



**Cuyahoga County Board of Control Agenda  
Monday, January 8, 2024 - 11:00 A.M.  
County Headquarters  
2079 East Ninth Street  
4<sup>th</sup> 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 – 1/2/2024**

**III. – PUBLIC COMMENT**

**IV. – CONTRACTS AND AWARDS**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2024-32**

Department of Public Works, submitting an amendment to Contract No. 2609 with R.L. Hill Management, Inc. for the Cuyahoga County Men’s Shelter Expansion Project for additional funds in the amount not-to-exceed \$197,647.00.

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

**BC2024-33**

Department of Public Works, submitting an amendment to Contract No. 3304 with Northeast Ohio Trenching Service, Inc. for installation of 785 feet of new concrete for East 26th Street roadway between Community College Avenue and Central Avenue in the City of Cleveland for additional funds in the amount not-to-exceed \$76,326.19

Funding Source: County Motor Vehicle \$7.50 License Tax Funds

**BC2024-34**

Department of Public Works, submitting a Revenue Generating Agreement (via Contract No. 4039) with City of Lakewood in the amount not-to-exceed \$300,000.00 for storm and sanitary sewer system services for the period 1/1/2024-12/31/2024.

Funding Source: Revenue Generating

**BC2024-35**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Love Train Ministries in the amount not-to-exceed \$19,249.95 for structured, pro-social leadership programs and mentoring services for court referred males ages 11 to 18 with high risk for recidivism for the period 7/1/2023-6/30/2024.
  
- b) Recommending an award and enter into Contract No. 4043 with Love Train Ministries in the amount not-to-exceed \$19,249.95 for structured, pro-social leadership programs and mentoring services for court referred males ages 11 to 18 with high risk for recidivism for the period 7/1/2023- 6/30/2024.

Funding Source: RECLAIM grant

**BC2024-36**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Girl Scouts of Northeast Ohio in the amount not-to-exceed \$19,462.50 for educational and vocational services for females ages 12 to 17 with high risk for recidivism for the period 7/1/2023- 6/30/2024.
  
- b) Recommending an award and enter into Contract No. 4046 with Girl Scouts of Northeast Ohio in the amount not-to-exceed \$19,462.50 for educational and vocational services for females ages 12 to 17 with high risk for recidivism for the period 7/1/2023- 6/30/2024.

Funding Source: RECLAIM grant

**BC2024-37**

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, recommending an award on RQ13403 and enter into Contract No. 4038 with The Ohio State University on behalf of The Ohio State University Extension (10-1) in the amount not-to-exceed \$290,000.00 for planning, coordinator and facilitator services for the Youth Advocacy and Leadership Coalition of Cuyahoga County for the period 1/1/2024 – 12/31/2025.

Funding Source: Health and Human Services Levy Fund

**C. – Exemptions**

**BC2024-38**

Office of the Medical Examiner, recommending an alternative procurement process, which will result in an award recommendation to Promega Corporation in the amount not to exceed \$22,202.37 to procure genetic testing kits and other consumable supplies as needed for Forensic DNA Casework in connection with FY21 National Sexual Assault Kit Initiative for the period 1/1/2024-9/30/2024.

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

**BC2024-39**

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, recommending to amend BC2023-436, dated 7/1/2023, which authorized an alternative procurement process, which will result in award recommendations to various providers for implementation of the Family Centered Services and Supports Wraparound Program for the period 7/1/2023 – 6/30/2025, to change the total amount not-to-exceed from \$816,235.02 to \$837,648.00.

Funding Source: 25% Federal Child Welfare Funds and 75% State General Revenue Funds

**D. – Consent Agenda**

**BC2024-40**

Department of Public Works, submitting an amendment to a Master Contract with various providers for various vehicle repair parts, equipment and services for County fleet vehicles for the period 12/7/2021 – 12/6/2023 to extend the time period to 2/29/2024; no additional funds required.

- a) Contract No. 1889 with Applied Maintenance Supplies & Solutions, LLC.
- b) Contract No. 1890 with Car Parts Warehouse, Inc.
- c) Contract No. 1891 with Crown Cleaning Systems & Supply, Inc. dba Crown Cleaning Systems
- d) Contract No. 1892 with Jack Doheny Company
- e) Contract No. 3397 (fka Contract No. 1893) with Genuine Parts Co. dba NAPA Auto Parts
- f) Contract No. 1894 with North Coast Two-Way Radio, Inc.
- g) Contract No. 1895 with Northcoast Equipment Specialists, Inc.
- h) Contract No. 1896 with Parks Authority, LLC
- i) Contract No. 1897 with RH Auto & Truck Glass
- j) Contract No. 1898 with Rich's Towing & Service, Inc.
- k) Contract No. 1899 with Rieth's Automotive Supply Co., dba Fleetwise Truck Parts
- l) Contract No. 1900 with Rush Truck Centers of Ohio, Inc. dba Rush Truck Center, Cleveland
- m) Contract No. 1901 with The Goodyear Tire & Rubber Company
- n) Contract No. 4045 (fka Contract No. 1902) with United Towing Services, Inc.

