



**Cuyahoga County Board of Control Agenda
Tuesday, October 10, 2023 - 11:00 A.M.
County Headquarters
2079 East Ninth Street
4th Floor, Committee Room B**

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

I – CALL TO ORDER

II. – REVIEW MINUTES – 10/2/2023

III. – PUBLIC COMMENT

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2023-609

Department of Public Works, requesting approval of a mediation settlement in the amount of \$29,400.00 as final payment for acquiring Right-of-Way in connection with the reconstruction, with additional turning lanes, of Royalton Road from West 130th Street to York Road in the City of North Royalton and Cuyahoga County Probate Court Case No. 2017 ADV 230899:

Parcel 1 WD, T (Warranty Deed and Temporary Easement)

Property Owner: USF Holland LLC

Fair Market Value Estimate: \$58,500.00

Funding Source: 50% Road and Bridge Fund and 50% City of North Royalton

BC2023-610

Department of Public Works,

a) Submitting an RFP exemption, which will result in an award recommendation to Precision Industrial Services, Inc. in the amount not-to-exceed \$388,193.40 for a state contract purchase of carpeting and related materials for installation on 1st and 2nd Floors of the Jane Edna Hunter Building.

b) Recommending an award on Purchase Order No. 23004398 to Precision Industrial Services, Inc. in the amount not-to-exceed \$388,193.40 for a state contract purchase of carpeting and related materials for installation on 1st and 2nd Floors of the Jane Edna Hunter Building.

Funding Source: Public Children Services Association of Ohio Grant

BC2023-611

Department of Public Works,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Rush Truck Centers of Ohio Inc. in the amount not-to-exceed \$199,636.00 for a joint cooperative purchase of (1) replacement, new, never titled 2024 International Service Truck for the Sanitary Division.
- b) Recommending an award on Purchase Order No. 23004323 to Rush Truck Centers of Ohio Inc. in the amount not-to-exceed \$199,636.00 for a joint cooperative purchase of (1) replacement, new, never titled 2024 International Service Truck for the Sanitary Division.

Funding Source: Sanitary Funds

BC2023-612

Department of Public Works, recommending an award and enter into Contract No. 3799 with Buckeye Power Sales Company, Inc. (59-1) in the amount not-to-exceed \$49,999.00 for preventative maintenance and emergency repairs of emergency generators at various County locations for the period 10/10/2023 – 2/9/2024.

Funding Source: General Fund

BC2023-613

Department of Public Works, recommending an award on RQ11970 and enter into Contract No. 3822 with DS Architecture, LLC (49-5) in the amount not-to-exceed \$450,000.00 for general architectural engineering and adjunct services on a task order basis, effective upon signatures of all parties for a period of 3 years.

Funding Source: General Fund

BC2023-614

Fiscal Office on behalf of the Office of Budget and Management,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Sherpa Government Solutions, LLC in the amount not-to-exceed \$117,000.00 for administrative support related to budget projections and forecasting, configuration of reports, and training, effective upon contract signatures of all parties through 12/31/2024.
- b) Recommending an award and enter into Contract No. 3796 with Sherpa Government Solutions, LLC in the amount not-to-exceed \$117,000.00 for administrative support related to budget projections and forecasting, configuration of reports, and training, effective upon contract signatures of all parties through 12/31/2024.

Funding Source: General Fund

BC2023-615

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to SHI International Corp. in the amount not-to-exceed \$32,300.10 for the purchase of Pro Services Plus, Hardware Security Modules Network USB.
- b) Recommending an award on Purchase Order No. 23004123 to SHI International Corp. in the amount not-to-exceed \$32,300.10 for the purchase of Pro Services Plus, Hardware Security Modules Network USB.

Funding Source: General Fund

BC2023-616

Department of Information Technology on behalf of the Department of Housing and Community Development, recommending an award on RQ11527 and enter into Contract No. 3700 with Benevate, Inc. (16-1) in the amount not-to-exceed \$192,500.00 for the Neighborly Program Software, effective upon signatures of all parties for a period of 5 years.

Funding Source: Community Development Block Grant/HOME Grant (80%), General Fund (15%), and Sustainability Projects Fund (5%)

BC2023-617

Department of Information Technology on behalf of the County Executive's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Catalis Tax and CAMA, Inc. in the amount not-to-exceed \$129,865.00 for consultant services for evaluation of the Land Record Process and Business Plan workflows and recommend changes for improvement, effective upon signatures of all parties for a period of 1 year.
- b) Recommending an award and enter into Contract No. 3823 with Catalis Tax and CAMA, Inc. in the amount not-to-exceed \$129,865.00 for consultant services for evaluation of the Land Record Process and Business Plan workflows and recommend changes for improvement, effective upon signatures of all parties for a period of 1 year.

Funding Source: Real Estate Assessment Fund

BC2023-618

Department of Human Resources, recommending an award and enter into Agreement No. 3802 with The MetroHealth System in the amount not-to-exceed \$52,500.00 for flu shot clinic services for County employees effective upon contract signatures of all parties through 12/31/2023.

Funding Source: Wellness Benefits

BC2023-619

Department of Human Resources, recommending an award on RQ12551 and enter into Contract No. 3826 with The Jellyvision Lab, Inc. (16-1) in the amount not-to-exceed \$143,941.00 for ALEX virtual benefits counselor software subscription services for employee benefits open enrollment for the period 10/12/2023 – 10/11/2024.

Funding Source: Self Insurance Fund

BC2023-620

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 2792 (fka Contract No. 413) with Reaching Above Hopelessness and Brokenness Ministries, Inc. dba RAHAB Ministries for trauma-informed mentoring services for youth assigned to the Safe Harbor Docket for the period 7/1/2020 – 6/30/2023 to extend the time period to 6/30/2024 and for additional funds in the amount of \$93,377.52.

Funding Source: RECLAIM Grant

BC2023-621

Court of Common Pleas/Juvenile Court Division, recommending an award on RQ12637 and enter into Contract No. 3689 with Sophia V. Cook (36-1) in the amount not-to-exceed \$50,000.00 for psychological evaluation services for the Diagnostic Clinic, effective upon signatures of all parties through 12/31/2024.

Funding Source: Health and Human Services Levy Fund

BC2023-622

County Prosecutor,

- a) Submitting an RFP exemption, which will result in an award recommendation to SHI International Corporation in the amount not-to-exceed \$50,424.72 for (6) SMS Magnet AXIOM software license renewals for Internet Crimes Against Children Unit for the period 11/1/2023– 10/31/2026.
- b) Recommending an award on Purchase Order No. 23003963 to SHI International Corporation in the amount not-to-exceed \$50,424.72 for (6) SMS Magnet AXIOM software license renewals for Internet Crimes Against Children Unit for the period 11/1/2023– 10/31/2026.

Funding Source: United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention Federal Grant

BC2023-623

Department of Health and Human Services/Community Initiatives Division/Office of Homeless Services, submitting an amendment to Contract No. 1997 with Joseph’s Home for temporary housing and supportive services for medically fragile men experiencing homelessness for the period 7/1/2021 - 6/30/2023 to extend the time period to 6/30/2024 and for additional funds in the amount not-to-exceed \$267,547.00.

Funding Source: Health and Human Services Levy Funds

C. – Consent Agenda

BC2023-624

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

Funding Source: Revenue Generating

BC2023-625

Department of Public Works, submitting an amendment to Agreement No. 1773 with Lutheran Metropolitan Ministry for food service operations at the Virgil E. Brown Building, incorporating culinary training, work experience and wraparound therapeutic programming services to incarcerated individuals enrolled in the Culinary Arts Training and Chopping for Change Programs for the period 7/1/2021 – 6/30/2023 to extend the time period to 6/30/2024, effective upon contract signatures of all parties.

Funding Source: Revenue Generating

BC2023-626

Department of Public Works, submitting an amendment to Contract No. 2375 with Vandra Brothers Construction Inc. for rehabilitation of West Ridgewood Drive from Ridge Road to State Road in the City of Parma for a decrease in the amount of (\$40,210.92); recommending to accept construction as complete and in accordance with plans and specifications; requesting authority for the County Treasurer to release the escrow account, in accordance with Ohio Revised Code Section 153.63.

Funding Source: 80% \$7.50 Motor Vehicle Fund and 20% City of Parma

BC2023-627

Department of Public Works, submitting an amendment to Contract No. 2378 with The Vallejo Company for the rehabilitation of Superior Road from Euclid Avenue to Lee Road in the Cities of Cleveland Heights and East Cleveland for a decrease in the amount of (\$449,061.56).

Funding Source: 20% Federal, 35% Ohio Public Works Commission Funds, 43% County Motor Vehicle \$7.50 License Tax fund, and 2% municipalities

BC2023-628

Department of Housing and Community Development, requesting authority to apply for grant funds from Ohio Department of Development in the amount of \$8,057,000.00 to conduct lead abatement services including window and door replacement in residential properties, congregate care settings, and childcare facilities constructed before 1978 in connection with the Lead Safe Ohio Program grant for the period 12/1/2023 –4/30/2026.

Funding Source: Lead Safe Ohio Program Funds

BC2023-629

Department of Workforce Development, in partnership with City of Cleveland as designated Local Workforce Area No. 3, submitting an amended subgrant agreement with Ohio Department of Job and Family Services to define the roles and responsibilities of the administration of workforce development activities in connection with the allocation of Workforce Innovation and Opportunity Act grant funds for the period 7/1/2023 - 6/30/2025.

