



**CUYAHOGA COUNTY COUNCIL**  
**HEALTH, HUMAN SERVICES & AGING COMMITTEE**  
CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS  
4<sup>th</sup> FLOOR

**MEETING AGENDA - REVISED**  
**WEDNESDAY, JUNE 3, 2026— 1:30 P.M.**

**Committee Members**

Yvonne M. Conwell, Chair | Dist. 7  
Martin J. Sweeney, Vice Chair | Dist. 3  
Mark Casselberry | Dist. 4  
Michael J. Houser, Sr. | Dist. 10  
Robert E. Schleper, Jr. | Dist. 6

**1. CALL TO ORDER**

**2. ROLL CALL**

**3. PUBLIC COMMENT**

**4. APPROVAL OF MINUTES FROM THE MAY 6, 2026 MEETING**

**5. MATTERS REFERRED TO COMMITTEE**

- a) R2026-0140: A Resolution authorizing an amendment to Contract No. 6178 (fka Contract Nos. 5836, 3272 and 2730) with Emerald Development and Economic Network, Inc. for Rapid Re-housing and housing stabilization services for the period 1/1/2022 – 12/31/2025 to extend the time period to 12/31/2027, to amend terms, and for additional funds in the amount not-to-exceed \$1,842,300.00, effective upon contract signatures of all parties; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.
- b) R2026-0141: A Resolution making an award on RQ16099 to The MetroHealth System in the amount not-to-exceed \$3,100,000.00 for comprehensive medical services for children and families involved with the Division of Children and Family Services for the period 1/1/2026-12/31/2027; authorizing the County Executive to execute the Contract No. 5732 and all other documents consistent with said award and this Resolution; and declaring the necessity that this Resolution become immediately effective.
- c) R2026-0148: A Resolution awarding a total sum, not to exceed \$50,000, to the Cleveland Urban Minority Alcoholism and Drug Abuse Outreach Project (“Cleveland UMADAOP”) for the renovation and rehabilitation of the Central Intake and Outpatient Services Facility House from the District 7 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.
- d) R2026-0151: A Resolution awarding a total sum, not to exceed \$10,000, to the Cuyahoga County Division of Senior and Adult Services for the Cuyahoga County Senior Resources Access Hub from the District 10 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.

- e) R2026-0153: A Resolution awarding a total sum, not to exceed \$10,000, to the Crimson Heights Ministries as fiscal agent for Strategic Resources Consulting, LLC for the Freedom Summer 2026 Project from the District 8 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.
- f) R2026-0157: A Resolution authorizing an amendment to Contract No. 5898 (fka Contract No. 4944) to Lutheran Metropolitan Ministry for joint transition and rapid housing project services in connection with the Youth Homelessness Demonstration Program for the period 1/1/2024-12/31/2025 to extend the time period to 12/31/2026, to amend and replace various terms, and for additional funds in the amount not-to-exceed \$1,676,083.00, effective 1/1/2026; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.

## **6. MISCELLANEOUS BUSINESS**

## **7. ADJOURNMENT**

*\* Complimentary parking for the public is available in the attached garage at 900 Prospect. A skywalk extends from the garage to provide additional entry to the Council Chambers from the 5th floor parking level of the garage. Download the Metropolis smartphone app and create an account to have parking validated at meetings. Please scan the QR code posted in Council Chambers to input your license plate information for parking to be validated by Metropolis, a non-County entity. You will be responsible for the cost of parking if you are unable to utilize this online parking service.*

*\*\*Council Chambers is equipped with a hearing assistance system. If needed, please see the Clerk to obtain a receiver.*



## **CUYAHOGA COUNTY COUNCIL**

### **HEALTH, HUMAN SERVICES & AGING COMMITTEE**

CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS

4<sup>th</sup> FLOOR

#### **MEETING MINUTES**

**WEDNESDAY, MAY 6, 2026—1:00 P.M.**

#### **Committee Members**

Yvonne M. Conwell, Chair | Dist. 7  
Martin J. Sweeney, Vice Chair | Dist. 3  
Mark Casselberry | Dist. 4  
Michael J. Houser, Sr. | Dist. 10  
Robert E. Schleper, Jr. | Dist. 6

#### **1. CALL TO ORDER**

**Chairwoman Conwell called the meeting to order at 1:08 p.m.**

#### **2. ROLL CALL**

**Ms. Conwell asked Clerk Richardson to call the roll. Committee members Conwell, Casselberry, Houser and Schleper were in attendance and a quorum was determined. Committee member Sweeney was absent.**

#### **3. PUBLIC COMMENT**

**There were no public comments given.**

#### **4. APPROVAL OF MINUTES FROM THE APRIL 1, 2026 MEETING**

**A motion was made by Mr. Schleper, seconded by Mr. Casselberry and approved by unanimous vote to approve the minutes from the April 1, 2026 meeting.**

#### **5. MATTERS REFERRED TO COMMITTEE**

- a) R2026-0112: A Resolution awarding a total sum, not to exceed \$12,500, to the Cuyahoga County Department of Health and Human Services for the Your Voice Matters Youth Voting Summit from the District 7 and District 10 ARPA Community Grant Funds, and declaring the necessity that this Resolution become immediately effective.

**Ms. Yvonne Dortch, Voting Rights Coordinator for the Department of Health & Human Services, addressed the Committee regarding Resolution No. R2026-0112. Discussion ensued.**

**Committee members asked questions of Ms. Dortch pertaining to the item, which she answered accordingly.**

**On a motion by Mr. Casselberry with a second by Mr. Schleper, Resolution No. R2026-0112 was considered and approved by unanimous vote to be referred to the full Council agenda for second reading.**

- b) R2026-0119: A Resolution making awards on various requisitions to various providers in the total amount not-to-exceed \$232,723,509.00 for out-of-home placement and foster care services for the period 4/1/2026 – 3/31/2029; authorizing the County Executive to execute the contracts and all other documents consistent with said awards and this Resolution; and declaring the necessity that this Resolution become immediately effective:

RQ16303:

- 1) Contract No. 6124 with Adelphoi Village, Inc. in the anticipated amount not-to-exceed \$487,240.00.
- 2) Contract No. 6125 with Advantage Family Outreach and Foster Care in the anticipated amount not-to-exceed \$1,801,690.00.
- 3) Contract No. 6092 with Applewood Centers, Inc. in the anticipated amount not-to-exceed \$3,302,260.00.
- 4) Contract No. 6126 with Artis's Tender Love & Care, Inc. in the anticipated amount not-to-exceed \$6,888,220.00.
- 5) Contract No. 6127 with Beech Brook in the anticipated amount not-to-exceed \$4,611,040.00.
- 6) Contract No. 6114 with Bellefaire Jewish Children's Bureau in the anticipated amount not-to-exceed \$10,033,360.00.
- 7) Contract No. 6129 with BHC Belmont Pines Hospital, Inc. in the anticipated amount not-to-exceed \$2,312,060.00.
- 8) Contract No. 6130 with BHC Fox Run Hospital, Inc. in the anticipated amount not-to-exceed \$1,008,250.00.
- 9) Contract No. 6089 with Caring for Kids, Inc. in the anticipated amount not-to-exceed \$5,731,300.00.
- 10) Contract No. 6091 with Carrington Behavioral Health LLC in the anticipated amount not-to-exceed \$4,161,110.00.
- 11) Contract No. 6094 with Catholic Charities Corporation in the anticipated amount not-to-exceed \$1,384,320.00.
- 12) Contract No. 6096 with Christian Children's Home of Ohio, Inc. in the anticipated amount not-to-exceed \$3,906,710.00.
- 13) Contract No. 6138 with The Cleveland Christian Home Incorporated in the anticipated amount not-to-exceed \$16,788,870.00.
- 14) Contract No. 6141 with Cornell Abraxas Group LLC in the anticipated amount not-to-exceed \$3,314,120.00.
- 15) Contract No. 6142 with Destiny Family Services, LLC, in the anticipated amount not-to-exceed \$3,988,900.00.
- 16) Contract No. 6143 with Gracehaven, Inc. in the anticipated amount not-to-exceed \$757,750.00.

- 17) Contract No. 6148 with Habilitation Center, LLC dba Little Creek Behavioral Health in the anticipated amount not-to-exceed \$10,418,030.00.
- 18) Contract No. 6149 with Habilitation Center, LLC dba Millcreek of Arkansas in the anticipated amount not-to-exceed \$0.00.
- 19) Contract No. 6135 with HMIH Cedar Crest, LLC dba Cedar Crest Hospital and RTC in the anticipated amount not-to-exceed \$1,375,210.00.
- 20) Contract No. 6134 with In Focus of Cleveland, Inc. in the anticipated amount not-to-exceed \$1,837,310.00.
- 21) Contract No. 6107 with Keystone Richland Center LLC dba Foundations for Living in the anticipated amount not-to-exceed \$2,422,930.00.
- 22) Contract No. 6108 with Lakeland Hospital Acquisition, LLC dba Lakeland Behavioral Health System in the anticipated amount not-to-exceed \$0.00.
- 23) Contract No. 6137 with Lighthouse Youth & Family Services in the anticipated amount not-to-exceed \$476,400.00.
- 24) Contract No. 6104 with Lutheran Homes Society, Inc. dba Genacross Family & Youth Services in the anticipated amount not-to-exceed \$5,385,530.00.
- 25) Contract No. 6132 with Lutheran Metropolitan Ministry in the anticipated amount not-to-exceed \$3,367,460.00.
- 26) Contract No. 6098 with National Youth Advocate Program, Inc. in the anticipated amount not-to-exceed \$22,813,890.00.
- 27) Contract No. 6106 with Necco SE, LLC in the anticipated amount not-to-exceed \$6,511,810.00.
- 28) Contract No. 6139 with Crossroads Health/New Directions in the anticipated amount not-to-exceed \$243,310.00.
- 29) Contract No. 6112 with Ohio Mentor, Inc. in the anticipated amount not-to-exceed \$36,041,550.00.
- 30) Contract No. 6102 with OhioGuidestone in the anticipated amount not-to-exceed \$22,498,770.00.
- 31) Contract No. 6133 with Open Arms Adoptions, Inc. in the anticipated amount not-to-exceed \$360,340.00.
- 32) Contract No. 6084 with Pathway Caring for Children in the anticipated amount not-to-exceed \$893,640.00.
- 33) Contract No. 6100 with Pathway to Purpose LLC in the anticipated amount not-to-exceed \$1,922,180.00.
- 34) Contract No. 6086 with Piney Ridge Treatment Center, LLC dba Yellow Rock Behavioral Health in the anticipated amount not-to-exceed \$0.00.

- 35) Contract No. 6088 with Pressley Ridge in the anticipated amount not-to-exceed \$1,687,060.00.
- 36) Contract No. 6121 with Quality Care Residential Homes, Inc. in the anticipated amount not-to-exceed \$5,060,510.00.
- 37) Contract No. 6109 with Raven House in the anticipated amount not-to-exceed \$594,550.00.
- 38) Contract No. 6122 with Rehabilitation Centers, LLC dba Millcreek of Pontotoc in the anticipated amount not-to-exceed \$0.00.
- 39) Contract No. 6123 with Rehabilitation Centers, LLC dba Millcreek of Magee in the anticipated amount not-to-exceed \$914,410.00.
- 40) Contract No. 6082 with Rolling Hills Hospital in the anticipated amount not-to-exceed \$0.00.
- 41) Contract No. 6131 with Safely Home, Inc. in the anticipated amount not-to-exceed \$0.00.
- 42) Contract No. 6090 with Specialized Alternatives for Families and Youth of Ohio, Inc. in the anticipated amount not-to-exceed \$14,041,250.00.
- 43) Contract No. 6111 with The Bair Foundation in the anticipated amount not-to-exceed \$1,844,640.00.
- 44) Contract No. 6101 with The Buckeye Ranch, Inc. in the anticipated amount not-to-exceed \$1,980,010.00.
- 45) Contract No. 6103 with The Village Network in the anticipated amount not-to-exceed \$1,858,290.00.
- 46) Contract No. 6097 with White Deer Run, LLC dba Cove Prep in the anticipated amount not-to-exceed \$0.00.
- 47) Contract No. 6115 with Youth Opportunity Investments LLC in the anticipated amount not-to-exceed \$1,377,000.00.

RQ16323:

- 48) Contract No. 6128 with Benchmark Behavioral Health System, Inc. in the anticipated amount not-to-exceed \$704,760.00.
- 49) Contract No. 6154 with The BridgeWay, LLC in the anticipated amount not-to-exceed \$0.00.
- 50) Contract No. 6087 with Cadence Care Network in the anticipated amount not-to-exceed \$2,761,470.00.
- 51) Contract No. 6110 with Life Start in the anticipated amount not-to-exceed \$1,745,450.00.
- 52) Contract No. 6099 with Northeast Ohio Adoption Services in the anticipated amount not-to-exceed \$175,350.00.

53) Contract No. 6105 with Nu Beginnings II, LLC in the anticipated amount not-to-exceed \$0.00.

54) Contract No. 6095 with Rite of Passage, Inc. dba Norris Academy in the anticipated amount not-to-exceed \$0.00.

55) Contract No. 6113 with Youth Villages, Inc. in the anticipated amount not-to-exceed \$0.00.

RFP Exemption

56) Contract No. 6081 with A Loving Heart Youth Services Incorporated in the anticipated amount not-to-exceed \$3,961,299.00 .

57) Contract No. 6140 with Compassion Care Group LP in the anticipated amount not-to-exceed \$0.00.

58) Contract No. 6136 with Harbor Point Behavioral Health Center, Inc. in the anticipated amount not-to-exceed \$1,134,290.00.

59) Contract No. 6083 with RTC Resource Acquisition Corporation in the anticipated amount not-to-exceed \$0.00.

60) Contract No. 6085 with SP Behavioral, LLC dba Sandy Pines in the anticipated amount not-to-exceed \$925,170.00.

61) Contract No. 6117 with Young Star Academy LLC dba Mohican Young Star Academy in the anticipated amount not-to-exceed \$4,912,440.00.

**Mr. David Merriman, Director of the Department of Health and Human Services; Mr. Marcos Cortes, Administrator of the Division of Contracts and Performance for the Department of Health and Human Services; Ms. Karen Stormann, Deputy Director, Division of Children & Family Services, and Ms. Jacqueline Fletcher, Director of the Division of Children and Family Services, addressed the Committee regarding Resolution No. R2026-0119. Discussion ensued.**

**Committee members asked questions of Mr. Merriman, Mr. Cortes, Ms. Stormann and Ms. Fletcher pertaining to the item, which they answered accordingly.**

**On a motion by Ms. Conwell with a second by Mr. Casselberry, Resolution No. R2026-0119 was considered and approved by unanimous vote to be referred to the full Council agenda for second reading.**

**Ms. Conwell and Mr. Schleper requested to have their names added as co-sponsors to the legislation.**

6. MISCELLANEOUS BUSINESS

**There was no miscellaneous business.**

7. ADJOURNMENT

**With no further business to discuss, Chairwoman Conwell adjourned the meeting at 1:54 p.m., without objection.**

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0140

Sponsored by: **County Executive Ronayne/Department of Health and Human Services/Division of Community Initiatives/Office of Homeless Services**

**A Resolution** authorizing an amendment to Contract No. 6178 (fka Contract Nos. 5836, 3272 and 2730) with Emerald Development and Economic Network, Inc. for Rapid Re-housing and housing stabilization services for the period 1/1/2022 – 12/31/2025 to extend the time period to 12/31/2027, to amend terms, and for additional funds in the amount not-to-exceed \$1,842,300.00, effective upon contract signatures of all parties; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution, and declaring the necessity that this Resolution become immediately effective.

