" x 4.5" Daily Desk Calendar	LEGAL	\$67.64	Approved
23005073	11/16/2023	UNITED BUSINESS SUPPLY	Desk Calendar Base for 4.5" x	LEGAL	\$56.28	Approved
23005077	11/16/2023	EASYCLOCKING	EasyClocking Nov 23-24	BOARD OF ELECT ADMINISTRATION	\$1562.50	Approved
23005083	11/16/2023	AMAZON CAPITAL SERVICES INC	Table C Charging Cords	ELECTRONIC VOTING CONSULTATION	\$2923.12	Approved
23005083	11/16/2023	AMAZON CAPITAL SERVICES INC	Table C Charging Cords	ELECTRONIC VOTING CONSULTATION	\$852.78	Approved
23005092	11/17/2023	4 IMPRINT INC	PROMO BAGS	SAS-PROTECTIVE SVCS	\$916.91	Approved
23005092	11/17/2023	4 IMPRINT INC	PROMO POST ITS	SAS-OFC OF THE DIRECTOR	\$388.81	Approved
23005092	11/17/2023	4 IMPRINT INC	PROMO KEYCHAINS	SAS-OFC OF THE DIRECTOR	\$577.89	Approved
23005093	11/17/2023	NICHOLS PAPER & SUPPLY CO	PARTS AND LABOR REPAIR	SANITARY OPERATING	\$1265.10	Approved
23005094	11/17/2023	SUSAN EVANS	Lustig Arb Inv - Wacasey Gosha	LAW DEPARTMENT	\$3325.00	Approved
23005102	11/17/2023	SOLOON BOARD OF EDUCATION	11/7/23 Election Nite Help	GENERAL ELECTION	\$1120.00	Approved

23005103	11/17/2023	BEDFORD SCHOOL DISTRICT	11/7/23 Election Night Help	GENERAL ELECTION	\$2340.00	Approved
23005104	11/17/2023	AMAZON CAPITAL SERVICES INC	Table C Charging Cords	ELECTRONIC VOTING CONSULTATION	\$2997.00	Approved
23005120	11/20/2023	SENIOR IMPACT PUBLICATIONS LLC	WRAAA ADULTS RESOURCE GUIDE	SAS-OFC OF THE DIRECTOR	\$2587.50	Approved
23005123	11/20/2023	CENTERS FOR MEDICARE & MEDICAI	Medicare - Wood STTL	RISK MGMT SETTLEMENTS	\$1359.56	Approved
23005129	11/21/2023	MNJ TECHNOLOGIES DIRECT INC	6 PACK WALKIE TALKIE	OFFICE OF THE DIRECTOR	\$1624.00	Approved
23005130	11/21/2023	US POSTMASTER	POSTAGE	CUYAHOGA SUPP. ENFORCEMENT AG	\$1670.00	Approved
23005131	11/21/2023	BORDEN DAIRY	1/2 pint 1% homogenized milk	DETENTION CENTER	\$3857.00	Approved
23005131	11/21/2023	BORDEN DAIRY	1/2 pint Fat free chocolate mi	DETENTION CENTER	\$855.90	Approved
23005132	11/21/2023	SCHWEBEL BAKING CO	Bread, Whole Grain, Enriched W	DETENTION CENTER	\$2488.00	Approved
23005132	11/21/2023	SCHWEBEL BAKING CO	Buns, Whole Grain Hamburger, 3	DETENTION CENTER	\$316.00	Approved
23005132	11/21/2023	SCHWEBEL BAKING CO	Buns, Whole Grain Hot Dogs 16	DETENTION CENTER	\$316.00	Approved
23005132	11/21/2023	SCHWEBEL BAKING CO	Buns, Sub, 6in.8 per pack	DETENTION CENTER	\$319.00	Approved
23005132	11/21/2023	SCHWEBEL BAKING CO	Flour Tortillas, 12 ct per pac	DETENTION CENTER	\$142.40	Approved
23005132	11/21/2023	SCHWEBEL BAKING CO	Rye bread, sliced	DETENTION CENTER	\$222.00	Approved
23005136	11/21/2023	CARR BROS INC	concrete	FAC-BUILDING SERVICES	\$2000.00	Unreleased
23005141	11/21/2023	HOLZBERG COMMUNICATIONS INC	biohazard test kits	STATE HOMELAND SECURITY PROJE	\$1949.00	Approved
23005141	11/21/2023	HOLZBERG COMMUNICATIONS INC	Shipping	STATE HOMELAND SECURITY PROJE	\$0.00	Approved

23005145	11/22/2023	UNITED RENTALS AERIAL EQUIPMEN	SHORING BOX STRUTS	SANITARY OPERATING	\$1630.00	Approved
23005146	11/22/2023	FRIENDSHIP CIRCLE OF CLEVELAND	Camp	FCFC OTHER SOCIAL SERV GRANTS	\$1330.00	Approved
23005147	11/22/2023	CEIA USA LTD	Metal Detector 720MM	CENTRAL SECURITY SERV-SHERIFF	\$3290.00	Approved
23005147	11/22/2023	CEIA USA LTD	Metal Plates with Screws	CENTRAL SECURITY SERV-SHERIFF	\$134.00	Approved
23005147	11/22/2023	CEIA USA LTD	Freight	CENTRAL SECURITY SERV-SHERIFF	\$125.00	Approved
23005148	11/26/2023	SHI	Part#: NPN-TRYHA- BUSIN-A	SECURITY AND DISASTER RECOVERY	\$2552.60	Approved
23005151	11/27/2023	ADVANCE OHIO	RQ13368 LEGAL AD FA MICROSCOPE	PUBLIC SAFETY GRANTS ADMIN	\$1123.20	Approved
23005156	11/27/2023	AMAZON CAPITAL SERVICES INC	Thermal Label Printer for EIP	ELECTRONIC VOTING CONSULTATION	\$3399.60	Approved
23005166	11/27/2023	JEFFREY A BELKIN LLC	Belkin Invoice - Gheen Canc	LAW DEPARTMENT	\$2000.00	Approved
23005167	11/27/2023	PITNEY BOWES	Bi-Annual Fees for 0010408789	BOARD OF ELECT ADMINISTRATION	\$1563.30	Approved
23005171	11/28/2023	THE SANSON COMPANY	Oranges, Fresh, (table beautif	DETENTION CENTER	\$1140.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Fresh Pears, 95-110 per case	DETENTION CENTER	\$380.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Strawberries, Fresh, 8lb box,	DETENTION CENTER	\$104.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Seedless Grapes, Green/Red, Fr	DETENTION CENTER	\$228.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Cantaloupe Melons, Fresh, 4/ca	DETENTION CENTER	\$8.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Honeydew Melons, Fresh, 3/case	DETENTION CENTER	\$9.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Bananas, Medium, Ripe on the t	DETENTION CENTER	\$210.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Yellow Apples, Fresh, Eating q	DETENTION CENTER	\$720.00	Approved

23005171	11/28/2023	THE SANSON COMPANY	Red Apples, Delicious, Fresh,	DETENTION CENTER	\$580.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Apple Slices 25/2oz individual	DETENTION CENTER	\$400.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Carrot Sticks 100/2oz individu	DETENTION CENTER	\$279.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Seedless Watermelon, Fresh, 2	DETENTION CENTER	\$21.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Peaches, Fresh, ripe turning,	DETENTION CENTER	\$320.00	Approved
23005171	11/28/2023	THE SANSON COMPANY	Cilantro (SMALL AMOUNT) TWO TI	DETENTION CENTER	\$9.00	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 500RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$216.27	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$266.47	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$296.30	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$220.06	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$454.18	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS	MED EXAM OTH JUDICIAL GRANTS	\$340.68	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 500RD/CASE	MED EXAM OTH JUDICIAL GRANTS	\$404.00	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 5000RD/CASE	MED EXAM OTH JUDICIAL GRANTS	\$298.80	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$225.06	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 500RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$304.21	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$304.21	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$451.70	Approved

23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$215.06	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 500RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$298.80	Approved
23005192	11/29/2023	KIESLER POLICE SUPPLY INC	Ammunition 1000RDS/CASE	MED EXAM OTH JUDICIAL GRANTS	\$430.12	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Peanut Butter, Smooth #354393	DETENTION CENTER	\$176.37	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Sauce, Pizza, Seasoned, with R	DETENTION CENTER	\$84.56	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Sauce, Cheese, Deluxe Nacho, #	DETENTION CENTER	\$120.78	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Olives, Spanish Black Ripe, Sl	DETENTION CENTER	\$69.85	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Peppers, Jalapeno, Sliced, Pla	DETENTION CENTER	\$47.26	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Sauce, Cheese, Sharp Cheddar,	DETENTION CENTER	\$112.38	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Sauce, Alfredo #283580 Primo	DETENTION CENTER	\$111.48	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Sauce, Sweet & Sour #242292 1	DETENTION CENTER	\$124.36	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Sauce, Spaghetti, with Spices,	DETENTION CENTER	\$76.10	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Beans, Great Northern, Fancy #	DETENTION CENTER	\$37.69	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Milk, Evaporated, Shelf-Stable	DETENTION CENTER	\$104.38	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Pepper Rings, Banana, Crinkle-	DETENTION CENTER	\$40.95	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Beans, Black, Fancy, #10 #5577	DETENTION CENTER	\$37.49	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Beans, Dark Red Kidney, Fancy,	DETENTION CENTER	\$41.74	Approved
23005196	11/29/2023	GORDON FOOD SERVICE	Beans, Pinto, Fancy, #10 #2614	DETENTION CENTER	\$37.59	Approved

23005196	11/29/2023	GORDON FOOD SERVICE	Jelly, Apple-Grape, #10 #10092	DETENTION CENTER	\$151.00	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Bagels, White Whole Grain, Fro	DETENTION CENTER	\$159.15	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	French Toast Sticks, Frozen, 0	DETENTION CENTER	\$185.04	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Waffles, Homestyle, Round, Fro	DETENTION CENTER	\$92.49	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Pancake, Whole Grain, Frozen #	DETENTION CENTER	\$81.36	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Small Wedge Potatoes, Refriger	DETENTION CENTER	\$195.99	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Cheese Sticks, Mozzarella, Bre	DETENTION CENTER	\$211.60	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Biscuits, Buttermilk, Sliced,	DETENTION CENTER	\$79.48	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Slider Sandwiches, Smoked Turk	DETENTION CENTER	\$241.23	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Sandwiches, Peanut Butter & St	DETENTION CENTER	\$173.28	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Pita Bread, White, 6 Inch, Poc	DETENTION CENTER	\$48.04	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Breadsticks, Italian Garlic &	DETENTION CENTER	\$122.40	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Crusts, Pizza, 1/2 Sheet, Trad	DETENTION CENTER	\$152.10	Approved
23005200	11/29/2023	SYSCO CLEVELAND INC	Maple-Battered Turkey Pancake	DETENTION CENTER	\$106.50	Approved
23005201	11/29/2023	SYSCO CLEVELAND INC	Frosted Flakes, Reduced-Sugar,	DETENTION CENTER	\$182.40	Approved
23005201	11/29/2023	SYSCO CLEVELAND INC	Whole Grain, Reduced-Sugar, Pl	DETENTION CENTER	\$179.55	Approved
23005201	11/29/2023	SYSCO CLEVELAND INC	Apple Jacks, Reduced Sugar, Wh	DETENTION CENTER	\$271.65	Approved
23005201	11/29/2023	SYSCO CLEVELAND INC	Fruit Loops, Reduced Sugar, Wh	DETENTION CENTER	\$177.80	Approved

23005201	11/29/2023	SYSCO CLEVELAND INC	Honey Nut, Cheerios, Bowl #509	DETENTION CENTER	\$293.90	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Creamy Italian Dressing, 1 Gal	DETENTION CENTER	\$83.24	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Ranch Dressing, 1 Gal, 4/Case	DETENTION CENTER	\$120.06	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	French Dressing, 1 Gal, 4/Case	DETENTION CENTER	\$83.90	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Barbecue Sauce, 1 Gal, 4/Case	DETENTION CENTER	\$90.82	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Hot Sauce, 1 Gal, 4/Case #7908	DETENTION CENTER	\$64.60	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Sauce, Tartar, Packets #213361	DETENTION CENTER	\$45.26	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Ketchup, Packets #272086 Gor	DETENTION CENTER	\$37.20	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Mustard Packets #870812 Bric	DETENTION CENTER	\$51.66	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Mayonnaise, Packets #475574	DETENTION CENTER	\$171.90	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Sauce, Barbecue, Dipping Cups	DETENTION CENTER	\$65.22	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Dressing, Italian #631420 Ki	DETENTION CENTER	\$86.13	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Sauce, Taco, Packets #192007	DETENTION CENTER	\$38.82	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Sauce, Hot, Packet #691181 C	DETENTION CENTER	\$48.57	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Cole Slaw Dressing, 1 Gal, 4/C	DETENTION CENTER	\$45.83	Approved
23005202	11/29/2023	GORDON FOOD SERVICE	Mustard, Jug, 1 Gal, 4/Case #8	DETENTION CENTER	\$19.97	Approved
23005203	11/29/2023	SYSCO CLEVELAND INC	Beef, Ground, Fine Grind, 81%	DETENTION CENTER	\$689.40	Approved
23005203	11/29/2023	SYSCO CLEVELAND INC	Beef Patties, Ground Chuck & B	DETENTION CENTER	\$414.60	Approved

23005219	11/30/2023	UNIVERSAL OIL INC	ATF FLUID	COUNTY AIRPORT	\$1261.10	Approved
23005222	11/30/2023	ASHLAND UNIVERSITY	JENNIFER WILSON	EQUITY & INCLUSION	\$1498.50	Approved
23005224	11/30/2023	PRISTINE CHEMICAL LLC	Cups, Souffle Portion, 2 Ounce	DETENTION CENTER	\$34.26	Approved
23005224	11/30/2023	PRISTINE CHEMICAL LLC	Lids, Plastic, Clear, Polystyr	DETENTION CENTER	\$21.48	Approved
23005224	11/30/2023	PRISTINE CHEMICAL LLC	Trays, 5-Compartment School Lu	DETENTION CENTER	\$504.30	Approved
23005224	11/30/2023	PRISTINE CHEMICAL LLC	Film Roll, Cling Wrap, 18 Inch	DETENTION CENTER	\$225.80	Approved
23005224	11/30/2023	PRISTINE CHEMICAL LLC	Bags, Sandwich, 6 x 7 Inch, We	DETENTION CENTER	\$256.26	Approved
23005224	11/30/2023	PRISTINE CHEMICAL LLC	Spoons, Soup, Medium-Weight PI	DETENTION CENTER	\$147.90	Approved

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes

Cuyahoga County Board of Control
Monday, December 11, 2023 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
Committee Room B

I. – CALL TO ORDER

The meeting was called to order at 11:03 a.m.

Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration
(Alternate for Chris Ronayne, County Executive)
Michael Chambers, Interim Fiscal Officer, serving as Chairman
Nichole English, Administrator, Planning and Programming, Department of Public Works
(Alternate for Michael Dever)
Paul Porter, Director, Department of Purchasing
James Boyle, County Council (Alternate for Pernel Jones, Jr.)
Councilmember Meredith Turner
Councilmember Dale Miller

II. – REVIEW MINUTES – 12/4/2023

Meredith Turner motioned to approve the minutes from the December 4, 2023, meeting; James Boyle seconded. The minutes were approved by unanimous vote, as written.

III. – PUBLIC COMMENT

There was no public comment.

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2023-794

Department of Public Works, submitting an amendment to Contract No. 3285 with Tri Mor Corporation for rehabilitation of Aprons D1, D2 and D3 at Cuyahoga County Airport located at 26340 Curtiss Wright Parkway, Richmond Heights, for additional funds in the amount not-to-exceed \$6,300.00.

Funding Source: Airport Fund

Nichole English, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-794 was approved by unanimous vote.

BC2023-795

Department of Public Works, recommending an award and enter into a Master Contract with various vendors (75-2) in the total amount not-to-exceed \$49,999.00 for emergency plumbing services on an as-needed basis, effective upon contract signature of all parties, for a period of one (1) year:

- a) Contract No. 3946 with Mayer Plumbing in the anticipated amount of \$40,000.00.
- b) Contract No. 3947 with McPhillips Plumbing & Heating in the anticipated amount of \$9,999.00.

Funding Source: Sanitary Funds

Thomas Pavich, Department of Public Works, presented. Dale Miller asked why Mayer was given 80% of the funding. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-795 was approved by unanimous vote.

BC2023-796

Department of Public Works,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Gilbane Building Company in the amount not-to-exceed \$29,800.00 for the design-build services for the Central Services Campus Project, effective upon contract signature of all parties, through 3/31/2024.
- b) Recommending an award and enter into Contract No. 4009 with Gilbane Building Company in the amount not-to-exceed \$29,800.00 for the design-build services for the Central Services Campus Project, effective upon contract signature of all parties, through 3/31/2024.

Funding Source: General Fund

Nichole English, Department of Public Works, presented. Dale Miller asked if we anticipated Gilbane working only on the jail project or the rest of the campus. James Boyle asked if Gilbane has been selected for the project, and if they will be recommended; asked if the dollar amount today is smaller than the overall award; asked who will present to Garfield Board of Zoning Appeals; asked if we would have to present to the BZA since we know the scope of the project. Michael Chambers motioned to approve the item; James Boyle seconded. Item BC2023-796 was approved by unanimous vote.

BC2023-797

Department of Public Works, submitting Agreement No. 4012 with City of Cleveland in the amount not-to-exceed \$157,014.47 for bridge inspection services, commencing upon contract signature of all parties for a period of one (1) year.

Funding Source: Revenue Generating

Nichole English, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-797 was approved by unanimous vote.

BC2023-798

Department of Housing and Community Development,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Lutheran Metropolitan Ministry in the amount not-to-exceed \$375,000.00 for affordable housing and related support services for families leaving homelessness as a response to COVID-19 for the period 10/01/2023 – 12/31/2024.

- b) Recommending an award and enter into Contract No. 3812 with Lutheran Metropolitan Ministry in the amount not-to-exceed \$375,000.00 for affordable housing and related support services for families leaving homelessness as a response to COVID-19 for the period 10/01/2023 – 12/31/2024.

Funding Source: Federal Community Development Block Grant – CV

Sara Parks Jackson, Department of Housing and Community Development, presented. Meredith Turner asked about the total cost of one of the homes, and the Presenter indicated she will follow up. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-798 was approved by unanimous vote.

BC2023-799

Department of Information Technology, on behalf of Department of Health and Human Services,

- a) Submitting an RFP Exemption, which will result in an award recommendation to TEC Communications, Inc. in the amount not-to-exceed \$151,200.00 for (5) Amazon Cloud Call Centers, licensing, and technical support for customer service hotlines for various agencies for the period 01/01/2024 – 12/31/2024:
 - 1) Department of Health and Human Services/Cuyahoga Job and Family Services – 7000 and Cares
 - 2) Department of Health and Human Services/Division of Senior and Adult Services
 - 3) Department of Health and Human Services/Division of Children and Family Services – KIDS Hotline
 - 4) Department of Health and Human Services-IT Help Desk
 - 5) Department of Health and Human Services/Office of Child Support Services

- b) Recommending an award and enter into Contract No. 3960 with TEC Communications, Inc. in the amount not-to-exceed \$151,200.00 for (5) Amazon Cloud Call Centers, licensing, and technical support for customer service hotlines for various agencies for the period 01/01/2024 – 12/31/2024:
 - 1) Department of Health and Human Services/Cuyahoga Job and Family Services – 7000 and Cares
 - 2) Department of Health and Human Services/Division of Senior and Adult Services
 - 3) Department of Health and Human Services/Division of Children and Family Services – KIDS Hotline
 - 4) Department of Health and Human Services-IT Help Desk
 - 5) Department of Health and Human Services/Office of Child Support Services

Funding Source: Health and Human Services Levy Fund

Dennis Sullivan, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; James Boyle seconded. Item BC2023-799 was approved by unanimous vote.

BC2023-800

Department of Information Technology,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Sterling Data Center dba BlueBridge Networks in the amount not-to-exceed \$336,000.00 for lease of space located at 1255 Euclid Avenue, Cleveland, to house and maintain County-owned fiber and server racks for the period 01/01/2024 – 12/31/2025.
- b) Recommending an award and enter into Contract No. 3983 with Sterling Data Center dba. BlueBridge Networks in the amount not-to-exceed \$336,000.00 for lease of space located at 1255 Euclid Avenue, Cleveland, to house and maintain County-owned fiber and server racks for the period 01/01/2024 – 12/31/2025.

Funding Source: General Fund

Dennis Sullivan, Department of Information Technology, presented. Dale Miller asked if the arrangement will be considered for the foreseeable future; asked why this is shorter than a typical lease. James Boyle pointed out the variation in dollar amounts between the amendments. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2023-800 was approved by unanimous vote.

BC2023-801

Court of Common Pleas/Juvenile Court Division, recommending awards and enter into agreements with various municipalities in the total amount not-to-exceed \$21,300.00 for Community Diversion Program services for the period 1/1/2024 – 12/31/2024:

- a) Agreement No. 3949 with City of Parma in the amount not-to-exceed \$14,400.00.
- b) Agreement No. 3981 with City of Solon in the amount not-to-exceed \$6,900.00.

Funding Source: Health and Human Services Levy Fund

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Dale Miller motioned to approve the item; James Boyle seconded. Item BC2023-801 was approved by unanimous vote.

BC2023-802

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to The-Musketeer Association, LLC in the amount not-to-exceed \$45,000.00 for positive youth development services for Court referred youths ages 12 to 20 with high risk for recidivism for the period 7/1/2023 – 6/30/2024.
- b) Recommending an award and enter into Contract No. 3936 with The-Musketeer Association, LLC in the amount not-to-exceed \$45,000.00 for positive youth development services for Court referred youths ages 12 to 20 with high risk for recidivism for the period 7/1/2023 – 6/30/2024.

Funding Source: RECLAIM Grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-802 was approved by unanimous vote.

BC2023-803

Sheriff's Department, submitting amendments to agreements with various municipalities and a board for inmate housing services for various time periods to extend the time period, to change the per diem rates from \$122.12 to \$173.00, effective 1/1/2024, and for additional revenue in the total estimated amount of ~~\$535,000.00~~ **\$545,000.00**:

a) for the period 1/1/2020 – 12/31/2023 to extend the time period to 12/31/2024:

- 1) Agreement No. 129 (fka Agreement No. AG2000218) with Village of Highland Hills in the estimated amount of \$10,000.00.

b) for the period 1/1/2020 – 12/31/2023 to extend the time period to 12/31/2025:

- 1) Agreement No. 131 with Village of Woodmere (fka Agreement No. AG2000220) in the estimated amount of \$5,000.00.
- 2) Agreement No. 132 with City of Richmond Heights (fka Agreement No. AG2000217) in the estimated amount of \$35,000.00.
- 3) Agreement No. 345 (fka Agreement No. AG1900213) with Board of Park Commissioners of the Cleveland Metropolitan Park District in the estimated amount of \$25,000.00.

c) for the period 2/1/2020 – 12/31/2023 to extend the time period to 12/31/2025:

- 1) Agreement No. 86 (fka Agreement No. 2000364) with City of Euclid in the estimated amount of \$460,000.00.

d) for the period 8/1/2020 – 12/31/2023 to extend the time period to 12/31/2024:

- 1) Agreement No. 119 (**fka 20000771**) with Village of Bratenahl in the estimated amount of \$10,000.00.

Funding Source: Revenue Generating

Chris Costin, Sheriff's Department, presented. James Boyle asked the rate the City of Cleveland is paying us. James Boyle observed this is lower than the other rates. Michael Chambers motioned to approve the item as amended; James Boyle seconded. Item BC2023-803 was approved by unanimous vote as amended. A second vote occurred due to an additional revision of the total not-to-exceed amount. Michael Chambers motioned to approve the item as amended; Meredith Turner seconded. Item BC2023-803 was approved by unanimous vote as amended.

BC2023-804

Department of Public Safety and Justice Services, recommending an award on RQ13352 and enter into Purchase Order No. 23005119 with Rigaku Analytical Devices, Inc. (39-4) in the amount not-to-exceed \$42,820.00 for the purchase of (1) handheld RAMAN chemical analyzer for the Lake County HazMat team.

Funding Source: FY2021 State Homeland Security Program

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. James Boyle asked if they were just waiting on our approval. James Boyle motioned to approve the item; Nichole English seconded. Item BC2023-804 was approved by unanimous vote.

BC2023-805

Department of Health and Human Services/Division of Children and Family Services, recommending an award and enter into Agreement No. 3938 with Court of Common Pleas/Juvenile Court Division in the amount not-to-exceed \$44,000.00 for psychological evaluation services for the period 1/1/2024 – 12/31/2025.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes presented, Department of Health and Human Services/Division of Children and Family Services, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-805 was approved by unanimous vote.

BC2023-806

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Values-in-Action Foundation in the amount not-to-exceed \$140,000.00 for workforce training services for youth for the period 1/1/2024 – 12/31/2025.
- b) Recommending an award and enter into Contract No. 3986 with Values-in-Action Foundation in the amount not-to-exceed \$140,000.00 for workforce training services for youth for the period 1/1/2024 – 12/31/2025.

Funding Source: Health and Human Services Levy Fund

Kathleen Stewart, Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, presented. Dale Miller asked why this was done by an exemption instead of competitively procured, and will it be bid out in the future. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-806 was approved by unanimous vote.

BC2023-807

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services,

- a) Submitting an RFP exemption, which will result in an award recommendation to Radical Hospitality in the amount not-to-exceed \$25,000.00 for operating support of seasonal shelter services for the period 12/1/2023 – 5/30/2024.
- b) Recommending an award on Purchase Order No. 23005152 to Radical Hospitality in the amount not-to-exceed \$25,000.00 for operating support of seasonal shelter services for the period 12/1/2023 – 5/30/2024.

Funding Source: Health and Human Services Levy Fund

David Merriman, Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, presented. Dale Miller commented that not everyone is responsive to the County's Shelter System, and people need options to get off the streets during winter nights, and this will support health and welfare and save lives. James Boyle echoed Councilman Miller's comments and commended the Department's work. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-807 was approved by unanimous vote.

BC2023-808

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services,

- a) Submitting an RFP exemption, which will result in an award recommendation to The Metanoia Project in the amount not-to-exceed \$25,000.00 for operating support for shelter and hospitality services for shelter resistant persons during the 2023/2024 winter season.
- b) Recommending an award on Purchase Order No. 23005163 to The Metanoia Project in the amount not-to-exceed \$25,000.00 for operating support for shelter and hospitality services for shelter resistant persons during the 2023/2024 winter season.