Funding Source: N/A

BC2023-630

Fiscal Department, presenting proposed travel/membership requests for the week of 10/10/2023:

Dept:	Sheriff's Department							
Event:	Promotional Assessment for Creation of 2 ND Lieutenant for Memphis PD							
Source:	Emergency Services Consulting International							
Location:	Sterling, Va							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Jay Hodge	10/01/2023-10/06/2023	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Emergency Services Consulting International

*Paid to host

**Staff reimbursement

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

***** The cost will be paid through Emergency Services Consulting International.

Flight \$445.80

Hotel \$882.36

Meals \$350.00

Purpose:

To travel to Sterling, VA to assist with the practice test for Memphis PD rank of 2nd Lieutenant as an assessor for this important endeavor during one or both testing dates of 10/2/2023-10/6/2023 and 11/27/2023-12/1/2023.

Dept:	Sheriff's Department
Event:	Advanced Polygraphy for the Senior Examiner course to maintain certification in compliance with ASTM Standards

Source:	Institute of Police Polygraphy							
Location:	Charleston, SC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Jamie Bonnette	11/05/2023-11/10/2023	\$795.00	\$291.00	\$802.30	\$0.00	\$0.00	\$1,888.30	CPT FUNDS-CONTINUING PROFESSIONAL TRAINING

*Paid to host

**Staff reimbursement

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

****Driving a County Vehicle

Purpose:

To travel to Charleston, SC to Advanced Polygraphy for the Senior Examiner course to maintain certification in compliance with ASTM Standards.

Dept:	Sheriff's Department							
Event:	Undercover Techniques and Survival for Women							
Source:	Pearland Police Department							
Location:	Pearland, TX							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
1-Public Service Worker; name redacted per R.C. 149.43(A)(1)(p)	11/12/2023-11/17/2023	\$425.00	\$360.00	\$625.00	\$200.00	\$375.00	\$1,985.00	CPT FUNDS-CONTINUING PROFESSIONAL TRAINING

*Paid to host

**Staff reimbursement

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

Purpose:

To travel to Pearland, TX to attend a training that is explicitly geared towards female officers' role as an undercover operative. The course will provide tools to help in situations that female officers face and problems unique to their gender.

Dept:	Sheriff's Department							
Event:	2023 Annual Training Conference							
Source:	Crime Stoppers USA							
Location:	Denver, CO							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Patricia Meehan	11/2/2023-11/6/2023	\$535.00	\$210.00	\$688.00	\$0.00	\$450.00	\$1,883.00	CPT FUNDS-CONTINUING PROFESSIONAL TRAINING

*Paid to host

**Staff reimbursement

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

Purpose:

To travel to Denver, CO to attend a conference to gain insight and skills of the best practices to run the day-to-day operation of a Crime Stoppers Program. The Crime Stoppers Program is evolving with time and in order to keep up with the times, this conference will help to do so and introduce new practices.

Dept:	Sheriff's Department							
Event:	IA Pro NexGen Annual Conference							
Source:	IA Pro NexGen by Versaterm Public Safety							
Location:	ST. Petersburg Beach, FL							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Brian Williams	10/30/2023-11/2/2023	\$300.00	\$191.00	\$630.00	\$0.00	\$421.40	\$1,542.40	CPT FUNDS
Yashila Ray	10/30/2023-11/2/2023	\$300.00	\$191.00	\$630.00	\$0.00	\$421.40	\$1,542.40	CPT FUNDS
Julie Coffman	10/30/2023-11/2/2023	\$300.00	\$191.00	\$630.00	\$338.74	\$421.40	\$1,881.14	CPT FUNDS

*Paid to host

**Staff reimbursement

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

****Ground TRN is the cost of a rental car

Purpose:

To travel to St. Petersburg Beach, FL to attend a conference to learn how to administer the new IA Pro Next Gen program and how to access new features. IA Pro is the program we use exclusively in Internal Affairs when conducting our investigations for our reports.

Dept:	Medical Examiner's Office							
Event:	Technical leader summit at 29 th Annual National Codis Conference							
Source:	Federal Bureau of Investigation							
Location:	Kansas City, MO							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Nasir Butt	11/12/2023-11/15/2023	\$0.00	\$163.00	\$458.55	\$140.00	\$489.00	\$1250.55	FY22 DNA BACKLOG GRANT

*Paid to host

**Staff reimbursement

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

Purpose:

Continuing Education and representation of CCRFSL as DNA Technical Manager at Tech. Lead Summit and Annual CODIS Conference

BC2023-631

Department of Purchasing, presenting proposed purchases for the week of 10/10/2023:

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23004032	Rental of lift equipment on an as needed basis for use at various County Building for the period 1/1/2024 – 12/31/2024	Department of Public Works	Sunbelt Rentals	Not-to-exceed \$49,999.00	General Fund
23004380	(800) Clear PVC lunch totes and (800) clear PVC drawstring backpacks for use by the Corrections staff	Sheriff's Department	IdeaStage Promotion, LLC	\$5,692.00	General Fund

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23003286	Family Centered Services and Supports: Safety adaptive equipment**	Family and Children First Council	Cuyahoga County Board of Developmental Disabilities	\$15,285.00	25% Federal Child Welfare Fund and 75% State General Revenue Fund
23003820	Family Centered Services and Supports: Safety adaptive equipment**	Family and Children First Council	Cuyahoga County Board of Developmental Disabilities	\$7,703.88	25% Federal Child Welfare Fund and 75% State General Revenue Fund

*Approval No. BC2021-393 dated 7/26/2021, which approved an alternative procurement process, which will result in purchase orders to various providers in the total amount not-to-exceed \$407,897.00 for implementation of the Family Centered Services and Supports Wraparound Program for the period 7/1/2021 – 6/30/2022.

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Court of Common Pleas/Corrections Planning Board,

- a) Requesting authority to apply for grant funds to Ohio Mental Health and Addiction Services in the amount of \$810,006.00 for alcohol and other drug assessment, case management and intensive outpatient treatment services in connection with the Treatment Alternatives to Street Crime Program for the period 7/1/2023 – 6/30/2024.

- b) Submitting a grant award from Ohio Mental Health and Addiction Services in the amount of \$810,006.00 for alcohol and other drug assessment, case management and intensive outpatient treatment services in connection with the Treatment Alternatives to Street Crime Program for the period 7/1/2023 – 6/30/2024.

Funding Source: Ohio Department of Mental Health and Addiction Services

Item No. 2

Cuyahoga County Law Library, requesting authority to apply for grant funds from Ohio Regional Association of Law Libraries to receive \$150.00 to attend the ORALL 74th Annual Meeting Bouncing Back Resilience in the Rubber City.

Funding Source: Ohio Regional Association of Law Libraries

Item No. 3

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

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
RQ 4082	Amend Master Contract – Assign Contract 3635	Various Providers	Adoption services; to add Specialized Alternatives for Families & Youth of Kentucky; no additional funds required	\$-0-	Division of Children and Family Services	1/1/2023 – 12/31/2024	(Original) State Child Protection Allocation	10/2/2023

VI – PUBLIC COMMENT

VII – ADJOURNMENT

Minutes

Cuyahoga County Board of Control

Monday, October 2, 2023 - 11:00 A.M.

County Headquarters

2079 East Ninth Street

Committee Room B

I – CALL TO ORDER

The meeting was called to order at 11:05 a.m.

Katherine A. Gallagher, Chief of Operations & Community Innovation County Executive Administration
(Alternate for Chris Ronayne, County Executive)

Michael Chambers, Interim Fiscal Officer, serving as Chairman

Mellany Seay, Finance and Operations Administrator, Department of Public Works
(Alternate for Michael Dever)

Paul Porter, Director, Department of Purchasing

Trevor McAleer, County Council (Alternate for Pernel Jones, Jr.)

Councilmember Meredith Turner

Councilmember Dale Miller

II. – REVIEW MINUTES – ~~9/5/2023~~ 9/25/2023

Michael Chambers motioned to approve the minutes as amended from the September 25, 2023, meeting; Meredith Turner seconded. The minutes were approved by unanimous vote, as written.

III. – PUBLIC COMMENT

There was no public comment.

IV. – CONTRACTS AND AWARDS

A. – Tabled Items

B. – New Items for Review

BC2023-596

Department of Information Technology on behalf of the Department of Public Works,

- a) Submitting an RFP exemption, which will result in an award recommendation to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$6,915.00 for a state contract purchase of (3) HP ZBook Firefly mobile workstations and docking stations, each to include HP Care Pack hardware support, HP Absolute Data & Device Security Premium – Subscription Licenses and (8) monitors.

- b) Recommending an award on Purchase Order No. 23003930 to MNJ Technologies Direct, Inc. in the amount not-to-exceed \$6,915.00 for a state contract purchase of (3) HP ZBook Firefly mobile workstations and docking stations, each to include HP Care Pack hardware support, HP Absolute Data & Device Security Premium – Subscription Licenses and (8) monitors.

Funding Source: 40% Sanitary Operating Fund, 40% Motor Vehicle Gas Tax Fund, 20% Maintenance Garage Fund

Matthew Hrubey, Department of Information Technology, presented. Dale Miller asked since we do a lot of business with MNJ can you tell me about them (i.e. where are they located, how large of a company they are; products/services they provide; do they manufacture any products or just get them from manufactures and resell them). The presenter will get a full rundown of the company and provide the information to the clerk. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-596 was approved by unanimous vote.

BC2023-597

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Advizex Technologies, LLC in the amount not-to-exceed \$36,155.10 for the purchase of (3) HPE ProLiant Gen10+ servers, various accessories, and a 3-year service agreement.
- b) Recommending an award on Purchase Order No. 23004136 to Advizex Technologies, LLC in the amount not-to-exceed \$36,155.10 for the purchase of (3) HPE ProLiant Gen10+ servers, various accessories, and a 3-year service agreement.

Funding Source: General Fund

Matthew Hrubey, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2023-597 was approved by unanimous vote.