**WHEREAS**, County Executive Ronayne/Department of Health and Human Services/Division of Community Initiatives/Office of Homeless Services recommends an amendment to Contract No. 6178 (fka Contract Nos. 5836, 3272 and 2730) with Emerald Development and Economic Network, Inc. for Rapid Re-housing and housing stabilization services for the period 1/1/2022 – 12/31/2025 to extend the time period to 12/31/2027, to amend terms, and for additional funds in the amount not-to-exceed \$1,842,300.00, effective upon contract signatures of all parties; and

**WHEREAS**, the primary goals of this project are to (a) provide short term rental assistance; and (b) move people from homelessness into housing quickly while providing supportive services; and

**WHEREAS**, this project is funded 80% State of Ohio Department of Development Emergency Solutions Grant and 20% State of Ohio Housing Trust Fund; and

**WHEREAS**, it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby authorizes an amendment to Contract No. 6178 (fka Contract Nos. 5836, 3272 and 2730) with Emerald Development and Economic Network, Inc. for Rapid Re-housing and housing stabilization services for the period 1/1/2022 – 12/31/2025 to extend the time period to 12/31/2027, to amend terms, and for additional funds in the amount not-to-exceed \$1,842,300.00, effective upon contract signatures of all parties.

**SECTION 2.** That the County Executive is authorized to execute the amendment and all other documents consistent with this Resolution. To the extent that any exemptions are necessary under the County Code and contracting procedures, they shall be deemed approved by the adoption of this Resolution.

**SECTION 3.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 4.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: May 12, 2026  
Committee(s) Assigned: Health, Human Services & Aging

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_\_\_

## PURCHASE-RELATED TRANSACTIONS

|                                  |                                                                                                                                                                                                                                                                                           |
|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Title</b>                     | OHS; EMERALD DEVELOPMENT AND ECONOMIC NETWORK, INC. (EDEN); 2025 –2027 AMEND 3; RAPID REHOUSING                                                                                                                                                                                           |
| <b>Department or Agency Name</b> | Office of Homeless Services                                                                                                                                                                                                                                                               |
| <b>Requested Action</b>          | <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<br><input type="checkbox"/> Other (please specify): |

| Original (O)/<br>Amendment<br>(A-# ) | Contract<br>No. (If PO,<br>list PO#) | Vendor Name                                          | Time<br>Period        | Amount         | Date<br>BOC/Council<br>Approved | Approval No. |
|--------------------------------------|--------------------------------------|------------------------------------------------------|-----------------------|----------------|---------------------------------|--------------|
| O                                    | 2730                                 | Emerald Development and Economic Network, Inc (EDEN) | 1/1/2022 – 12/31/2023 | \$1,935,500.00 | 11/22/22                        | R2022-0415   |
| A - 1                                | 3272 (copy of 2730)                  | Emerald Development and Economic Network, Inc (EDEN) | 1/1/2022 – 6/30/24    | \$902,677.31   | 6/6/23                          | R2023-0139   |
| A - 2                                | 3272                                 | Emerald Development and Economic Network, Inc (EDEN) | 1/1/2022 – 12/31/25   | \$1,985,300.00 | 5/14/24                         | R2024-0168   |
| A - 3                                | 6178 (Copy of 5836)                  | Emerald Development and Economic Network, Inc (EDEN) | 1/1/2022 – 12/31/27   | \$1,842,300.00 | Pending                         | Pending      |

**Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.**

The Cuyahoga County Homeless Continuum of Care is committed to low-barriers to ensure homelessness is rare, brief, and non-recurring. Rapid Rehousing (RRH) swiftly connects individuals and families experiencing homelessness to housing with minimal barriers. This approach provides tailored services and time-limited financial support, focusing on overcoming immediate obstacles to securing permanent housing, reducing homelessness duration, preventing recurrent homelessness, and promoting long-term housing stability.

RRH employs a progressive engagement model, starting with minimal assistance and increasing support as needs arise. Key components in Cuyahoga County include landlord recruitment, housing location, inspections, rent assessments, and subsidies for up to 12 months, along with continuous support for program participants.

EDEN is the designated RRH provider for the CoC. This funding will allow EDEN to continue to expedite the transition from homelessness to housing for individuals and families across Cuyahoga County.

This is the third amendment to CM 6178 (fka 5836) seeking an extension of time for a term from 9/23/25 to 12/31/27 with additional funding in the amount of \$1,842,300.00.

Indicate whether: ☐ New service/purchase ☐ Existing service/purchase ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)

N/A

For purchases of furniture, computers, vehicles: ☐ Additional ☐ Replacement

Age of items being replaced: N/A How will replaced items be disposed of: N/A

Project Goals, Outcomes or Purpose (list 3):

- Move households quickly from shelter to permanent housing using term-limited rent assistance subsidies
- Ensure that the household will be able to sustain their rent after the subsidy ends
- Link households with other services in the community to promote housing stability

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). If there are multiple vendors copy this table and complete for each vendor.

Vendor Name and address:

EDEN, Inc.  
7812 Madison Avenue  
Cleveland, Ohio 44102

Owner, executive director, other (specify):

Elaine Gimmel, Executive Director

Vendor Council District: 3

Project Council District: County-Wide

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

N/A

#### COMPETITIVE PROCUREMENT

RQ# \_\_\_\_\_

☐ RFB ☐ RFP ☐ RFQ

☐ Informal

☐ Formal Closing Date:

The total value of the solicitation:

Number of Solicitations (sent/received) /

Participation/Goals (%): ( ) DBE ( ) SBE  
( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? ☐ Yes  
☐ No, please explain.

#### NON-COMPETITIVE PROCUREMENT

Provide a short summary for not using competitive bid process.

\*See Justification for additional information.

☐ Exemption

☐ State Contract, list STS number and expiration date

☐ Government Coop (Joint Purchasing Program/GSA), list number and expiration date

☐ Sole Source ☐ Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).

|                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Recommended Vendor was low bidder: <input type="checkbox"/> Yes<br><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 - (list original procurement)<br>Contract Amendment ( <i>list original procurement</i> )<br>The initial procurement was a competitive process (RQ 7099), completed on August 30, 2021. OHS requested an alternative procurement to award EDEN a contract for services proposed in response to this RFP, using a different funding source. The awarded contract was funded through State of Ohio Homeless Crisis Response Program. BC2022-97, approved 2/14/22.<br><br>OHS received additional guidance from the State of Ohio requiring all HCRP funding to go to EDEN as the Rapid Rehousing provider. An amended alternative procurement request was submitted and approved. BC2022-482, approved 8/8/22. |
|                                                                                                                 | <input type="checkbox"/> Other Procurement Method, please describe:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

|                                                                                                                                                                                                                                       |                           |       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------|
| <b>Is Purchase/Services technology related</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list date of TAC approval and answer the questions below.                                                  |                           |       |
| <table border="1"> <tr> <td>List date of TAC approval</td> <td>Date:</td> </tr> </table>                                                                                                                                              | List date of TAC approval | Date: |
| List date of TAC approval                                                                                                                                                                                                             | Date:                     |       |
| <input type="checkbox"/> Check if item on IT Standard List of approved purchase and provide date of TAC approval.<br><input type="checkbox"/> Check if item is ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes. |                           |       |
| Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.                                                                                            |                           |       |

|                                                                                                                                                                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FUNDING SOURCE:</b> Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.                                                                                                                                                      |
| <ul style="list-style-type: none"> <li>80% State of Ohio Emergency Solutions Grant</li> <li>20% State of Ohio Housing Trust Fund</li> </ul>                                                                                                                                                          |
| Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):                                                                                                                                                   |
| <b>List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.</b><br><br>HS220140; 55130; HS-26-HCRP-ESG; 55130; for Emergency Solutions Grant \$1,473,600.00<br><br>HS220100; 55130; HS-26-HCRP-OHTF; 55130; for Ohio Housing Trust Fund \$368,700.00 |

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

**Provide status of project.**

Recurring service under current contract CM 6178 (Copy of 5836).

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

**Reason:** OHS received the grant awards late then needed additional time for appropriation and activity code creation.

**Timeline**

Project/Procurement Start Date (date your team started working on this item): 2/6/2026 (OHS); 2/25/2026 (DCAP)

Date documents were requested from vendor: 3/5/2026; 3/18/2026

Date of insurance approval from risk manager: N/A

Date Department of Law approved Contract: 4/2/2026

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 been made? ☒ No ☐ Yes (if yes, please explain)

**HISTORY** (see instructions):

| Prior Original (O) and subsequent Amendments (A-# ) | Contract No. (If PO, list PO#) | Vendor Name | Time Period | Amount | Date BOC/Council Approved | Approval No. |
|-----------------------------------------------------|--------------------------------|-------------|-------------|--------|---------------------------|--------------|
| See Table 1                                         |                                |             |             |        |                           |              |

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in OnBase Document Management

|                                         |                                    |
|-----------------------------------------|------------------------------------|
| Infor/Lawson RQ# (if applicable):       | RQ 7099                            |
| Buyspeed RQ# (if applicable):           | N/A                                |
| Infor/Lawson PO # Code (if applicable): | AMND                               |
| CM Contract#                            | CM 6178 (Copy of 5836, 3272, 2730) |

|                                                      |                                                                                                                                                          |                             |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| Late Submittal Required:                             | Yes <input checked="" type="checkbox"/>                                                                                                                  | No <input type="checkbox"/> |
| Why is the contract being submitted late?            | OHS received the grant awards late, then needed additional time for approval/signature, appropriation and activity code creation.                        |                             |
| What is being done to prevent this from reoccurring? | OHS does not have control over when grant award is issued but we can work closer with our county partners to ensure that it is turned over to us timely. |                             |

|                                               |                                         |                                        |
|-----------------------------------------------|-----------------------------------------|----------------------------------------|
| TAC or CTO Required or Authorized IT Standard | Yes <input checked="" type="checkbox"/> | No <input checked="" type="checkbox"/> |
|-----------------------------------------------|-----------------------------------------|----------------------------------------|

| Contract Amendments<br>Reviewed by Purchasing                                                                                    |                              |           |                            |                   |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------|----------------------------|-------------------|
| <b>Emerald Development of Economic Network – RRH AMND 3</b>                                                                      |                              |           | <b>Department Initials</b> | <b>Purchasing</b> |
| Briefing Memo                                                                                                                    |                              |           | DA                         | BRM               |
| Justification Form                                                                                                               |                              |           | DA                         | BRM               |
| IG#                                                                                                                              | 25-0102-REG; EXP: 12/31/2029 |           | DA                         | BRM               |
| Annual Non-Competitive Bid Contract Statement ( <i>See Contracts Checklist Glossary on the intranet for form requirements</i> ). | Date:                        |           | N/A                        | N/A               |
| Debarment/Suspension Verified                                                                                                    | Date:                        | 3.5.2026  | DA                         | BRM               |
| Auditor's Findings                                                                                                               | Date:                        | 2.27.2026 | DA                         | BRM               |
| Independent Contractor (I.C.) Form                                                                                               | Date:                        | 10.6.2025 | DA                         | BRM               |
| Cover - <i>Master contracts only</i>                                                                                             |                              |           | N/A                        | N/A               |
| Contract Evaluation – <i>if required provide most recent CM history on contract history table (see pg 2)</i>                     |                              |           | DA                         | BRM               |
| TAC/CTO Approval or IT Standards ( <i>if required attach and identify relevant page #s or meeting approval number</i> )          |                              |           | N/A                        | N/A               |
| Checklist Verification                                                                                                           |                              |           | DA                         | BRM               |

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

| Reviewed by Law                                                                   |    |
|-----------------------------------------------------------------------------------|----|
| <b>Emerald Development of Economic Network – RRH AMND 3</b>                       |    |
| Agreement/Contract and Exhibits                                                   | DA |
| Matrix Law Screen shot                                                            | DA |
| COI                                                                               | DA |
| Workers' Compensation Insurance                                                   | DA |
| Original Executed Contract (containing insurance terms) & all executed amendments | DA |

## Department of Purchasing – Required Documents Checklist

### CONTRACT SPENDING PLAN

| Time Period          | Accounting Unit | Account Number | Activity Code   | Account Category or Subaccount | Dollar Amount         |
|----------------------|-----------------|----------------|-----------------|--------------------------------|-----------------------|
| 9/23/2025-12/31/2025 | HS220140        | 55130          | HS-26-HCRP-ESG  | 55130                          | \$212,538.46          |
| 1/1/2026-12/31/2026  | HS220140        | 55130          | HS-26-HCRP-ESG  | 55130                          | \$524,261.54          |
| 1/1/2026-12/31/2026  | HS220100        | 55130          | HS-26-HCRP-OHTF | 55130                          | \$184,350.00          |
| 1/1/2027-12/31/2027  | HS220140        | 55130          | HS-26-HCRP-ESG  | 55130                          | \$736,800.00          |
| 1/1/2027-12/31/2027  | HS220100        | 55130          | HS-26-HCRP-OHTF | 55130                          | \$184,350.00          |
|                      |                 |                | <b>TOTAL</b>    |                                | <b>\$1,842,300.00</b> |

### CONTRACT HISTORY (see Contract Evaluation, if applicable/ to be completed by Department)

| CE/AG# (if applicable)                                  |                 | N/A                              |                                                |                               |                            |
|---------------------------------------------------------|-----------------|----------------------------------|------------------------------------------------|-------------------------------|----------------------------|
| Infor/Lawson PO# and PO Code (if applicable)            |                 | EXMT                             |                                                |                               |                            |
| Lawson RQ# (if applicable)                              |                 | 7099                             |                                                |                               |                            |
| CM Contract#                                            |                 | 6178 COPY OF 5836, 3272, 2730    |                                                |                               |                            |
|                                                         | Original Amount | Amendment Amount (if applicable) | Original Time Period/Amended End Date          | BOC/ Resolution Approval Date | BOC/ Resolution Approval # |
| Original Amount: CM 2730                                | \$1,935,300.00  |                                  | 1/1/2022-12/31/2023                            | 11/22/22                      | R2022-0415                 |
| Prior Amendment Amounts (list separately) (A-1) CM 3272 |                 | \$902,677.31                     | 1/1/2023-6/30/2024                             | 6/6/2023                      | R2023-0139                 |
| (A-2) CM 3272                                           |                 | \$1,985,300.00                   | Effective upon signature 1/1/2024 - 12/31/2025 | 5/14/2024                     | R2024-0168/56081143        |
| Pending Amendment: CM 6178                              |                 | \$1,842,300.00                   | Effective Date- 12/31/2027                     | Pending                       | Pending                    |
| Total Amendments                                        |                 | \$ 4,730,277.31                  |                                                |                               |                            |
| Total Contract Amount                                   |                 | \$ 6,665,577.31                  |                                                |                               |                            |

### PURCHASING USE ONLY

|                    |                                                |
|--------------------|------------------------------------------------|
| Prior Resolutions: | R2022-0415, R2023-0139, R2024-0168             |
| CM#:               | 6178 COPY OF 5836, 3272, 2730                  |
| Vendor Name:       | Emerald Development and Economic Network, Inc. |
| Time Period:       | 1/1/2022-12/31/2025 EXT 12/31/2027             |
| Amount:            | \$1,842,300.00                                 |

## Department of Purchasing – Required Documents Checklist

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|                                                 |               |
|-------------------------------------------------|---------------|
| History/CE:                                     | YES           |
| EL:                                             | YES           |
| Purchasing Notes:                               |               |
| Purchasing Agents Initials and date of approval | BRM 4/21/2026 |

## CONTRACT EVALUATION FORM

|                                                                                   |                                                                                                                                                                                                                                                                                                                              |                      |                |                      |             |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------|----------------------|-------------|
| <b>Contractor</b>                                                                 | Emerald Development and Economic Network, Inc.                                                                                                                                                                                                                                                                               |                      |                |                      |             |
| <b>Current Contract History:<br/>CE/AG# (if applicable)<br/>Infor/Lawson PO#:</b> | CM 2730/PO 211935<br>CM 3272/PO 212413<br>CM 6178 (Copy of 5836)                                                                                                                                                                                                                                                             |                      |                |                      |             |
| <b>RQ#</b>                                                                        | 7099                                                                                                                                                                                                                                                                                                                         |                      |                |                      |             |
| <b>Time Period of Original Contract</b>                                           | 1/1/22-12/31/23                                                                                                                                                                                                                                                                                                              |                      |                |                      |             |
| <b>Background Statement</b>                                                       | EDEN was awarded a contract to implement the Rapid Re-Housing Program through an alternative procurement resulting from an RFP process. EDEN is the provider of RRH for single adults and families throughout the homeless Continuum of Care.                                                                                |                      |                |                      |             |
| <b>Service Description</b>                                                        | Rapid Re-Housing provides short-term rental assistance to persons experiencing a housing crisis and who are literally homeless. Services include housing location, inspection, rent assistance, and follow-up case management to support stability after the rent assistance ends.                                           |                      |                |                      |             |
| <b>Performance Indicators</b>                                                     | Number of households assisted annually; reduced returns to shelter; length of time from RRH referral to move out to permanent housing.                                                                                                                                                                                       |                      |                |                      |             |
| <b>Actual Performance versus performance indicators (include statistics):</b>     | 79 households received rent assistance in 2025. Approximately 0% of households return to shelter within 2 years. Referrals to move out averaged 22 days.                                                                                                                                                                     |                      |                |                      |             |
| <b>Rating of Overall Performance of Contractor</b>                                | <b>Superior</b>                                                                                                                                                                                                                                                                                                              | <b>Above Average</b> | <b>Average</b> | <b>Below Average</b> | <b>Poor</b> |
| <b>Select One (X)</b>                                                             |                                                                                                                                                                                                                                                                                                                              | X                    |                |                      |             |
| <b>Justification of Rating</b>                                                    | EDEN coordinates the RRH program with all shelter providers and the specific sub-populations of youth, families, single adults, and unsheltered persons. In addition to the front-end process of linking people with housing, EDEN coordinates the RRH case management services provided to households once they are housed. |                      |                |                      |             |
| <b>Department Contact</b>                                                         | Erin Rearden                                                                                                                                                                                                                                                                                                                 |                      |                |                      |             |
| <b>User Department</b>                                                            | Office of Homeless Services                                                                                                                                                                                                                                                                                                  |                      |                |                      |             |
| <b>Date</b>                                                                       | 1/28/2026                                                                                                                                                                                                                                                                                                                    |                      |                |                      |             |

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0141

Sponsored by: **County Executive Ronayne/Department of Health and Human Services/Division of Children and Family Services**

**A Resolution** making an award on RQ16099 to The MetroHealth System in the amount not-to-exceed \$3,100,000.00 for comprehensive medical services for children and families involved with the Division of Children and Family Services for the period 1/1/2026- 12/31/2027; authorizing the County Executive to execute the Contract No. 5732 and all other documents consistent with said award and this Resolution; and declaring the necessity that this Resolution become immediately effective.