Funding Source: Health and Human Services Levy Fund

David Merriman, Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-808 was approved by unanimous vote.

BC2023-809

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, submitting an amendment to Contract No. 3054 (fka Contract No. 1983) with Oriana House, Inc. for administration and operation of the Neighborhood Reentry Resource Center and the Adult Transition Model for the period 7/1/2021 – 12/31/2024 to expand the scope of services, effective upon contract signature of all parties, and for additional funds in the amount not-to-exceed \$100,000.00.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, presented. There were no questions. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-809 was approved by unanimous vote.

BC2023-810

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, submitting an amendment to Grant Agreement (via Contract No. 3193) with Northeast Ohio Coalition for the Homeless for street outreach services for individuals experiencing unsheltered homelessness throughout Cuyahoga County for the period 3/23/2023 – 3/22/2024 to extend the time period for one (1) year, to change the scope of services, effective upon contract signature of all parties, and for additional funds in the amount not-to-exceed \$99,900.00.

Funding Source: Health and Human Services Levy Fund

David Merriman and Simeon Best, Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-810 was approved by unanimous vote.

BC2023-811

Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, submitting Agreement No. 3982 with Ohio Department of Rehabilitation and Correction in the amount not-to-exceed \$200,000.00 for support services to assist formerly incarcerated individuals, effective upon contract signature of all parties, through 12/31/2024.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services/Community Initiatives Division/Office of Re-entry, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-811 was approved by unanimous vote.

C. – Exemptions

BC2023-812

Court of Common Pleas/Juvenile Court Division, recommending an alternative procurement process to allow weekly and monthly repetitive food purchases in the amount not-to-exceed \$1,800,000.00 for the period 1/1/2024 – 12/31/2025.

Funding Source: General Fund

Priscilla Bottomlee, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-812 was approved by unanimous vote.

BC2023-813

Sheriff's Department, requesting an alternative procurement process, which will result in award recommendations to various providers in the total amount not-to-exceed \$20,000.00 for emergency and routine veterinary services for the K-9 Unit for the period 1/1/2024 – 12/31/2024.

- a) Family Pet Clinic in the amount not-to-exceed \$10,000.00.
- b) Metropolitan Vet Clinic in the amount not-to-exceed \$6,000.00.
- c) Provider(s) to be determined for emergency services at nearest vet clinic in the amount not-to-exceed \$4,000.00.

Funding Source: Federal Equitable Sharing Account

Chris Costin, Sheriff's Department, presented. Meredith Turner asked if they budget for hair and nail care. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-813 was approved by unanimous vote.

D. – Consent Agenda

Dale Miller asked what we see our relationship with Project Management Consultants will be going forward. James Boyle asked what is left on BC2023-814; asked for BC2023-815 what is remaining; asked if we have an Owner’s Rep for the Justice Center project yet; asked if we would solicit one once we get to that point. Dale Miller asked if we would expand Project Management Consultants’ scope. Michael Chambers motioned to approve Consent Agenda Item No. BC2023-814 through BC2023-818 as amended; Paul Porter seconded. The Consent Agenda Items were approved by unanimous vote as amended.

BC2023-814

Department of Public Works, submitting an amendment to Contract No. 832 with DLR Group, Inc. dba DLR Group|Westlake Reed Leskosky for programming services for the Justice Center Complex Project include the coordination of third-party review of the jail and the coordination of the planning process regarding the potential to reduce the scope and construction/project costs for the Courts as part of the Justice Center for the period 4/24/2019 – 12/31/2023 to extend the time period to 12/31/2024; no additional funds required.

Funding Source: General Fund – ~~American Rescue Plan Act Revenue Replacement (ARPA)/Provision of Government Services~~

BC2023-815

Department of Public Works, requesting ~~authority to prepare~~ **submitting** an amendment to Contract No. 3995 (fka Contract No. 871) with Project Management Consultants LLC for owner’s representative services in connection with the Justice Center Complex Project to include Conceptual Design Phase for the Corrections Center and consulting services to evaluate options for remaining functions at the Justice Center for the period 1/9/2019 – 12/31/2023 to extend the time period to 12/31/2024; no additional funds required.

Funding Source: General Fund

BC2023-816

Department of Purchasing, declaring various property as surplus County property no longer needed for public use; recommending selling said property via internet auction, in accordance with Ohio Revised Code Section 307.12(E).

Funding Source: Revenue Generating

BC2023-817

Fiscal Department, presenting proposed travel/membership requests for the week of 12/11/2023:

Dept:	Public Defender’s Office
Event:	Gideons Promise Winter Conference
Source:	Gideons Promise
Location:	Atlanta, GA

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Rachelle Summers	1/25/2024 – 1/28/2024	\$662.50	\$212.00	\$0.00	\$176.00	\$319.80	\$1,370.30	General Fund, Reimbursable at 85% from Ohio Public Defender
Andrew Schriver	1/25/2024 – 1/28/2024	\$662.50	\$212.00	\$0.00	\$153.84	\$319.80	\$1,348.14	General Fund, Reimbursable at 85% from Ohio Public Defender

*Paid to host

**Staff reimbursement

*** Airfare will be covered by a contract with the County’s Travel Vendor

Purpose:

Gideon’s Promise Winter Session is a three-day training held annually in January. Winter Session gives us an opportunity for Gideon’s Promise “Returners” and Alumni to continue to hone their trial skills. Winter Session provides current CORE 101 members who have completed their initial two-week training and are continuing to matriculate through the CORE 101 training (aka “Returners”) with ongoing training and support. Gideon’s Promise alumni who have completed their CORE 101 program are able to attend follow-up training, based on their needs. This workshop will provide a wide range of skills & techniques to provide representation to the indigent population.

BC2023-818

Department of Purchasing, presenting proposed purchases for the week of 12/11/2023:

Direct Open Market Purchases
(Purchases between \$5,000 - \$49,999.99 unless requiring assistance from the Department of Purchasing – See Below):

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23002080	Create, conduct and evaluate Citizens’ Advisory Council on Equity (CACE) community survey	Department of Equity and Inclusion	Cleveland State University	\$29,987.00	General Fund
23004775	New installation of (2) Amano McGann credit	Department of Public Works	PSX, Inc.	\$44,900.00	Parking Enterprise Fund

	card readers for use at the Huntington Garage				
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V. – OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Department of Public Works, submitting a grant award from the Cleveland Foundation in the amount of \$50,000.00 for public engagement activities in connection with Rediscover Veterans Memorial Bridge for the period 7/1/2023 – 9/30/2023.

Funding Source: Cleveland Foundation

Item No. 2

Sheriff’s Department, submitting an amendment to a grant agreement with Ohio University to design a Decision Support System (DSS) for the planning and deployment of anti-human trafficking operations system in connection with Senator Brown’s Congressionally Direct Spending (CDS) for the period 7/1/2023 – 6/30/2024 to extend the time period to 9/30/2024; no additional funds required.

Funding Source: FY2023 Senator Brown’s Congressionally Directed Spending (CDS) Request for FY2023 (Human Trafficking)

Item No. 3

Department of Public Safety and Justice Services, submitting a Grant Agreement from Ohio Emergency Management Agency in the amount not-to-exceed \$83,800.00 for the FY2023 State Homeland Security Grant Program for the period 9/1/2023 – 12/31/2025.

Funding Source: FY2023 Urban Area Security Initiative Grant Program

Item No. 4

Department of Public Safety and Justice Services,

- a) Requesting authority to apply for grant funds to Ohio Emergency Management Agency in the amount not-to-exceed \$1,645,333.00 for the FY2023 Urban Area Security Initiative Grant Program for the period 9/1/2023 – 12/31/2025.
- b) Submitting a Grant Agreement from Ohio Emergency Management Agency in the amount not-to-exceed \$1,645,333.00 for the FY2023 Urban Area Security Initiative Grant Program for the period 9/1/2023 – 12/31/2025.

Funding Source: FY2023 Urban Area Security Initiative Grant Program

Item No. 5

Department of Public Safety and Justice Services,

- a) Requesting authority to submit a grant application to Ohio Department of Youth Services in the amount of \$10,000.00 for the FY2023 Racial and Ethnic Disparities Planning Program in connection with the Juvenile Justice and Delinquency Prevention Title II Formula Block Grant Program for the period 10/1/2023 – 12/31/2024.

- b) Submitting a grant award from Ohio Department of Youth Services in the amount of \$10,000.00 for the FY2023 Racial and Ethnic Disparities Planning Program in connection with the Juvenile Justice and Delinquency Prevention Title II Formula Block Grant Program for the period 10/1/2023 – ~~12/31/2023~~ **12/31/2024.**

Funding Source: Ohio Department of Youth Services

Item No. 6

Department of Public Safety and Justice Services,

- a) Requesting authority to submit a grant application to Ohio Department of Youth Services in the amount of \$190,000.00 for the FY2023 Juvenile Justice and Delinquency Prevention Disproportionate Minority Contact Title II Formula Block Grant Program for the period 10/1/2023 – 6/30/2025.

- b) Submitting a grant award from Ohio Department of Youth Services \$190,000.00 for the FY2023 Juvenile Justice and Delinquency Prevention Disproportionate Minority Contact Title II Formula Block Grant Program for the period 10/1/2023 – 6/30/2025.

Funding Source: U.S. Department of Justice, Office of Justice Delinquency and Prevention Block Grant

Item No. 7

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services,

- a) Requesting authority to apply for grant funds from Ohio Department of Development in the amount of \$1,451,600.00 for rapid rehousing to homeless males, females and households with children in connection with the FY2023 Homeless Crisis response Program for the period 7/1/2023 – 8/25/2025.

- b) Submitting a grant agreement from Ohio Department of Development in the amount of \$1,451,600.00 for rapid rehousing to homeless males, females and households with children in connection with the FY2023 Homeless Crisis response Program for the period 7/1/2023 – 8/25/2025.

Funding Source: Ohio Department of Development

Item No. 8

Contracts \$0.00 – \$4,999.99 – Processed and executed (no vote required)

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
No RQ	Contract No. 3976	Nover Englestein & Associates, Inc.	Migration services of the WinWam software from Access to SQL Express	\$3,000.00	Department of Consumer Affairs	11/21/2023 – 11/20/2024	General Fund	11/21/2023 (Executive) 11/22/2023 (Law)
RQ 11049 & 12848	Amend Master Contract – Assign Contract No. 3817	Various providers	Various maintenance, repair and operations supplies for the Sanitary Engineering Division; to add Applied MSS; no additional funds required	\$-0-	Department of Public Works	1/1/2023 – 12/31/2024	(Original) Sanitary Fund	11/29/2023 (Executive) 11/28/2023 (Law)
RQ 11049 & 12848	Amend Master Contract – Assign Contract No. 3831	Various providers	Various maintenance, repair and operations supplies for the Sanitary Engineering Division; to add Core & Main LP; no additional funds required	\$-0-	Department of Public Works	1/1/2023 – 12/31/2024	(Original) Sanitary Fund	11/29/2023 (Executive) 11/28/2023 (Law)
RQ 11049 & 12848	Amend Master Contract – Assign Contract No. 3832	Various providers	Various maintenance, repair and operations supplies for the Sanitary Engineering Division; to add Industrial Safety Products; no additional funds required	\$-0-	Department of Public Works	1/1/2023 – 12/31/2024	(Original) Sanitary Fund	11/29/2023 (Executive) 11/28/2023 (Law)

RQ 11049 & 12848	Amend Master Contract – Assign Contract No. 3833	Various providers	Various maintenance, repair and operations supplies for the Sanitary Engineering Division; to add Winsupply of Cleveland; no additional funds required	\$-0-	Department of Public Works	1/1/2023 – 12/31/2024	(Original) Sanitary Fund	11/29/202 3 (Executive) 11/28/202 3 (Law)
RQ 42565	Amend Contract No. 1556	MS Consultants, Inc.	General architectural and engineering services	\$-0-	Department of Public Works	10/23/2018 – 12/31/2023	(Original) General Fund	11/29/202 3

VI. – PUBLIC COMMENT

Councilman Miller asked if we would not be meeting the two Holiday weeks. Paul Porter indicated we will not meet December 26, 2023 but we will meet January 2, 2024.

VII. – ADJOURNMENT

Michael Chambers motioned to adjourn; Nichole English seconded. The motion to adjourn was unanimously approved at 11:45am.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2023-819

Department of Public Works; Land & Water Conservation Fund—Outdoor Recreation Legacy Partnership (LWCF-ORLP) Program Grant Award \$1,498,750

Scope of Work Summary

The Department of Public Works requests approval to accept a grant agreement with the Ohio Department of Natural Resources/National Park Service in the amount of \$1,498,750 for the Beulah Park-Euclid Beach Connector Trail – in connection with the Cuyahoga County Lakefront Public Access Plan in the City of Cleveland.

Grant funds will be used for constructions costs to provide continuous shoreline protection (integrated armor stone revetment and nature-based shoreline) and public access (multi-purpose trail) along 2/3-of-a-mile of an eroding shoreline from Euclid Beach Park west to Shore Acres Drive.

The grantor is:

Ohio Department of Natural Resources
Office of Real-Estate
2045 Morse Road, E-2
Columbus, OH 43229

The Office of Real Estate is under the direction of Chief Tara Paciorek.

The project site is a 2/3 of-a-mile stretch of lakeshore stretching from Euclid Beach Park, part of the Cleveland Metroparks' Lakefront Reservation, west to Shore Acres Drive.