BC2023-598

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to SHI International Corp. in the amount not-to-exceed \$63,651.45 for a joint cooperative purchase of (1) Enterprise runZero, Inc. software license for the period 10/28/2023 – 10/27/2024.
- b) Recommending an award on Purchase Order No. 23004139 to SHI International Corp. in the amount not-to-exceed \$63,651.45 for a joint cooperative purchase of (1) Enterprise runZero, Inc. software license for the period 10/28/2023 – 10/27/2024.

Funding Source: General Fund

Matthew Hrubey, Department of Information Technology, presented. Paul Porter, Director, Department of Purchasing supplemented. Dale Miller asked when we talk about making a joint cooperative purchase how is it done and who we are doing it with; asked do they do this on behalf of a substantial number of prospective buyers and so they get the advantages of economies of scales as well is that correct. The presenter will provide additional information about this item and will provide the specifications behind them. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-598 was approved by unanimous vote.

BC2023-599

Court of Common Pleas/Corrections Planning Board, submitting an amendment to Agreement No. 2499 with Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County for residential treatment services in connection with the Residential Substance Abuse Treatment Program for the period 7/1/2022 – 6/30/2023 to extend the time period to 6/30/2024, to change the terms, effective 7/1/2023 and for additional funds in the amount not-to-exceed \$490,000.00.

Funding Source: 90% General Fund and 10% Health and Human Services Levy Fund

Linda Lagunzad, Court of Common Pleas/Corrections Planning Board, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-599 was approved by unanimous vote.

BC2023-600

Clerk of Courts, recommending an award on Purchase Order No. 23004024 to the United States Postal Service in the amount not-to-exceed \$475,000.00 for the purchase of refill postage for the period 10/1/2023 – 2/28/2024 in accordance with Civil Rule No. 4 of the Ohio Rules of Civil Procedures.

Funding Source: General Fund

Ta Shan Cole, Clerk of Courts, presented. There were no questions. Dale Miller commented got to have it. Dale Miller motioned to approve the item; Trevor McAleer seconded. Item BC2023-600 was approved by unanimous vote.

BC2023-601

County Prosecutor, recommending an award and enter into Agreement No. 3731 with the Medical Examiner’s Office in the amount not-to-exceed \$65,000.00 for research and analysis of ballistic cases, effective upon contract signature of all parties through 9/30/2024.

Funding Source: Department of Justice, Office of Justice Programs, Bureau of Justice Affairs FY21 National Sexual Assault Kit Initiative

James Ginley, County Prosecutor’s Office, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-601 was approved by unanimous vote.

BC2023-602

Medical Examiner’s Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Fisher Scientific Company LLC in the amount not-to-exceed \$22,759.84 for a state contract purchase of various laboratory supplies for various departments.

- b) Recommending an award on Purchase Order No. 23003966 to Fisher Scientific Company LLC in the amount not-to-exceed \$22,759.84 for a state contract purchase of various laboratory supplies for various departments.

Funding Source: General Fund

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-602 was approved by unanimous vote.

BC2023-603

Medical Examiner's Office,

- a) Submitting an RFP exemption, which will result in an award recommendation to Brown Enterprise Solutions LLC in the amount not-to-exceed \$8,982.39 for a state contract purchase of (7) Adobe Commercial Creative Cloud-Teams and (8) Photoshop licenses for various departments for the period 10/1/2023 - 9/30/2024.
- b) Recommending an award on Purchase Order No. 23004277 to Brown Enterprise Solutions LLC in the amount not-to-exceed \$8,982.39 for a state contract purchase of (7) Adobe Commercial Creative Cloud-Teams and (8) Photoshop licenses for various departments for the period 10/1/2023 - 9/30/2024.

Funding Source: General Fund

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-603 was approved by unanimous vote.

BC2023-604

Department of Health and Human Services/Division of Children and Family Services, submitting an amendment to Contract No. 3152 with Family First Childcare Center dba Family First Village for planning and coordinating structured age-appropriate activities, supportive services for children and their families, and transportation services for children at the Jane Edna Hunting Building awaiting placement for the period 1/1/2023 – 12/31/2023 to extend the time period to 6/30/2024, to change the terms and modify hourly service rates effective 8/1/2023; no additional funds required.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services, presented. Dale Miller asked how it is possible the rate increased substantially and a time extension, but no additional funds are being requested; asked when we expect the Child Wellness Campus to be operational; asked what the capacity at the wellness campus is; asked whether it is a residential facility or only for daytime services. Meredith Turner asked how many children Family First Childcare Center servicing for us is; commented she had an opportunity to visit with Directors David Merriman, Michael Dever and Levine Ross and was

quite pleased with the progress; she posted about the center publicly on her social media and everybody, all the Social Workers sounded in on how excited they are that this administration is following through on the plan that was obviously started under the last administration but they are nonetheless happy to see that there's some progress so she just wanted to mention that. Michael Chambers motioned to approve the item; Meredith Turner seconded. Item BC2023-604 was approved by unanimous vote.

C. – Exemptions

BC2023-605

Medical Examiner's Office, requesting an alternative procurement process, which will result in award recommendations to various providers in the amount not-to-exceed \$9,495.00 for the purchase of meals for participants of the Medicolegal Death Investigation training program for the period 10/3/2023 – 11/17/2023.

- a) Daves Supermarket in the amount not-to-exceed \$1,500.00.
- b) Gordon Food Service dba GFS in the amount not-to-exceed \$1,200.00.
- c) Italian Cravings DBA Italian Creations in the amount not-to-exceed \$5,275.00.
- d) Nates Deli in the amount not-to-exceed \$820.00.
- e) Presti's Bakery in the amount not-to-exceed \$700.00.

Funding Source: General Fund - 100 Percent reimbursement back by the participants

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2023-605 was approved by unanimous vote.

D. – Consent Agenda

There were no questions or comments on the Consent Agenda items. Dale Miller motioned to approve Consent Agenda Item No. BC2023-606 through BC2023-608; Trevor McAleer seconded. The Consent Agenda Items were approved by unanimous vote.

BC2023-606

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

Funding Source: Revenue Generating

BC2023-607

Fiscal Department, presenting proposed travel/membership requests for the week of 10/2/2023:

Dept:	Department of Health and Human Services/Division of Community Initiatives/ Family and Children First Council/Invest in Children							
Event:	National League of Cities Prenatal, Three Community of practice meeting							
Source:	National League of Cities							
Location:	New Orleans, LA							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Shawna Rohrman	10/5/2023-10/7/2023	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	National League of Cities

*Paid to host

**Staff reimbursement

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

***** The cost will be paid through National League of Cities

Flight- \$600.00

Hotel- \$324.00

Meals -\$108.00

Ground TRN-\$72.00

Purpose:

We are participating in a National League of Cities (NLC) Community of Practice (CoP), along with colleagues at the City of Cleveland, focusing on the Prenatal-to-three (PN-3) age range and on how issues of climate/environment, family economic stability, and housing/homelessness impact our youngest children. NLC is hosting this convening to give PN-3 partners the opportunity to convene with peers from across the CoP cities as well as national partners and subject matter experts, to connect with and learn from one another, and increase everyone’s capacity to impact policies that promote healthy development for infants, toddlers, and their families. All travel expenses are being paid by the National League of Cities approved by the Inspector General. The cost of the trip covered by the National League of Cities is estimated at \$1,104.

Dept:	Department of Communications							
Event:	Empowering Local Leadership							
Source:	Greater Cleveland Elected Leadership Conference							
Location:	Washington, DC							

Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
David Razum	10/19/2023-10/20/2023	\$0.00	\$50.00	\$400.00	\$0.00	\$500.00	\$950.00	General FUnd

*Paid to host

**Staff reimbursement

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

Purpose:

I will attend the Empowering Local Leadership event on October 19 and 20 in Washington D.C. The event is presented by the Greater Cleveland Partnership with special guests Congressman Dave Joyce, Congresswoman Shontel Brown, Congressman Max Miller, and Congresswoman Emilia Sykes and in partnership with the Northeast Ohio Mayors and City Managers Association and the Cuyahoga County Mayors and City Managers Association. I will represent Cuyahoga County in policy briefings and in meetings with our Congressional delegation to better connect our county with our partners in the federal government.

Dept:	Medical Examiner's Office							
Event:	29TH ANNUAL NATIONAL CODIS CONFERENCE							
Source:	Federal Bureau of Investigation							
Location:	Kansas City, MO							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Carey M. Baucher	11/13/2023-11/15/2023	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Federal Bureau of Investigation

*Paid to host

**Staff reimbursement

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

***** The cost will be paid through the Federal Bureau of Investigation

Flight \$554.78

Hotel \$458.52

Meals \$150.00

Ground Transportation \$146.20

Purpose:

FBI required training for labs using CODIS (Combined DNA Index System). Training is required of the CODIS Administrator from each lab per FBI guidelines and I am the Local CODIS Administrator for my laboratory.

Dept:	Sheriff's Department							
Event:	IACP 2023 Educational Workshops							
Source:	International Association of Chiefs of Police							
Location:	San Diego, CA							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Harold Pretel	10/12/2023-10/18/2023	\$600.00	\$420.00	\$1,811.28	\$350.00	\$955.00	\$4,136.28	Law Enforcement Trust Fund

*Paid to host

**Staff reimbursement

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

Purpose:

To travel to San Diego, CA to attend the International Association of Chiefs of Police 2023 Conference. The conference is for Sheriffs around the nation to meet and address national, state, and local issues; bringing diverse experience and best practices back to our community to enhance safety and quality of life to those they serve.

Dept:	Medical Examiner's Office							
Event:	American Board of Medicolegal Death Investigators (ABMDI Annual Advisory Council meeting)							
Source:	American Board of Medicolegal Death Investigators (ABMDI)							
Location:	San Jose, California							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Justin Wilson	10/17/2023-10/20/2023	\$0.00	\$123.00	\$510.00	\$140.00	\$541.40	\$1,314.40	CORONER LAB FUND

*Paid to host

**Staff reimbursement

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

Purpose:

Members of the Advisory Council are responsible for working with ABMDI's educational consultant to develop and maintain test specifications on two levels of national certification examinations.