**WHEREAS**, the County Executive/Department of Health and Human Services/ Division of Children and Family Services recommends making an award on RQ16099 to The MetroHealth System in the amount not-to-exceed \$3,100,000.00 for comprehensive medical services for children and families involved with the Division of Children and Family Services for the period 1/1/2026- 12/31/2027; and

**WHEREAS**, the primary goal of this project is to offer timely, high quality comprehensive medical services for children and youth in custody, and drug testing for caregivers; and

**WHEREAS**, this project is funded 65% Health & Human Services Levy and 35% Federal Title IV-E; and

**WHEREAS**, it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby authorizes an award on RQ16099 to The MetroHealth System in the amount not-to-exceed \$3,100,000.00 for comprehensive medical services for children and families involved with the Division of Children and Family Services for the period 1/1/2026- 12/31/2027.

**SECTION 2.** That the County Executive is authorized to execute Contract No. 5732 and all other documents consistent with said award and this Resolution.

**SECTION 3.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 4.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: May 12, 2026  
Committee(s) Assigned: Health, Human Services & Aging

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_

## PURCHASE-RELATED TRANSACTIONS

|                                  |                                                                                                                                                                                                                                                                                           |
|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Title</b>                     | DCFS Contract with The MetroHealth System for comprehensive medical services                                                                                                                                                                                                              |
| <b>Department or Agency Name</b> | DCFS                                                                                                                                                                                                                                                                                      |
| <b>Requested Action</b>          | <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<br><input type="checkbox"/> Other (please specify): |

| Original (O)/<br>Amendment<br>(A-# ) | Contract<br>No. (If PO,<br>list PO#) | Vendor<br>Name          | Time Period           | Amount         | Date<br>BOC/Council<br>Approved | Approval No. |
|--------------------------------------|--------------------------------------|-------------------------|-----------------------|----------------|---------------------------------|--------------|
| O                                    | 5732                                 | The Metro Health System | 1/1/2026 – 12/31/2027 | \$3,100,000.00 | Pending                         | Pending      |
|                                      |                                      |                         |                       |                |                                 |              |
|                                      |                                      |                         |                       |                |                                 |              |

**Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.**

In order to pursue the safety, health, and well-being of children in custody, DCFS offers comprehensive medical services including 1) screening and assessment of health care needs of children and youth, 2) coordinated psychotropic medication consultation and counseling, and 3) alcohol and drug testing for caregivers, youth, or other adults in the home.

**Indicate whether:** ☐ New service/purchase   ☒ Existing service/purchase   ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)

**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 reduce safety risks for children and youth  
 To establish care coordination through consultation and counseling for children and youth prescribed psychotropic medications  
 To provide linkages for youth aging-out of the foster care system  
 To comply with referral standards for preventive and follow-up visits for physical and behavioral health care set by American Academy of Pediatrics (AAP) and Ohio Administrative Code (OAC) 5101:2-42-66.1.

**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). If there are multiple vendors copy this table and complete for each vendor.**

|                                                                         |                                                    |
|-------------------------------------------------------------------------|----------------------------------------------------|
| <b>Vendor Name and address:</b>                                         | <b>Owner, executive director, other (specify):</b> |
| The MetroHealth System<br>2500 MetroHealth Drive<br>Cleveland, OH 44109 | <b>Dr. Christine Alexander-Rager</b>               |

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

| COMPETITIVE PROCUREMENT                                                                                                                                                                                                                                                                                 | NON-COMPETITIVE PROCUREMENT                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RQ# <u>16099</u><br><input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ<br><input type="checkbox"/> Informal<br><input type="checkbox"/> Formal Closing Date:                                                                                             | Provide a short summary for not using competitive bid process.<br><br>*See Justification for additional information.                                                                         |
| The total value of the solicitation: \$504,000.00                                                                                                                                                                                                                                                       | <input type="checkbox"/> Exemption                                                                                                                                                           |
| Number of Solicitations (sent/received) 36 / 4                                                                                                                                                                                                                                                          | <input type="checkbox"/> State Contract, list STS number and expiration date<br><br><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<br><input type="checkbox"/> No, please explain.<br><br>If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome? | <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<br><input type="checkbox"/> No, please explain:                                                                                                                                                                                         | <input type="checkbox"/> Government Purchase<br><br><input type="checkbox"/> Alternative Procurement Process                                                                                 |
| How did pricing compare among bids received? The Metro Health System was higher than most, but they are able to handle all the items needed for this contract.                                                                                                                                          | <input type="checkbox"/> Contract Amendment - (list original procurement)<br><br><input type="checkbox"/> Other Procurement Method, please describe:                                         |

|                                                                                                                                                                                                                                       |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Is Purchase/Services technology related <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, list date of TAC approval and answer the questions below.</b>                                                  |  |
| <div> <div>List date of TAC approval</div> <div>Date:</div> </div>                                                                                                                                                                    |  |
| <input type="checkbox"/> Check if item on IT Standard List of approved purchase and provide date of TAC approval.<br><input type="checkbox"/> Check if item is ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes. |  |
| Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.                                                                                                       |  |

**FUNDING SOURCE:** Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.

65% Health & Human Services & 35% Federal Title IV-E

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

**List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.**

HS215100

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

**Provide status of project.**

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

**Reason: There were extended contract negotiations between vendor and our law departments. There were changes made to the scope.**

**Timeline**

Project/Procurement Start Date (date your team started working on this item): 8/5/2025

Date documents were requested from vendor: 8/5/2025

Date of insurance approval from risk manager: 4/7/2026

Date Department of Law approved Contract: 4/7/2026

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)

Services began but there were issues with the COI that delayed the contract from moving forward.

Have payments been made? ☒ No ☐ Yes (if yes, please explain)

**HISTORY** (see instructions):

| Prior Original (O) and subsequent Amendments (A-#) | Contract No. (If PO, list PO#) | Vendor Name  | Time Period         | Amount         | Date BOC/Council Approved | Approval No. |
|----------------------------------------------------|--------------------------------|--------------|---------------------|----------------|---------------------------|--------------|
| Original                                           | 2833                           | Metro Health | 1/1/2023-12/31/23   | \$1,551,000.00 | 2/28/2023                 | R2023-0049   |
| A-1                                                | 2833                           | Metro Health | 1/1/2023-12/31/2023 | \$1,038,459.52 | 7/18/2023                 | R2023-0201   |
| A-2                                                | 2833                           | MetroHealth  | 1/1/2024-12/31/2024 | \$1,889,151.49 | 11/30/2023                | R2023-0333   |
| A-3                                                | 2833                           | MetroHealth  | 1/1/2025-12/31/2025 | \$1,551,000.00 | 12/12/2024                | R2024-0387   |

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in Infor

|                                        |       |
|----------------------------------------|-------|
| Infor/Lawson RQ# (if applicable):      | 16099 |
| Infor/Lawson PO# Code (if applicable): | RFP   |
| Event #                                | 6435  |
| CM Contract#                           | 5732  |

|                                                      |                                                                                 |                             |
|------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------|
| Late Submittal Required:                             | Yes <input checked="" type="checkbox"/>                                         | No <input type="checkbox"/> |
| Why is the contract being submitted late?            | Extended contract negotiations between vendor and our law departments.          |                             |
| What is being done to prevent this from reoccurring? | Explained to vendor importance of timely documents and effective communication. |                             |

|                                               |                              |                                        |
|-----------------------------------------------|------------------------------|----------------------------------------|
| TAC or CTO Required or Authorized IT Standard | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|-----------------------------------------------|------------------------------|----------------------------------------|

### FULL AND OPEN COMPETITION

#### Formal RFP

#### Reviewed by Purchasing

| The MetroHealth System                                                                                                  |       |                               |  | Department Initials | Purchasing |
|-------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------|--|---------------------|------------|
| Briefing Memo                                                                                                           |       |                               |  | DG                  | BRM        |
| Notice of Intent to Award (sent to all responding vendors)                                                              |       |                               |  | DG                  | BRM        |
| Bid Specification Packet (RFP Packet)                                                                                   |       |                               |  | DG                  | BRM        |
| Final DEI Goal Setting Worksheet                                                                                        |       |                               |  | DG                  | BRM        |
| Diversity Documents – <i>if required (goal set)</i>                                                                     |       |                               |  | N/A                 | N/A        |
| Award Letter (sent to awarded vendor)                                                                                   |       |                               |  | DG                  | BRM        |
| Vendor's Confidential Financial Statement – <i>if RFP requested</i>                                                     |       |                               |  | N/A                 | N/A        |
| Bid Tabulation Sheet                                                                                                    |       |                               |  | DG                  | BRM        |
| Evaluation with Scoring Summary ( <i>Names of evaluators to be included, must have minimum of three evaluators</i> ).   |       |                               |  | DG                  | BRM        |
| IG#                                                                                                                     |       |                               |  | N/A                 | N/A        |
| Debarment/Suspension Verified                                                                                           | Date: | 4.7.26                        |  | DG                  | BRM        |
| Auditor's Findings                                                                                                      | Date: | 4/7/26                        |  | DG                  | BRM        |
| Vendor's Submission                                                                                                     |       |                               |  | DG                  | BRM        |
| Independent Contractor (I.C.) Form                                                                                      | Date: | <del>10.7.25</del><br>4/13/26 |  | DG                  | BRM        |
| Cover - <i>Master contracts only</i>                                                                                    |       |                               |  | N/A                 | N/A        |
| Contract Evaluation – <i>if required provide most recent CM history on contract history table (see pg 2)</i>            |       |                               |  | DG                  | BRM        |
| TAC/CTO Approval or IT Standards ( <i>if required attach and identify relevant page #s or meeting approval number</i> ) |       |                               |  | N/A                 | N/A        |
| Checklist Verification                                                                                                  |       |                               |  | DG                  | BRM        |

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

#### Reviewed by Law

|                                       | Department Initials |
|---------------------------------------|---------------------|
| Agreement/Contract and Exhibits       | DG                  |
| Matrix Law Screen shot                | DG                  |
| COI                                   | DG                  |
| Workers' Compensation Insurance       | DG                  |
| Performance Bond, if required per RFP | N/A                 |

## Department of Purchasing – Required Documents Checklist

### CONTRACT SPENDING PLAN

| Time Period         | Accounting Unit | Account Number | Activity Code | Account Category or Subaccount | Dollar Amount         |
|---------------------|-----------------|----------------|---------------|--------------------------------|-----------------------|
| 1/1/2026-12/31/2026 | HS215100        | 55130          | UCH05001      | 55130                          | \$1,550,000.00        |
| 1/1/2027-12/31/2027 | HS215100        | 55130          | UCH05001      | 55130                          | \$1,550,000.00        |
|                     |                 |                |               |                                |                       |
|                     |                 |                |               |                                |                       |
|                     |                 |                | <b>TOTAL</b>  |                                | <b>\$3,100,000.00</b> |

### CONTRACT HISTORY (see Contract Evaluation, if applicable/ to be completed by Department)

| <b>CE/AG# (if applicable)</b>                          |                 |                                  |                                       |                               |                            |
|--------------------------------------------------------|-----------------|----------------------------------|---------------------------------------|-------------------------------|----------------------------|
| <b>Infor/Lawson PO# and PO Code (if applicable)</b>    |                 |                                  |                                       |                               |                            |
| <b>Lawson RQ# (if applicable)</b>                      |                 | 9776                             |                                       |                               |                            |
| <b>CM Contract#</b>                                    |                 | 2833                             |                                       |                               |                            |
|                                                        | Original Amount | Amendment Amount (if applicable) | Original Time Period/Amended End Date | BOC/ Resolution Approval Date | BOC/ Resolution Approval # |
| <b>Original Amount</b>                                 | \$1,551,000.00  |                                  | 1/1/23-12/31/23                       | 2/28/2023                     | R2023-0049                 |
| <b>Prior Amendment Amounts (list separately) (A-#)</b> | A-1             | \$1,038,459.52                   | 1/1/23-12/31/3                        | 7/18/2023                     | R2023-0201                 |
|                                                        | A-2             | \$1,889,151.49                   | 1/1/24-12/31/2024                     | 11/30/23                      | R2023-0333                 |
|                                                        | A-3             | \$1,551,000.00                   | 1/1/25-12/31/25                       | 12/12/24                      | R2024-0387                 |
|                                                        |                 | \$                               |                                       |                               |                            |
| <b>Pending Amendment</b>                               |                 | \$                               |                                       |                               |                            |
| <b>Total Amendments</b>                                |                 | \$4,478,611.01                   |                                       |                               |                            |
| <b>Total Contract Amount</b>                           |                 | \$6,029,611.01                   |                                       |                               |                            |

### PURCHASING USE ONLY

|                                                        |                                                |
|--------------------------------------------------------|------------------------------------------------|
| <b>Prior Resolutions:</b>                              | R2023-0049, R2023-0201, R2023-0333, R2024-0387 |
| <b>CM#:</b>                                            | 5732                                           |
| <b>Vendor Name:</b>                                    | The MetroHealth System                         |
| <b>Time Period:</b>                                    | 1/1/2026-12/31/2027                            |
| <b>Amount:</b>                                         | \$3,100,000.00                                 |
| <b>History/CE:</b>                                     | YES                                            |
| <b>EL:</b>                                             | N/A                                            |
| <b>Purchasing Notes:</b>                               |                                                |
| <b>Purchasing Agents Initials and date of approval</b> | BRM 4/14/2026                                  |