The project is located in Council District 10.

Project Status

This grant will be awarded to Cuyahoga County upon the signed agreement.

The grant agreement document will require either a wet or a digital signature.

Funding

The \$1,498,750 grant award from the Ohio Department of Natural Resources / National Park Service is funded 100% by State of Ohio capital funds. This grant is a 50/50 match. The County will be required to contribute \$1,498,750 of local share.

The grant will be paid by the state on a reimbursable basis.

BC2023-820

Scope of Work Summary

The Department of Public Works requests approval to accept a grant agreement with the Ohio Department of Natural Resources in the amount of \$70,000 for the Beulah Park-Euclid Beach Connector Trail – in connection with the Cuyahoga County Lakefront Public Access Plan in the City of Cleveland.

Grant funds will be used for constructions costs to provide continuous shoreline protection (integrated armor stone revetment and nature-based shoreline) and public access (multi-purpose trail) along 2/3-of-a-mile of an eroding shoreline from Euclid Beach Park west to Shore Acres Drive.

Contractor Information

Ohio Department of Natural Resources
Office of Real-Estate
2045 Morse Road, E-2
Columbus, OH 43229

The Office of Real Estate is under the direction of Chief Tara Paciorek.

The project site is a 2/3 of-a-mile stretch of lakeshore stretching from Euclid Beach Park, part of the Cleveland Metroparks’ Lakefront Reservation, west to Shore Acres Drive.

The project is located in Council District 10.

Project Status

This grant will be awarded to Cuyahoga County upon the signed agreement. The grant agreement document will require either a wet or a digital signature.

Funding

The \$70,000 grant award from the Ohio Department of Natural Resources is funded 100% by State of Ohio capital funds. This grant is a 53.3 - 46.6% split. The County will be required to contribute \$80,000 of local share.

The grant will be paid by the state on a reimbursable basis.

BC2023-821

Title	Public Works – Waste Removal Service– Contract Amendment – Browning-Ferris Industries of Ohio dba Republic Services	
Department or Agency Name	Public Works	

Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):
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Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	CM2146	Republic Services	1/1/2022 – 12/31/2023	\$240,000.00	1/3/2022	BC2022-03
A-1	CM2146	Republic Services	Pending approval – 12/31/2024	\$240,000.00	Pending	pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.
 This request is to extend the Waste removal contract to 12/31/2024 and add additional funds in the amount of \$240,000.00.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):
 To provide rubbish removal services for various County buildings.
 The contract amendment allows for continuous service with no disruption.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: Browning-Ferris Industries of Ohio , Inc. 8123 Jones Road Cleveland, Ohio 44105	Owner, executive director, other (specify): Chase Ritenauer-General Manager
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <i>RFB – original method</i> <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. <i>General Fund – 100%</i>	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission

Reason:	
Timeline:	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-822

Title	Public Works Precision Compaction Services Amendment / RQ none /Compactor, Baler & Dumpster Prevention Maintenance Amendment
Department or Agency Name	Department of Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
0	CM2592	Precision Compaction Services	8/2/2022- 8/1/2025	\$49,500.00	7.25.2022	BC2022-450
A-1	CM2592	Precision Compaction Services	8/2/2022- 8/1/2025	\$23,000.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New or <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>Public Works is requesting approval to amend this preventive maintenance contract, per the chart above, to secure an additional \$23,000, there is no change to the scope or the term.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>

Project Goals, Outcomes or Purpose (list 3): To add funding to the Compactor, Baler & Dumpster Prevention Maintenance Amendment
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Precision Compaction Services. 2557 Center Road Hinckley, OH 44233	Owner, executive director, other (specify): Ken L. Boersma, President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Precision Compaction Services is the current vendor that provides preventive maintenance services for compactors, bailers and dumpsters and was selected originally through a formal bid process. This is an active contract and additional funds are needed for 2024.
	*See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process

How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <i>IBID</i>
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. General Fund – PW750100 / 55130
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline:	
Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

Please see page 1.

BC2023-823

Title	2024 Seven Hills Sewer Maintenance Utility Agreement- revenue generating, \$400,000, CM 3901	
Department or Agency Name	Public Works	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3901	Seven Hills	1/1/2024-12/31/2024	\$400,000	pending	pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase. The primary goal of this Agreement is for sanitary and storm sewer maintenance and for the purpose of retaining the County to perform certain services relative to City's sewers.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):
 This is an annual direct bill agreement with the City of Seven Hills for sewer maintenance services provided by the Public Works Sanitary Engineering Division and billed quarterly on a direct bill basis to Seven Hills

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
City of Seven Hills 7325 Summitview Drive Seven Hills, Ohio 44131	Jack Johnson- Service Director
Vendor Council District: 6	Project Council District: 6

If applicable provide the full address or list the municipality(ies) impacted by the project.	Sewer work in Seven Hills
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COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. This is a requested revenue generated agreement. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. Revenue generating- for deposit in Seven Hills sewer district funds
Is funding for this included in the approved budget? <input type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain): NA
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):	
2936 (2023 Agreement)	
BC2022-758	12/12/2022

BC2023-824

Title	2023 Department of Development; Cleveland State University; Economic Development Research and Analysis	
Department or Agency Name	Department of Development	
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3993	Cleveland State University	1/1/2024- 12/31/2024	\$24,500.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

The Department of Development is seeking approval of a contract with Cleveland State University to provide research and analysis for economic development related areas for the period of January 1, 2024 to December 31, 2024 in an amount not to exceed \$24,500.00.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):

The purpose of the program is to provide research and analysis services to the County to provide services including but not limited to;

- Research and analysis for periodic updates of the Cuyahoga County 5-year Economic Development Plan
- Develop Impact reports for specific economic development initiatives
- Provisions of evidence-based analysis for periodic issues and policy questions as these arise.
- Examples of potential research and analytics capabilities include:
 - Opinion polls and surveys
 - Focus groups and interviews
 - Content analysis
 - Demographics surveys
 - GIS social and political mapping
 - Needs assessments
 - Evaluation studies
 - Feasibility studies
 - Market surveys and analyses
 - Documentary & secondary source research
 - Big data analysis

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
Cleveland State University 2121 Euclid Avenue Cleveland , OH 44115	Molly Schnoke, Director
Vendor Council District: 7	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT - X	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input checked="" type="checkbox"/> RFQ	Provide a short summary for not using competitive bid process.

<input checked="" type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	*See Justification for additional information.
The total value of the solicitation: \$49,000.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 5 / 2	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i> N/A	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i> N/A	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? N/A	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. Department of Development General Fund	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission

Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
N/A

BC2023-825

Title	Department of Development; The National Council for Community Development dba Grow America; 2024-2025 Contract for Technical Assistance with Economic Development Projects and Activities
Department or Agency Name	Department of Development
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3971	The National Council for Community Development dba Grow America	1/1/2024 – 12/31/2025	\$198,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.
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Requesting approval of a contract with The National Council for Community Development dba Grow America the amount of \$198,000.00 for the period 1/1/2024 – 12/31/2025.

The Project is an extension of the longstanding, existing technical assistance relationship between Cuyahoga County and the National Council for Community Development.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):

- Assist the Department of Development staff in the analysis, evaluation and underwriting of loan and financial assistance requests for business expansion, real estate development, and brownfield clean-up projects.
- Assist the Department of Development’s Director and Deputy Director in reaching out to, communicating with, meeting with, developing concepts, programs and solutions for issues, etc. amongst local & regional entities, constituencies, communities, intermediaries, organizations, associations, institutions, governments, etc. on various topics and areas of concern within economic development in Cuyahoga County.
- Assist the Director and staff of the Department of Housing and Community Development with various initiatives including evaluating low income and affordable housing projects.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
The National Council for Community Development, Inc. dba Grow America 633 Third Ave, Floor 19, Suite J New York, NY 10017	Daniel March, President
Vendor Council District: N/A	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. The National Council for Community Development is a nationally recognized leader in training Economic Development professionals in the underwriting of

	business loans which include a variety of public financing. Other means would be less effective. Years of experience working with The Council has confirmed its expertise. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. 100% Department of Development General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):
Provide status of project.

<input type="checkbox"/> New Service or purchase	<input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:		
Timeline: Project/Procurement Start Date (date your team started working on this item):		
Date documents were requested from vendor:		
Date of insurance approval from risk manager:		
Date Department of Law approved Contract:		
Date item was entered and released in Infor:		
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:		
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)		
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)		

HISTORY (see instructions):
CM1834 - \$169,680.00, 1/1/2022 – 12/31/2023
CM1272 - \$84,000.00, 8/24/2020 – 12/31/2021

BC2023-826

Title	2023; Department of Housing and Community Development; City of Euclid;
Department or Agency Name	Department of Housing and Community Development
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23005206	City of Euclid	12/18/2023- 12/31/2023	116,476.96	TBD	TBD

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.
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A final invoice in the amount of \$161,476.96 was discovered by the City of Euclid in February 2023 and an invoice for the final amount was submitted to Cuyahoga County on June 12, 2023, representing the final payment on the contract AG1900185.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):
 Represent the fulfillment of obligations of the contract originally approved by County Council through R2019-0291.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
City of Euclid 585 East 222 nd Street Euclid, OH 44123	Kirsten Holzheimer Gail, Mayor
Vendor Council District: 11	Project Council District: 11
If applicable provide the full address or list the municipality(ies) impacted by the project.	City of Euclid

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT X
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. The City of Euclid entered into a contract for HOME Down Payment Assistance from 5/1/2019-4/30/2021 in the amount of \$508,121.37. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain</i> .	<input checked="" type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
	<input type="checkbox"/> Government Purchase

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain:	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. HOME Investment Partnership Grant – 100%	
Is funding for this included in the approved budget? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (if “no” please explain): The unexpected request from the City of Euclid was received on June 12, 2023	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project. Complete	
<input type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Invoice for the final amount was submitted to Cuyahoga County on June 12, 2023	
Timeline: Project/Procurement Start Date (date your team started working on this item):	11/29/2023
Date documents were requested from vendor:	On File
Date of insurance approval from risk manager:	On File
Date Department of Law approved Contract:	N/A
Date item was entered and released in Infor:	11/30/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
AG1900185 – approved through R2019-0291 on 1/14/2020 in the amount of \$508,121.37.

BC2023-827

Title	Department of Housing and Community Development; Court Community Service; Non-Profit Agreement for Litter Cleanup 01/01/2024 – 12/31/2025
Department or Agency Name	Department of Housing and Community Development
Requested Action	<input type="checkbox"/> Contract <input checked="" type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	3953	Court Community Service	1/1/2024 – 12/31/2025	\$110,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

Requesting approval of an agreement with Court Community Service in the amount not to exceed \$110,000.00 for the period 01/01/2024 – 12/31/2025.

Court Community Service provides litter control services in neighborhood commercial areas approved by the county. The specific areas assigned by the Department of Housing and Community Development are in suburban communities that are members of the Urban County.

Court Community Service is the only organization providing nonviolent offenders an opportunity to work off their fines while performing a public purpose. The need to work off their fine is indicative of these individuals being of low to moderate income.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):
 Provide litter control services in neighborhood commercial areas approved by the county.
 Provide nonviolent offenders an opportunity to work off their fines while performing a public purpose.
 Assist in increasing the livability and attractiveness of neighborhood commercial areas and improve the quality of life for low- and moderate-income residents.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Court Community Service 820 W. Superior Ave, Suite 310 Cleveland, OH 44113	Paul J. Klodor, Executive Director
Vendor Council District: 7	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Court Community Service is the only organization providing nonviolent offenders an opportunity to work off their fines while performing a public purpose. The need to work off their fine is indicative of these individuals being of low to moderate income. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input checked="" type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:
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<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% Community Development Block Grant
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
Contract 2327, 1/1/2022 – 12/31/2023 for \$100,000.00 approved by BOC 11/23/2021, BC2021-674

BC2023-828

Title	2023 Department of Housing and Community Development; Cleveland State University; Comprehensive Housing Plan	
Department or Agency Name	Department of Housing and Community Development	

Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):
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Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3991	Cleveland State University	Upon Signature (est 12/15/2023)- 10/31/2024	\$65,000.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>The Department of Housing and Community Development is seeking approval of a contract with Cleveland State University to provide a comprehensive housing plan with metrics and recommendations for the period of upon signature of the contract (est 12/15/2023) to October 31, 2024 in an amount not to exceed \$65,000.00.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The purpose of the program is to examine the existing housing program and policies currently in effect across the county, identifying the housing needs and challenges of municipalities, and housing related recommendation through information collected through the following phases. provide a portfolio of data that are of particular interest and relevance to housing across Cuyahoga County. Census tract data will be collected from the 2017-2021 ACS 5-Year estimates This data will be supplemented by census tract data from ESRI that details estimates for such variables as median disposable income and net worth by household. engage community organizations and stakeholders for input and feedback and interviews and information from county agencies and departments. A survey, informed by and built from the previous activities that will be administered to community and/or economic development practitioners from the 59 municipalities in Cuyahoga County Presentation of the findings and recommendations to the Cuyahoga County Department of Housing and Community Development.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Cleveland State University 2121 Euclid Avenue Cleveland , OH 44115	Molly Schnoke, Director

Vendor Council District: 7	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT - X
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received)	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (*No acronyms i.e. HHS Levy, CDBG, etc.*). Include % if more than one source.
100% by General Fund – American Plan Rescue Act (ARPA) Revenue Replacement/Provision of Government Services

Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-829

Title	ERP Support Services
Department or Agency Name	Department of Information Technology
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original	1096	Timothy Wauhop	03/22/2021 – 09/21/2021	\$90,000.00	03/22/2021	BC2021-124
1 st Amendment			09/21/2021 – 03/21/2022	\$0.00	10/18/2021	BC2021-586
2 nd Amendment			03/21/2022 – 10/31/2022	\$53,807.00	03/14/2022	BC2022-151
3 rd Amendment			10/31/2022 – 04/29/2023	\$60,000.00	08/29/2022	BC2022-512

4 th Amendment			04/29/2023 – 12/31/2023	\$72,779.73	06/05/2023	BC2023-361
5 th Amendment			01/01/2024 – 12/31/2024	\$98,800.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

The Dept. of Information Technology requesting approval for a 5th Amendment to the contract with Timothy M. Wauhop, to extend the time thru 12/31/2024 for the additional amount of \$98,800.00 for ERP Support Services.