BC2023-608

Department of Purchasing, presenting proposed purchases for the week of 10/2/2023:

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

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23004236	Various dive rescue personal protection equipment (PPE) for the by Geauga County Dive Rescue Team	Department of Public Safety and Justice Services	Dive Rescue International	\$11,531.31	FY2021 State Homeland Security Grant Program Fund

Items/Services Received and Invoiced but not Paid:

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23004224	Out-of-home emergency placement services for the period 8/1/2023 – 8/31/2023*	Division of Children and Family Services	Blended Family Home	\$39,525.00	66% Health and Human Services Levy Fund and 34% Title IV-E Reimbursement Fund
23004249	Out-of-home emergency placement services for the period 8/1/2023 – 8/22/2023*	Division of Children and Family Services	Rehabilitation Centers LLC dba Millcreek of Pontotoc	\$24,004.00	66% Health and Human Services Levy Fund and 34% Title IV-E Reimbursement Fund

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

V- OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Sheriff's Department, submitting an amendment to a grant agreement with Ohio Department of Rehabilitation and Correction, Division of Parole and Community Services, Bureau of Community Sanctions for the Local Incarceration Program in connection with FY2023 – 2025 Community Corrections Act Grant Program for the period 7/1/2023 – 6/30/2025 for additional funds not-to-exceed \$20,000.00.

Funding Source: Ohio Department of Rehabilitations and Corrections

Item No. 2

Department of Public Safety and Justice Services, submitting an amendment to a grant award from the U.S. Department of Justice/Office on Violence Against Women for creation of a centralized registry for protection orders in connection with the Office of Violence FY2016 Improving Criminal Justice responses to Sexual Assault Domestic Violence, Dating Violence and Stalking Grant Program for the period 10/1/2016 – 9/30/2023 to extend the time period to 9/30/2024; no additional funds required.

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

Item No. 3

Department of Public Safety and Justice Services, on behalf of the Office of the Medical Examiner submitting a grant award from the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance in the amount not-to-exceed \$396,006.00 for the FY2023 Formula DNA Capacity Enhancement for Backlog Reduction Grant Program for the period 10/1/2023 – 9/30/2025.

Funding Source: FY2023 Formula DNA Capacity Enhancement for Backlog Reduction Grant

Item No. 4

Department of Public Safety and Justice Services, on behalf of the Office of the Medical Examiner, submitting a grant award from the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance in the amount not-to-exceed \$382,398.00 for the FY2023 Competitive DNA Capacity Enhancement for Backlog Reduction Grant Program for the period 10/1/2023 – 9/30/2025.

Funding Source: FY2023 Competitive DNA Capacity Enhancement for Backlog Reduction Grant

Item No. 5

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

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
RQ 10475	Amend Contract No. 2918	Genesis Global Holding, LLC	Disposition and sale of real property located at 13231 Euclid Avenue, East Cleveland; Permanent Parcel Numbers 672-08-15, 672-08-017 to 672-08-021, 672-08-030, 672-08-046, 672-08-009 and 672-08-016; changing the closing date to 9/30/2023, effective upon contract signature of all parties	\$-0-	Department of Public Works	N/A	(Original) Revenue Generating	9/20/2023
RQ 12771 (aka RQ 11080)	Amend Master Contract – Assign Contract Nos. 3691, 3692, 3693, 3694, 3695, 3696, 3697, 3698 and 3783	Various Providers	Various maintenance, repair and operations supplies; to add Carmen’s Custom Window Treatments, Dean W. Guernsey dba Dynamic Sign/Byrne Sign Supply, Hilti, Inc., Industrial Safety Products, Inc., Refrigeration Sales Company LLC dba Refrigeration Sales Corporation, The Sherwin Williams Company, Vincent Valentino Inc. dba Cleveland Lumber Company, Winzer Franchise Company, Wadsworth and Associates, Inc. dba Wadsworth Solutions; no	\$-0-	Department of Public Works	1/1/2023 – 12/31/2024	(Original) General Fund	9/22/2023 (Executive) 9/25/2023 (Law)

			additional funds required					

**Agreements related to public convenience and welfare projects – Processed and executed
(no vote required)**

Approving Resolution	Public convenience and welfare project description	Total Estimated Project Cost	Total Actual Project Cost	Funding Source	Date of Execution
R2023-0196	Replacement of Schaaf Road Bridge No. 02.89 over West Creek in the City of Independence – Council District 6	\$2,405,600.00	N/A	N/A	9/20/2023 (Executive)

VI – PUBLIC COMMENT

There was no public comment.

VII – ADJOURNMENT

Michael Chambers motioned to adjourn; Dale Miller seconded. The motion to adjourn was unanimously approved at 11:24 am.

Item Details as Submitted by Requesting Departments

IV. Contracts and Awards

A. – Tabled Items

B. – New Items for Review

BC2023-609

Scope of Work Summary

The Department of Public Works is requesting approval of a mediation settlement for an additional \$29,400.00 to EGZ Properties, LLC. for a total of \$45,000.00.

The County constructed the Royalton Road Project, which widened Royalton Road and included improvements like sidewalks, sewers, culverts and a new waterline. To complete the Project, the County needed a fee simple taking and temporary easement from EGZ Properties, LLC. The County originally provided an offer to EGZ Properties, LLC. in the amount of \$15,600.00, which was deposited with the Court. In the original offer, the County did not compensate for the sign that was in front of the property. It was not in the fee take area and was labeled as “Do Not Disturb” in the plans.

After the completion of the project, EGZ Properties, LLC. constructed a new building on their property. The City required EGZ to move their sign because it no longer met the City’s setback requirements. The Royalton Road Project and fee simple taking caused its sign to no longer meet the City’s requirements.

Therefore, a mediation settlement was proposed to include the sign.

If approved, the additional settlement in the amount of \$29,400.00 will be deposited with the Probate Court. EGZ may then be able to withdraw the settlement amount.

The primary goal of the project is to approve the settlement.

Procurement

This is an appropriation.

Contractor and Project Information

Cuyahoga County – Probate Court

Judge Anthony J. Russo

The project is located in Council District 5

Project Status and Planning

If approved, the settlement will be paid upon approval.

Funding

50% will be paid with Road and Bridge Funds and 50% will be paid by the local municipality (North Royalton)

PREVIOUS RESOLUTIONS:

- R2016-0184: Resolution authorizing the County to acquire ROW for the Royalton Road Project
 R2017-0230: Resolution authorizing the appropriation of parcels related to the Royalton Road Project

BC2023-610

Title	Replacement Carpet for the Jane Edna Hunter Building Renovation
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23004398	Precision Industrial Services		\$388,193.40	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. Public Works is requesting authorization for a purchase order, per the above chart, for replacement carpet for the 1 st and 2nd floor of the Jane Edna Hunter Building.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input checked="" type="checkbox"/> Replacement Age of items being replaced: 15-20 years How will replaced items be disposed of? Will be discarded.
Project Goals, Outcomes or Purpose (list 3): n/a To replace the carpet in the Jane Edna Hunter Building
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Precision Industrial Services 2445 Parliament Square, Toledo, Ohio 43617	Owner, executive director, other (specify): Leslie Jennings Customer Support
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$388,193.40	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) n/a	<input checked="" type="checkbox"/> State Contract, list STS number and expiration date 800915 expires 6.30.2024 <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain.</i> n/a	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain:</i>	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. Client Support Services Funds – HS215100
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if “no” please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.

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

HISTORY (see instructions):

BC2023-611

Title	2023-Department of Public Works-Sanitary Division/Rush Trucking-RQ13364 for 2024 International Service Truck	
Department or Agency Name	Department of Public Works-Sanitary	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendme nt (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23004323 RQ13364	Rush Trucking		\$199,636.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.
The Department of Public Works is requesting approval to purchase one (1) International Service Truck for the Sanitary Division, in the amount of \$199,636.00 off the ODOT contract #023-23. This will replace older service trucks that are beyond their life cycle.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input checked="" type="checkbox"/> Replacement

Age of items being replaced: 11 years (2012)	How will replaced items be disposed of? Disposal of vehicle per County guidelines, value will be determined and placed on the gov.deals website.
Project Goals, Outcomes or Purpose (list 3):	
<ul style="list-style-type: none"> • Replace aging vehicles 	
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No	

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
Rush Trucking	Justin Lakins/Sales Representative
Vendor Council District: n/a	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	12970 Snow Rd. Parma, Ohio 44130

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. JCOP *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) / NA	<input type="checkbox"/> State Contract, list STS number and expiration date <input checked="" type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date: 023-023 09/30/2023
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> . NA	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain</i> : NA (JCOP)	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? NA	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

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

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

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	9/11/23
Date documents were requested from vendor:	8/30/23
Date of insurance approval from risk manager:	NA
Date Department of Law approved Contract:	NA
Date item was entered and released in Infor:	Pending
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	NA
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	NA

HISTORY (see instructions):

BC2023-612

Title	Public Works - Preventative Maintenance Services for generators at various county locations – Buckeye Power Sales	
Department or Agency Name	Public Works	

Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):
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Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3799	Buckeye Power Sales	10/10/2023-2/9/2024	\$49,999.00		

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>The Department of Public Works is requesting approval of a 4-month contract with Buckeye Power Sales for the maintenance and repair of County generators at various County buildings.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>Provide maintenance services to the County generators.</p> <p>Provide emergency services to the generators at various County buildings.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>	
Vendor Name and address:	Owner, executive director, other (specify):
Buckeye Power Sales 6850 Commerce Court Drive Blacklick, OH 43004	Thomas Bohls - President
Vendor Council District:	Project Council District:
<p>If applicable provide the full address or list the municipality(ies) impacted by the project.</p>	