## CONTRACT EVALUATION FORM

|                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Contractor</b>                                                                  | The MetroHealth System                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Current Contract History:<br/>CE/AG# (if applicable)<br/>Infor/Laws on PO#:</b> | 2833                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>RQ#</b>                                                                         | 9776                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>Time Period of Original Contract</b>                                            | January 1, 2023 – December 31, 2025                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Background Statement</b>                                                        | <p>In order to pursue the safety, health, and well-being of children in custody, DCFS offers comprehensive medical services including 1) screening and assessment of physical and behavioral health care needs of children and youth, and 2) alcohol and drug testing for caregivers, youth or other adults in the home.</p> <p>With approximately 2,300 children and youth in care, there is a need for full access to trauma-informed medical services that could appropriately address the significant challenges that children and youth are faced with when being removed from their home or placement. This cohesive and coordinated approach ensures each child's medical needs are being met on a consistent basis, and that trained professionals are dedicated entirely to the care of these.</p> |
| <b>Service Description</b>                                                         | MetroHealth was contracted to provide high quality comprehensive medical services for children and youth in custody and drug testing for caregivers. The services are to be delivered as a coordinated approach to ensure medical needs are being met by trained medical professionals dedicated to the care and safety of children and youth in custody.                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Performance Indicators</b>                                                      | Comprehensive reports from MetroHealth include but are not limited to: Number of follow up appointments scheduled or attended per month, Number of preventative visits scheduled or attended per month, Number of comprehensive physicals, Number of children/youth being tracked through care coordination, Number of children receiving developmental/behavioral health screenings, Number of subspecialty referrals, etc.                                                                                                                                                                                                                                                                                                                                                                                |

|                                                                        |                                                                                                                                                                                                                    |               |         |               |      |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------|---------------|------|
| Actual Performance versus performance indicators (include statistics): | <b>The MetroHealth System</b><br><b>Foster Care Children Receiving Medical Care within MHS</b>                                                                                                                     |               |         |               |      |
|                                                                        |                                                                                                                                                                                                                    | Q1-20         | Q2-20   | Q3-20         |      |
|                                                                        | Total Num of FC Encounters created within MHMC(any Dep, any status)                                                                                                                                                | 13631         | 13431   | 12979         |      |
|                                                                        | Total Num of FC Unique Patients serviced within MHMC(any Dep, any status)                                                                                                                                          | 1571          | 1530    | 1555          |      |
|                                                                        | <b>Office Visits (type 101-completed) within MHMC:</b>                                                                                                                                                             |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 776           | 794     | 797           |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 1423          | 1448    | 1448          |      |
|                                                                        | <b>CCTracking MHMC (70-phone,41-FCP tracking,Visit type-CareCoord):</b>                                                                                                                                            |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 395           | 468     | 406           |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 739           | 764     | 680           |      |
|                                                                        | <b>Triage(DCFS251-completed):</b>                                                                                                                                                                                  |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 258           | 364     | 354           |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 281           | 413     | 389           |      |
|                                                                        | <b>Dental(specialty):</b>                                                                                                                                                                                          |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 55            | 56      | 46            |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 62            | 72      | 59            |      |
|                                                                        | <b>Exp/Urgent('Urgent Care', 'Express Care', 'Pediatric Urgent Care'):</b>                                                                                                                                         |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 102           | 90      | 98            |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 117           | 112     | 123           |      |
|                                                                        | <b>30 DayEvaluation(DCFS30-completed):</b>                                                                                                                                                                         |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 97            | 104     | 102           |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 99            | 104     | 102           |      |
|                                                                        | <b>Psychiatry(EncClass 255-completed):</b>                                                                                                                                                                         |               |         |               |      |
|                                                                        | #Unique Pts                                                                                                                                                                                                        | 57            | 65      | 60            |      |
|                                                                        | #Encounters                                                                                                                                                                                                        | 58            | 65      | 60            |      |
|                                                                        | <b>LEAD Test *:</b>                                                                                                                                                                                                |               |         |               |      |
|                                                                        | # tested                                                                                                                                                                                                           | 89            | 63      | 49            |      |
|                                                                        | #positive                                                                                                                                                                                                          | 8             | 4       | 7             |      |
| Rating of Overall Performance of Contractor                            | Superior                                                                                                                                                                                                           | Above Average | Average | Below Average | Poor |
| Select One (X)                                                         |                                                                                                                                                                                                                    |               | X       |               |      |
| Justification of Rating                                                | MetroHealth remains a strong partner in addressing the needs of our children in out of home care settings and providing comprehensive toxicology testing. They are meeting the criteria set forth in the contract. |               |         |               |      |
| Department Contact                                                     | Nicole Scalish                                                                                                                                                                                                     |               |         |               |      |
| User Department                                                        | DCFS                                                                                                                                                                                                               |               |         |               |      |
| Date                                                                   | 10/27/25                                                                                                                                                                                                           |               |         |               |      |

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0148

|                                            |                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sponsored by: <b>Councilmember Conwell</b> | <b>A Resolution</b> awarding a total sum, not to exceed \$50,000, to the Cleveland Urban Minority Alcoholism and Drug Abuse Outreach Project (“Cleveland UMADAOP”) for the renovation and rehabilitation of the Central Intake and Outpatient Services Facility House from the District 7 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective. |
|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**WHEREAS**, Cuyahoga County received \$239,898,257 from the Federal Government through the American Rescue Plan Act (“ARPA”); and

**WHEREAS**, Cuyahoga County calculated 100% of the ARPA dollars as loss revenue under the U.S. Department of the Treasury Final Rule; and

**WHEREAS**, since all the ARPA dollars have been calculated as loss revenue, the ARPA dollars have been deposited in the County’s General Fund; and

**WHEREAS**, the County Executive and County Council have authorized \$86 million of the ARPA dollars for community grants to benefit the residents of Cuyahoga County (the “ARPA Community Grant Fund”); and

**WHEREAS**, of the \$86 million for community grants, \$66 million have been encumbered for equal distribution to each County Council District; and

**WHEREAS**, the Cuyahoga County Council desires to provide funding from the District 7 ARPA Community Grant Fund in the amount of \$50,000 to Cleveland UMADAOP for the renovation and rehabilitation of the Central Intake and Outpatient Services Facility House; and

**WHEREAS**, Cleveland UMADAOP estimates approximately 500-700 people will be served annually through this award; and

**WHEREAS**, Cleveland UMADAOP estimates approximately 8 to 11 permanent and temporary jobs will be created or retained through this project; and

**WHEREAS**, Cleveland UMADAOP estimates the total cost of the project is \$80,000; and

**WHEREAS**, Cleveland UMADAOP indicates the other funding source(s) for this project includes \$30,000 from Cleveland Amvet fundraising; and

**WHEREAS**, Cleveland UMADAOP requested \$50,000 from the District 7 ARPA Community Grant Fund to complete this project; and

**WHEREAS**, the Cuyahoga County Council desires to provide funding in the amount of \$50,000 to Cleveland UMADAOP to ensure this project is completed; and

**WHEREAS**, this Council by a vote of at least eight (8) members determines that it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue to provide for the usually, daily operations of the County.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby awards a not-to-exceed amount of \$50,000 to Cleveland UMADAOP from the General Fund made available by the American Rescue Plan Act revenue replacement provision for the renovation and rehabilitation of the Central Intake and Outpatient Services Facility House.

**SECTION 2.** If any specific appropriation is necessary to effectuate this agreement, the Director of the Office of Budget and Management is authorized to submit the requisite documentation to financial reporting to journalize the appropriation.

**SECTION 3.** That the County Council staff is authorized to prepare all documents to effectuate said award.

**SECTION 4.** That the County Executive is authorized to execute all necessary agreements and documents consistent with said award and this Resolution.

**SECTION 5.** If requested or necessary, the Agency of the Inspector General or Department of Internal Audit is authorized to investigate, audit, or review any part of this award.

**SECTION 6.** To the extent that any exemptions are necessary under the County Code and contracting procedures, they shall be deemed approved by the adoption of this Resolution.

**SECTION 7.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the

preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 8.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: May 26, 2026

Committee(s) Assigned: Health, Human Services & Aging

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_



## Cuyahoga County Council

2079 East 9<sup>th</sup> Street, 8<sup>th</sup> Floor • Cleveland Ohio 44115  
(216) 698-2010

### COUNTY AMERICAN RESCUE PLAN ACT APPLICATION

#### APPLICANT INFORMATION:

**Name of Requesting Entity (City, Business, Non-Profit, etc.):**

Cleveland Urban Minority Alcoholism and Drug Abuse Outreach Project (Cleveland UMADAOP)

**Address of Requesting Entity:**

1215 E. 79<sup>th</sup> Street, Cleveland, OH 44103

**County Council District # of Requesting Entity:**

District 07

**Address or Location of Project if Different than Requesting Entity:**

Same as requesting entity

**County Council District # of Address or Location of Project if Different than Requesting Entity:**

Same as requesting entity

**Contact Name of Person Filling out This Request:**

Ronnie Davis

**Contact Address if different than Requesting Entity:**

Same as requesting entity

**Email:**

rdavis@clevelandumadaop.com

**Phone:**

Office: (216) 361-2040

Cell: (718) 593-0814

**Federal IRS Tax Exempt No.:**

34-1517684

**Date:**

December 23, 1988

## PROJECT DESCRIPTION

### PROJECT NAME

Cleveland Urban Minority Alcoholism and Drug Abuse Outreach Program (“Cleveland UMADAOP”) Renovation / Rehab of the Central Intake and Outpatient Services Facility House – Capital Project.

### PROJECT DESCRIPTION

Cleveland UMADAOP seeks funding to complete critical capital improvements to the house that will serve as the Central Intake and Outpatient Services Facility located in the Hough neighborhood of Cleveland, Ohio. Planned improvements include:

- |                     |                        |                    |                         |
|---------------------|------------------------|--------------------|-------------------------|
| ▪ Foundation Repair | ▪ HVAC System          | ▪ Flooring         | ▪ Permits & Inspections |
| ▪ Roof Repair       | ▪ Electrical System    | ▪ Kitchen Remodel  | ▪ Cleanup & Dumpster    |
| ▪ Siding & Exterior | ▪ Plumbing System      | ▪ Bathroom Remodel |                         |
| ▪ Windows & Doors   | ▪ Drywall & Insulation | ▪ Interior Paint   |                         |

This project plays a critical role in strengthening Cleveland UMADAOP’s long-term financial stability. By expanding our outpatient and therapeutic service capacity, we will increase access to billable services, qualify for additional grant opportunities, and deepen partnerships with healthcare providers and community organizations.

### IMPORTANCE OF PROJECT

The Cleveland UMADAOP has provided culturally responsive substance use treatment, re-entry support, and behavioral health services to Cuyahoga County residents for more than 40 years. Located in Cleveland’s Hough neighborhood, the organization serves a population experiencing some of the county’s most significant health and socioeconomic disparities.

Data from the Cleveland Department of Public Health and Case Western Reserve University demonstrate that life expectancy in neighborhoods like Hough is more than 20 years lower than nearby communities such as Lyndhurst. Additional data from the Cuyahoga County Board of Health and Ohio Department of Health show disproportionately high rates of overdose and childhood lead exposure in Cleveland’s East Side neighborhoods. These conditions contribute to increased trauma, instability, and risk of substance use disorders—directly driving demand for Cleveland UMADAOP’s services.

For seventeen years, Cleveland UMADAOP has owned a two-story house that has remained unused due to limited resources. With the support of this funding, we will finally be able to renovate the property and transform it into a fully functional Central Intake and Outpatient Services Facility. The renovation will allow us to:

- Establish a dedicated intake center where new participants can be assessed and connected to appropriate services without delay.
- Operate a full Intensive Outpatient Program (IOP), offering structured therapeutic support, relapse prevention, group counseling, and psychoeducation for individuals who require a higher level of care while maintaining daily responsibilities.
- Provide Standard Outpatient Services for clients who need flexible, ongoing recovery support focused on coping strategies, recovery maintenance, and long-term stability.
- Offer Individual and Group Therapy delivered by licensed clinicians addressing substance use, trauma, mental health needs, and personal growth, while fostering peer support and shared learning.
- Expand Case Management services to help clients access housing, employment, healthcare, and other essential supports, ensuring a holistic approach to recovery.

This project aligns with Cuyahoga County priorities by investing in infrastructure that supports health equity, stabilizes critical community-based providers, and strengthens service delivery in historically underserved neighborhoods. Funding this project will produce immediate operational benefits and long-term community impact by ensuring continued access to essential behavioral health and recovery services.

### PROJECT TIMELINE

**Phase 1** — Pre-Construction & Permitting (Month 1)

**Phase 2** — Structural & Envelope Work (Month 2)

**Phase 3** — Mechanical Systems (Months 2-3)

**Phase 4** — Interior Build-Out (Month 3)

**Phase 5** — Programmatic Activation (Months 3 - 4)

#### **Project Start Date:**

Within 30–45 days of award

#### **Project End Date:**

Within 15 -17 weeks of award

## IMPACT OF PROJECT:

### Who will be served:

The Cleveland UMADAOP serves residents of Cuyahoga County, with a primary focus on individuals and families living in Cleveland's East Side neighborhoods, including Hough. The target population includes:

- Individuals with substance use disorders
- Individuals re-entering the community following incarceration
- Youth and young adults at risk of substance use or behavioral health challenges
- Low-income individuals and families facing barriers to care

### How many people will be served annually:

Cleveland UMADAOP currently serves approximately:

- 500–700 individuals annually through direct services (treatment, re-entry, and case management)
- 1,000+ individuals annually through outreach, prevention programming, and community engagement

Completion of the capital project will support continued service at these levels and enable modest growth, particularly in youth outreach programming and client outpatient services.

### Will low/moderate income people be served; if so how:

Yes. A substantial majority of Cleveland UMADAOP's clients are low- to moderate-income.

LMI individuals are served through:

- Free or low-cost services, often covered by Medicaid or grant-funded programs
- Targeted outreach in high-poverty neighborhoods such as Hough and surrounding East Side communities
- Re-entry and recovery services designed for individuals with limited financial resources and employment barriers
- Culturally responsive programming that reduces access barriers and improves engagement

### How does the project fit with the community and with other ongoing projects:

The impact of this investment will be substantial. It will:

- Increase our service capacity and reduce wait times for individuals seeking help.
- Strengthen our ability to provide comprehensive, community-based behavioral health services.
- Create a stable, permanent location for recovery programming in a neighborhood that has long lacked accessible treatment options.
- Support our broader strategy to diversify funding and reduce reliance on state allocations by expanding billable services and community partnerships.

This investment aligns with and reinforces all existing Cleveland UMADAOP programming by protecting the physical infrastructure required to deliver services effectively.

### If applicable, how many jobs will be created or retained (specify the number for each) and will the jobs be permanent or temporary:

- 1 Treatment Facility Director (new)
- 5 – 8 temporary construction jobs
- 2 Counselors (existing)

### If applicable, what environmental issues or benefits will there be:

1. Lead Hazard Remediation
2. Energy Efficiency
3. Vacant Property Reactivation
4. Construction Waste Management

### If applicable, how does this project serve as a catalyst for future initiatives:

This project positions Cleveland UMADAOP to serve as an anchor for several follow-on initiatives:

1. Expanded Billable Service Lines
2. Replicable Model for neighborhood
3. Healthcare Partnership Development
4. Catalyst for Hough Neighborhood Revitalization
5. Workforce Development Pipeline

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FINANCIAL INFORMATION:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Total Budget of Project:</b> <ul style="list-style-type: none"><li>• \$80,000</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Other Funding Sources of Project (list each source and dollar amount separately):</b> <ul style="list-style-type: none"><li>• Cleveland Amvet fundraising: ~\$30,000</li></ul>                                                                                                                                                                                                                                                                                                                                     |
| <b>Total amount requested of County Council American Resource Act Dollars:</b> <ul style="list-style-type: none"><li>• \$50,000</li></ul>                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Since these are one-time dollars, how will the Project be sustained moving forward:</b> <p>Ongoing operations of the renovated facility will be sustained through Medicaid billing for outpatient and IOP services, DBH and ADAMHS Board contracts, private insurance reimbursement, and existing grant streams that have supported Cleveland UMADAOP for over 40 years.</p> <p>The capital improvements directly enable expanded billable service capacity, strengthening long-term financial sustainability.</p> |

## DISCLAIMER INFORMATION AND SIGNATURE:

### Disclaimer:

I HEREBY CERTIFY that I have the authority to apply for financial assistance on behalf of the entity described herein, and that the information contained herein and attached hereto is true, complete, and correct to the best of my knowledge.

I acknowledge and agree that all County contracts and programs are subject to Federal Guidelines and Regulations, the Ohio Revised Code, the Cuyahoga County Charter, and all County Ordinances including all information submitted as part of this application is a public record.

I understand that any willful misrepresentation on this application or on any of the attachments thereto could result in a fine and/or imprisonment under relevant local, state, and/or federal laws or guidelines.