For purchases of furniture, computers, vehicles: Additional Replacement
Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):

The goal of this amendment is to provide continuation of the needed ERP support services provided by Tim Wauhop.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: Timothy Wauhop	Owner, executive director, other (specify): OWNER
309 Cheadle Loop Road Seaford, Virginia 23696	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. This is a contract 5th amendment to extend time thru 12/31/2024 for continued contracted ERP support services. The contract received an RFP Exemption approved on 3/22/2021 CM #1096, BC2021-124. Subsequent 1st thru 4th amendments were also approved. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption

Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) RFP Exemption
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: CTO Approval 12/06/2023
Is the item ERP related? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	

Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-830

Title	OnBase Licensing and Support
Department or Agency Name	Department of Information Technology
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original	2597	DataBank	05/01/2020 – 12/31/2023	\$946,676.00	6/23/2020	R2020-0115
1 st Amendment	2597	DataBank	12/31/2023	\$10,150.00		BC2022-439
2 nd Amendment	2597	DataBank	12/31/2024	\$282,496.00	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>The Department of Information Technology plans to amend Contract No. 2597 with DataBank IMC, LLC., in the amount of \$282,496 to provide OnBase Licensing and Support and to extend the time period for one year, January 1, 2024 – December 31, 2024.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3): Continuation of licensing and support services is necessary to ensure the proper functioning of OnBase.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>
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Vendor Name and address:	Owner, executive director, other (specify):
DataBank IMX LLC 620 Freedom Business Center Drive, Suite 120 King of Prussia, PA 19406	Lee Meyerdirk
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Initial procurement was awarded from RFP 47694 for 05/01/2020 – 12/31/2023 in the amount of \$946,676.00 under R2020-0115. This is a request for a 2 nd amendment to an approved current contract. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) RFP <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	

Are services covered under the original ERP Budget or Project? Yes No, please explain.

Are the purchases compatible with the new ERP system? Yes No, please explain.

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.
100% General Fund

Is funding for this included in the approved budget? Yes No (if "no" please explain):

Payment Schedule: Invoiced Monthly Quarterly One-time Other (please explain):

Provide status of project.

New Service or purchase Recurring service or purchase

Is contract late No Yes, In the fields below provide reason for late and timeline of late submission

Reason:

Timeline:

Project/Procurement Start Date (date your team started working on this item):

Date documents were requested from vendor:

Date of insurance approval from risk manager:

Date Department of Law approved Contract:

Date item was entered and released in Infor:

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:

If late, have services begun? No Yes (if yes, please explain)

Have payments be made? No Yes (if yes, please explain)

HISTORY (see instructions):

BC2023-831

Title	VEEAM Backup Renewal Subscription Licenses
Department or Agency Name	Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
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	23005164 JCOP	Advizex	Coterm – 03/30/2025	\$111,874.06	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

The Department of Information Technology plans to contract with Advizex, to renew its annual purchase of VEEAM Backup Renewal Subscription Licenses in the amount of \$111,874.06.

An evaluation of the product licensure occurred this year and the company’s offering of the product has four tiers of licensure. The County currently has the top-tier license which the difference between the top tier license and the third-tier license are functionality that the County is not leveraging today and does not plan to leverage over the period of this licensure renewal. This renewal consists of a downgrade to the third-tier license vs the top-level licensure.

If you cross reference the previous year’s purchase and wonder why the cost is higher this year since the County is selecting a lower tier licensure is because some of the licenses are on different renewal timeframes. With this renewal some of the licenses will be renewed for a longer period of time to co-term all of the licenses to a closer date when they all will expire as well, as also to push the next service renewal further out into Q1 to try and avoid having so many procurement related renewals due around the time of the year when the fiscal year closes.

For purchases of furniture, computers, vehicles: Additional Replacement
Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):

Veeam is one of the six products in Gartner’s Top Quadrant for Enterprise Backup Solutions and handles the County’s internal and cloud repository backup needs well. The current product has varying expiration dates based on when the licensure was procured, and the soonest set of licenses expires on December 27, 2023. The Veeam backup solution was not reviewed and considered for evaluation of a reengineering to another solution for this fiscal year. The current product works well and handles the need of backing up the various types of servers and replication of backups to the cloud for offsite storage relating to a Disaster Recovery scenario.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
Advizex 6480 Rockside Woods Blvd, Suite 190 Independence, Ohio 44131	Bob Hornick Support & Maintenance Manager
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. A government cooperative purchasing was leveraged for Veeam, thus the competition portion for pricing of this product was already negotiated. The County has made a significant investment of Engineering hours in the Veeam configuration that exists today. It would not be financially responsible to seek to migrate from Veeam to a different product at each renewal period but is open to reviewing other software products every 7-10 years. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input checked="" type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date OMNIA 01-97 expires July 31, 2024.
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

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FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase Renewal	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-832

Title	100 IP Cisco 8811 Series Phones
Department or Agency Name	Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	23005165 STAC	TEC Communicati ons		\$23,900.00	PENDING	PENDING

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Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

The Department of Information Technology plans to contract with TEC Communications, for the purchase of 100 CISCO IP Phone 8811 Series in the amount of \$23,900.00.

This request is for the procurement of 100 CISCO IP Phone 8811 Series.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):
 Department of Information Technology plans to contract TEC communications Inc., for the purchase of 100 Cisco Telephones in the amount of \$23,900.00 for DoIT stock.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: TEC Communications	Owner, Executive director, other (specify): Melanie Schilling, Owner
	20234 Detroit Road Rocky River, OH 44116
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. TEC Communications, Inc. is able to provide Cuyahoga County the requested hardware equipment using Ohio State Term Schedule pricing. All vendors awarded an Ohio state contract have gone through formal bidding processes and have been vetted by the State of Ohio prior to award. OH STS contract #534612 expires on June 30, 2025. All vendors awarded Ohio state term schedule contracts have completed a formal bid process and have been vetted, selected and awarded contracts by the State of Ohio. The State of Ohio has negotiated pricing for the State Term Schedule and has determined that these are fair and reasonable prices. STS # 033, Contract# 534612 effective through 6/30/2025.

	*See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date STS # 033, Contract# 534612 effective through 6/30/2025. <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (list original procurement)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% Capital Improvement project account	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase As Needed by Department Request/Project	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date	

(date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-833

Title	The DoIT office for the Sheriff's Department- a security camera, intercom, and proximity card reader
Department or Agency Name	Department of Information Technology on behalf of Sheriff's department.
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	23005252	Integrated Precision Systems	10/17/2023	\$8,462.75	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): The procurement, installation, and programming of a security camera, intercom, and proximity card reader to be installed in/on the door leading into the DoIT office for the Sheriff's Department.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Integrated Precision Systems	Owner, executive director, other (specify):

8555 Sweet Valley Dr. Suite B. Valley View, OH 44125	Rob Jackson President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. IPS Ohio State Term Contract #: 010018 *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date IPS Ohio State Term Contract #: 010018 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.
 General Fund 100%

Is funding for this included in the approved budget? Yes No (if "no" please explain):

Payment Schedule: Invoiced Monthly Quarterly One-time Other (please explain):

Provide status of project.

New Service or purchase Recurring service or purchase
 Is contract late No Yes, In the fields below provide reason for late and timeline of late submission

Reason:

Timeline:
 Project/Procurement Start Date (date your team started working on this item):

Date documents were requested from vendor:

Date of insurance approval from risk manager:

Date Department of Law approved Contract:

Date item was entered and released in Infor:

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:

If late, have services begun? No Yes (if yes, please explain)

Have payments be made? No Yes (if yes, please explain)

HISTORY (see instructions):

BC2023-834

Title	Juvenile Courts Laptops
Department or Agency Name	Department of Information Technology
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	23005258	MNJ Technologies	11.30.2023	16,734.00	PENDING	PENDING

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>The Department of Information Technology plans to contract with MNJ Technologies Direct, Inc., for the purchase of (8) Zbooks (12) HP USB-C Dock G5 (11) P27H G4 27-inch Monitors in the amount of \$16,734.00.</p> <p>This request is for the procurement of (8) Zbooks (12) HP USB-C Dock G5 (11) P27H G4 27-inch Monitors.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3): The Department of Information Technology plans to contract with MNJ Technologies Direct, Inc., for the purchase of (8) Zbooks (12) HP USB-C Dock G5 (11) P27H G4 27-inch Monitors in the amount of \$16,734.00. For juvenile Courts.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
<p>Vendor Name and address: MNJ Technologies Direct Inc.</p>	<p>Owner, Executive director, other (specify): Jimmy Lochner, Account Manager</p>
	<p>1025 Busch Parkway Buffalo Grove, IL 60089</p>
<p>Vendor Council District:</p>	<p>Project Council District:</p>
<p>If applicable provide the full address or list the municipality(ies) impacted by the project.</p>	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
<p>RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:</p>	<p>Provide a short summary for not using competitive bid process. MNJ Technologies, Inc. is able to provide Cuyahoga County the requested hardware equipment using Ohio State Term Schedule pricing. All vendors awarded an Ohio state contract have gone through formal bidding processes and have been vetted by the State of Ohio prior to award. OH STS contract # STS 534486 expires on 12/29/2023. All vendors awarded Ohio state term schedule contracts have completed a formal bid process and have been vetted, selected and awarded contracts by the State of Ohio. The State of Ohio has negotiated pricing for the State Term Schedule and has determined that these are fair and reasonable prices. STS # 033, Contract# 534486 effective through 12/29/2023.</p> <p>*See Justification for additional information.</p>

The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date STS # 033, Contract# 534486 effective through 12/29/2023. <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input checked="" type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. General Fund	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase As Needed by Department Request/Project	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	

Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-835

Title	ERP Staff Augmentation
Department or Agency Name	Department of Information Technology
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original	4001	OneSparQ, LLC	01/01/2024 – 12/31/2024	\$150,800.00	PENDING	PENDING

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

The Department of Information Technology plans to contract with OneSparQ, LLC under Contract No.4001., for ERP Staff Augmentation in the amount of \$150,800.00.

For purchases of furniture, computers, vehicles: Additional Replacement
Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):

This contract will allow the Department of Information Technology to continue multiple projects as well as allows DoIT to get contractors that will assist in providing more help to departments and allow the permanent ERP team to continue project work.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: OneSparkQ, LLC	Owner, executive director, other (specify): Lenny Trusnik, CEO
3372 Peachtree Road, NE, Suite 115 Atlanta, Georgia 30326	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. This is being processed as an exemption as this new contract follows the previous CM2935. Prior to awarding the previous CM2935, each vendor was screened using Linked In, ZipRecruiter and Indeed. From there, the vendors were interviewed and evaluated by the ERP Leaders for skillset and fit. These vendors were selected as they met the criteria. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: TAC/CTO Approval

Is the item ERP related? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, answer the below questions.
Are services covered under the original ERP Budget or Project? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% General Fund, IT100145 Mainframe Operation Services
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase Previous contract was CM2935	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): CM2935 Original \$75,400.00 12/05/2022 – 05/05/2023 12/19/2022 BC2022-798 (original approval had incorrect amount on the agenda and was fixed 12/12/2022 under BC2022-762) 1 st Amendment \$99,000.00 12/05/2022 - 12/31/2023 04/13/2023 BC2023-189 2 nd Amendment \$84,100.00 12/05/2022 – 12/31/2023 11/06/2023 BC2023-698
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BC2023-836

Title	RELX, Inc.
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Department or Agency Name	Law Department
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2317	RELX, Inc.	1/1/18-12/31/20	\$657,664.80	3/27/18	R2018-0061
A-1	2317	RELX, Inc.	1/1/21-12/31/23	\$723,091.20	10/27/20	R2020-0213
A-2	2317	RELX, Inc.	Through 12/31/24	\$249,380.32	Pending	

Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement N/A Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): Provide online legal research for multiple County departments.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No N/A

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: RELX, Inc. 28544 Network Place, Chicago, IL 60673	Owner, executive director, other (specify): Joseph Ellerhorst, Client Manager – State & Local Government
Vendor Council District: N/A	Project Council District: N/A
If applicable provide the full address or list the municipality(ies) impacted by the project.	N/A

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal	Provide a short summary for not using competitive bid process.