<p>COMPETITIVE PROCUREMENT</p> <p>RQ # <i>if applicable</i></p> <p><input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ</p> <p><input checked="" type="checkbox"/> Informal</p> <p><input type="checkbox"/> Formal Closing Date: 9/13/2023</p>	<p>NON-COMPETITIVE PROCUREMENT</p> <p>Provide a short summary for not using competitive bid process.</p> <p>*See Justification for additional information.</p>
<p>The total value of the solicitation:</p>	<p><input type="checkbox"/> Exemption</p>

Number of Solicitations (sent/received) 1	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (list original procurement)
	<input type="checkbox"/> Other Procurement Method, please describe:

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

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

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

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

HISTORY (see instructions):

BC2023-613

Title	Submit & Award Contract #3822 with DS Architecture LLC for General Architectural Engineering Services RFQ 11970 for \$450,000
Department or Agency Name	Department of Public Works
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
0		DS Architecture, LLC	Execution Date- Three years after execution	\$450,000.00	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. Public Works is requesting approval of a contract with DS Architecture LLC in the amount of \$450,000.00 for the period of three years. DS Architecture LLC shall perform professional design architectural-engineering and consulting services as requested and authorized on a Task Order basis.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): The County has determined the need to engage DS Architecture LLC to perform the primary goal of General Architectural-Engineering Services for various County buildings. The General Architectural-Engineering Services contract will allow this office to continue to maximize our resources (staff and financial) to address our facilities needs for maintenance, improvements, and capital projects.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: DS Architecture, LLC 1020 Huron Road, Suite 101 Cleveland, OH 44115	Owner, executive director, other (specify): Jeffrey G Myers, Chief Executive Officer
Vendor Council District: District 7	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	Multiple locations throughout the county

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input checked="" type="checkbox"/> RFQ 11970 <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: 4/10/2023	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$450,000.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 5 bids received.	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE (Prime) SBE (15%) MBE (1%) WBE. Were goals met by awarded vendor per DEI tab sheet review? : <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain</i> : <i>Vendor was chosen via selection committee based on qualifications.</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? N/A	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

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

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

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

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

HISTORY (see instructions):

BC2023-614

Title	Office of Budget Management; Sherpa Government Solutions; Contract approval effective upon signature until 12/31/2024 for budget software reporting and assistance.
Department or Agency Name	Fiscal Department- Office of Budget Management
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3796	Sherpa Government Solutions	Effective upon sign- 12/31/2024	\$117,000.00	pending	

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

This is for a support package that will provide training and report design. This support package will assist OBM with data uploads and verification, guidance in creating complex reports, the ability to create what-if scenarios and creation of new budget forms.

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 generate new payroll reports
To obtain training for the new modules
To receive support with system issues

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

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

Vendor Name and address:	Owner, executive director, other (specify):
Sherpa Government Solutions 2990 Osceola St Denver, CO 80212	Dawn Rippentrop, COO
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. This vendor is currently on the TAC approval items. The budget system is currently in place. We need a new agreement for support and report design

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

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

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

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

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

HISTORY (see instructions):

BC2023-615

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

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23004123 JCOP	SHI International Corp		\$32,300.10	pending	

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

The Department of Information Technology plans to contract with SHI Corp, for Pro Services Plus, HSM Network USB in the amount of \$32,300.10. Pro Services Plus is used for training, documentation, and installation assistance with the Hardware Security Modules (HSMs) that will be used with the Public Key Infrastructure (Certificate Authority) e.g. County's internal encryption security configuration and environment.

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):

Pro Services Plus is used for training, documentation, and installation assistance with the Hardware Security Modules (HSMs) that will be used with the Public Key Infrastructure (Certificate Authority) e.g. County's internal encryption security configuration and environment.

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

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

Vendor Name and address: SHI International Corp	Owner, executive director, other (specify): Rob Ciarrocca
290 Davidson Avenue Somerset, New Jersey 08873	Account Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input checked="" type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date OMNIA Contract #: 2018011-02 which expires February 28, 2025.
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)

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

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

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

HISTORY (see instructions):

BC2023-616

Title	Neighborly Housing & Community Development Programs Software
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Department or Agency Name	Department of Information Technology on behalf of the Department of Housing and Community Development
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3700	Benevate, Inc. dba Neighborly Software	Execution – 12/31/2027	\$192,500.00	Pending	

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

The Cuyahoga County Department of Development is seeking a comprehensive program management computer system to manage a variety of programs and to ensure compliance with Federal, State, and Local regulatory requirements more effectively, as well as modernizing the delivery of program funding and overcome processing challenges to better meet the needs of the community. Neighborly will provide robust reporting and configurable workflows that help contribute to timely delivery of programs as well as be used to offer greater transparency into programs and funding decisions, provide tracking, reporting, auditing of programs, and reduce staff time required for data entry and processing.

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):

Replace existing legacy system(s) with a comprehensive housing and community development program/case management system, that allows for the management of various County offered programs on one platform. The proposed system will allow for grant management, case management, loan processing, construction and rehabilitation management, asset management and offer extensive reporting. An online portal or platform will allow for the collaboration for stakeholders, as well as remote inspection, and work order management via mobile devices.

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

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

Vendor Name and address: Benevate, Inc. dba Neighborly Software	Owner, executive director, other (specify): Leah Larson Account Representative
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3423 Piedmont Road Atlanta, GA 30305	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 16 /1	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (0%) DBE (0%) SBE (0%) MBE (0%) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> . N/A – NO goals set by DEI 0%	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? Only one bid was received for this RFP.	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: April 13, 2023
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: Community Development Block Grant/HOME Grant (80%), General Fund (15%), and Sustainability Projects Fund (5%).

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

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

HISTORY (see instructions):

BC2023-617

Title	Land Record Process Evaluation & Business Plan
Department or Agency Name	Department of Information Technology
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
	3823	Catalis Tax and CAMA, Inc.	Upon approval for one year	\$129,865.00		

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

Cuyahoga County is seeking a professional services contractor to review the County land records' operations and business process. The current business process includes:

- Plat and deed submission
- Conveyance standards review,
- Publication of parcels,
- Appraisal parcel connection via parcel number schema to CAMA for taxation purposes,
- Linkage to historic land records for research,
- Online portal publication for current constituent needs.

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

Project Goals, Outcomes or Purpose (list 3):

This request was a collaborative effort between the Department of Information Technology, the County Fiscal Office, The Department of Public Works and the Office of the County Executive. The goal is to use the existing County GIS infrastructure to create and maintain land records using Esri's ArcGIS Parcel Fabric as the single system of record for geometry. This geometry will have the ability to link/relate/associate with current CAMA data. The overall outcome of this plan should be to reduce error, remove redundant processes, decrease processing time, and increase consistency across county land record data sets, and increase cost savings through elimination of unnecessary software.

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

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

Vendor Name and address: Catalis Tax and CAMA, Inc.	Owner, executive director, other (specify): David Salzer
3025 Winward Plaza, Suite 200 Alpharetta, GA 30005	
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ #11873 <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. The Department completed a formal RFQ process, however due to the evaluation including an interview between the two top scoring companies, which was not

	<p>stated in the final RFQ, it was suggested by DOP to submit as an exemption contract award.</p> <p>*See Justification for additional information.</p>
The total value of the solicitation: \$129,865.00	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) 15 / 4	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (0%) DBE (10%) SBE (0%) MBE (0%) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain. In an interview with the vendor, Catalis presented a successfully completed project which best mirrors the requirements requested by the County in the RFQ.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain: RFQ process.	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (list original procurement) <input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 09/14/2023
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant FS305100 55200 Real Estate Assessment Fund	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

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

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

HISTORY (see instructions):

BC2023-618

Title	Human Resources; 2023; Agreement with MetroHealth dba Skyway for Flu Shot Clinics for County Employees for the period ending 12/31/2023 in the amount NTE \$52,500.00.
Department or Agency Name	Human Resources
Requested Action	<input type="checkbox"/> Contract <input checked="" type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3802	The MetroHealth System dba Skyway	Effective upon signature of all parties - 12/31/2023	\$52,500.00		PENDING

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. MetroHealth will provide on-site flu shot clinics for County employees this fall. This is an annual program as part of the Wellness Program.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p>

The primary goal of this project is to provide convenient vaccinations for the annual flu to County employees. This protects our employees, the family, and the public that those employees interact with.