I agree that at any time, any local, state, or federal governmental agency, or a private entity on behalf of any of these governmental agencies, can audit these dollars and projects.

### Printed Name:

RONNIE DAVIS

### Signature:

### Date:

Ronnie Davis

5/17/2026

## Additional Documents

Are there additional documents or files as part of this application? Please list each documents name:

N/A

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0151

|                                                   |                                                                                                                                                                                                                                                                                                                   |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sponsored by: <b>Councilmember Houser</b>         | <b>A Resolution</b> awarding a total sum, not to exceed \$10,000, to the Cuyahoga County Division of Senior and Adult Services for the Cuyahoga County Senior Resources Access Hub from the District 10 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective. |
| Co-sponsored by:<br><b>Councilmember Schleper</b> |                                                                                                                                                                                                                                                                                                                   |

**WHEREAS**, Cuyahoga County received \$239,898,257 from the Federal Government through the American Rescue Plan Act (“ARPA”); and

**WHEREAS**, Cuyahoga County calculated 100% of the ARPA dollars as loss revenue under the U.S. Department of the Treasury Final Rule; and

**WHEREAS**, since all the ARPA dollars have been calculated as loss revenue, the ARPA dollars have been deposited in the County’s General Fund; and

**WHEREAS**, the County Executive and County Council have authorized \$86 million of the ARPA dollars for community grants to benefit the residents of Cuyahoga County (the “ARPA Community Grant Fund”); and

**WHEREAS**, of the \$86 million for community grants, \$66 million have been encumbered for equal distribution to each County Council District; and

**WHEREAS**, the Cuyahoga County Council desires to provide \$10,000 in funding from the District 10 ARPA Community Grant Fund to the Cuyahoga County Division of Senior and Adult Services for the Cuyahoga County Senior Resources Access Hub; and

**WHEREAS**, the Cuyahoga County Division of Senior and Adult Services estimates approximately 1,000 people will be served annually through this award; and

**WHEREAS**, the Cuyahoga County Division of Senior and Adult Services is estimating the start date of the project will be June 2026 and the project will be completed by September 2026; and

**WHEREAS**, the Cuyahoga County Division of Senior and Adult Services requested \$10,000 from the District 10 ARPA Community Grant Fund to complete this project; and

**WHEREAS**, the Cuyahoga County Council desires to provide funding in the amount of \$10,000 to the Cuyahoga County Division of Senior and Adult Services to ensure this project is completed; and

**WHEREAS**, this Council by a vote of at least eight (8) members determines that it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue to provide for the usually, daily operations of the County.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby awards a not-to-exceed amount of \$10,000 to the Cuyahoga County Division of Senior and Adult Services from the General Fund made available by the American Rescue Plan Act revenue replacement provision for the Cuyahoga County Senior Resources Access Hub.

**SECTION 2.** If any specific appropriation is necessary to effectuate this agreement, the Director of the Office of Budget and Management is authorized to submit the requisite documentation to financial reporting to journalize the appropriation.

**SECTION 3.** That the County Council staff is authorized to prepare all documents to effectuate said award.

**SECTION 4.** That the County Executive is authorized to execute all necessary agreements and documents consistent with said award and this Resolution.

**SECTION 5.** If requested or necessary, the Agency of the Inspector General or Department of Internal Audit is authorized to investigate, audit, or review any part of this award.

**SECTION 6.** To the extent that any exemptions are necessary under the County Code and contracting procedures, they shall be deemed approved by the adoption of this Resolution.

**SECTION 7.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after

disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 8.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: May 26, 2026

Committee(s) Assigned: Health, Human Services & Aging

Additional Sponsorship Requested on the Floor: May 26, 2026

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_\_\_



## Cuyahoga County Council

2079 East 9<sup>th</sup> Street, 8<sup>th</sup> Floor • Cleveland Ohio 44115  
(216) 698-2010

### COUNTY AMERICAN RESCUE PLAN ACT APPLICATION

| <b>APPLICANT INFORMATION:</b>                                                                                                                                                   |                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Name of Requesting Entity (City, Business, Non-Profit, etc.):</b><br>Cuyahoga County Division of Senior and Adult Services                                                   |                               |
| <b>Address of Requesting Entity:</b><br>2925 Euclid Avenue<br>Cleveland, OH 44115                                                                                               |                               |
| <b>County Council District # of Requesting Entity:</b><br>District 7 – location of offices<br>Support from Councilman Houser (District 10) and Councilman Schleper (District 6) |                               |
| <b>Address or Location of Project if Different than Requesting Entity:</b>                                                                                                      |                               |
| <b>County Council District # of Address or Location of Project if Different than Requesting Entity:</b>                                                                         |                               |
| <b>Contact Name of Person Filling out This Request:</b><br>Natasha Pietrocola                                                                                                   |                               |
| <b>Contact Address if different than Requesting Entity:</b>                                                                                                                     |                               |
| <b>Email:</b><br><a href="mailto:Natasha.Pietrocola@jfs.ohio.gov">Natasha.Pietrocola@jfs.ohio.gov</a>                                                                           | <b>Phone:</b><br>216-420-6755 |
| <b>Federal IRS Tax Exempt No.:</b>                                                                                                                                              | <b>Date:</b><br>5/13/2026     |

## PROJECT DESCRIPTION

**REQUEST DESCRIPTION (include the project name, a description of the project, why the project is important or needed, and timeline of milestones/tracking of the project):**

Project name: **The Cuyahoga County Senior Resource Access Hub**

The Cuyahoga County Division of Senior and Adult Services proposes the creation of the Senior Resource Access Hub, a pilot designed to improve access to critical services and resources for older adults through a centralized digital platform and QR code resource system.

The COVID-19 pandemic, funding concerns related to benefits, and inflation has exposed and intensified barriers many seniors face when attempting to access affordable housing programs, transportation services, healthcare navigation, food support, utility assistance, behavioral health resources, and other essential programs. Many older adults continue to have trouble navigating fragmented systems, limited in-person access, transportation challenges, and technology barriers.

The Senior Resource Access Hub will create a simple, user-friendly digital resource platform that connects seniors and caregivers to trusted local services and public benefits across Cuyahoga County. The initiative will also include printed QR code cards and outreach materials distributed through senior centers, libraries, recreation centers, faith-based institutions, healthcare providers, community organizations, and residential senior buildings to increase accessibility for residents with limited digital literacy.

The initiative is designed to reduce isolation, improve service navigation, increase awareness of available programs, and support seniors aging safely and independently within their communities.

County Council offices and community partners will incorporate QR resource links into newsletters, outreach materials, and constituent communications, helping expand awareness and accessibility for seniors throughout Cuyahoga County.

### **Why the Project is Important and Needed**

Older adults continue to face significant barriers when attempting to access available services and support systems. While many programs already exist, seniors are often disconnected from those resources due to lack of awareness, transportation limitations, digital access challenges, and reduced in-person navigation support following the COVID-19 pandemic.

This project directly responds to those challenges by:

- Increasing awareness of available senior services and public benefits
- Improving access to housing, transportation, healthcare, and food assistance resources
- Reducing barriers caused by technology and service fragmentation
- Supporting seniors aging safely and independently
- Strengthening coordination between residents and existing service providers
- Expanding community outreach through trusted local institutions and communication channels

The Senior Resource Access Hub reflects Cuyahoga County's commitment to accessibility, equity, and long-term community stabilization while supporting continued public health recovery efforts for older adults.

### **Timeline of Milestones and Tracking:**

#### **Phase 1: Planning and Development**

- Develop digital resource platform
- Identify participating agencies and community partners
- Design QR code cards and outreach materials

#### **Phase 2: Outreach and Distribution**

- Distribute materials throughout Cuyahoga County
- Coordinate outreach via senior centers, libraries, faith-based institutions, community organizations, medical providers
- Promote resource access through newsletters and partner communication channels

#### **Phase 3: Public Launch and Implementation**

- Launch Senior Resource Access Hub
- Provide ongoing outreach and resource navigation support
- Monitor engagement and community participation

#### **Phase 4: Evaluation and Reporting**

- Track outreach distribution and digital engagement
- Collect community feedback and participation data
- Develop summary report outlining outcomes, service usage, and future expansion opportunities

|                                            |                                                |
|--------------------------------------------|------------------------------------------------|
| <b>Project Start Date:</b><br>June 1, 2026 | <b>Project End Date:</b><br>September 30, 2026 |
|--------------------------------------------|------------------------------------------------|

## IMPACT OF PROJECT:

### Who will be served:

This initiative will serve older adults and caregivers throughout Cuyahoga County, focusing on communities disproportionately impacted by COVID-19, economic hardship, isolation, and barriers to accessing services.

Special emphasis will be placed on low- and moderate-income seniors, residents aging alone, and individuals facing transportation and technology barriers.

### How many people will be served annually:

The initiative is expected to directly serve approximately 1,000 seniors and caregivers through digital access, printed outreach materials, and community-based distribution efforts.

Additional indirect impact is expected through expanded outreach, community partnerships, and continued sharing of resource information throughout the county.

### Will low/moderate income people be served; if so how:

Serving low- and moderate-income seniors is a central priority of this initiative.

The Senior Resource Access Hub will be free and publicly accessible. Outreach efforts will intentionally target underserved neighborhoods, senior housing developments, community organizations, libraries, and faith-based institutions serving residents with limited access to transportation, technology, healthcare navigation, and public benefits.

The Division of Senior and Adult Services will also:

- Partner with local senior-serving organizations and community agencies
- Provide simple and accessible QR code resource materials
- Focus outreach on historically underserved communities
- Promote free and low-cost supportive services available to seniors
- This approach ensures equitable access and meaningful engagement for residents most impacted by service barriers

### How does the project fit with the community and with other ongoing projects:

This initiative complements and strengthens existing county and community-based efforts focused on senior wellness, housing stability, healthcare access, food security, and aging in place.

Rather than duplicating services, the Senior Resource Access Hub serves as a centralized connector that increases awareness, accessibility, and utilization of existing programs and community resources specific to Cuyahoga County.

The initiative aligns with broader county recovery and stabilization efforts by:

- Improving service coordination
- Supporting independent aging
- Expanding accessibility to existing resources
- Strengthening community outreach
- Increasing awareness of preventative and supportive services

**If applicable, how many jobs will be created or retained (specify the number for each) and will the jobs be permanent or temporary:**

The project will be developed in-house and utilize county departments, but there may be a need to explore temporary project-based and contract opportunities related to website and digital platform development, Community outreach and engagement, graphic design and printing, and data collection and reporting support

While temporary, these opportunities contribute to local economic activity and strengthen partnerships with community-based organizations and service providers.

**If applicable, what environmental issues or benefits will there be:**

The pilot project prioritizes digital communication and QR-based outreach strategies to reduce reliance on large-scale printed materials.

**If applicable, how does this project serve as a catalyst for future initiatives:**

The Senior Resource Access Hub is designed as a scalable pilot initiative that can support future countywide expansion and long-term coordination of senior services.

Specifically, the initiative will:

- Generate measurable data regarding senior needs and resource usage
- Strengthen partnerships with community organizations and service providers
- Identify gaps in accessibility and outreach
- Support future grant and funding opportunities
- Establish a replicable model for expanded senior access initiatives across Cuyahoga County

By combining digital accessibility, community outreach, and measurable outcomes, this initiative positions Cuyahoga County as a leader in advancing senior wellness, accessibility, and equitable service connection for older adults throughout the region.

**FINANCIAL INFORMATION:**

**Total Budget of Project:**

**Other Funding Sources of Project (list each source and dollar amount separately):**

In-kind support from DSAS, communications, and IT staff used to work on the pilot.

**Total amount requested of County Council American Resource Act Dollars:**

\$10,000 was discussed as potentially available to support this project. These dollars would be used for reproducing some printed versions of the Resource Hub guides, printing postcards, bookmarks, or magnet to be provided to seniors, and money allocated for any postage expenses related to disseminating printed versions of this resource guide. As much of the work that can be done in-house will be curated. There may arise costs associated for support in the development of materials if outside vendors are needed for a specific task or expertise we do not have access to.

**Since these are one-time dollars, how will the Project be sustained moving forward:**

The plan is to utilize existing resources at DSAS and work with our internal partners, such as the communications department and IT, to address updates on resources and programs available to older adults and their caregivers. This will need to occur at a minimum annually.

There may be opportunities to seek grant funding to sustain and expand the project moving forward.

**DISCLAIMER INFORMATION AND SIGNATURE:****Disclaimer:**

I HEREBY CERTIFY that I have the authority to apply for financial assistance on behalf of the entity described herein, and that the information contained herein and attached hereto is true, complete, and correct to the best of my knowledge.

I acknowledge and agree that all County contracts and programs are subject to Federal Guidelines and Regulations, the Ohio Revised Code, the Cuyahoga County Charter, and all County Ordinances including all information submitted as part of this application is a public record.

I understand that any willful misrepresentation on this application or on any of the attachments thereto could result in a fine and/or imprisonment under relevant local, state, and/or federal laws or guidelines.

I agree that at any time, any local, state, or federal governmental agency, or a private entity on behalf of any of these governmental agencies, can audit these dollars and projects.

**Printed Name:**

**Natasha Pietrocola**

**Signature:****Date:**

**5/13/2026**

## **Additional Documents**

**Are there additional documents or files as part of this application? Please list each document's name:**

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0153

|                                                 |                                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sponsored by: <b>Councilmember Jones</b>        | <b>A Resolution</b> awarding a total sum, not to exceed \$10,000, to the Crimson Heights Ministries as fiscal agent for Strategic Resources Consulting, LLC for the Freedom Summer 2026 Project from the District 8 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective. |
| Co-sponsored by:<br><b>Councilmember Turner</b> |                                                                                                                                                                                                                                                                                                                               |

**WHEREAS**, Cuyahoga County received \$239,898,257 from the Federal Government through the American Rescue Plan Act (“ARPA”); and

**WHEREAS**, Cuyahoga County calculated 100% of the ARPA dollars as loss revenue under the U.S. Department of the Treasury Final Rule; and

**WHEREAS**, since all the ARPA dollars have been calculated as loss revenue, the ARPA dollars have been deposited in the County’s General Fund; and

**WHEREAS**, the County Executive and County Council have authorized \$86 million of the ARPA dollars for community grants to benefit the residents of Cuyahoga County (the “ARPA Community Grant Fund”); and

**WHEREAS**, of the \$86 million for community grants, \$66 million have been encumbered for equal distribution to each County Council District; and

**WHEREAS**, the Cuyahoga County Council desires to provide funding from the District 8 ARPA Community Grant Fund in the amount of \$10,000 to the Crimson Heights Ministries for the Freedom Summer 2026; and

**WHEREAS**, the Crimson Heights Ministries estimates approximately 500-1,000 people will be served annually through this award; and

**WHEREAS**, the Crimson Heights Ministries estimates approximately 10-15 permanent and temporary jobs will be created or retained through this project; and

**WHEREAS**, the Crimson Heights Ministries estimates the total cost of the project is \$20,000; and

**WHEREAS**, the Crimson Heights Ministries is estimating the date of the project will be June 2026 and the project will be completed by; and

**WHEREAS**, the Crimson Heights Ministries requested \$10,000 from the District 8 ARPA Community Grant Fund to complete this project; and

**WHEREAS**, the Cuyahoga County Council desires to provide funding in the amount of \$10,000 to the Crimson Heights Ministries to ensure this project is completed; and

**WHEREAS**, this Council by a vote of at least eight (8) members determines that it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue to provide for the usually, daily operations of the County.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby awards a not-to-exceed amount of \$10,000 to the Crimson Heights Ministries as fiscal agent for Strategic Resources Consulting, LLC from the General Fund made available by the American Rescue Plan Act revenue replacement provision for the Freedom Summer 2026.

**SECTION 2.** If any specific appropriation is necessary to effectuate this agreement, the Director of the Office of Budget and Management is authorized to submit the requisite documentation to financial reporting to journalize the appropriation.

**SECTION 3.** That the County Council staff is authorized to prepare all documents to effectuate said award.

**SECTION 4.** That the County Executive is authorized to execute all necessary agreements and documents consistent with said award and this Resolution.

**SECTION 5.** If requested or necessary, the Agency of the Inspector General or Department of Internal Audit is authorized to investigate, audit, or review any part of this award.