<input type="checkbox"/> Formal Closing Date:	*See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) RQ 41069
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 11/18/21
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. N/A	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain. N/A	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. General Fund	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline:	

Project/Procurement Start Date (date your team started working on this item):	N/A
Date documents were requested from vendor:	N/A
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	N/A
Date item was entered and released in Infor:	N/A
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-837

Title	Oriana House Inc. T4C (Thinking 4 a Change)
Department or Agency Name	Corrections Planning Board, Common Pleas Court
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original	2165	Oriana House Inc.	07/01/2021 to 06/30/2023	\$496,000.00	02/28/2022	BC2022-115
A-1 First Amendment	2165	Oriana House Inc.	July 1, 2023 to June 30, 2024	\$272,800.00		

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>Oriana House Inc. will continue to provide Thinking 4 A Change (T4C) program services, which incorporate evidence-based cognitive behavior therapy designed to reduce thinking errors and improve justice-related outcomes for all moderate and high-risk offenders engaged with the criminal justice system. This therapy program will assist offenders in recognizing and identifying thinking errors that lead to high-risk behavior.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
Project Goals, Outcomes or Purpose (list 3):

To provide Cognitive Skills programming to target probation violators assessed as high or moderate risk and to reduce recidivism rates in Cuyahoga County while incorporating evidence-based approaches to changing offender behavior and attitudes.	
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No	
In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Oriana House, Inc. 885 E. Buchtel Ave. Cleveland, OH 44109	Owner, executive director, other (specify): James Lawrence, President and CEO
Vendor Council District: ALL	Project Council District: ALL
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Contract Amendment *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	

Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. 100% funded by ODRC CCA Grant Funds
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Provider requested higher contract amendment price from the original contract – this required continued negotiations with provider and the Corrections Planning Board and Court Administration.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	June 1, 2023
Date documents were requested from vendor:	June 2023 through November 2023
Date of insurance approval from risk manager:	November 20, 2023
Date Department of Law approved Contract:	November 1, 2023
Date item was entered and released in Infor:	November 20, 2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) Continued services to support offender treatment. Provider has been contacted before deadline of the original agreement regarding the delay in processing Amended contract	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-838

Title	Juvenile Court Transcription Services contract with Mizanin Reporting Services, Inc
Department or Agency Name	Juvenile Court
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	1993	Mizanin	1/1/22- 12/31/23	\$102,000.00	12/6/21	BC2021-706
A1	1993	Mizanin	1/1/22- 12/31/23	\$10,000.00	pending	pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

For purchases of furniture, computers, vehicles: Additional Replacement
Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):
To provide Transcription services
To provide certified copies of record
To provide services in accordance with the contract

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: Mizanin Reporting Services, Inc	Owner, executive director, other (specify): James Mizanin
5755 Granger Road, Ste 335 Independence, Ohio 44131	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Amendment *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date

Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) RFP
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. General Fund
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Additional funding to pay remaining invoices.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	09/01/2023
Date documents were requested from vendor:	11/8/2023
Date of insurance approval from risk manager:	11/30/23
Date Department of Law approved Contract:	not review until after release
Date item was entered and released in Infor:	11/30/23
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: n/a	

If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain)
Have payments be made? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain)
This amendment is to pay incoming invoices.

HISTORY (see instructions):

BC2023-839

Title	MENTORING SERVICES
Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE DIVISION
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
(A)	3933	R.O.S.E.S. Mentoring	7/1/2023- 6/30/2024	\$30,714.00	Pending	pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase. Vendor shall provide community based and school based mentoring services to expose youth to pro-social activities and strengthen positive relationships with healthy adults for a term starting July 1, 2023, until June 30, 2024. The funding not to exceed \$30,714.00.

For purchases of furniture, computers, vehicles: Additional Replacement
Age of items being replaced: N/A How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3): Mentoring services will focus on the goal to strengthen families to access resources in the community to support youth with pro-social activities and decision-making skills.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: R.O.S.E.S. Mentoring P.O. Box 2566 Streetsboro, Ohio	Owner, executive director, other (specify): Tamiela Barlow Founder/Chief Executive Officer

Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i> <i>RFP Exemption County Code 501.12 (D)</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? <i>RFP Exemption County Code 501.12 (D), 100% Funded through RECLAIM grant.</i>	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (*No acronyms i.e. HHS Levy, CDBG, etc.*). Include % if more than one source.
100% RECLAIM grant.

Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: The delay is due to RECLAIM grant notification and award process, and in addition to vendors' delayed submission of documents	
Timeline: Project/Procurement Start Date (date your team started working on this item):	4/10/2023
Date documents were requested from vendor:	9/6/2023
Date of insurance approval from risk manager:	9/6/2023
Date Department of Law approved Contract:	9/6/2023
Date item was entered and released in Infor:	11/16/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-840

Title	EDUCATIONAL/VOCATIONAL SERVICES
Department or Agency Name	CUYAHOGA COUNTY COURT OF COMMON PLEAS, JUVENILE DIVISION
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
(O)	3934	Sports and Spine Physical Therapy, Inc.	7/1/2023- 6/30/2024	\$57,576.96	Pending	pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>Provide youth identified or at risk of recidivism job readiness skills, financial literacy, college/trade school preparedness, and healthcare field education for a term starting July 1, 2023, until June 30, 2024. Funding for this contract shall not exceed \$57,576.96.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: N/A How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3): Soft skills, accountability, teamwork, and opportunities for individual creativity and autonomy are the main tools used towards working on skill creation.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
<p>Vendor Name and address: Sports and Spine Physical Therapy, Inc. 3365 Richmond Rd Suite 110 Beachwood, Ohio 44122</p>	<p>Owner, executive director, other (specify): Leon R. Anderson III President Andre R. Russell Chief Operations Officer</p>
<p>Vendor Council District:</p>	<p>Project Council District:</p>
<p>If applicable provide the full address or list the municipality(ies) impacted by the project.</p>	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
<p>RQ # <i>if applicable</i></p> <p><input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ</p> <p><input type="checkbox"/> Informal</p> <p><input type="checkbox"/> Formal Closing Date:</p>	<p>Provide a short summary for not using competitive bid process.</p> <p>*See Justification for additional information.</p>
<p>The total value of the solicitation:</p>	<p><input checked="" type="checkbox"/> Exemption</p>
<p>Number of Solicitations (sent/received) /</p>	<p><input type="checkbox"/> State Contract, list STS number and expiration date</p> <p><input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date</p>
<p>Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i></p>	<p><input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().</p>

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i> <i>RFP Exemption County Code 501.12 (D)</i>	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? <i>RFP Exemption County Code 501.12 (D), 100% Funded through RECLAIM grant.</i>	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. 100% RECLAIM grant.
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: The delay is due to RECLAIM grant notification and award process, and in addition to vendors' delayed submission of documents.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	4/10/2023
Date documents were requested from vendor:	9/6/2023
Date of insurance approval from risk manager:	9/28/2023
Date Department of Law approved Contract:	9/25/2023
Date item was entered and released in Infor:	11/17/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:n/a	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-841 a) City of Shaker Heights

Title	CCJC CY24 Community Diversion Program contract with the City of Shaker Heights
Department or Agency Name	Juvenile Court
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3980	City of Shaker Heights	1/1/24-12/31/24	\$3,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.
 Community Diversion Services

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):
 80% of YOUTH served during the AGREEMENT period will successfully complete the program without referral to the COURT for official COURT processing.
 80% of YOUTH referred will be engaged in and complete services with no new charges.
 90% of YOUTH engaged in services will complete services within a targeted timeframe of ninety (90) calendar days.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No n/a

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: City of Shaker Heights 3355 Lee Road, Shaker Heights, Ohio 44120	Owner, executive director, other (specify): Timothy Grafton (Programmatic Contact)
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	City of Shaker Heights

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Government Purchase *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input checked="" type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. Levy

Is funding for this included in the approved budget? Yes No (if "no" please explain): This contract is not to be funded until 2024 and that budget has not received final approval.

Payment Schedule: Invoiced Monthly Quarterly One-time Other (please explain):

Provide status of project.

New Service or purchase Recurring service or purchase

Is contract late No Yes, In the fields below provide reason for late and timeline of late submission

Reason:

Timeline:

Project/Procurement Start Date (date your team started working on this item):	7/10/2023
Date documents were requested from vendor:	9/20/2023
Date of insurance approval from risk manager:	8/21/2023
Date Department of Law approved Contract:	8/24/2023
Date item was entered and released in Infor:	11/17/2023

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:

If late, have services begun? No Yes (if yes, please explain)

Have payments be made? No Yes (if yes, please explain)

HISTORY (see instructions):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2301	City of Shaker Heights	1/1/22-12/31/23	\$6,800.00	03/01/2022	BC2022-136

BC2023-841 b) Village of Orange

Title	CCJC CY24 Community Diversion Program contract with the Village of Orange
Department or Agency Name	Juvenile Court
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/	Approval No.
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					Council's Journal Date	
O	3996	Village of Orange	1/1/24-12/31/24	\$300.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.
 Community Diversion Services

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):

80% of YOUTH served during the AGREEMENT period will successfully complete the program without referral to the COURT for official COURT processing.

80% of YOUTH referred will be engaged in and complete services with no new charges.

90% of YOUTH engaged in services will complete services within a targeted timeframe of ninety (90) calendar days.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No n/a

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: Village of Orange	Owner, executive director, other (specify): Sgt. Jason Marvin (Programmatic Contact)
4600 Lander Road, Orange Village, 44022	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	Village of Orange

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Government Purchase *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date

	<input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i>	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input checked="" type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. <i>Levy</i>
Is funding for this included in the approved budget? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (if "no" please explain): This contract is not to be funded until 2024 and that budget has not received final approval.
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	7/10/2023
Date documents were requested from vendor:	9/20/2023
Date of insurance approval from risk manager:	8/21/2023

Date Department of Law approved Contract:	8/24/2023
Date item was entered and released in Infor:	11/30/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):						
Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2185	Village of Orange	1/1/22- 12/31/23	\$400.00	02/14/2022	BC2022-90

BC2023-842

Title	2023 Kiesler Police Supply Purchase Order for the Medical Examiner's Office	
Department or Agency Name	Department of Public Safety and Justice on behalf of the Medical Examiner's Office	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O		Kiesler Police Supply	N/A	4,725.92	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): 1. The ammunition will be used in the laboratory for ballistic comparison to bullets and casings from crime scenes
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
Kiesler Police Supply 2802 Sable Mill Rd, Jeffersonville, IN 47130	Douglas Kiesler CEO
Vendor Council District:	Project Council District:
All	All
If applicable provide the full address or list the municipality(ies) impacted by the project.	All municipalities of Cuyahoga County.

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. This vendor is on the Medical Examiner's approved vendor list (kept as part of its accreditation) and has the desired ammunition readily available for the Medical Examiner department to use. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

Are the purchases compatible with the new ERP system? Yes No, please explain.

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.
 ARPA Crime Lab Backlog Grant 100%

Is funding for this included in the approved budget? Yes No (if "no" please explain):

Payment Schedule: Invoiced Monthly Quarterly One-time Other (please explain):

Provide status of project.

New Service or purchase Recurring service or purchase
 Is contract late No Yes, In the fields below provide reason for late and timeline of late submission

Reason: N/A

Timeline:
 Project/Procurement Start Date (date your team started working on this item): N/A

Date documents were requested from vendor: N/A

Date of insurance approval from risk manager: N/A

Date Department of Law approved Contract: N/A

Date item was entered and released in Infor: N/A

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A

If late, have services begun? No Yes (if yes, please explain)

Have payments be made? No Yes (if yes, please explain)

HISTORY (see instructions):

BC2023-843

Title	2023 Vance Law Enforcement Purchase Order for the Medical Examiner's Office	
Department or Agency Name	Department of Public Safety and Justice on behalf of the Medical Examiner's Office	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23005238	Vance Law Enforcement	N/A	9,999.75	Pending	Pending

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Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): 1. The ammunition will be used in the laboratory for ballistic comparison to bullets and casings from crime scenes
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Vance Law Enforcement 4250 Alum Creek Dr, Obetz, OH 43207	Doug Vance CEO
Vendor Council District:	Project Council District:
All	All
If applicable provide the full address or list the municipality(ies) impacted by the project.	All municipalities of Cuyahoga County.

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. This vendor is on the Medical Examiner's approved vendor list (kept as part of its accreditation) and has the desired ammunition readily available for the Medical Examiner department to use. *See Justification for additional information.
The total value of the solicitation: _____	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) _____ / _____	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
	<input type="checkbox"/> Government Purchase

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. ARPA Crime Lab Backlog Grant 100%	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: N/A	
Timeline: Project/Procurement Start Date (date your team started working on this item):	N/A
Date documents were requested from vendor:	N/A
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	N/A
Date item was entered and released in Infor:	N/A
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-844

Title	TEMPORARY EMPLOYEES- RFB
Department or Agency Name	SHERIFF'S
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3989	GPI ENTERPRISES INC	1/1/24-6/30/24	\$75,000	CURRENT ITEM	CURRENT ITEM

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.
 THIS IS A NEW CONTRACT FOR TEMPORARY EMPLOYEES (CLERK) SERVICES.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):
 HIRE TEMPS AS NEEDED FOR COMMISSARY CLERK DUTIES.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address:	Owner, executive director, other (specify):
GPI ENTERPRISES INC 3637 MEDINA RD STE 60 MEDINA, OHIO 44256	CHRISTOPHER MURILLO, PRESIDENT
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> 13429 <input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ	Provide a short summary for not using competitive bid process.