Funding Source: 40% Maintenance Garage Funds, 35% Sanitary Operating Funds and 25% Road and Bridge Fund

**BC2024-41**

Department of Public Works, submitting an amendment to Contract No. 2367 with CATTS Construction, Inc. for rehabilitation of Wolf Road from Sutcliffe Drive to Clague Road in the City of Bay Village for a decrease in the amount of (\$238,919.35); 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: 20% Federal, 35% Ohio Public Works Commission, 43% County Motor Vehicle \$7.50 License Tax Funds, and 2% municipalities.

**BC2024-42**

Department of Public Works, submitting an amendment to Contract No. 2511 with Chagrin Valley Paving Incorporated for reconstruction of Cuyahoga County Airport South taxi lanes U and V for a decrease in the amount of (\$56,826.95); 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% Ohio Department of Transportation Aviation Grant and 20% County General Funds.

**BC2024-43**

Department of Public Works, submitting an amendment to Contract No. 3205 with Suburban Maintenance & Construction, Inc. for rehabilitation of Boston Road Bridge No. 07.45 over the East Branch of the Rocky River in the City of Broadview Heights for a decrease in the amount of (\$58,204.29); 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: County Motor Vehicle \$7.50 License Tax Funds

**BC2024-44**

Department of Information Technology, on behalf of Court of Common Pleas/Juvenile Court Division 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 December 2023 in accordance with E02012-0001.

Funding Source: Revenue Generating

**BC2024-45**

Department of Purchasing, presenting proposed purchases for the week of 1/8/2024:

**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
23005433	Concrete for various county projects*	Department of Public Works	Carr Bros. Inc.	Not-to-exceed \$49,500.00	Road and Bridge Fund

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

**V- OTHER BUSINESS**

**Item of Note (non-voted)**

**Item No. 1**

Department of Public Safety and Justice Services, submitting a grant agreement with Ohio Emergency Management Agency in the amount of \$243,674.00 for the FY2023 Emergency Management Performance Grant Program for the period 10/1/2022 – 12/31/2024.

Funding Source: This award is a 50% reimbursement grant of eligible expenses of the Office of Emergency Management. The grant award does not include any additional county match funds or, any obligations that the county contract with external service providers or vendors.

**Item No. 2**

Department of Health and Human Services/Division of Senior and Adult Services,

- a) Requesting authority to apply for grant funds from Western Reserve Area Agency on Aging in the amount of \$204,820.12 for the Older Americans Act/Senior Community Services Program in connection with the Aging and Disability Resource Network Grant Program for the period 1/1/2024 - 12/31/2024.
- b) Submitting a grant agreement with Western Reserve Area Agency on Aging in the amount of \$204,820.12 for the Older Americans Act/Senior Community Services Program in connection with the Aging and Disability Resource Network Grant Program for the period 1/1/2024 - 12/31/2024.

Funding Source: Federal Older Americans Act Title III Funds

**VI – PUBLIC COMMENT**

**VII – ADJOURNMENT**

## Minutes

Cuyahoga County Board of Control  
Tuesday, January 2, 2024 - 11:00 A.M.  
County Headquarters  
2079 East Ninth Street  
Committee Room B

### **I – CALL TO ORDER**

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

#### Attending:

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

### **II. – REVIEW MINUTES – 12/18/2023**

Michael Chambers motioned to approve the minutes from the December 18, 2023, meeting; Paul Porter 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**

##### **BC2024-01**

Department of Public Works, submitting an amendment to Contract No. 2176 with Innovation Landing LLC for lease of office space and parking spaces located at 1835/1849 Prospect Avenue, Cleveland, for use by Veterans Service Commission for the period 10/1/2009-9/30/2024 to extend the time period to 6/30/2025, to change the terms, effective 1/1/2024 and for additional funds in the amount not-to-exceed \$315,000.00.

Funding Source: General Fund

John Myers, Department of Department of Public Works, presented. Trevor McAleer asked does the lease have an extension; asked will we be able to extend the lease if there is a delay on the renovation of the new headquarters; asked for an update on the HVAC system because he heard that it is still not working and the building had to close last week; asked what is taking them so long to get it fixed; asked

do you know if it is a lack of them trying to fix it; asked if the repairs are not made is there anything in the lease that would allow us to hold back rent payments; asked why did they have to do the process of bidding out the repairs; asked what requires them to do so. Katherine A. Gallagher asked how long they had been out of the building; asked since Christmas day. Dale Miller asked is the building operable in its current condition. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-01 was approved by unanimous vote.

### **BC2024-02**

Department of Public Works, submitting an amendment to Contract No. 3108 with CATTs Construction, Inc. for resurfacing and rehabilitation of Coventry Road from Fairhill Road to Euclid Heights Boulevard, in the City of Cleveland Heights for additional funds in the amount not-to-exceed \$91,367.99.

Funding Source: \$5.00 Motor Vehicle License Tax Fund

Nichole English, Department of Public Works, presented. Dale Miller asked what law enforcement will be doing. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-02 was approved by unanimous vote.

### **BC2024-03**

Department of Public Works, recommending an award on RQ7866 and enter into Contract No. 4051 with CTL Engineering, Inc. (77-4) in the amount not-to-exceed \$150,000.00 for geotechnical services for the Central Services Campus Project on a task order basis, effective upon signatures of all parties through project completion.