**SECTION 6.** To the extent that any exemptions are necessary under the County Code and contracting procedures, they shall be deemed approved by the adoption of this Resolution.

**SECTION 7.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be

disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 8.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: May 26, 2026

Committee(s) Assigned: Health, Human Services & Aging

Additional Sponsorship Requested on the Floor: May 26, 2026

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_\_\_

## Cuyahoga County Council

2079 East 9th Street, 8th Floor • Cleveland, Ohio 44115 • (216) 698-2010

### COUNTY AMERICAN RESCUE PLAN ACT APPLICATION

*Submitting Entity: Crimson Heights Ministries (Fiscal Sponsor / Nonprofit of Record)*  
*Event Organizer: Strategic Moves Media Network | Production Partner: Watts Productions*  
*Council District Contact: Councilman Neil Jones | Total Event Budget: \$20,000 | ARPA Request: \$10,000*

## APPLICANT INFORMATION

### ORGANIZATIONAL STRUCTURE — PLEASE READ

PROJECT LEAD & APPLICANT: Strategic Resources Consulting, LLC (d/b/a Strategic Moves Media Network) — Kenn Dowell, Sole Proprietor. SBE/MBE certified Cuyahoga County vendor. Strategic Resources Consulting is the entity organizing, managing, and producing Freedom Summer 2026.

FISCAL AGENT (Nonprofit of Record): Crimson Heights Ministries — Dr. Heather E. Burton, Founder & Executive Director. Crimson Heights Ministries is serving solely as the nonprofit fiscal agent for this application, as required to receive ARPA funds. All funds will be disbursed to support the Freedom Summer 2026 event as organized and managed by Strategic Resources Consulting, LLC.

|                                                        |                                                                                                                                                                                     |
|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Name of Requesting Entity:</b>                      | Crimson Heights Ministries<br>(Fiscal Agent for Strategic Resources Consulting, LLC / Strategic Moves Media Network)                                                                |
| <b>Address of Requesting Entity:</b>                   | Suite 1410, Suite 1410, 1301 E. 9th Street (Erievue)<br>Cleveland, OH 44114                                                                                                         |
| <b>County Council District # of Requesting Entity:</b> | District 7 — Councilwoman Yvonne Conwell                                                                                                                                            |
| <b>Address / Location of Project (if different):</b>   | Garden View Hill Park<br>1340 East 88th Street at St. Clair Avenue, Cleveland, OH 44108                                                                                             |
| <b>County Council District # of Project Location:</b>  | District 7 — Councilwoman Yvonne Conwell                                                                                                                                            |
| <b>Contact Name:</b>                                   | Kenn Dowell, Sole Proprietor & CEO<br>Strategic Resources Consulting, LLC / Strategic Moves Media Network<br>(Project Lead — on behalf of Fiscal Agent, Crimson Heights Ministries) |
| <b>Contact Address (if different):</b>                 | Suite 1410, Suite 1410, 1301 E. 9th Street (Erievue)<br>Cleveland, OH 44114                                                                                                         |

|                                          |                        |
|------------------------------------------|------------------------|
| <b>Email:</b>                            | kenn@strategicmove.com |
| <b>Phone:</b>                            | (216) 990-6887         |
| <b>Federal IRS Tax Exempt No. (EIN):</b> | 27-0989295             |
| <b>Date:</b>                             | June 2026              |

## PROJECT DESCRIPTION

### REQUEST DESCRIPTION — Project name, description, why the project is important or needed, and timeline of milestones:

PROJECT NAME: Freedom Summer 2026 — A Juneteenth Community Festival for Freedom, Voice & Civic Power

#### OVERVIEW:

Freedom Summer 2026 is a free, outdoor community festival held at Garden View Hill Park on East 88th Street and St. Clair Avenue in Cleveland on Juneteenth — June 19, 2026. Produced by Strategic Moves Media Network (SMN) in partnership with Watts Productions, and fiscally sponsored by the Crimson Heights Ministries, the event is a full-day civic activation experience open to all members of the public at no charge.

This is not a passive celebration. Freedom Summer is an organized expression of community power — combining voter mobilization, civic education, mental health resources, Black cultural heritage, and a direct defense of freedom of speech, freedom of the press, and the right to a Black community voice.

#### WHY THIS PROJECT IS NEEDED — THE CRISIS IN BLACK MEDIA AND CIVIC EXPRESSION:

The decline of Black-owned newspapers and community media institutions — including the historic Call & Post, which served Cleveland's Black community for generations — has created a critical information vacuum in Black neighborhoods across Northeast Ohio. When trusted local Black press disappears, communities lose more than news. They lose civic infrastructure. They lose the platform through which elections are understood, leadership is held accountable, community events are announced, and collective identity is reinforced.

This is not a local problem. Across the country, state legislatures in places like Tennessee and Louisiana have moved aggressively to restrict voting access, limit the civic expression of minority communities, and suppress the community organizing that has historically driven Black political power. When Black communities lose their press and their civic voice at the same moment that external forces are restricting their political rights, the consequences are measured in suppressed votes, eroded representation, and weakened institutions.

Strategic Moves Media Network exists as a direct response to that vacuum. SMN reaches approximately 125,000 monthly viewers and listeners through five active shows — serving the role that Black newspapers once served, updated for the media landscape of the twenty-first century.

Freedom Summer 2026 brings that platform off-screen and into the community, turning Garden View Hill Park into a live expression of every freedom the event celebrates.

#### WHAT FREEDOM SUMMER CELEBRATES AND DEFENDS:

Freedom Summer 2026 is built around six pillars — each one a different dimension of what it means to be free:

##### 1. FREEDOM OF VOICE — POETRY, MUSIC & CULTURAL EXPRESSION

Live poetry, spoken word, original music, and cultural performance as acts of civic expression. The stage at Garden View Hill is not entertainment — it is a platform. Every performer is exercising the same freedom of expression that is under pressure nationally. This is Juneteenth as it was meant to be observed: loud, proud, and unapologetic.

##### 2. FREEDOM OF PRESS — BLACK MEDIA EMPOWERMENT

A dedicated programming space celebrating and supporting Black journalists, Black podcasters, Black media makers, and independent content creators. In an era when the Call & Post is gone and corporate media does not serve Black Cleveland, Strategic Moves Media Network represents what independent Black press looks like in the modern era. This pillar educates the community about the importance of Black media ownership, supports emerging Black journalists, and positions SMN as the institutional heir to a legacy of Black civic journalism.

##### 3. FREEDOM TO KNOW — CIVIC & POLITICAL EDUCATION

An educational programming track that connects what is happening in Tennessee, Louisiana, and statehouses across the country to what it means for Black Clevelanders today. Voting rights, legislative attacks on community organizing, local electoral power, and the policy decisions that shape daily life in Black neighborhoods — explained in plain language by people who actually know the game. This is community organizing as education.

##### 4. FREEDOM TO VOTE — VOTER REGISTRATION & CIVIC MOBILIZATION

On-site voter registration, polling location resources, and civic participation information. In a 2026 midterm election year, connecting community members to the ballot box is not a side feature — it is the mission. Every Freedom Summer attendee who registers to vote is a direct outcome that can be measured and reported.

##### 5. FREEDOM TO HEAL — MENTAL HEALTH & COMMUNITY WELLNESS

A mental health resource village offering free screenings, referrals, and connection to local mental health providers. The community cannot organize, vote, or build if it is in crisis. Mental health access is a civil rights issue.

##### 6. FREEDOM TO GATHER — FAMILY & COMMUNITY TOGETHERNESS

Youth programming, family activities, local Black-owned vendors, and intergenerational space. The right to gather freely, celebrate culture, and build community is itself an act of resistance and affirmation.

#### TIMELINE OF MILESTONES:

- April 2026: Finalize event permit, insurance, vendor agreements, and community partners
- May 2026: Launch marketing and outreach campaign through SMN platforms and neighborhood distribution; confirm performers, panelists, and media partners
- June 1–15, 2026: Complete all equipment rentals, volunteer training, and resource village coordination; finalize press/media components

- June 19, 2026 (Juneteenth): Freedom Summer 2026 — full event execution, 12:00 PM – 7:00 PM, Garden View Hill Park
- July 2026: Compile all metrics — attendance, voter registrations, mental health referrals, media reach, and vendor participation
- August 2026: Submit full report and documentation to Cuyahoga County per ARPA agreement requirements
- Fall 2026: Begin Freedom Summer 2027 planning; present outcomes to council and community stakeholders

**Project Start Date:** April 1, 2026 (Pre-event planning, permitting, and production)

**Project End Date:** August 31, 2026 (Reporting and documentation completion)

## IMPACT OF PROJECT

**Who will be served:**

Freedom Summer 2026 will serve the residents of Cleveland's East Side, with a primary focus on the Black community in and around the neighborhoods of St. Clair-Superior, Glenville, Hough, and Collinwood. The event is free and open to the public, with no barriers to participation.

Target populations:

- Adults ages 18+ who are unregistered or infrequent voters
- Young adults and first-time voters ages 18–25
- Aspiring and working Black journalists, podcasters, and media makers
- Families with children (intergenerational programming)
- Residents who lack access to mental health resources
- Black small business owners and entrepreneurs
- Faith leaders, community organizers, and civic advocates
- Anyone who believes Black communities deserve a free and independent press

**How many people will be served annually:**

Year 1 (2026): 500–1,000 community members at the event directly. SMN's existing media audience of 125,000 monthly viewers and listeners will amplify the event's content, documentation, and coverage — extending the impact beyond the park.  
Year 2 (2027): Target 1,500–2,000 attendees.  
Year 3 (2028): Target 2,500+ attendees with regional media distribution.

**Will low/moderate income people be served; if so how:**

Yes. The neighborhoods immediately surrounding Garden View Hill Park are among Cleveland's highest-poverty census tracts. Every element of the event is designed to serve low- and moderate-income residents at no cost:

- Free voter registration and civic resources
- Free mental health screenings, information, and referrals
- Free admission to all programming, performances, and cultural activities
- Access to local Black-owned vendors and businesses — creating economic opportunity within the community itself
- Free media literacy and Black press education programming
- Free civic education on voting rights and legislative issues affecting their communities

The venue selection is itself an equity decision — resources placed directly in the geographic center of the community that needs them most.

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#### **How does the project fit with the community and with other ongoing projects:**

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Freedom Summer 2026 aligns with and amplifies several existing community priorities:

- STRATEGIC MOVES MEDIA NETWORK serves the same East Side ZIP codes as this event. This is SMN's platform extended into physical community space — not a new initiative, but an activation of existing infrastructure.
- CRIMSON HEIGHTS FOUNDATION already serves East Side communities through faith-based leadership, wellness, and civic development. Freedom Summer is a natural extension of the Foundation's existing mission.
- VOTER MOBILIZATION aligns with the Cuyahoga County Board of Elections' ongoing civic participation priorities in precincts with historically low turnout — particularly meaningful in a 2026 midterm election year.
- BLACK MEDIA SUPPORT aligns with the national conversation about press freedom, local media deserts, and the need for community-owned information infrastructure. This positions Cuyahoga County as a leader in protecting civic expression.
- MENTAL HEALTH ACCESS aligns with Cuyahoga County's ongoing investments in behavioral health for underserved communities.

Freedom Summer does not duplicate existing events. It fills a specific, documented gap: a large-scale, free, civic-centered community gathering rooted in Black cultural identity, freedom of expression, and measurable outcomes.

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#### **If applicable, how many jobs will be created or retained and will the jobs be permanent or temporary:**

---

Freedom Summer 2026 will create the following temporary economic activity:

- 10–15 temporary event staff positions (setup, execution, breakdown) — Temporary
- 5–8 audio/visual and production crew (Watts Productions) — Temporary
- 15–25 participating local vendors, artisans, food entrepreneurs, and Black-owned businesses — Temporary income generating

As an annual event, Freedom Summer creates recurring economic activity each year — building a sustainable vendor ecosystem and a predictable annual employment opportunity tied to the event.

**If applicable, what environmental issues or benefits will there be:**

Freedom Summer 2026 activates Garden View Hill Park as a valued community green space, demonstrating the social benefit of public parks in East Side neighborhoods. All event activity will comply with City of Cleveland park use permit requirements, including waste management, vendor setup regulations, and post-event site restoration. No permanent construction or ground disturbance is involved.

**If applicable, how does this project serve as a catalyst for future initiatives:**

Freedom Summer 2026 is designed to be the first chapter of a growing institution:

- **ANNUAL EVENT:** Year 1 establishes the model. Year 2 expands programming, attendance, and partnerships. Year 3 targets 2,500+ attendees, a full-day broadcast, and citywide coalition partnerships.
- **BLACK MEDIA PIPELINE:** The Freedom of Press pillar creates an active pipeline for developing Black journalists, podcasters, and community media makers — building the next generation of the free Black press in Cleveland.
- **CIVIC MEDIA DOCUMENTATION:** SMN will produce and distribute broadcast-quality content from Freedom Summer through all five active shows — generating a national narrative about Cleveland's East Side as a model for Black civic media infrastructure.
- **VOTER MOBILIZATION COMPOUNDING:** Registrations from Year 1 compound into Years 2 and 3 — creating a growing civic participation record tied directly to Freedom Summer.
- **NATIONAL REPLICATION MODEL:** A successful Freedom Summer in Cleveland creates a documented, replicable community event model applicable to Black communities in other Ohio cities and nationally.

## FINANCIAL INFORMATION

***BUDGET NOTE FOR COUNCIL:** The total operational budget for Freedom Summer 2026 is \$20,000. Crimson Heights Ministries, Strategic Moves Media Network, and Watts Productions are requesting \$10,000 from Councilman Neil Jones through this ARPA application to anchor the event's funding. The remaining \$10,000 gap represents an open opportunity for additional council members, community partners, and sponsors who share the goals of Black civic expression, voter mobilization, and community empowerment. Any council member wishing to support Freedom Summer 2026 is welcomed as a partner in this initiative.*

**Total Budget of Project:** | \$20,000

**Other Funding Sources of Project (list each source and dollar amount separately):**

- Cuyahoga County ARPA — Councilman Neil Jones (this application): \$10,000 requested
- Additional Cuyahoga County Council support (open to interested members): \$10,000 (gap — to be secured)
- Strategic Moves Media Network — In-kind: Media production, broadcast distribution, and event promotion across five active shows (estimated value: \$5,000+)
- Watts Productions — In-kind: Production expertise, equipment coordination, and event management (estimated value: \$3,000+)
- Strategic Resources Consulting / Kenn Dowell — In-kind: Event coordination, community outreach, and partner relationship management (estimated value: \$2,000+)
- Vendor participation fees (Year 1 nominal) — TBD
- Sponsorship outreach in progress — TBD

NOTE: In-kind contributions are not included in the ARPA budget request. The \$10,000 ARPA request covers direct out-of-pocket operational costs only.

**Total amount requested of County Council ARPA Dollars:**

\$10,000 (anchoring contribution — Councilman Neil Jones)

**Since these are one-time dollars, how will the Project be sustained moving forward:**

Freedom Summer is structured for multi-year sustainability without reliance on recurring ARPA funding:

1. MEDIA SPONSORSHIP REVENUE: SMN's active sponsorship development program (\$2,500–\$10,000+ tiers) will integrate Freedom Summer as a premium sponsorship opportunity, with sponsors receiving on-site presence, SMN broadcast coverage, and co-branding across five active shows.
2. CITY AND COUNTY GRANT PROGRAMS: Beginning in Year 2, the organizers will apply to City of Cleveland park programming and community development grant programs using Year 1 outcomes — voter registrations, attendance, mental health referrals, and media reach — as demonstrated impact.
3. FOUNDATION SUPPORT: Crimson Heights Ministries will pursue Northeast Ohio philanthropic funding from the Cleveland Foundation, George Gund Foundation, and other civic funders aligned with community health, civic participation, and press freedom.
4. VENDOR AND PARTNERSHIP FEES: As the event scales, a structured vendor participation model and community partnership program will generate operating revenue while maintaining the event's free-admission commitment.
5. EARNED MEDIA VALUE: SMN's live broadcast and documentation of Freedom Summer directly supports SMN's consulting and sponsorship revenue — creating a self-reinforcing financial model where the event builds the platform and the platform sustains the event.