<input type="checkbox"/> Informal <input checked="" type="checkbox"/> Formal Closing Date: 10/30/23	*See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 16 / 2	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (0) DBE (0) SBE (0) MBE (0) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain. N/A	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? \$28.51/HR VS. \$34.36/HR	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. 100% GENERAL FUND
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: N/A	
Timeline: Project/Procurement Start Date	9/28/23

(date your team started working on this item):	
Date documents were requested from vendor:	11/7/23
Date of insurance approval from risk manager:	9/7/23
Date Department of Law approved Contract:	11/20/23
Date item was entered and released in Infor:	11/21/23
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-845

Title	PSJS – West Publishing Corporation d/b/a Thomson Reuters – Exemption – Contract #3863 for CLEAR LPR Software for Fusion Center		
Department or Agency Name	Public Safety & Justice Services		
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue <input type="checkbox"/> Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):		

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3863	Thomson Reuters	1/1/24- 12/31/24	\$43,526.40	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

Requesting approval of a contract exemption with Thomson Reuters in the amount of \$43,526.40 for the time period 1/1/2024-12/31/2024.

Thomson Reuters' CLEAR software is the sole source provider under a proprietary license agreement to provide access to Vigilant Solutions' commercially available license plate reader data. The Northeast Ohio Regional Fusion Center (NEORFC) is one of three Fusion Centers recognized by the Department of Homeland Security in the State of Ohio. The three centers all utilize proprietary software to view this data that can then be analyzed and applied to active terror and crime related cases. These cases, and other actionable intelligence, are analyzed to detect, prevent, and deter acts of terrorism.

West Publishing Corporation, a Thomson Reuters business, is the sole provider of CLEAR, and they do not permit sale/resell through distributors or resellers.

For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____	
Project Goals, Outcomes or Purpose (list 3): <ul style="list-style-type: none"> • Query data related to the County LPR system to provide support to local law enforcement on terrorist and criminal cases. 	
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No	

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
West Publishing Corporation d/b/a Thomson Reuters P.O. Box 6292 Carol Stream, IL 60197	Andrew Shrout CLEAR Government Investigations – Account Executive
Vendor Council District:	Project Council District:
N/A	District 2
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT X
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Vendor is sole proprietor of software needed to access the LPR system. *See Justification for additional information.
The total value of the solicitation: _____	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) _____ / _____	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 11/9/23
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. FY22 State Homeland Security Program Grant	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2816	West Publishing Corporation dba Thompson Reuters – West	1/1/2023 – 12/31/2023	\$31,965.00	11/7/2022	BC2022-673

BC2023-846

Title	RQ2259 – 2023 – Multiple Vendors – RFP Master Agreement Amendment 5 – SNAP to Skills Employment and Training Services
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Department or Agency Name	Cuyahoga Job and Family Services
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Grant Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Loan Agreement <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify): Alternative Procurement
Department of Purchasing use only	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Approval Date	Approval No.
O	23004843	The Centers Family and Children	9/1/23- 9/30/23	\$9,260.84	Pending	Pending
O	23004844	Cuyahoga County Public Library	9/1/23- 9/30/23	\$2,264.24	Pending	Pending
O	23004845	Lutheran Metropolitan Ministries	9/1/23- 9/30/23	\$12,407.08	Pending	Pending
O	23004846	Towards Employment	9/1/23- 9/30/23	\$6,558.53	Pending	Pending
O	23004847	NewBridge	9/1/23- 9/30/23	\$15,474.98	Pending	Pending
O	23004848	West Side Catholic Center	9/1/23- 9/30/23	\$35,038.57	Pending	Pending
O	23004849	Urban League	9/1/23- 9/30/23	\$1,397.99	Pending	Pending

Service/Item Description (include quantity if applicable): Cuyahoga Job and Family Services SNAP Employment and Training Program is requesting approval of purchase orders for final payment for a total of seven Vendors for a master services contract.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed?
Project Goals, Outcomes or Purpose (list 3): These Vendors help: <ul style="list-style-type: none"> To increase the number of SNAP participants who are able to obtain employment at a wage allowing them to sustain their families. To increase the rate of SNAP participants retaining employment.

In the boxes below, list Vendor/Contractor Name, Street Address, City, State and Zip Code. Beside each vendor provide owner, executive director, other (specify)	
Urban League of Cleveland 2930 Prospect Avenue E Cleveland, OH 44115	Marsha Mockabee, President & CEO
Vendor Council District: 08	Project Council District: Serving Countywide
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # 2259 <input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: August 10, 2020	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: The total value of the RFP was \$532,849.80.	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received): Originally, there were eight (8) proposals submitted for review, and four (4) proposals approved.	<input type="checkbox"/> State Contract, list STS number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? N/A	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by department of Purchasing. # of additional responses received from posting ()
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <i>If not, please explain: N/A</i>	<input type="checkbox"/> Government Purchase
How did pricing compare among bids received? N/A	<input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA)
	<input type="checkbox"/> Contract Amendment

	Other Procurement Method, please describe: Purchase Order
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<i>TECHNOLOGY ITEMS: Complete, if the request is for the purchase of software or technical equipment</i>		
<input type="checkbox"/> Check if item on IT Standard List of approved purchase. If item is not on IT Standard List answer: N/A		
State date of TAC approval: N/A	Is the item ERP approved?	N/A
Are services covered under original ERP Budget or Project?	N/A	
Are the purchases compatible with the new ERP system?	N/A	

FUNDING SOURCE(S): (No acronyms – General Fund, HHS Levy, Capital, etc.). Include % if more than one source. Federal Food Assistance Employment and Training		
Is this approved in the biennial budget? Yes		
Payment Schedule: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):		

PROJECT STATUS: Provide status of project and if late, include timeline for lateness.		
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase		

HISTORY: Provide prior approval numbers and date of approval, unless submitting a contract amendment and the details were provided on page 1.		
O – BC2020-645 – 12/07/2020		
A-1 – BC2021-301 – 06/21/2021		
A-2 – R2021-0214 – 9/28/2021		
A-3- R2022-0438 – 11/22/2022		

BC2023-847

Title	HHS: Division of Children and Family Services RQ#13102 – 2024 - Circle Health Services dba The Centers operating The Cleveland Christian Home Contract – Child Wellness Campus	
Department or Agency Name	Health and Human Services/Division of Children and Family Services	
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	4026	Circle Health Services dba The Centers	effective upon signature – 6.30.2024	\$450,000.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>The Child Wellness Campus that will serve youth waiting for longer term placement and remove the need for the current onsite childcare room at the Jane Edna Hunter Building. The Child Wellness Campus will operate 24/7, 365 days per year for residential placements of youth.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of? _____</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <ul style="list-style-type: none"> • To provide immediate access to safe and secure residential placement for youth. • To build upon the above residential services with additional wraparound services to youth placed at the Child Wellness Campus or alternative site.
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
Vendor Name and address:	Owner, executive director, other (specify):
Circle Health Services dba The Centers 11401 Lorain Avenue, Cleveland, OH 44111	Eric Morse, CEO
Vendor Council District:	Project Council District:
Three (3)	Three (3)
If applicable provide the full address or list the municipality(ies) impacted by the project.	County wide

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
<p>RQ # <i>if applicable</i></p> <p><input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ</p> <p><input type="checkbox"/> Informal</p> <p><input type="checkbox"/> Formal Closing Date: 9.4.2023</p>	<p>Provide a short summary for not using competitive bid process.</p> <p>*See Justification for additional information.</p>
<p>The total value of the solicitation: \$0.00</p>	<p><input type="checkbox"/> Exemption</p>
<p>Number of Solicitations (sent/received) ? / 4</p>	<p><input type="checkbox"/> State Contract, list STS number and expiration date</p> <p><input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date</p>
<p>Participation/Goals (%): 0 () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i></p>	<p><input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().</p>

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain:</i> <i>Vendor gave us the best option</i>	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? All were very similar but this one gave us the best response with similar budget amounts	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. Health and Human Services Levy
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

Have payments be made? No Yes (if yes, please explain)

HISTORY (see instructions):
See above

BC2023-848

Title	OHS; Emerald Development and Economic Development (EDEN), Inc; 2023-2026; Grant Agreement for Purchase of 2710 Walton Ave
Department or Agency Name	Office of Homeless Services
Requested Action	<input type="checkbox"/> Contract <input checked="" type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	4027	EDEN, Inc.	Effective upon execution – 12/31/26	\$425,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

Emerald Development and Economic Network (EDEN), Inc. will purchase a site located at 2710 Walton Avenue to be used as a swing site shelter during construction of Norma Herr 1. EDEN owns the Norma Herr Women's Shelter and received ARPA funding to rehab the facility, which requires the relocation of shelter guests during this process.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of?

Project Goals, Outcomes or Purpose (list 3):

- Purchase swing site shelter to accommodate Norma Herr Women's Shelter guests during construction
- Maintain building in compliance with local requirements as well as OHS Advisory Board-approved shelter standards

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: Emerald Development and Economic Network 7812 Madison Ave Cleveland, Ohio 44102	Owner, executive director, other (specify): Elaine Gimmel, executive director
Vendor Council District: 7	Project Council District: county-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	N/A

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. RFP Exemption. This is a DHHS Director sponsored item that will allow EDEN to purchase 2710 Walton Avenue. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

Are the purchases compatible with the new ERP system? Yes No, please explain.

FUNDING: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source.
100% Public Assistance Fund

Is funding for this included in the approved budget? Yes No (if "no" please explain):

Payment Schedule: Invoiced Monthly Quarterly One-time Other (please explain):

Provide status of project.

<input checked="" type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
---	---

Reason:

Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A

If late, have services begun? No Yes (if yes, please explain)

Have payments be made? No Yes (if yes, please explain)

HISTORY (see instructions):

C.- Exemptions

BC2023-849

Scope of Work Summary

Sheriff's Department is requesting approval of an alternate procurement process resulting in multiple not-to-exceed purchase orders with various vendors for the anticipated not-to-exceed amount of \$32,000.00 for all purchase orders combined.

Prior Approvals: BC2019-622, BC2022-109 & BC2022-679

Vendors are able to provide items needed that are critical to the corrections operations. The anticipated completion date is 12/31/2024.

The alternate procurement would allow for timely purchases to maintain operations within the Jail, the ability to process timely payments to vendors, and for the Sheriff's Department to remain compliant with Accounts Payables policies and procedures. The NTE POs would be processed in INFOR/Lawson, providing the necessary procurement documentation, but would not require additional Board of Control approval.

Procurement

The procurement method for this project was alternate procurement. The total value of the alternate procurement is \$ 32,000.00.

Contractor and Project Information

W.W. Grainger (\$10,000.00)

Joshen Paper & Packaging (\$7,000.00)

Dean Supply (\$9,000.00)

Gordon Food Supply (\$6,000.00)

Project Status and Planning

The project reoccurs annually.

Funding

The project is funded 100% by the General Fund

The schedule of payments is by invoice.

BC2023-850

Scope of Work Summary

Sheriff's Department is requesting approval of an alternate procurement process resulting in multiple not-to-exceed purchase orders with various vendors for the anticipated not-to-exceed amount of \$71,000.00 for all purchase orders combined.

Prior Approval: BC2019-766, BC2022-108, BC2022-291 & BC2022-678

Vendors are able to repair services needed that are critical to the corrections operations. The anticipated completion date is 12/31/2024.

The alternate procurement would allow for timely repairs to maintain jail equipment operation, limiting downtime of equipment such as wrist band machines, floor scrubbers, radios, ventilation fans, washers/dryers, etc. within the Jail. This will also provide the ability to process timely payments to vendors, and for the Sheriff's Department to remain compliant with Accounts Payables policies and procedures. The NTE POs would be processed in INFOR/Lawson, providing the necessary procurement documentation, but would not require additional Board of Control approval.

Procurement

The procurement method for this project was alternate procurement. The total value of the alternate procurement is \$71,000.00.

Contractor and Project Information

Belenky, Inc. (\$10,000.00)

Cleveland Communications, Inc. (\$39,000.00)

General Parts, LLC (\$15,000.00)
Toyota Material Handling Ohio (\$7,000.00)

Project Status and Planning
The project reoccurs annually.

Funding
The project is funded 100% by the General Fund
The schedule of payments is by invoice.

BC2023-851

Scope of Work Summary
Department of Health and Human Services is requesting approval of an exemption from aggregation to pay the State of Ohio for the Tech Service Support Policy at an anticipated cost \$250,000.00 for the time period 1/1/2024-12/31/2024.

If the Project is not new to the County List the Prior Board Approval Number or Resolution Number.
BC2021-735, BC2022-800

Describe the exact services being provided. This is for the Tech Service Support Policy and this is how Health and Human Services receive tech support from the state they bill us after each quarter. This is for the time period 1/1/2024-12/31/2024.

The primary goals of the project are:

This is the alternate procurement request for Tech service and Support Policy. Through TSSP HHS is able to request IT equipment and services from the state. The state provides workstations, software, and network access that enables staff to connect to ODJFS. HHS agencies are on state mainframes and servers, and we are responsible for covering the maintenance and service. We usually get billed quarterly. This will allow us to pay these invoices.

Procurement
The procurement method for this project was an exemption. The total value of the exemption is \$250,000.00.

Contractor and Project Information
Ohio Treasurer of the State
PO Box 15278
Columbus, OH 43215-0278

The Treasurer Robert Sprague for The State of Ohio is the contractor/vendor

Project Status and Planning
The agreement is perpetual with the State of Ohio.

Funding
The project is funded 50% by the Health and Human Services Levy 50% State and Federal Reimbursement

The schedule of payments is by invoice.

BC2023-852

Scope of Work Summary

Department of Health and Human Services/Cuyahoga Job and Family Services requesting approval of an alternate procurement process with ABC and ACE Taxi for a not-exceed amount of \$120,000.00.