Funding Source: General Fund

Nichole English, Department of Public Works, presented. Dale Miller asked about the task orders how are the charges determined for any particular task; asked how you decided between the four vendors. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-03 was approved by unanimous vote.

### **BC2024-04**

Department of Public Works, recommending an award on RQ7864 and enter into Contract No. 4052 with KS Associates, Inc. (82-2) in the amount not-to-exceed \$60,000.00 for survey services for the Central Services Campus Project on a task order basis, effective upon signatures of all parties through project completion.

Funding Source: General Fund

Nichole English, Department of Public Works, presented. Dale Miller asked are we still in the due diligence phase; asked how likely we are to complete the process prior to February 3rd and not require an extension; asked what the costs will be if we don't close; asked if the zoning hearing has been scheduled. Trevor McAleer asked can you explain in follow up to the advanced questions for this one and the last one do you know how the solicitation went to 82 vendors, when obviously there's not 82 vendors that can do the work and the last one went to 77 vendors and we only got 6 responses; commented we got to try to fix something if we know there isn't 82 that can do the work; asked if tomorrow's Zoning Board Appeals hearing is for final or preliminary approval. Michael Chambers

motioned to approve the item; Trevor McAleer seconded. Item BC2024-04 was approved by unanimous vote.

#### **BC2024-05**

Department of Information Technology,

- a) Submitting an RFP exemption, which will result in an award recommendation to Entrust, Corporation in the amount not-to-exceed \$40,301.70 for the purchase of Entrust Managed SSL Enterprise Account Certificates to provide secure transmission of data on Cuyahoga County Web Servers for the period 10/28/2023 – 10/27/2024.
- b) Recommending an award on Purchase Order No. 23004484 to Entrust, Corporation in the amount not-to-exceed \$40,301.70 for the purchase of Entrust Managed SSL Enterprise Account Certificates to provide secure transmission of data on Cuyahoga County Web Servers for the period 10/28/2023 – 10/27/2024.

Funding Source: General Fund

Dennis Sullivan, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-05 was approved by unanimous vote.

#### **BC2024-06**

Department of Information Technology, submitting an amendment to Contract No. 1181 (fka Contract No. CE1900169) with ~~SBC Global Services, Inc. dba AT&T Global Services on behalf of its Affiliates The Ohio Bell Telephone Company dba AT&T Ohio~~ **AT&T Corp.** for Measured business line services for the period 1/1/2019 – 12/31/2023, to extend the time period to 12/31/2024, to change the terms, effective upon contract signature of all parties, and for additional funds in the amount not-to-exceed \$216,000.00.

Funding Source: General Fund

Dennis Sullivan, Department of Information Technology, presented. There were no questions. Michael Chambers motioned to approve the item as amended; Dale Miller seconded. Item BC2024-06 was approved by unanimous vote as amended.

#### **BC2024-07**

Department of Information Technology, recommending an award on RQ12903 and enter into Contract No. 4029 with Interapt, LLC (25-1) in the amount not-to-exceed \$81,120.00. for a Network Engineer to augment staff with network administration, design and security in connection with the County's Wide Area and Local Area Networks, effective upon signatures of all parties for a period of one (1) year.

Funding Source: General Fund

Dennis Sullivan, Department of Information Technology, presented. Dale Miller asked have we made attempts to hire a person to perform these services. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-07 was approved by unanimous vote.



**BC2024-08**

County Executive’s Office, submitting a Grant Agreement with The Refugee Response (via Contract No. 4030) in the amount not-to-exceed \$150,000.00 to support the building of a new multipurpose farm market and farm stand facility in Ohio City to spur economic growth in Cuyahoga County effective upon contract signatures of all parties through 12/31/2026.

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

Domonique Tatum, Fiscal Department, presented and Katherine A. Gallagher, County Executive’s Office supplemented. Dale Miller asked what will the \$150,000.00 be used for, is it for actual construction costs, for design or operating costs. How was the \$150,000.00 number decided upon; asked in follow-up do we have confidence that they’re going to obtain the necessary funding to complete the project. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-08 was approved by unanimous vote.

**BC2024-09**

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 4014 (fka Contract Nos. 2975 and 1666) with Applewood Centers, Inc. for clinical case management services for the Coordinated Approach to Low-Risk Misdemeanors (CALM) Project 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 \$389,781.00.

Funding Source: Reclaim Grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-09 was approved by unanimous vote.

**BC2024-10**

Court of Common Pleas/Juvenile Court Division, submitting an amendment to Contract No. 4017 (fka Contract No. 1468 and 2967) with Applewood Centers, Inc. for Therapeutic Level IV Foster Care Respite services for Coordinated Approach to Low-Risk Misdemeanors Project for the period 6/1/2021 – 6/30/2023 to extend the time period to 6/30/2024 and for additional funds in the amount not-to-exceed \$62,458.80.

Funding Source: RECLAIM Grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Nichole English seconded. Item BC2024-10 was approved by unanimous vote.

**BC2024-11**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Serenity Health & Wellness Corporation in the amount not-to-exceed \$225,000.00 for positive youth development services for Court referred youth ages 15 to 20 with high risk for recidivism for the period 7/1/2023 – 6/30/2024.