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

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

Vendor Name and address:	Owner, executive director, other (specify):
The MetroHealth System dba Skyway 2500 MetroHealth Dr. Cleveland, OH 44109	Dr. Airica Steed, CEO
Vendor Council District:	Project Council District:
03	Countywide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

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

Is Purchase/Services technology related Yes No. If yes, complete section below:

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

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

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

HISTORY (see instructions):
Previous Flu Shot Agreement: BC2022-627 10/24/2022

BC2023-619

Title	Human Resources; 2023; Contract with The Jellyvision Lab, Inc. for Benefits Selection Software for the period 10/12/2023-10/11/2024 in the amount of \$143,941.00.	
Department or Agency Name	Human Resources	

Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):
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Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3826	The Jellyvision Lab, Inc.	10/12/2023-10/11/2024	\$143,941.00		PENDING

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>The Jellyvision Lab, Inc. (Jellyvision) will provide the County with online benefits selection software for County employees. This software will assist employees in selecting the benefits package that best meets their needs and current situation. Employees will have the ability to enter their information on a secure platform which is not saved, unless opted to by the employee. From this data, the software will provide recommendations of the County's current benefits offerings in an easy-to-understand manner to help the employees make informed decisions on their benefits selection. This is available to all employees for open enrollment as well as new employees when onboarded or employees with a qualifying life event.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <p>The primary goals are to assist employees in making informed decisions about their benefits, reduce the number of employees contacting the benefits team for assistance so they can focus on other errors or issues, and ensure the County and employees are appropriately insured.</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
The Jellyvision Lab, Inc. 848 W. Eastman St. Chicago, IL 60642	Amanda Lannert, CEO
Vendor Council District:	Project Council District:
N/A	Countywide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # 12551 <i>if applicable</i> <input type="checkbox"/> RFB <input checked="" type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$143,941.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 16 / 1 The department has acknowledged the low number of submissions and will revise the RFP prior to soliciting for 2024 onwards.	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (0) DBE (10) SBE (0) MBE (0) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain</i> . With the current RFP, there are limited vendors that can provide this software solution. Per the Benefits division, any software solution for this service is likely already made, leading to limited, if any subcontracting opportunities. It is the department's intent to revisit the RFP for 2024 onwards to identify improvements to foster competition and provide for DEI goal opportunities.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? The vendor recommended for award was the only bid received.	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: 9/29/2023
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	
Are the purchases compatible with the new ERP system? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

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

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

Provide status of project. This service will be in place for Open Enrollment at the end of October 2023.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason:	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
Previous contract approved 9/13/2021, BC2021-504

BC2023-620

Title	2023- Contract Amendment for Trauma-Informed Mentoring Services.
Department or Agency Name	Cuyahoga County Court of Comon Pleas, Juvenile Division
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period End Date	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
0	2792	RAHAB Ministries	7/1/2021 - 6/30/2021	\$93,377.52	11/2/2020	BC2020-590
A-1	2792	RAHAB Ministries	6/30/2022	\$93,377.52	9/24/2021	BC2021-563

A-2	2792	RAHAB Ministries	6/30/2023	\$93,377.52	11/4/2022	BC2022-650
A-3	2792	RAHAB Ministries	6/30/2024	\$93,377.52	Pending	pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase. Juvenile Court FY2023-2024 Seeking to extend the contract with RAHAB Ministries, Inc. to extend the time period of the contract for Trauma Informed Youth Mentoring Services from June 30, 2023, to June 30, 2024, and increase the funds in the amount of \$93,377.52 and replace the insurance requirements of the contract. This changes the not-to-exceed value of the contract from \$280,132.56 to \$373,510.08.

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

Project Goals, Outcomes or Purpose (list 3):

1. The purpose of this grant is to provide community-based options for effective programming for at-risk youth.
2. The services are comprehensive in nature to enhance the connection of at-risk youth to healthy adults and pro-social supports.
3. Mentoring youth and their families based on strengths and trauma.

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

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

Vendor Name and address: Reaching above Hopelessness and Brokenness Ministries dba RAHAB Ministries. 3480 W. Market St. Ste 3030 Fairlawn, Ohio 44333.	Owner, executive director, other (specify): Jaime Blair- Chief Executive Officer
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Vendor Council District: n/a	Project Council District: Cuyahoga County
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If applicable provide the full address or list the municipality(ies) impacted by the project.	
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COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> N/A <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) / N/A	<input type="checkbox"/> State Contract, list STS number and expiration date

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

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

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

Provide status of project. The project is an extension of an existing project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: contract amendments are late due to receipt of RECLAIM grant award, resigning all amendments to comply with executive order number EO2023-0003, and transferring information to the new Briefing memos document, and vendor delay in submitting documents.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	5/31/2023
Date documents were requested from vendor:	6/5/2023 Vendor returned all documents on 8/14/2023
Date documents were received from vendor:	7/7/2023
Date of insurance approval from risk manager:	6/14/2023

Date Department of Law approved Contract:	5/31/2023
Date item was entered and released in Infor:	8/15/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: none	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

BC2023-621

Title	DIAGNOSTIC CLINIC EVALUATION SERVICES; SOPHIA V. COOK
Department or Agency Name	Cuyahoga County Juvenile Court
Requested Action	<input checked="" type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3689	Sophia V. Cook	9/22/2023- 12/31/2024	\$50,000.00	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase.</p> <p>RFQ- AWARD- Court desires to award RFQ to Sophia V. Cook to provide Evaluation Services in the Court's Diagnostic Clinic. The vendor to provide services upon date of execution through December 31, 2024. Funding for this contract shall not exceed \$50,000.00 and a per unit rate of \$35.00/hr.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: N/A How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <ul style="list-style-type: none"> The vendor is an independent contractor who provides psychologist services in the Diagnostic Clinic by way of clinical evaluations. Psychological evaluations of those persons ordered by the Court to undergo said evaluations, psychological test, report preparation, dictations-reporting and dictation-review, and testimony.
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Sophia V. Cook, 4379 Karen Lynne Dr., Broadview Heights, Ohio 44147	Owner, executive director, other (specify): Owner
Vendor Council District:	Project Council District: Cuyahoga County
If applicable provide the full address or list the municipality(ies) impacted by the project.	Cuyahoga County

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input checked="" type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: 7/31/2023	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$200,000.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) / Sent 36/ received 1	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, <i>please explain</i> . <i>No goals assigned to RFQ</i>	<input type="checkbox"/> Sole Source <input checked="" type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? RFQ issued to 36 vendors with 1 response.	<input type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

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

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

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

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: n/a RFQ is not late contract is effective upon execution.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	
Date documents were requested from vendor:	
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	
Date item was entered and released in Infor:	
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: RFQ was manually processed due to INFOR issues.	
If late, have services begun? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

Note:
This award will be in addition to the current Waltman contract, which is the reason for both contracts overlapping. The RFQ was to search for additional vendors to assist in the diagnostic clinic, which resulted in one response and one award.

BC2023-622

Title	Prosecutor's Request for PO#23003963 EXMT for (6) SMS Magnet AXIOM License renewals
Department or Agency Name	Cuyahoga County Prosecutor
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	23003963	SHI International	11/1/2023– 10/31/2026	\$50,424.72	pending	

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.
SMS Magnet AXIOM is a robust forensic software program that is utilized by the Ohio Internet Crimes Against Children Task Force to investigate online child exploitation offenders and child sexual abuse material traders and possessors. SMS Magnet AXIOM allows investigators to extract electronic data from computers and mobile devices and analyze Internet based evidence and artifacts. The renewal of these (6) licenses is being extended for a 3-year period. The license start on November 1, 2023 and expire October 31, 2026.

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):
Renewal of software licenses and extending renewal period to 3 years

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

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

Vendor Name and address: Software House International dba SHI International 290 Davidson Ave., Somerset, NJ 08873	Owner, executive director, other (specify): Erica Flint is the Account Manager
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. Procurement process used is RFP Exemption because this is a renewal of software originally purchased in 2020 *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date

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

Is Purchase/Services technology related <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If yes, complete section below:	
<input type="checkbox"/> Check if item on IT Standard List of approved purchase.	If item is not on IT Standard List state date of TAC approval: September 14, 2023
Is the item ERP related? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, answer the below questions.	
Are services covered under the original ERP Budget or Project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain. Software is being purchased through a grant	
Are the purchases compatible with the new ERP system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. US Department of Justice federal grant #2020-AK-BX-0038 (100%)	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain): in grant budget	
Payment Schedule: <input type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

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

Date item was entered and released in Infor:	9-15-2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):
Original item #BC2020-17 approved January 6, 2020 1 st renewal item #BC2021-639, 2 nd renewal item #BC2022-612

BC2023-623

Title	Joseph's Home; 2023 Amendment 2; Temporary Housing for Medically Fragile Homeless Men
Department or Agency Name	Office of Homeless Services
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	1997	Joseph's Home	7/1/21 – 6/30/22	\$267,547.00	11/29/21	BC2021-693
A1	1997	Joseph's Home	7/1/22 – 6/30/23	\$267,547.00	11/21/22	BC2022-718
A2	1997	Joseph's Home	7/1/23 – 6/30/24	\$267,547.00	pending	

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>Requesting approval of an amendment as indicated in the chart above.</p> <p>Joseph's Home offers an eleven-bed facility with private rooms, ongoing medical supervision, medication management, nutritious home-cooked meals, and coordination with local healthcare providers. Residents also receive intensive case management that includes the development of permanent housing plans, benefits review, transportation to and from any needed medical or housing appointments, and supportive programming that identifies community resources and supports.</p> <p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p>

Age of items being replaced:	How will replaced items be disposed of?	N/A
Project Goals, Outcomes or Purpose (list 3):		
<ul style="list-style-type: none"> • Provide basic, temporary housing and safety net services for medically fragile homeless men, in accordance with all continuum of care emergency shelter standards; • Provide intensive case management to address barriers to housing stability; • Link shelter guests with permanent housing upon discharge 		
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No N/A		

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address: Joseph's Home 2412 Community College Avenue Cleveland, OH 44115	Owner, executive director, other (specify): Beth Graham, executive director
Vendor Council District: 7	Project Council District: County-wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	N/A

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. Provider was awarded funds through an RFP with the City of Cleveland for the same service. OHS used this proposal and award as the basis for a contract, with BOC approval. *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process

How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) Alternative procurement- BC2021-149, approved 3/29/21
	<input type="checkbox"/> Other Procurement Method, please describe:

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

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

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Delays in receiving budget and certificate of insurance from provider	
Timeline: Project/Procurement Start Date (date your team started working on this item):	5/12/23
Date documents were requested from vendor:	5/12/23, 5/23/23, 6/12/23, 6/22/23, 6/30/23, 7/14/23, 7/28/23, 8/9/23, 8/24/23, 9/11
Date of insurance approval from risk manager:	9/11
Date Department of Law approved Contract:	9/12
Date item was entered and released in Infor:	9/18
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: N/A	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) Provider has continued services as described in the amendment that ended 6/30/23. The provider was made aware that payment for services after this date will be contingent on execution of the pending amendment.	
Have payments been made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): N/A – See table on page 1

C. - Consent Agenda

BC2023-624

Department of Information Technology, recommending to declare excess County computers and IT Equipment as surplus County-owned property, no longer needed for public use; requesting authority to sell surplus property to Info@Ret3.org. for a fee in the amount of \$1.00 in accordance with EA02012-0001.