- a) ABC Taxi in the total amount not-to-exceed \$60,000.00
- b) Ace Taxi in the total amount not-to-exceed \$60,000.00

If the Project is not new to the County List the Prior Board Approval Number or Resolution Number. BC2021-737, BC2022-802

Describe the exact services being provided. The anticipated start-completion dates are 01/01/2024-12/31/2024. This is for the Non-Emergency Transportation (NET) Program. The NET program in Ohio is a statewide initiative designed to provide transportation services to Medicaid-eligible individuals. The primary goal of the NET program is to ensure that individuals who are on Medicaid have reliable transportation to and from medical appointments and services that are covered by Medicaid. This proposal is designed to ensure uninterrupted, reliable transportation services for our Medicaid-eligible residents. This is for the time- period 1/1/2024-12/31/2024.

The primary goals of the project are:

Pay for client’s non-emergency travel needs.

Allows Medicaid-eligible residents CJFS clients to receive the treatments they need.

Procurement

The procurement method for this project is an alternative procurement method. This request is for a not-exceed amount \$120,000.00 .

Contractor and Project Information

ABC Taxi	Ace Taxi
3530 Ridge Road	1798 East 55 th Street
Cleveland, OH 44102	Cleveland, OH 44103

The Owner for the ABC Taxi is Deselean Sisay and the owner of ACE Taxi Devang Bavishi

Project Status and Planning

This is an occasional service and reoccurs annually.

Funding

The project is funded 100% by the Health and Human Services Levy. However, this is 100% State Reimbursable.

D. - Consent Agenda

BC2023-853

Title	Public Works – Can Liners – Contract Amendment – Joshen Paper and Amico - RQ10057
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	CM2837 & CM2853	Joshen Paper & Packaging Co., Inc. & Amico LLC dba SOS Speedy Office Supply	effective upon contract signatures of all parties for a period of one year.	\$200,000.00	11/28/2022	BC2022-723
A-1	CM2837 & CM2853	Joshen Paper & Packaging Co., Inc. & Amico LLC dba SOS Speedy Office Supply	Pending approval – 12/31/2024	\$0	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase. This request is to extend the can liners contracts with Joshen Paper and Amico until 12/31/2024, adding no new funds.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3): To provide various sizes of can liners (trash bags) to be used at various County facilities. The contract allows flexibility to purchase various sized can liners in a timely manner.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Joshen Paper & Packaging Co., Inc. 5800 Grant Avenue Cuyahoga Hts., OH 44105	Owner, executive director, other (specify): Bob Reiner / President
Amico LLC dba SOS Speedy Office Supply 4536 Renaissance Parkway Warrensville Hts., OH 44128	Tomas Monachino / CEO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <i>RFP – original method</i> <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (No acronyms i.e. HHS Levy, CDBG, etc.). Include % if more than one source. General Fund – 100%
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Delay in getting all contractual documents.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	Started 9/26, emailed vendor ICF form & Matrix for Amendment 9/26, emailed Matrix for Amendment again 10/4, emailed Matrix for final Amendment 10/17, emailed vendor Amendment for signature & ICF again 10/20 and again 10/27, received Amendment 10/30, received ICF 11/13, released 11/13, week of 11/27 found contract document errors/corrected & resubmitted.
Date documents were requested from vendor:	9/26/2023
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	11/13/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-854

Department of Information Technology, recommending to declare excess County computers and IT Equipment as surplus County-owned property, no longer needed for public use; requesting authority to

sell surplus property to Info@Ret3.org. for a fee in the amount of \$1.00 in accordance with EA02012-0001.

Funding Source: Revenue Generating

Agency: Department of IT

Sale of property to:

Info@Ret3.org
1814 E. 40th Street
Cleveland, Ohio 44103
Kenny Kovach-Director

R.E.T.3 Marked for Disposal - 11-30-2023
From IT Workroom

<u>Asset Tag</u>	<u>Serial Number</u>	<u>Manufacturer</u>	<u>Model/Device</u>
29324	USSC055049	HP	LaserJet 4000tn Printer
80234	2UA4520WFZ	HP	Z230 SFF Workstation
80238	2UA4520WGT	HP	Z230 SFF Workstation
78039	2UA2501H04	HP	Z220 SFF Workstation
77533	2UA2501KQ6	HP	Z220 SFF Workstation
77850	2UA2501H3J	HP	Z220 SFF Workstation
72352	CN0TYXD9744450B4ALXL	Dell	LCD Monitor
60016	CN0CC388716187CAA761	Dell	LCD Monitor
77321	CN4248065H	HP	ZR2440w Monitor
84599	5CG6133HWD	HP	EliteBook 850 G3 Laptop
88795	5CG7373B5C	HP	EliteBook 850 G3 Laptop
78483	5CB3200NGJ	HP	EliteBook 8570P Laptop
88911	14911574653	Microsoft	Surface Pro 1807 LTE Tablet
No Tag	CN0N445N7426113Q20NS	Dell	LCD Monitor
82145	3CQ40117DH	HP	ProDisplay p221 Monitor
84708	6CM5330VMJ	HP	ProDisplay p222va Monitor
78682	3CQ3102SY3	HP	ProDisplay p221 Monitor
82154	3CQ40117F6	HP	ProDisplay p221 Monitor
86075	440256753252	Microsoft	Surface Pro 3 Tablet
87629	5CG633ZQRW	HP	UltraSlim Docking Station
90874	5CG830XN85	HP	UltraSlim Docking Station
92126	5CG843Z4DR	HP	UltraSlim Docking Station
87623	5CG633ZPM4	HP	UltraSlim Docking Station
88804	5CG731ZRNS	HP	UltraSlim Docking Station
88382	CNU419ZZKJ	HP	90W Docking Station Pum1.0
32147	L078BOA72HW644	Compaq	KVM Network Switch
80348	5CG54651KC	HP	ProBook 650 G1 Laptop

65292	CN0C730C7162308N1244	Dell	2209 Waf Monitor
77322	CN424806V1	HP	ZR2440w Monitor
71965	CN0T776R728720CC1H1M	Dell	E2210f Monitor
71967	CN0T776R728720CC0CJM	Dell	E2210f Monitor

BC2023-855

(See related items for proposed memberships for the week of 12/18/2023 in Section C above).

BC2023-856

(See related items for proposed purchases for the week of 12/18/2023 in Section C. above).

V – OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Title	Grant Award Notification - Cuyahoga County High-Risk Domestic Violence Court	
Department or Agency Name	Corrections Planning Board / Cuyahoga County Common Pleas Court	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input checked="" type="checkbox"/> Other (please specify): This is a notification of an award – no signature is needed.	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
Original Award Package (Award Agreement)		Department of Justice – Office of Violence Against Women	10/1/23 to 9/30/27	\$1,000,000.00	n/a	n/a

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>The Cuyahoga County Common Pleas Court received a four-year grant from the US Dept of Justice’s Criminal Justice Responses to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Grant Program.</p> <p>The grant supports a program that fosters victim safety and offender accountability in cases of domestic violence, dating violence, sexual assault, and stalking by encouraging state, local, and tribal governments and</p>
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courts to work collaboratively with community partners to identify problems and share ideas that will result in effectively responding to these crimes. An integral component of this program is the development, revitalization, or enhancement of a coordinated community response that brings together criminal justice agencies, victim services providers, and community-based organizations that respond to domestic violence, dating violence, sexual assault, and stalking.

The Cuyahoga County Common Pleas Court, in collaboration with its project partners (Journey Center for Safety and Healing, Signature Health, Case Western Reserve University), will use this grant award to improve their jurisdiction’s criminal justice system response to domestic violence, dating violence, sexual assault, and stalking by implementing activities that focus on victim safety and offender accountability and create sustainable project activities.

The project will: 1) identify a project coordinator to lead the project and any additional members of the coordinated community response team; 2) complete community assessments to inform the development of a strategic plan; 3) identify evidence-informed practices or tools that may be implemented at the agency and community level; 4) participate in mandated OVW training and technical assistance, including utilizing OVW culturally specific and underserved TTA providers.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

The project will address the following priority areas:
 1) develop an action plan to enhance the High-Risk Domestic Violence Court operations;
 2) revise the Domestic Violence Court policies and procedures including improving the pre- and post- sentence case management to expedite case processing and reduce caseload;
 3) re-design the information sharing process to communicate case information with stakeholders;
 4) conduct regular validated risk assessment using the Domestic Violence Risk and Needs Assessment and Ohio Risk Assessment System of pre- and post-sentencing offenders to develop strategic case management decisions;
 and
 5) create an informational brochure and video of the project’s High-Risk Domestic Violence Enhancement Initiative.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: N/A	Owner, executive director, other (specify): N/A
Vendor Council District: ALL	Project Council District: ALL
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
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RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) - <input checked="" type="checkbox"/> Other Procurement Method, please describe: This item serves as notification of a federal grant award that was accepted by the Honorable Brendan Sheehan (Common Pleas Court).

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. 100% funding from the U.S. Department of Justice – Office of Violence Against Women
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: N/A	
Timeline: Project/Procurement Start Date (date your team started working on this item):	The Item was filed in OnBase on Dec. 1, 2023
Date documents were requested from vendor:	Award was made on Oct. 1, 2023
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	N/A
Date item was entered and released in Infor:	N/A
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain) Continued services to support offender treatment. Provider has been contacted before deadline of the original agreement regarding the delay in processing Amended contract	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
Please note: We experienced issues with our SAM registration, resulting in a two-month delay in accepting our grant award. The Department of Justice was regularly notified of the issue and helped us with its resolution.

Item No. 2

Title	Grant Award Notification - Cuyahoga County Veterans Treatment Court
Department or Agency Name	Corrections Planning Board / Cuyahoga County Common Pleas Court
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input checked="" type="checkbox"/> Other (please specify): This is a notification of an award – no signature is needed.

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
Original Award Package (Award Agreement)		Department of Justice – Bureau of Justice Assistance	10/1/23 to 9/30/27	\$950,000.00	n/a	n/a

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.

The Cuyahoga County Common Pleas Court received notification of a four-year \$950,000 federal grant to support the expansion of its VTC Program. It will serve 40-50 unduplicated Veterans over an average 18-month involvement (range 12- 29 months), amounting to 160-200 Veterans served during the grant period.

The VTC Program will serve Veterans as follows: (1) VTC Coordinator oversees the program while finding more eligible Veteran participants to better meet their SUD and/or mental health needs; (2) VTC Probation Officer maintains supervision over Veterans and serves as the primary enforcer of any court-ordered treatment; (3) TASC Case Manager and local VJO Specialist use a strengths-based approach to case management that ensures Veterans have full access to coordinated community supports and service linkages related to substance abuse and mental health, including trauma; (4) VTC Mentoring Program Coordinator links Veterans with mentors who will provide hope for Veterans to recover; (5) Partner with local sober housing providers who can ensure Veterans have optimal sober support services opportunities, including those with a dual diagnosis.

For purchases of furniture, computers, vehicles: Additional Replacement
 Age of items being replaced: _____ How will replaced items be disposed of? _____

Project Goals, Outcomes or Purpose (list 3):

Goal 1: Enhance current Veteran’s Treatment Court (VTC) Program operations to increase a Veteran’s resiliency against SUD/Mental/COD issues through a coordinated continuum of treatment, community supervision, case management, mentor support, and wraparound services for Veteran participants each year.

Goal 2: Identify, assess, and refer Veterans to receive comprehensive programming that allows them to take responsibility for their actions resulting in positive SUD treatment and stable/improved behavioral health outcomes.

Goal 3: The VTC Mentor Coordinator oversees a Mentoring Program that increases the number of Veteran Mentors who assist Veteran Mentees in navigating through the VTC Program.

Goal 4: Demonstrate effectiveness of the VTC Program and enhancement efforts through regular data collection and sharing, program monitoring and outcome evaluation.

If a County Council item, are you requesting passage of the item without 3 readings. Yes No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)

Vendor Name and address: N/A	Owner, executive director, other (specify): N/A
Vendor Council District: ALL	Project Council District: ALL
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ	Provide a short summary for not using competitive bid process.

<input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	*See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) - <input checked="" type="checkbox"/> Other Procurement Method, please describe: This item serves as notification of a federal grant award that was accepted by the Honorable Brendan Sheehan (Common Pleas Court).

Is Purchase/Services technology related <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval:
Is the item ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source.	
100% funding from the U.S. Department of Justice – Bureau of Justice Assistance	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):	
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission

Reason: N/A	
Timeline: Project/Procurement Start Date (date your team started working on this item):	The Item was filed in OnBase on Dec. 1, 2023
Date documents were requested from vendor:	Award was made on Oct. 1, 2023
Date of insurance approval from risk manager:	N/A
Date Department of Law approved Contract:	N/A
Date item was entered and released in Infor:	N/A
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain) Continued services to support offender treatment. Provider has been contacted before deadline of the original agreement regarding the delay in processing Amended contract	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
Please note: We experienced issues with our SAM registration, resulting in a two-month delay in accepting our grant award. The Department of Justice was regularly notified of the issue and helped us with its resolution.

Item No. 3

(See related list of Contracts \$0.00 - \$4,999.99 – processed and executed for the week of 12/18/2023 in Section V. above).

Item No. 4

(See related list of purchases processed in the amount not-to-exceed \$5,000.00 for the period 11/1/2023 – 12/31/2023 in Section V. above).

VI – PUBLIC COMMENT

VII – ADJOURNMENT