- b) Recommending an award and enter into Contract No. 4008 with Serenity Health & Wellness Corporation in the amount not-to-exceed \$225,000.00 for positive youth development services for Court referred youth ages 15 to 20 with high risk for recidivism for the period 7/1/2023 – 6/30/2024.

Funding Source: RECLAIM grant.

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Nichole English seconded. Item BC2024-11 was approved by unanimous vote.

**BC2024-12**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Golden Ciphers in the amount not-to-exceed \$59,873.20 for positive youth development services for Court referred youth ages 12 to 18 with high risk for recidivism for the period 7/1/2023-6/30/2024.
- b) Recommending an award and enter into Contract No. 4010 with Golden Ciphers in the amount not-to-exceed \$59,873.20 for positive youth development services for Court referred youth ages 12 to 18 with high risk for recidivism for the period 7/1/2023-6/30/2024.

Funding Source: RECLAIM Grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. Dale Miller asked can you elaborate a little more on what the Restorative Justice concept is; asked can the RECLAIM Grant items be labeled the same. Trevor McAleer asked as part of the grant are you required to monitor the effectiveness of the program. The Presenter will follow up. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2024-12 was approved by unanimous vote.

**BC2024-13**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Bellefaire Jewish Children’s Bureau in the amount not-to-exceed \$250,715.00 for Co-occurring Integrated Treatment program services for youth ages 12 to 18 with co-occurring substance abuse and mental health diagnoses for the period 7/1/2023 – 6/30/2025.
- b) Recommending an award and enter into Contract No. 4019 Bellefaire Jewish Children’s Bureau in the amount not-to-exceed \$250,715.00 for Co-occurring Integrated Treatment program services for youth ages 12 to 18 with co-occurring substance abuse and mental health diagnoses for the period 7/1/2023 – 6/30/2025.

Funding Source: RECLAIM Grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2024-13 was approved by unanimous vote.

#### **BC2024-14**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Applewood Centers, Inc. in the amount not-to-exceed \$472,000.00 for Multisystemic Therapy/Multisystemic Therapy-Problem Sexual Behavior Services for adjudicated youth for the period 7/1/2023-6/30/2025.
- b) Recommending an award and enter into Contract No. 4021 with Applewood Centers, Inc. in the amount not-to-exceed \$472,000.00 for Multisystemic Therapy/Multisystemic Therapy-Problem Sexual Behavior Services for adjudicated youth for the period 7/1/2023-6/30/2025.

Funding Source: RECLAIM grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. Dale Miller asked what the difference between the Multisystemic therapy programs is. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2024-14 was approved by unanimous vote.

#### **BC2024-15**

Court of Common Pleas/Juvenile Court Division,

- a) Submitting an RFP Exemption, which will result in an award recommendation to Intelligence Over Emotions Foundation in the amount not-to-exceed \$57,099.90 for positive youth development and social-emotional programming services for Court referred males ages 11 to 18 with high risk for recidivism for the period 7/1/2023-6/30/2024.
- b) Recommending an award and enter into Contract No. 4028 with Intelligence Over Emotions Foundation in the amount not-to-exceed \$57,099.90 for positive youth development and social-emotional programming services for Court referred males ages 11 to 18 with high risk for recidivism for the period 7/1/2023-6/30/2024.

Funding Source: RECLAIM Grant

Sharon Allen, Court of Common Pleas/Juvenile Court Division, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-15 was approved by unanimous vote.

#### **BC2024-16**

Medical Examiner's Office, submitting an amendment to Contract No. 1560 (formerly Contract No. **500 and** CE1900351) with Allstar Laundry Services, Inc. for laundry services for the period 12/1/2019-12/31/2023 to extend the time period to 6/30/2024, to change the terms, effective upon contract signatures of all parties and for additional funds in the amount not-to-exceed \$11,337.50.

Funding Source: General Fund

Hugh Shannon, Medical Examiner's Office, presented. There were no questions. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2024-16 was approved by unanimous vote.

**BC2024-17**

Department of Public Safety and Justice Services on behalf of Medical Examiner's Office, submitting an amendment to Contract No. 4020 (fka Contract No. 1144 and CE1800308) with JusticeTrax, Inc. for Laboratory Information Management System software licenses for the period 10/15/2018 - 10/14/2024 to extend the time period to 12/31/2024, to expand the scope of services to include the purchase of a (50) user licenses for Consumables Inventory Management System (CIMS), and (7) Laboratory Information Management System named user licenses, and custom development, effective upon contract signatures of all parties and for additional funds in the amount not-to-exceed \$63,868.63.

Funding Source: 65% American Rescue Plan Act Crime Lab Backlog Grant; 35% General Fund with 30% reimbursement by the Center for Disease Control Overdose Data to Action Grant (OD2A)

Hugh Shannon, Medical Examiner's Office, presented. Dale Miller asked if the 30% reimbursement, just for the General Fund portion. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-17 was approved by unanimous vote.