The \$10,000 ARPA investment in Year 1 seeds an annual community institution that will generate its own funding ecosystem within two years.

**DETAILED BUDGET — FREEDOM SUMMER 2026**

The following budget reflects total event costs and the ARPA funds requested. This budget serves as Exhibit 1 to the Project Award Agreement. The ARPA request covers direct operational costs. In-kind contributions from SMN, Watts Productions, and SRC are noted separately and not drawn from ARPA funds.

| Budget Line Item                                                 | Total Cost                                     | ARPA Request    |
|------------------------------------------------------------------|------------------------------------------------|-----------------|
| Stage, Sound System & Audio/Visual Equipment Rental              | \$3,000                                        | \$2,500         |
| Generator & Electrical Power Infrastructure                      | \$1,000                                        | \$800           |
| Event Tents, Tables, Chairs & Canopy Structures                  | \$1,500                                        | \$1,200         |
| Event Permits, Liability Insurance & City Filing Fees            | \$800                                          | \$600           |
| Mental Health Resource Village (Staffing, Materials & Supplies)  | \$1,500                                        | \$1,000         |
| Voter Registration Station (Supplies, Training & Coordination)   | \$500                                          | \$400           |
| Cultural Programming, Performers & Entertainment Fees            | \$2,500                                        | \$1,500         |
| Black Media / Freedom of Press Programming & Materials           | \$1,200                                        | \$700           |
| Civic & Political Education Programming (Speakers, Materials)    | \$1,000                                        | \$500           |
| Event Marketing, Flyers, Banners, Signage & Print Materials      | \$1,000                                        | \$700           |
| Event Coordination, Logistics & Volunteer Management             | \$1,000                                        | \$500           |
| Poetry / Spoken Word & Expression Stage Support                  | \$800                                          | \$100           |
| Contingency / Miscellaneous Operational Expenses                 | \$1,200                                        | \$500           |
| <b>TOTAL FULL EVENT BUDGET</b>                                   | <b>\$18,000 (cash) +<br/>\$10,000+ in-kind</b> | <b>—</b>        |
| <b>TOTAL ARPA FUNDS REQUESTED (Neil Jones — District)</b>        | <b>\$10,000</b>                                | <b>\$10,000</b> |
| <b>REMAINING BUDGET GAP (open to additional council support)</b> | <b>\$8,000–\$10,000</b>                        | <b>TBD</b>      |

## DISCLAIMER INFORMATION AND SIGNATURE

*DISCLAIMER: I HEREBY CERTIFY that I have the authority to apply for financial assistance on behalf of the entity described herein, and that the information contained herein and attached hereto is true, complete, and correct to the best of my knowledge. I acknowledge and agree that all County contracts and programs are subject to Federal Guidelines and Regulations, the Ohio Revised Code, the Cuyahoga County Charter, and all County Ordinances including all information submitted as part of this application is a public record. I understand that any willful misrepresentation on this application or on any of the attachments thereto could result in a fine and/or imprisonment under relevant local, state, and/or federal laws or guidelines. I agree that at any time, any local, state, or federal governmental agency, or a private entity on behalf of any of these governmental agencies, can audit these dollars and projects.*

**Printed Name:**

Kenn Dowell

**Title / Role:**

Founder & CEO / Sole Proprietor, Strategic Resources Consulting, LLC (Applicant Organization)

|            |                    |
|------------|--------------------|
| Signature: | <u>Kenn Dowell</u> |
| Date:      | <u>5-14-2026</u>   |

ADDITIONAL DOCUMENTS

Are there additional documents or files as part of this application? Please list each document's name:

The following supporting documents are attached or available upon request:

- 1. Freedom Summer 2026 — Full Event Overview & Grant Narrative (Strategic Resources Consulting / SMN)
- 2. Crimson Heights Ministries — IRS 501(c)(3) Determination Letter [attached]
- 3. Crimson Heights Ministries — Articles of Incorporation / Organizational Documents [to be submitted]
- 4. Strategic Resources Consulting, LLC — SBE/MBE Certification (Cuyahoga County, valid 11/15/2024–11/15/2026) [attached]
- 5. Strategic Resources Consulting, LLC — Inspector General Contractor Registration No. 25-0263-REG (expires 12/31/2029) [attached]
- 6. Strategic Resources Consulting, LLC — Certificate of Liability Insurance, Hiscox Policy No. P105.424.282.1 (effective 09/08/2025–09/08/2026) [attached]
- 7. Garden View Hill Park — City of Cleveland Facility / Permit Confirmation (pending)
- 8. Freedom Summer 2026 — Event Program & Programming Schedule [attached]

BUREAU OF WORKERS' COMPENSATION STATEMENT:

Strategic Resources Consulting, LLC is a sole proprietorship owned and operated solely by Kenn Dowell, with no W-2 employees. Pursuant to Ohio Revised Code §4123.01, sole proprietors are expressly excluded from the definition of "employee" under Ohio workers' compensation law and are therefore not required to maintain Bureau of Workers' Compensation coverage. Strategic Resources Consulting, LLC does not currently carry BWC coverage as it is not legally required under ORC Chapter 4123. In the event that employees are hired in connection with this project or at any future time, BWC coverage will be obtained immediately as required by Ohio law.

— End of Application —

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0157

Sponsored by: **County Executive Ronayne/Department of Health and Human Services/Division of Community Initiatives/Office of Homeless Services**

**A Resolution** authorizing an amendment to Contract No. 5898 (fka Contract No. 4944) to Lutheran Metropolitan Ministry for joint transition and rapid housing project services in connection with the Youth Homelessness Demonstration Program for the period 1/1/2024-12/31/2025 to extend the time period to 12/31/2026, to amend and replace various terms, and for additional funds in the amount not-to-exceed \$1,676,083.00, effective 1/1/2026; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution, and declaring the necessity that this Resolution become immediately effective.

**WHEREAS**, the County Executive/Department of Health and Human Services/Division of Community Initiatives/Office of Homeless Services recommends authorizing an amendment to Contract No. 5898 (fka Contract No. 4944) to Lutheran Metropolitan Ministry for joint transition and rapid housing project services in connection with the Youth Homelessness Demonstration Program for the period 1/1/2024-12/31/2025 to extend the time period to 12/31/2026, to amend and replace various terms, and for additional funds in the amount not-to-exceed \$1,676,083.00, effective 1/1/2026; and

**WHEREAS**, the primary goals for this project are to provide short-term housing and/or long-term rapid rehousing assistance to youth and young adults experiencing homelessness or housing instability and youth and young adults driven case management and supportive services with a focus on developing community connections, empowering self-determination and facilitating access to meet youth and young adult needs; and

**WHEREAS**, this project is funded 100% U.S. Department of Housing and Urban Development; and

**WHEREAS**, it is necessary that this Resolution become immediately effective in order that critical services provided by Cuyahoga County can continue.

**NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COUNCIL  
OF CUYAHOGA COUNTY, OHIO:**

**SECTION 1.** That the Cuyahoga County Council hereby authorizes authorizing an amendment to Contract No. 5898 (fka Contract No. 4944) to Lutheran Metropolitan Ministry for joint transition and rapid housing project services in connection with the Youth Homelessness Demonstration Program for the period 1/1/2024-12/31/2025 to extend the time period to 12/31/2026, to amend and replace various terms, and for additional funds in the amount not-to-exceed \$1,676,083.00, effective 1/1/2026.

**SECTION 2.** That the County Executive is authorized to execute the amendment and all other documents consistent with this Resolution. To the extent that any exemptions are necessary under the County Code and contracting procedures, they shall be deemed approved by the adoption of this Resolution.

**SECTION 3.** It is necessary that this Resolution become immediately effective for the usual daily operation of the County; the preservation of public peace, health or safety in the County; and any additional reasons set forth in the preamble. Provided that this Resolution receives the affirmative vote of at least eight members of Council, it shall take effect and be in force immediately upon the earliest occurrence of any of the following: (1) its approval by the County Executive through signature, (2) the expiration of the time during which it may be disapproved by the County Executive under Section 3.10(6) of the Cuyahoga County Charter, or (3) its passage by at least eight members of Council after disapproval pursuant to Section 3.10(7) of the Cuyahoga County Charter. Otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

**SECTION 4.** It is found and determined that all formal actions of this Council relating to the adoption of this Resolution were adopted in an open meeting of the Council, and that all deliberations of this Council and of any of its committees that resulted in such formal action were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

On a motion by \_\_\_\_\_, seconded by \_\_\_\_\_, the foregoing Resolution was duly adopted.

Yeas:

Nays:

\_\_\_\_\_  
County Council President

\_\_\_\_\_  
Date

\_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clerk of Council

\_\_\_\_\_  
Date

First Reading/Referred to Committee: May 26, 2026

Committee(s) Assigned: Health, Human Services & Aging

Journal \_\_\_\_\_  
\_\_\_\_\_, 20\_\_\_\_

**.PURCHASE-RELATED TRANSACTIONS**

|                                  |                                                                                                                                                                                                                                                                                           |
|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Title</b>                     | OHS; Lutheran Metropolitan Ministry; 2026-2027 Contract for Joint Transitional Housing – Permanent Supportive Housing for Young Adults                                                                                                                                                    |
| <b>Department or Agency Name</b> | Office of Homeless Services                                                                                                                                                                                                                                                               |
| <b>Requested Action</b>          | <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<br><input type="checkbox"/> Other (please specify): |

| Original (O)/<br>Amendment<br>(A-# ) | Contract<br>No. (If PO,<br>list PO#) | Vendor<br>Name                       | Time Period          | Amount         | Date<br>BOC/Council<br>Approved | Approval No.           |
|--------------------------------------|--------------------------------------|--------------------------------------|----------------------|----------------|---------------------------------|------------------------|
| O                                    | 4944                                 | Lutheran<br>Metropolitan<br>Ministry | 1/1/24 –<br>12/31/25 | \$3,108,549.00 | 12/10/24                        | R2024-<br>0430/5763347 |
| A-1                                  | 5898<br>(4944)                       | Lutheran<br>Metropolitan<br>Ministry | 1/1/26 –<br>12/31/26 | \$1,676,083.00 | pending                         | pending                |
|                                      |                                      |                                      |                      |                |                                 |                        |

**Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.**

This project will bridge the gap between short-term and long-term housing assistance, facilitate youth choice in meeting their housing needs, and provide resources that may not be immediately accessible to youth experiencing homelessness. YYA will receive personalized case management, including support with finding and maintaining housing, education and career resources, and independent living skills. The TH component will provide short- to medium-term rental assistance and supportive services for an average of six months in a scattered site setting. The RRH component will provide rental assistance and supportive services for an average of 12 months as well as aftercare once rental assistance ends to increase the likelihood of maintaining permanent housing. YYA will have the opportunity to transition in place, allowing them to remain in the same unit as they transition from TH to Rapid Re-Housing (RRH). This continuity of housing allows YYA to familiarize themselves with the property and owner, facilitating trust and ensuring a smooth transition to a potential 12-month lease agreement. By maintaining consistency in their living environment during this transition period, YYA can focus on their goals and stability without the disruption of relocating to a new residence

This project will serve a minimum of 75 households each year.

This is an amendment to CM 5898 (fka 4509) for an extension of time from ending 12/31/25 to ending 12/31/26 for an amount of \$1,676,083.00.

Indicate whether: ☐ New service/purchase   ☒ Existing service/purchase   ☐ Replacement for an existing service/purchase (provide details in Service/Item Description section above)

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

**Project Goals, Outcomes or Purpose (list 3):**

- Provide support to YYA experiencing homelessness or housing instability through connections with housing, developing community connections, empowering self-determination, and facilitating access to additional resources that meet their identified needs.
- Ensure that YYA receive adequate and equitable services as they navigate systems resources
- Improve system coordination and continuity of care, and strengthen awareness of community resources

**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). If there are multiple vendors copy this table and complete for each vendor.**

|                                                                                                             |                                                                                  |
|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Vendor Name and address:<br>Lutheran Metropolitan Ministry<br>4515 Superior Avenue<br>Cleveland, Ohio 44103 | Owner, executive director, other (specify):<br>Maria Foschia, 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# _____<br><input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ<br><input type="checkbox"/> Informal<br><input type="checkbox"/> Formal Closing Date: _____                                                                                                                    | Provide a short summary for not using competitive bid process.<br><br>*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<br><br><input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date                                                                                                                                                          |
| Participation/Goals (%): (   ) DBE (   ) SBE<br>(   ) MBE (   ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes<br><input type="checkbox"/> No, please explain.<br><br>If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome? | <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<br><input type="checkbox"/> No, please explain: _____                                                                                                                                                                                              | <input type="checkbox"/> Government Purchase<br><br><input checked="" type="checkbox"/> Alternative Procurement Process<br>OHS received approval (BC2023-241, approved 4/17/23) for Sisters of Charity Foundation to release an RFP on behalf of the Cuyahoga County Continuum of Care. The planholder list included CoC and social service providers |

|                                              |                                                                                                                                                           |
|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                              | throughout the county. LMM was the only provider that submitted a proposal. Proposals were reviewed and scored by the YHDP core team, which included OHS. |
| How did pricing compare among bids received? | <input checked="" type="checkbox"/> Contract Amendment - (list original procurement)<br><b>RFP – CM 4944</b>                                              |
|                                              | <input type="checkbox"/> Other Procurement Method, please describe:                                                                                       |

|                                                                                                                                                                                                                                           |                           |       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------|
| <b>Is Purchase/Services technology related</b> <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, list date of TAC approval and answer the questions below.                                                                 |                           |       |
| <table border="1"> <tr> <td>List date of TAC approval</td> <td>Date:</td> </tr> </table>                                                                                                                                                  | List date of TAC approval | Date: |
| List date of TAC approval                                                                                                                                                                                                                 | Date:                     |       |
| <input type="checkbox"/> Check if item on IT Standard List of approved purchase and provide date of TAC approval.<br><input type="checkbox"/> Check if item is ERP related? <input type="checkbox"/> No <input type="checkbox"/> Yes. N/A |                           |       |
| Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.                                                                                                |                           |       |

|                                                                                                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FUNDING SOURCE:</b> Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed.                                                                                  |
| <b>100% HS220105 - US Department of Housing and Urban Development Youth Homelessness Development Program</b>                                                                                                                     |
| Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):                                                                               |
| <b>List all Accounting Unit(s) upon which funds will be drawn and amounts if more than one accounting unit.</b><br><b>HS220105; HS-26-YHDP-RRH; 55130</b>                                                                        |
| 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): |

|                                                                                                                                                                                                                                                                                                     |                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| <b>Provide status of project. Currently performing and awaiting amended contract to pay costs/expenses accrued per monthly invoice schedule as of 1/1/2026</b>                                                                                                                                      |                                         |
| Is contract/purchase late <input type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission                                                                                                                                     |                                         |
| <b>Reason: OHS had to work with HUD to ensure all components of the proposed project are in alignment with requirements, which took much longer than expected due to uncertainty regarding new Notice of Funding Opportunities and Grant Renewal requirements for existing grants such as YHDP.</b> |                                         |
| <b>Timeline</b>                                                                                                                                                                                                                                                                                     |                                         |
| Project/Procurement Start Date (date your team started working on this item):                                                                                                                                                                                                                       | 1/15/2026; 3/25/2026 (Received in DCAP) |
| Date documents were requested from vendor:                                                                                                                                                                                                                                                          | 2/4/2026; (4/6/2026)                    |
| Date of insurance approval from risk manager:                                                                                                                                                                                                                                                       | N/A                                     |
| Date Department of Law approved Contract:                                                                                                                                                                                                                                                           | 4/9/2026                                |
| 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)                                                                                                                                                                          |                                         |

Have payments been made? ☒ No ☐ Yes (if yes, please explain)

**HISTORY** (see instructions):

| Prior Original<br>(O) and<br>subsequent<br>Amendments<br>(A-# ) | Contract<br>No. (If<br>PO, list<br>PO#) | Vendor<br>Name | Time Period | Amount | Date<br>BOC/Council<br>Approved | Approval No. |
|-----------------------------------------------------------------|-----------------------------------------|----------------|-------------|--------|---------------------------------|--------------|
| See Table 1                                                     |                                         |                |             |        |                                 |              |