Funding Source: Revenue Generating

Agency: Department of IT

Sale of property to:

Info@Ret3.org

1814 E. 40th Street

Cleveland, Ohio 44103

Kenny Kovach-Director

IT Equipment To Be Returned - 2nd Floor Courthouse Square

ISC TAG #	Model	Type	ISC TAG #	Model	Type
23600	HP Scanjet	Scanner	72316	Lexmark E462dtn	Printer
24031	Compaq Proliant 6	0 Server	72317	Lexmark E462dtn	Printer
24201	Compaq Deskpro	Desktop	72318	HP 6005 Pro	Desktop
24212	Compaq Deskpro	Desktop	72320	HP 6005 Pro	Desktop
35471	Compaq Deskpro	Desktop	72323	HP 6005 Pro	Desktop
41048	HP P9621D	Monitor	72324	HP 6005 Pro	Desktop
43950	Dell 1703	Monitor	72423	HP 6005 Pro	Desktop
43953	Dell 1703	Monitor	72424	HP 6005 Pro	Desktop
43954	Dell 1703	Monitor	72425	HP 6005 Pro	Desktop
44375	HP 1702	Monitor	72426	HP 6005 Pro	Desktop
44408	Dell GX270	Desktop	72427	HP LE1901	Monitor
44414	Dell GX270	Desktop	72429	HP LE1901W	Monitor
44416	Dell GX270	Desktop	72430	HP LE1901W	Monitor
44417	Dell GX270	Desktop	72431	HP LE1901W	Monitor
46482	HP ML350	Server	72432	Toshiba	Laptop
46492	HP 7550	Desktop	72433	Toshiba Satellite L450	Laptop
46644	Gateway E4100	Desktop	72434	Toshiba L455	Laptop
47742	HP 1702	Monitor	72435	Toshiba L455	Laptop
50301	Dell m783s	Monitor	72461	HP C3525	Printer
52358	Toshiba Tecra	Laptop	75894	HP 6560	Laptop
52362	HP 2430tn	Printer	75895	HP 6560	Laptop
52394	HP Color LJ 3500	Printer	75901	HP 6560	Laptop
52408	Gateway 700g	Monitor	75902	HP 6560	Laptop
52410	Gateway 700g	Monitor	75907	HP 6560	Laptop
52413	Gateway 700G	Monitor	75912	HP 6560	Laptop
52414	Gateway 700g	Monitor	75913	HP 6560	Laptop
52420	Gateway 700g	Monitor	75914	HP 6560	Laptop
52421	Gateway 700g	Monitor	75916	HP 6560	Laptop
52424	Gateway 700g	Monitor	75919	HP 6560	Laptop
52452	Gateway E4300	Desktop	75922	HP 6560	Laptop
52463	Gateway E4300	Desktop	75924	HP 6560	Laptop
52715	Cisco 7941	Phone	75926	HP 6560	Laptop
52763	Cisco 7941	Phone	75928	HP 6560	Laptop
55266	Dell	Monitor	75932	HP 6560	Laptop
55268	Dell 1707	Monitor	75934	HP 6560	Laptop
55278	Dell 1707	Monitor	75936	HP 6560	Laptop
55279	Dell 1707	Monitor	75937	HP 6560	Laptop
55281	Dell 1707	Monitor	75942	HP 6560	Laptop
55284	Dell 1707	Monitor	75945	HP 6560	Laptop
55295	Dell 1707	Monitor	75949	HP 6560	Laptop
55298	Dell Poweredge	Server	78359	HP Z220	Desktop
55319	Toshiba Tecra	Laptop	78522	HP LA2206	Monitor
55322	Toshiba	Laptop	78578	HP LA2206	Monitor
55323	Toshiba Tecra	Laptop	78581	HP LA2206	Monitor
55568	Toshiba Tecra	Laptop	78583	HP LA2206X	Monitor
57224	HP LJ 1018	Printer	79030	HP 8570	Laptop
58490	Polycom	Vid Conf	79032	HP 8570	Laptop
59290	Sony CD Player	CD Player	79033	HP 8570	Laptop
60055	HP LJ 1005	Printer	79063	HP 8570	Laptop
61501	HP Scanjet	Scanner	79064	HP 8570	Laptop
66170	Polycom VSX 3000	Video Conf	79068	HP 8570	Laptop
68635	HP 6000 Pro	Desktop	79161	HP Z230	Desktop
68638	HP 6000 Pro	Desktop	79689	HP Z230	Desktop
68640	HP 6000 Pro	Desktop	79692	HP Z230	Desktop
69252	Toshiba	Laptop	79696	HP Z230	Desktop
69401	Lexmark E460dn	Printer	80651	HP Z230	Desktop
71637	HP Z230	Desktop	81587	HP Elitepad	Tablet
71668	HP 6000 Pro	Desktop	81589	HP Elitepad	Tablet
72126	HP 8100	Desktop	81595	Dock for HP Elitepa Dock	

BC2023-625

Title	2023-The Department of Public Works /Lutheran Metropolitan Ministries – Amendment to contract CM1773 to extend the contract to June 30, 2024
Department or Agency Name	
Requested Action	<input type="checkbox"/> Contract <input checked="" type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	1773	Lutheran Metropolitan Ministry	7/1/2021 – 6/30/2023	Anticipated Revenue \$0-training program	11/29/2021	BC2021-697
A-1	1773	Lutheran Metropolitan Ministry	June 30, 2024	Anticipated Revenue \$0-training program	pending	

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase. The Department of Public is Amending CM1773 with LMM for the operation of the café at the Virgil Brown Building to extend the time period to June 30, 2024.

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 amend the contract with LMM for the operation of the café at the VEB Building, providing café services for visitors and building staff.

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

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

Vendor Name and address: Lutheran Metropolitan Ministries 1641 Payne Avenue Cleveland, OH 44144	Owner, executive director, other (specify): Maria Foschia, President & CEO
Vendor Council District:	Project Council District:

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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$0	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement Revenue Generating</i>) <input type="checkbox"/> Other Procurement Method, please describe:

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

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

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: The operation of the café ceased during the Covid 19 pandemic and it was prior to the end of the contract that the vendor approached the County with stating back up services. It took an extended amount of time to produce the amendment and all its required documents before it was able to come before for approval.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	5/26/23 First made aware of interest to start back up services
Date documents were requested from vendor:	July 2023
Date of insurance approval from risk manager:	August 2023
Date Department of Law approved Contract:	August 2023
Date item was entered and released in Infor:	9/20/23
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: There were several issues with the amendment language that caused delays in obtaining it and getting it back from the vendor.	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

BC2023-626

Title	W. Ridgewood Rd. AMD #3
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Approval Date	Approval No.
O (first reading 4/26/2022)		Vandra Brothers Construction, Inc.		\$2,344,113.87	4/26/2022	R2022-0096
A-1	2375	Vandra Brothers Construction, Inc.		\$414,716.68	10/31/2022	BC2022-638

A-2	2375	Vandra Brothers Construction, Inc.		\$136,405.38	2/21/2023	BC2023-93
A-3	2375	Vandra Brothers Construction, Inc.		(\$40,210.92)	pending	
Total				\$2,855,025.01		

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase.
 Resurfacing of approximately 1.25 miles of West Ridgewood Drive from Ridge Road (SR 3) to State Road (SR 94), located in the City of Parma, Ohio. Work shall include milling of existing asphalt and replacement, along with full and partial depth pavement repairs, utility casting adjustments, ADA compliant ramps and landings, and pavement markings throughout the project length. Expected to begin 5/23/2022 and end 11/4/2023.

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): See above

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

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

Vendor Name and address:	Owner, executive director, other (specify):
Vandra Brothers Construction 24629 Broadway Ave. Oakwood Village, OH 44146	Bruce Melaragno
Vendor Council District: 6	Project Council District: 4
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.

The total value of the solicitation: \$2,487,572.22	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 8 / 5	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): () DBE (%3) SBE (%17) MBE (%10) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain.	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, please explain: <i>Low Bidder not DEI compliant recommended vendor matched the lowest bid</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? Equal	<input checked="" type="checkbox"/> Contract Amendment (<i>list original procurement</i>) <input type="checkbox"/> Other Procurement Method, please describe:

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

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. The project is funded 80% by county \$7.50 fund and 20% municipality.	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):	

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

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

HISTORY (see instructions): See chart above

BC2023-627

Title	Superior Rd. AMD #2
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue <input type="checkbox"/> Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2378	The Vallejo Company	N/A	\$2,988,925.02	May 10 th 2022	R2022-0116
A-1	2378	The Vallejo Company		-\$499,061.56	Pending	

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

This project includes the resurfacing of approximately 1.7 miles of Superior Road (CR-41) from Euclid Avenue to Lee Road in the Cities of East Cleveland and Cleveland Heights. Work tasks include the installation of new asphalt intermediate and surface courses, full and partial depth pavement repairs and curb, sidewalk and drive apron repairs as required, utility adjustments, ADA curb ramp upgrades and new pavement markings for the length of the corridor. This the first amendment for this project, there are no new items for this project. The amendment is for increasing and decreasing quantities.

The anticipated start-completion dates are May 31, 2022 and ending approximately November 4, 2022. The project is essentially complete, just finishing up final details.