**BC2024-18**

Department of Public Safety and Justice Services,

- a) Submitting an RFP exemption, which will result in an award recommendation to Mental Health Services for Homeless Persons, Inc. dba Frontline Services in the amount not-to-exceed \$10,000.00 for evidence-based, trauma-informed treatment of child victims and witnesses of violence in connection with the Defending Childhood Initiative Project for the period 10/1/2023-9/30/2024.
- b) Recommending an award and enter into Contract No. 3924 with Mental Health Services for Homeless Persons, Inc. dba Frontline Service in the amount not-to-exceed \$10,000.00 for evidence-based, trauma-informed treatment of child victims and witnesses of violence in connection with the Defending Childhood Initiative Project for the period 10/1/2023-9/30/2024.

Funding Source: 100% by the Ohio Attorney General Victim of Crime Act VOCA Grant Fund

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. There were no questions. Michael Chambers motioned to approve the item; Nichole English seconded. Item BC2024-18 was approved by unanimous vote.

**BC2024-19**

Department of Public Safety and Justice Services,

- a) Submitting an RFP exemption, which will result in an award recommendation to Mental Health Services for Homeless Persons, Inc. dba Frontline Service in the amount not-to-exceed \$226,151.00 for Defending Childhood Central Intake and Assessment services in connection with the FY2023 Victims of Crime Act Grant for the period 10/1/2023 – 9/30/2024.
- b) Recommending an award and enter into Contract No. 3925 with Mental Health Services for Homeless Persons, Inc. dba Frontline Service in the amount not-to-exceed \$226,151.00 for Defending Childhood Central Intake and Assessment services in connection with the FY2023 Victims of Crime Act Grant for the period 10/1/2023 – 9/30/2024.

Funding Source: 100% by the Ohio Attorney General Victim of Crime Act VOCA Grant Fund

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. Trevor McAleer asked was the provider written in the grant, like the other ones. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2024-19 was approved by unanimous vote.

**BC2024-20**

Department of Public Safety and Justice Services,

- a) Submitting an RFP exemption, which will result in an award recommendation to Wingspan Care Group in the amount not-to-exceed \$10,000.00 for evidence-based, trauma-informed treatment services for child victims and witnesses of violence in connection with the Defending Childhood Initiative Project for the period 10/1/2023 – 9/30/2024.
- b) Recommending an award and enter into Contract No. 3927 with Wingspan Care Group in the amount not-to-exceed \$10,000.00 for evidence-based, trauma-informed treatment services for child victims and witnesses of violence in connection with the Defending Childhood Initiative Project for the period 10/1/2023 – 9/30/2024.

Funding Source: 100% by the Ohio Attorney General Victim of Crime Act (VOCA) Grant Fund

Mary Beth Vaughn, Department of Public Safety and Justice Services, presented. Dale Miller asked whether the VOCA funding is still declining or has it stabilized or is it now back to increasing. Michael Chambers motioned to approve the item; Dale Miller seconded. Item BC2024-20 was approved by unanimous vote.

**BC2024-21**

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

- a) Submitting an RFP Exemption, which will result in an award recommendation to A Place 4 Me Collaborative in the amount not-to-exceed \$113,935.00 for rental assistance and supportive services in support of COVID Recovery to youth at risk of homelessness for the period 1/1/2024-12/31/2024.
- b) Recommending an award and enter into Contract No. 3887 with A Place 4 Me Collaborative in the amount not-to-exceed \$113,935.00 for rental assistance and supportive services in support of COVID Recovery to youth at risk of homelessness for the period 1/1/2024-12/31/2024.

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

Marcos Cortes, Department of Health and Human Services, presented. Trevor McAleer asked what the maximum dollar amount an individual can receive for rent; asked for the items you mentioned is per individual or how does the funding work. Levine Ross asked the presenter to find out how many youths are being served in the program. The Presenter will follow up. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-21 was approved by unanimous vote.

**BC2024-22**

Department of Health and Human Services/Community Initiatives Division/Family and Children First Council, recommending an award on RQ13207 and enter into a Master Contract with various providers (26-2) in the amount not-to-exceed \$164,000.00 for the Teen Pregnancy Prevention Program for the period 1/1/2024-12/31/2025.

- a) Contract No. 3942 with Planned Parenthood of Greater Ohio in the anticipated amount of \$110,000.00.
- b) Contract No. 3944 with Beech Brook in the anticipated amount of \$54,000.00.

Funding Source: Health and Human Services Levy Fund

Kathleen Stewart, Family and Children First Council, presented. Trevor McAleer asked is the program working; asked have you seen a decrease in the number of teen pregnancies; asked do you have any numbers from 10 years ago to today. The Presenter will follow up. Michael Chambers motioned to approve the item; Paul Porter seconded. Item BC2024-22 was approved by unanimous vote.

**BC2024-23**

Department of Health and Human Services/Community Initiatives Division/Office of Early Childhood, recommending an award and enter into Agreement No. 3723 with Cuyahoga County District Board of Health in the amount not-to-exceed \$240,000.00 for child fatality review services for the period 1/1/2024 – 12/31/2025.

Funding Source: Health and Human Services Levy Fund

Marcos Cortes, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-23 was approved by unanimous vote.