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in OnBase Document Management

|                                         |                     |
|-----------------------------------------|---------------------|
| Infor/Lawson RQ# (if applicable):       | N/A                 |
| Buyspeed RQ# (if applicable):           | N/A                 |
| Infor/Lawson PO # Code (if applicable): | AMND                |
| CM Contract#                            | 5898 (Copy of 4944) |

|                                                      |                                                                                                                                                                                                                                                                                      |                             |
|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| Late Submittal Required:                             | Yes <input checked="" type="checkbox"/>                                                                                                                                                                                                                                              | No <input type="checkbox"/> |
| Why is the contract being submitted late?            | OHS had to work with HUD to ensure all components of the proposed project are in alignment with requirements, which took much longer than expected due to uncertainty regarding new Notice of Funding Opportunities and Grant Renewal requirements for existing grants such as YHDP. |                             |
| What is being done to prevent this from reoccurring? | OHS has established all program components so there should not be any additional time needed for this in future contracts/amendments.                                                                                                                                                |                             |

|                                               |                              |                                        |
|-----------------------------------------------|------------------------------|----------------------------------------|
| TAC or CTO Required or Authorized IT Standard | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|-----------------------------------------------|------------------------------|----------------------------------------|

| Contract Amendments<br>Reviewed by Purchasing                                                                           |                             |           |                     |            |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------|---------------------|------------|
| OHS – AMND 1 LMM- YHDP TH-RRH                                                                                           |                             |           | Department Initials | Purchasing |
| Briefing Memo                                                                                                           |                             |           | LS                  | BRM        |
| Justification Form                                                                                                      |                             |           | LS                  | BRM        |
| IG#                                                                                                                     | 25-0292-REG exp. 12.31.2029 |           | LS                  | BRM        |
| Annual Non-Competitive Bid Contract Statement (See Contracts Checklist Glossary on the intranet for form requirements). | Date:                       |           | N/A                 | N/A        |
| Debarment/Suspension Verified                                                                                           | Date:                       | 4/8/2026  | LS                  | BRM        |
| Auditor's Findings                                                                                                      | Date:                       | 4/8/2026  | LS                  | BRM        |
| Independent Contractor (I.C.) Form                                                                                      | Date:                       | 12/3/2025 | LS                  | BRM        |
| Cover - Master contracts only                                                                                           |                             |           | N/A                 | N/A        |
| Contract Evaluation – if required provide most recent CM history on contract history table (see pg 2)                   |                             |           | LS                  | BRM        |
| TAC/CTO Approval or IT Standards (if required attach and identify relevant page #s or meeting approval number)          |                             |           | N/A                 | N/A        |
| Checklist Verification                                                                                                  |                             |           | LS                  | BRM        |

Other documentation may be required depending upon your specific item

Glossary of Terms at: <https://intranet.cuyahoga.cc/policies-procedures/procurement-information>

Reviewed by Law

## Department of Purchasing – Required Documents Checklist

| OHS – AMND 1 LMM- YHDP TH-RRH                                                     | Department Initials |
|-----------------------------------------------------------------------------------|---------------------|
| Agreement/Contract and Exhibits                                                   | LS                  |
| Matrix Law Screen shot                                                            | LS                  |
| COI                                                                               | LS                  |
| Workers' Compensation Insurance                                                   | LS                  |
| Original Executed Contract (containing insurance terms) & all executed amendments | LS                  |

### CONTRACT SPENDING PLAN

| Time Period                                                      | Accounting Unit | Account Number | Activity Code  | Account Category or Subaccount | Dollar Amount  |
|------------------------------------------------------------------|-----------------|----------------|----------------|--------------------------------|----------------|
| 1/1/2026 – 12/31/2026                                            | HS220105        | 55130          | HS-26-YHDP-RRH | 55130                          | \$1,220,883.03 |
| 1/1/2027 – <del>12/31/2027</del><br>3/31/2027<br>*final invoices | HS220105        | 55130          | HS-26-YHDP-RRH | 55130                          | \$455,199.97   |
|                                                                  |                 |                |                |                                |                |
|                                                                  |                 |                |                |                                |                |
|                                                                  |                 |                | <b>TOTAL</b>   |                                | \$1,676,083.00 |

### CONTRACT HISTORY (see Contract Evaluation, if applicable/ to be completed by Department)

| CE/AG# (if applicable)                           |                 | N/A                              |                                       |                               |                            |
|--------------------------------------------------|-----------------|----------------------------------|---------------------------------------|-------------------------------|----------------------------|
| Infor/Lawson PO# and PO Code (if applicable)     |                 | EXMT                             |                                       |                               |                            |
| Lawson RQ# (if applicable)                       |                 | N/A                              |                                       |                               |                            |
| CM Contract#                                     |                 | 5898 copy of 4944                |                                       |                               |                            |
|                                                  | Original Amount | Amendment Amount (if applicable) | Original Time Period/Amended End Date | BOC/ Resolution Approval Date | BOC/ Resolution Approval # |
| Original Amount                                  | \$3,108,549.00  |                                  | 1/1/2024 – 12/31/2025                 | 12/3/2024                     | R2024-0430                 |
| Prior Amendment Amounts (list separately) (A-# ) |                 | \$                               |                                       |                               |                            |
|                                                  |                 | \$                               |                                       |                               |                            |
|                                                  |                 | \$                               |                                       |                               |                            |
| Pending Amendment (A-1)                          |                 | \$1,676,083.00                   | 1/1/2026 – 12/31/2026                 | Pending                       | Pending                    |
| Total Amendments                                 |                 | \$1,676,083.00                   |                                       |                               |                            |
| Total Contract Amount                            |                 | \$4,784,632.00                   |                                       |                               |                            |

## Department of Purchasing – Required Documents Checklist

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### PURCHASING USE ONLY

|                                                 |                                    |
|-------------------------------------------------|------------------------------------|
| Prior Resolutions:                              | R2024-0430                         |
| CM#:                                            | 5898 copy of 4944                  |
| Vendor Name:                                    | Lutheran Metropolitan Ministry     |
| Time Period:                                    | 1/1/2024-12/31/2025 ext 12/31/2026 |
| Amount:                                         | \$1,676,083.00                     |
| History/CE:                                     | Yes                                |
| EL:                                             | yes                                |
| Purchasing Notes:                               |                                    |
| Purchasing Agents Initials and date of approval | BRM                                |



### **JUSTIFICATION FOR USE OF NON-COMPETITIVE PROCESS**

The County requires submitting departments to provide a business case which includes specific details supporting the contract/purchase being made.

As a consequence, departments need to provide detailed information justifying any purchases to be made non-competitively. The County has developed a justification packet for completion. If submitting a request for a non-competitive purchase, the department must complete this form, and attach it (along with supporting documentation) in the procurement software system.

A review of the contract/purchase request will not be completed without a signed completed justification packet uploaded as an attachment when submitting the contract/purchase request in the procurement software system. It is critically important, and incumbent upon the department to fully and accurately complete the form in order to avoid any lengthy and unnecessary delays in processing the contract/purchase request.

|                           |              |
|---------------------------|--------------|
| Requestor                 | LeVine Ross  |
| Requestor<br>Phone Number | 216-443-8421 |
| Date                      | 1/28/2026    |
| Requisition<br>Number     | N/A          |

**OPERATING DEPARTMENT & ACTIVITY: (Choose 1)**

The Department of Health and Human Services, Office of Homeless Services, plans to amend Contract No. 5898 (fka 4944) with Lutheran Metropolitan Ministry, to change extend time period to 1/1/26 - 12/31/26 for Joint Transitional Housing for Young Adults in the amount of \$1,676,083.00.

**Check the appropriate box:**

- ☐ Governmental Purchase - County Code 501.12 (B)(2)(vi)
- ☐ State Contract Purchase – County Code 501.12(B)(2)(x)
- ☐ Lower than State Contract Purchase - County Code 501.12(B)(2)(ix)
- ☐ Cooperative Purchasing - County Code 501.12(B)(2)(ix)
  - ☐ Federal Contracts
  - ☐ Joint Purchasing Programs (includes GSA)

**X Contract Amendment**

Contract # 5898 (fka 4944) RQ# N/A

- ☐ RFP Exemption – County Code 501.12(B)(2)(xi)
- ☐ Community Rehabilitation Program (CRP) - O.R.C. 125.60 - O.R.C. 125.607
- ☐ Public Utility (911 System) - O.R.C. 128.03(F)
- ☐ Exemption from Aggregation of Contracts -County Code 501.05(C)(2)

**X Alternative Procurement Process – County Code 501.12(B)(2)(vii)**

- ☐ Federal, State, or Other Grant Application Program (County Code 501.12(B)(2)(viii))

Revised: 11/13/2025

Page 2 of 6

**1. Description of Supplies or Services, amount of purchase; if a contract or an amendment list start date and end date, and/or scope change if an amendment.**

Lutheran Metropolitan Ministry will act as the lead agency for the joint Transition Housing and Rapid Rehousing (TH-RRH) project which offers supportive services, safe and stable crisis housing, and permanent housing for young adults 18-24, who are experiencing, or at risk of homelessness. LMM will provide housing and property liaison services and partner with Family Promise of Greater Cleveland and FrontLine Service as subrecipients to provide specialized case management.

This project will bridge the gap between short-term and long-term housing assistance, facilitate youth choice in meeting their housing needs, and provide resources that may not be immediately accessible to youth experiencing homelessness. YYA will receive personalized case management, including support with finding and maintaining housing, education and career resources, and independent living skills. The TH component will provide short- to medium-term rental assistance and supportive services for an average of six months in a scattered site setting. The RRH component will provide rental assistance and supportive services for an average of 12 months as well as aftercare once rental assistance ends to increase the likelihood of maintaining permanent housing. YYA will have the opportunity to transition in place, allowing them to remain in the same unit as they transition from TH to Rapid Re-Housing (RRH). This continuity of housing allows YYA to familiarize themselves with the property and owner, facilitating trust and ensuring a smooth transition to a potential 12-month lease agreement. By maintaining consistency in their living environment during this transition period, YYA can focus on their goals and stability without the disruption of relocating to a new residence.

**This is an amendment to contract, CM 5898 (fka 4944), for an extension of time from ending 12/31/2025 to ending 12/31/2026, for an existing service, in an amount not to exceed \$1,676,083.00 for the term of 1/1/26 – 12/31/26.**

***If contract or contract amendment term has begun, please respond to questions 1a. and 1b below:***

**1a. Why is the contract/amendment being submitted late?**

OHS had to work with HUD to ensure all components of the proposed project are in alignment with requirements, which took much longer than expected due to uncertainty regarding new Notice of Funding Opportunities and Grant Renewal requirements for existing grants such as YHDP.

**1b. What is being done to prevent this from reoccurring?**

OHS has established all program components so there should not be any additional time needed for this in future contracts/amendments.

**2. Funding Source(s) including percentage breakdown and the actual fund name(s).**

100% HS220105 - US Department of Housing and Urban Development Youth Homelessness Development Program

**3. Was the specific project funding included in OBM-approved budget for the current year? If not, please explain.**

Yes

**4. Rationale Supporting the Use of the Selected Procurement Method (include state contract # or cooperative purchasing contract # and expiration date)**

OHS received approval (BC2023-241, approved 4/17/23) for Sisters of Charity Foundation to release an RFP on behalf of the Cuyahoga County Continuum of Care. This allowed the CoC to comply with HUD requirements to ensure youth-focus and cross-system partnership in the RFP creation, review, and scoring. The plan holder list included CoC and social service providers throughout the county. Proposals were reviewed and scored by the YHDP core team, which included OHS.

**5. What other available options and/or vendors were evaluated? If none, include the reasons why (*Attach supporting documentation such as other vendor quotes/pricing*).**

The alt procurement-approved RFP was released via notice on the Office of Homeless Services website, email to all CoC providers and social service agencies, as well as press release by Cuyahoga County. LMM was the only provider that submitted a proposal for the services.

**6. What ultimately led you to this product or service? Why was the recommended vendor selected? How was it determined that the anticipated cost is fair and reasonable? (*Attach supporting documentation*).**

The YHDP Core Team, which includes OHS staff, the Youth Action Board, Sisters of Charity, and A Place 4 Me, reviewed the proposal submitted by LMM and determined that it possessed the programmatic experience, capacity, and infrastructure to provide navigation services within the CoC.

**7. Provide an explanation of unacceptable delays in fulfilling the County's need that would be incurred if award was made through a competitive process. (*Attach supporting documentation*).**

N/A – There was a competitive process, just outside of the County RFP process

**8. Describe what future plans, if any, your department can take to permit competition before any subsequent purchases of the required supplies or services. In none, please explain why.**

Office of Homeless Services may issue an RFP for these services or they may be awarded through the HUD Continuum of Care Funding application.

### **CERTIFICATION REQUIREMENTS**

I certify that the information contained in and attached to this Justification is accurate and complete to support the recommendation.

I further certify that the attached narrative justification verifies Cuyahoga County's minimum need or schedule requirements and any rationale used to justify the non-competitive request.

**Signature of Director:**



**Date:** 3/19/2026

**RQ#** \_\_\_\_\_

**Procurement software system title:**

## CONTRACT EVALUATION FORM

|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Contractor</b>                                                                 | Lutheran Metropolitan Ministry                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Current Contract History:<br/>CE/AG# (if applicable)<br/>Infor/Lawson PO#:</b> | 5898 (4944)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>RQ#</b>                                                                        | N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Time Period of Original Contract</b>                                           | 1/1/24-12/31/25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Background Statement</b>                                                       | OHS received a grant from the US Department of Housing and Urban Development for the Youth Homeless Demonstration Program to propose new approaches to drastically reduce the number of youth experiencing homelessness, including unaccompanied, pregnant, and parenting youth. Awarded YHDP communities must develop a Coordinated Community Plan (CCP) to lay the groundwork for YHDP implementation and provide a framework for proposed YHDP projects. REACHing for New Heights, the Cuyahoga CCP identified a joint Transitional Housing – Rapid Rehousing (TH-RRH) project as a funding priority.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Service Description</b>                                                        | <p>Lutheran Metropolitan Ministry will act as the lead agency for the TH-RRH project which offers supportive services, safe and stable crisis housing, and permanent housing for young adults 18-24, who are experiencing or at risk of homelessness. LMM will provide housing and property liaison services and partner with Family Promise of Greater Cleveland and FrontLine Service as subrecipients to provide specialized case management.</p> <p>This project will bridge the gap between short-term and long-term housing assistance, facilitate youth choice in meeting their housing needs, and provide resources that may not be immediately accessible to youth experiencing homelessness. YYA will receive personalized case management, including support with finding and maintaining housing, education and career resources, and independent living skills. The TH component will provide short- to medium-term rental assistance and supportive services for an average of six months in a scattered site setting. The RRH component will provide rental assistance and supportive services for an average of 12 months as well as aftercare once rental assistance ends to increase the likelihood of maintaining permanent housing.</p> |
| <b>Performance Indicators</b>                                                     | Households served; Number of Persons Served; Percentage entering with earned income; Number of Persons Served of were Served 6 months or more.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

|                                                                               |                                                                                                                                                                                          |                      |                |                      |             |
|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------|----------------------|-------------|
| <b>Actual Performance versus performance indicators (include statistics):</b> | Households Served – 80<br>Number of Persons Served – 126 - 86 Adults; 40 Children<br>Percentage entering with Earned Income – 39.5%<br>Number of Persons Served 6 months or more – 48.4% |                      |                |                      |             |
| <b>Rating of Overall Performance of Contractor</b>                            | <b>Superior</b>                                                                                                                                                                          | <b>Above Average</b> | <b>Average</b> | <b>Below Average</b> | <b>Poor</b> |
| <b>Select One (X)</b>                                                         |                                                                                                                                                                                          |                      | X              |                      |             |
| <b>Justification of Rating</b>                                                | LMM effectively provides Transitional Housing to Rapid ReHousing services to Youth and Young Adults experiencing Homelessness with the CoC                                               |                      |                |                      |             |
| <b>Department Contact</b>                                                     | Erin Rearden                                                                                                                                                                             |                      |                |                      |             |
| <b>User Department</b>                                                        | Office of Homeless Services                                                                                                                                                              |                      |                |                      |             |
| <b>Date</b>                                                                   | 1/27/2026                                                                                                                                                                                |                      |                |                      |             |