For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: _____ How will replaced items be disposed of? _____	
Project Goals, Outcomes or Purpose (list 3): See above	
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No	

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)	
Vendor Name and address:	Owner, executive director, other (specify):
The Vallejo Company 4000 Brookpark Rd. Cleveland OH, 44134	Mark Adzema
Vendor Council District: 7	Project Council District: 10
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: _____	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: \$3,144,351.52	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 4 / 4	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): (%7) DBE () SBE () MBE () WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ().
Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> : <i>Low Bidder not DEI compliant recommended vendor matched the lowest bid</i>	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process

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

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

FUNDING SOURCE: i.e. General Fund, Health and Human Services Levy Funds, Community Development Block Grant (<i>No acronyms i.e. HHS Levy, CDBG, etc.</i>). Include % if more than one source. The project is funded 20% Federal, 35% OPWC Funds, 43% County \$7.50 fund, and 2% municipalities.
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

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

HISTORY (see instructions):
See chart above

BC2023-628

Scope of Work Summary

Department of Housing and Community Development is seeking approval to apply for and accept a grant from Ohio Department of Development, as well as award subrecipient funding agreements to the following entities in the stated amounts below.

Grant Application

Department of Housing and Community Development will apply to the Ohio Department of Development for the Lead Safe Ohio Program grant. The deadline to apply is October 12, 2023. The total amount applied for will be \$8,057,000. The grant funds will be used to repair the homes where young children live, repair childcare facilities, and reduce the risk of lead poisoning. The grant period will be from 12/01/2023 through 04/30/2026 (unless these dates are changed by the Ohio Department of Development).

- CHN Housing Partners - \$2,000,000
CHN's Lead Program will provide home loans, grants, and incentives countywide to help homeowners repair conditions that place young children for risk for lead poisoning.
- City of Cleveland Heights - \$492,908
The City of Cleveland Heights will repair conditions in child care facilities that place young children at risk for lead poisoning.
- Cuyahoga County Board of Health – \$4,089,092
Cuyahoga County Board of Health will supplement other funding to extend its Lead Safe program that enables eligible low and moderate-income homeowners and renters in targeted suburban areas outside the City of Cleveland to make changes in their homes to provide a lead safe environment for young children and will repair conditions in congregate shelters and childcare facilities that place young children at risk for lead poisoning.
- Mount Sinai Health Foundation - \$1,375,000
Mount Sinai Health Foundation, as fiscal agent for Enterprise Community Partners on behalf of the Lead Safe Cleveland Coalition will repair conditions in owner occupied and renter occupied residential units and child facilities to reduce and ultimately prevent childhood lead poisoning over time by proactively creating lead safe homes and childcare spaces.

Contractor and Project Information

The addresses of the vendors are:

CHN Housing Partners, 2999 Payne Ave., Suite 134, Cleveland, OH 44114.

The Chief Executive Officer and President of vendor is Kevin J. Nowak

City of Cleveland Heights, 40 Severance Circle, Cleveland Heights, OH 44118.

The Mayor of Cleveland Heights is Kahlil Seren

Cuyahoga County Board of Health, 5550 Venture Dr, Parma, OH 44130.

The CEO of vendor is Kirsten Gatt

Mount Sinai Health Foundation, 10501 Euclid Ave Second Floor, Cleveland, OH 44106.
 The President of vendor is Mitchell Balk

Granting Agency

The Ohio Department of Development, 77 South High Street, 29th Floor, Columbus, OH 43215.
 The Director of agency is Lydia Mihalik

The projects will have an impact in Cuyahoga County.

Project Status and Planning

The grant funds will be used to repair the homes where young children live, and repair childcare facilities, to reduce the risk of lead poisoning.

Funding

Funding is 100% Lead Safe Ohio Program funds

BC2023-629

Title	Department of Workforce Development 2023 Ohio Department of Job & Family Services Subgrant Agreement, Local Workforce Development System Subgrant Agreement (Revision)	
Department or Agency Name	Department of Workforce Development	
Requested Action	<input type="checkbox"/> Contract <input checked="" type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-#)	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O		Ohio Department of Job and Family Services	7/1/19-6/30/21		June 2 nd , 2019	BC2019-408
A-1			7/1/21-6/30/23		June 1 st , 2021	BC2021-264
A-2			7/1/23-6/30/25		July 10 th , 2023	BC2023-438
A-3			7/1/23 – 6/30/25			Pending

Service/Item Description (include quantity if applicable). Indicate whether New or Existing service or purchase. This Subgrant Agreement between the Ohio Department of Job and Family Service and Local Workforce Area 3 is created pursuant to the Workforce Innovation and Opportunity Act of 2014, to define the roles and responsibilities of the parties with respect to the funds allocated to the Local Workforce Area by ODJFS for the administration of workforce development activities. The agreement start-completion dates are 07/01/23-06/30/2025.

This Agreement was signed by Chris Ronayne in July, 2023 but there was a revision made that requires his signature.

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

Project Goals, Outcomes or Purpose (list 3): This Subgrant Agreement is applicable to all funds allocated to the Local Workforce Area for the operation of the local workforce development system to carry out workforce development activities.

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

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

Vendor Name and address: Ohio Department of Job and Family Services 30 East Broad Street, 32 nd Floor Columbus, OH 43215	Owner, executive director, other (specify):
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date: N/A	Provide a short summary for not using competitive bid process. *See Justification for additional information.
The total value of the solicitation: 0	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date

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

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

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

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

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

HISTORY (see instructions):

BC2023-630

(See related items for proposed travel/memberships for the week of 10/10/2023 in Section C above).

BC2023-631

(See related items for proposed purchases for the week of 10/10/2023 in Section C above).

V – OTHER BUSINESS

Item of Note (non-voted)

Item No. 1

Common Pleas Court/Corrections Planning Board TASC is requesting authority to apply for, accept and spend grant funds from Ohio Department of Mental Health and Addictions Services in the amount of \$810,006.00 for a grant that provides funding for salaries and miscellaneous expenses for Supervisors, Administrative Assistant and Assessment Specialists who perform Assessments, Case Management, Individual Counseling, Out Patient and Intensive Out Patient services to clients in the criminal justice system for the period July 1, 2023 through June 30, 2024.

The grant application was made available through the State’s online Grants Fiscal Management System (GFMS) on May 26 and is due on an unspecified date in June, 2023. The award notification will be issued upon review and award in June or July, 2023.

Funding Source: Ohio Department of Mental Health and Addiction Services (OMHAS)

History – CON 2022-86, CONS2021-78, BC2019-733 (Doc Handle 45185757); BC2020 517

Does this Grant require a match – No match required

Are vendors written into the grant - No

Scope of Work Summary

Common Pleas Court/Corrections Planning Board TASC is requesting authority to apply for, accept and spend grant funds from Ohio Department of Mental Health and Addictions Services in the amount of \$810,006.00 for a grant that provides funding for salaries and miscellaneous expenses for Supervisors,

Administrative Assistant, and Assessment Specialists who perform Assessments, Case Management Individual Counseling, Out Patient and Intensive Out Patient services to clients in the criminal justice system for the period July 1, 2023 through June 30, 2024. In addition, other support personnel – Fiscal Officer, Billing Specialist and Program Officer III – provide indirect services for the grant such as the application process, client billing and grant reporting.

Scope of Services

Under this grant, TASC will employ 8 FTE Assessment Specialists who will perform Assessments, Case Management, Individual Counseling, Intensive Out Patient and Out Patient services to clients in the criminal justice system for the period July 1, 2023 through June 30, 2024. Support services are provided by Supervisors and the Administrative Assistant and services such as the application process and reporting are provided by the TASC Fiscal Officer, Billing Specialist and Program Officer III (approximately .54 FTE).

Procurement

There is no procurement required for this grant.

Contractor and Project Information

There are no outside contractors for this project.

Project Status and Planning

The application process is in effect. The approval process begins once the application has been submitted. The notice of award will be forwarded once received. Per grantor requirement, the grant will be managed and accounted for in accordance with OMHAS directives.

Funding

\$810,006.00

Item No. 2

Scope of Work Summary

The Cuyahoga County Law Library is requesting approval to submit a grant application in the amount of \$150.00 to the Ohio Regional Association of Law Libraries (ORALL) so that ORALL will subsidize the Law Library's Reference Librarian to attend ORALL's Annual 2023 Conference in Akron from November 1-3, 2023. This is a brand-new grant, and no prior grants have been sought from this entity in a long time.

The anticipated start date is November 1, 2023, and the grant must be submitted as soon as possible.

The primary goals of the project are to:

- a) provide an educational opportunity for the Law Library's new Reference Librarian; and
- b) provide a great networking opportunity for the Law Library's new Reference Librarian.

The project is not mandated.

Procurement

The procurement method for this project is a grant pursuant to a grant application process of the Ohio Regional Association of Law Libraries. The total value of the awarded grant would be \$150.00. This is a grant process, not a bid process.

Contractor and Project Information
Ohio Regional Association of Law Libraries
c/o Stephanie Ziegler, Education Committee Chair
The Ohio State University
Michael E. Moritz College of Law
280B Drinko Hall, 55 W. 12th Ave., Columbus, OH 43210
(614) 292-9417
ziegler.149@osu.edu

The President of the grantor is Sarah Starnes, Assistant Professor, Law Library, The University of Akron
School of Law, 150 University Ave, Akron, OH 44325
sstarnes@uakron.edu • (330) 972-5291

The address or location of the project is:
Hilton Akron/Fairlawn Hotel
3180 W. Market Street
Akron, Ohio, 44333-3365

Project Status and Planning
The project is a new grant opportunity for the CLLRB.

The grant has a single phase.

This project is not on a critical action path.

The project's term has not already begun or ended.

Funding
The grant would be funded 100% by the Ohio Regional Association of Law Libraries.

The schedule of payments is a one-time payment.

The project is not an amendment to a contract, loan, lease, grant, amendment, agreement, or other document.

Items/Services Received and Invoiced but not Paid: N/A

Item No. 3

(See related list of Contracts \$0.00 - \$4,999.99 – processed and executed for the week of 10/10/2023 in Section V. above).

VI – PUBLIC COMMENT

VII – ADJOURNMENT