**C. – Exemptions**

**BC2024-24**

Department of Public Works,

- a) Submitting an RFP exemption, which will result in an award recommendation to Home Depot U.S.A, Inc. in the total amount not-to-exceed \$49,500.00 for routine equipment and material purchases for the period 1/1/2024 – 12/31/2024 for various divisions:
  - 1) Facilities Division in the amount not-to-exceed \$19,250.00
  - 2) Road and Bridge Division in the amount not-to-exceed \$2,000.00
  - 3) Road and Bridge – Fleet Division in the amount not-to-exceed \$2,500.00
  - 4) Sanitary Division in the amount not-to-exceed \$21,750.00
  - 5) Animal Shelter in the amount not-to-exceed \$4,000.00
- b) Recommending an award to Home Depot U.S.A., Inc. in the total amount not-to-exceed \$49,500.00 for routine equipment and material purchases for various divisions, as listed above.

Funding Source: 39% General Fund, 9% Road and Bridge Fund, 44% Sanitary Sewer Fund, and 8% Dog and Kennel Fund

Thomas Pavich, Department of Public Works, presented. There were no questions. Michael Chambers motioned to approve the item; Trevor McAleer seconded. Item BC2024-24 was approved by unanimous vote.

**BC2024-25**

Department of Health and Human Services/Cuyahoga Job and Family Service, recommending an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to Treasurer, State of Ohio in the total amount not-to-exceed \$3,487,984.93 for State-mandated services rendered to children with medical handicaps for the period 1/1/2024-12/31/2024, in accordance with Ohio Revised Code Section 3701.023.

Funding Source: Health and Human Services Levy Fund

Remon Kaldas, Department of Health and Human Services, presented. There were no questions. Michael Chambers motioned to approve the item; Levine Ross seconded. Item BC2024-25 was approved by unanimous vote.

**D. – Consent Agenda**

There were no questions or comments on the Consent Agenda items. Michael Chambers motioned to approve Consent Agenda Item No. BC2024-26 through BC2024-31; Dale Miller seconded. The Consent Agenda Items were approved by unanimous vote.

**BC2024-26**

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 (\$50,000.00); 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: 20% Federal, 35% Ohio Public Works Commission Funds, 43% County Motor Vehicle \$7.50 License Tax fund, and 2% municipalities

**BC2024-27**

Department of Public Safety and Justice Services, submitting an amendment to Contract No. 1389 with Cleveland Rape Crisis Center for development and implementation of a Protection Order Registry in connection with FY2016 Improving Criminal Justice Responses to Sexual Assault, Domestic Violence, Dating Violence and Stalking Program for the period 6/1/2019 – 9/30/2023 to extend the time period to 9/30/2024; no additional funds required.

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

**BC2024-28**

Department of Public Safety and Justice Services, submitting an amendment to Contract No. 1390 with The Legal Aid Society of Cleveland for development and implementation of a Protection Order Registry in connection with FY2016 Improving Criminal Justice Responses to Sexual Assault, Domestic Violence, Dating Violence and Stalking Program for the period 6/1/2019 – 9/30/2023 to extend the time period to 9/30/2024; no additional funds required.

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

**BC2024-29**

Department of Public Safety and Justice Services, submitting an amendment to Contract No. 1453 with Journey Center for Safety and Healing dba Domestic Violence Child Advocacy Center for the coordination of training of suburban police departments on the use of Danger Assessment for Law Enforcement in connection with FY2020 Improving Criminal Justice Responses to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Grant Program for the period 7/8/2021 – 9/30/2023 to extend the time period to 9/30/2025; no additional funds required.

Funding Source: FY2020 U.S. Department of Justice, Office on Violence Against Women Grant

**BC2024-30**

Fiscal Department, presenting proposed travel/membership requests for the week of 1/2/2024.

Dept:	County Executive’s Office							
Event:	USDOT Infrastructure Investment							
Source:	USDOT							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
Christopher Ronayne	1/8/2024-1/8/2024	\$0.00	\$50.00	\$0.00	\$40.00	\$500.00	\$590.00	General Fund

\*Paid to host

\*\*Staff reimbursement

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

Purpose:

Executive Ronayne and Deputy Chief of Staff, David Razum will travel to Washington DC to attend meetings related to federal government infrastructure investment in Cuyahoga County with USDOT.



Dept:	Department of Communications							
Event:	USDOT Infrastructure Investment							
Source:	USDOT							
Location:	Washington, DC							
Staff	Travel Dates	Registration *	Meals **	Lodging **	Ground TRN/ Mileage **	Air ***	Total	Funding Source
David Razum	1/8/2024-1/8/2024	\$0.00	\$50.00	\$0.00	\$40.00	\$500.00	\$590.00	General Fund

\*Paid to host

\*\*Staff reimbursement

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

Purpose:

Executive Ronayne and Deputy Chief of Staff, David Razum will travel to Washington DC to attend meetings related to federal government infrastructure investment in Cuyahoga County with USDOT.

**BC2024-31**

Department of Purchasing, presenting proposed purchases for the week of 1/2/2024.

**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
23005339	Lift equipment rentals on an as-needed basis for various County buildings	Department of Public Works	Sunbelt Rentals, Inc	Not-to-exceed \$49,999.00	General Fund
23005368	(6) Air release valves	Department of Public Works	The Craun Liebing Company	\$5,014.20	Sanitary Fund

**Items/Services Received and Invoiced but not Paid:**

Purchase Order Number	Description	Department	Vendor Name	Total	Funding Source
23005317	Factory Authorized – Vactor repairs on Vehicle S-229*	Department of Public Works	Jack Doheny Company	\$21,569.27	Sanitary Fund
23005322	Factory Authorized – Repairs at the Creekside Pump Station*	Department of Public Works	The Craun Liebing Company	\$14,720.00	Sanitary Fund

23005187	Out-of-home emergency placement services for the period 8/15/2023 – 8/31/2023, 9/1/2023 – 9/30/2023 and 10/1/2023 – 10/31/2023*	Division of Children and Family Services	Harbor Point Behavioral Health Center	\$67,704.00	66% Health and Human Services Levy and 34% Title IV-E reimbursement
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\*Approval No. BC2023-452, dated 7/17/2023, which amended BC2022-735 dated 11/29/2022, which approved an alternative procurement process and exemption from aggregation on various purchase orders, which will result in various award recommendations to various Factory Authorized Dealers for vehicle and equipment repairs, parts and services for the period 11/29/2022 – 12/31/2024 by changing the total amount not-to-exceed from \$475,000.00 to \$1,475,000.00.

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

## V- OTHER BUSINESS

### Item of Note (non-voted)

#### **Item No. 1**

Court of Common Pleas/Domestic Relations Court Division,

- a) Requesting authority to apply for grant funds from Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County in the amount of \$90,000.00 for the Families First Program in connection with CY2024 Behavioral Health, Prevention, Treatment, and Recovery Support Services Program for the period 1/1/2024-12/31/2024.
- b) Submitting a grant award from Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County in the amount of \$90,000.00 for the Families First Program in connection with CY2024 Behavioral Health, Prevention, Treatment, and Recovery Support Services Program for the period 1/1/2024-12/31/2024.

Funding Source: Alcohol, Drug Addiction and Mental Health Services Board

#### **Item No. 2**

Department of Public Safety and Justice Services,

- a) Submitting an amendment to a grant award from Camp HOPE America for the Camp HOPE America Readiness Grant Program for the period 3/1/2018 – 12/31/2023 to extend the time period to 12/31/2024, no additional funds.

- b) Submitting a Memorandum of Understanding with Alliance for HOPE International to outline the collaborative roles and responsibilities on the creation and development of Camp HOPE America – Ohio Program for the period 1/1/2024 – 12/31/2024.

Funding Source: Camp HOPE America and Verizon Foundation

**Item No. 3**

Department of Public Safety and Justice Services,

- a) Requesting authority to apply for grant funds from The Cleveland Browns in the amount of \$7,500.00 for the Camp HOPE Pathways programming in connection with the 2023 Healthy Relationships Microgrant – Browns Give Back program for the period 12/1/2023 – 12/31/2024.
- b) Submitting a grant award from The Cleveland Browns in the amount of \$7,500.00 for the Camp HOPE Pathways programming in connection with the 2023 Healthy Relationships Microgrant – Browns Give Back program for the period 12/1/2023 – 12/31/2024.

Funding Source: The Cleveland Browns

**Item No. 4**

Department of Health and Human Services/Division of Senior and Adult Services,

- a) Requesting authority to apply for grant funds from Western Reserve Area Agency on Aging in the amount of \$20,623.46 for the Medicare Improvements for Patients and Providers Act (MIPPA) Medicare Savings Programs, Low-income Subsidy and Prescription Drug Assistance through the Aging Network, State Health Insurance Program and Aging and Disability Resource Centers for the period 9/1/2023 – 8/31/2024.
- b) Submitting a grant agreement with Western Reserve Area Agency on Aging in the amount of \$20,623.46 for the Medicare Improvements for Patients and Providers Act (MIPPA) Medicare Savings Programs, Low-income Subsidy and Prescription Drug Assistance through the Aging Network, State Health Insurance Program and Aging and Disability Resource Centers for the period 9/1/2023 – 8/31/2024.

Funding Source: Western Reserve Area Agency on Aging through the Federal Medicare Improvements for Patients and Providers Act (MIPPA)

**Item No. 5**

Department of Health and Human Services/Division of Senior and Adult Services, submitting an amendment to a grant agreement with Cuyahoga County District Board of Health for Home and Community-Based Health Services and Home Health Care in connection with the FY2023 Ryan White HIV/AIDS Treatment Extension Act Part A Program and Minority AIDS Initiative for the period 3/1/2023 – 2/29/2024, for additional funds in the amount of \$10,000.00.

Funding Source: Cuyahoga County Board of Health through the Health Resources and Services Administration

**Item No. 6**

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

RQ No.	Contract Number	Vendor	Service Description	Amount	Department	Date(s) of Service	Funding Source	Date of Execution
No RQ	Amend Contract No. 2234	Nover Englestein & Associates, Inc.	Support and maintenance on the WinWam Software System, <b>expand the scope of services, effective upon contract signature of all parties</b>	\$3,645.00	Fiscal Office/ Department of Consumer Affairs	2/1/2022 – 1/31/2025	(Original) General Fund	12/18/2023 (Executive) 12/19/2023 (Law)
No RQ	Amend Agreement No. 3250	City of Cleveland/ Department of Law	Prosecution services for domestic violence and sexual assault cases in connection with the FY2022 STOP Violence Against Women Act Block Grant Program	\$-0-	Department of Public Safety and Justice Services	1/1/2023 – 12/31/2023 <b>to extend the time period to 2/15/2024</b>	(Original) FY2022 STOP Violence Against Women Act Block Grant Fund	12/18/2023 (Executive) 12/19/2023 (Law)
RQ 4593	Amend Contract No. 2436 (fka Contract No. 2298)	YMCA of Greater Cleveland	Renovations and the purchase of furnishings for an interim housing facility that provides substance use disorder treatment and mental health counseling services in connection with funding for one-time capital and programmatic costs to support delivery of services to persons with serious mental illness, serious mental illness with co-occurring substance abuse or substance abuse/addiction	\$-0-	Department of Public Safety and Justice Services	1/1/2022 – 6/30/2024 <b>to extend the time period to 8/31/2025</b>	(Original) Opioid Settlement Fund	12/20/2023 (Executive) 12/19/2023 (Law)

RQ 8737	Amend Contract No. 2875	Stella Maris, Inc.	Building rehabilitation in connection with alternative housing and related services and support for COVID Recovery	\$-0-	Community Initiatives Division/ Office of Homeless Services	1/1/2023 – 12/31/2023 <b>to extend the time period to 12/31/2024</b>	(Original) General Fund – American Rescue Plan Act Revenue Replacement (ARPA)/ Provision of Government Services	12/20/2023 (Executive) 12/21/2023 (Law)
No RQ	Amend Contract No. 2875	Sisters of Charity Foundation of Cleveland	Fiscal agent services and oversight of the implementation and operation of a Youth Drop-in Center for homeless young adults, ages 16 – 24	\$-0-	Department of Children and Family Services	11/29/2021 – 12/31/2023 <b>to extend the time period to 12/31/2025</b>	(Original) Health and Human Services Levy Fund	12/22/2023

**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 11:53 a.m.

**Item Details as Submitted by Requesting Departments**

**IV. Contracts and Awards**

**A. – Tabled Items**

**B. – New Items for Review**

**BC2024-32**

Title	Men’s Shelter Expansion Amendment 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 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.
	2609	R.L. Hill Management , Inc	N/A	\$3,974,592.00	October 3, 2022	R2022-0300
Amendment #1	2609	R.L. Hill Management , Inc	N/A	\$270,359.00	October 16,2023	BC2023-633
Amendment #2	2609	R.L. Hill Management , Inc		\$197,647.00		

<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. Expanding the Men’s Shelter into the adjacent building to address the needs of the homeless population in the community.</p>
<p>For purchases of furniture, computers, vehicles: <input checked="" 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): See Above</p>
<p>If a County Council item, are you requesting passage of the item without 3 readings. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify)</p>
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Vendor Name and address:	Owner, executive director, other (specify):
R., L. Hill Management, Inc. 31835 Aurora Road Solon, Ohio 44139	Raphael Hill
Vendor Council District: (6)	Project Council District: (7)
If applicable provide the full address or list the municipality(ies) impacted by the project.	Greater Cleveland Area

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: \$3,974,592.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 2 / 2	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( 6% ) SBE (18% ) MBE ( 6% ) 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 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?  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 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. **ARPA FUNDING**

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

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

Provide status of project.

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

Reason:

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

Date documents were requested from vendor:

Date of insurance approval from risk manager:

Date Department of Law approved Contract:

Date item was entered and released in Infor:

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: None

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

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

HISTORY (see instructions):

**BC2024-33**

Title	East 26 <sup>th</sup> . New Roadway Construction AMD #1		
Department or Agency Name	Public Works		
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):		

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
O	3304	Northeast Ohio	05/08/2023-11/17/2023	\$2,163,750.00	May 23 <sup>th</sup> 2023	R2023-0138



		Trenching Svcs.				
A-1	3304	Northeast Ohio Trenching Svcs.		\$76,326.19	PENDING	

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
 The project consists of 785 feet of new concrete roadway between Community College Avenue and Central Avenue to be named East26th street. Project work also includes construction of new sidewalks, ADA compliant curb ramps, storm sewer, water main, sanitary sewer, streetlighting, electric power ducts and other associated infrastructure to support the adjacent development. Anticipated dates are 5/8/2023-11/17/2023.

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):
Northeast Ohio Trenching Svcs. Inc. 17900 Miles Road Warrensville Heights, OH 44128	George Gorup
Vendor Council District: 9	Project Council District: 7
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <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: \$2,302,057.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 3 / 3  There were 3 bids pulled from OPD, 3 bids submitted for review, 2 bids approved	<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 ( 20% ) SBE ( 19% ) MBE ( 5% ) 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please explain: For this project the engineer's estimate was \$2,302,057.00, and this was under 6.01%.	<input type="checkbox"/> Government Purchase <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  We accepted the lowest and best bid	<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. 100% County Motor Vehicle \$7.50 License Tax 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 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

**BC2024-34**

Title	2024 City of Lakewood Sewer Maintenance Agreement, \$300,000, direct bill, revenue generating
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	4039	City of Lakewood	1/1/2024-12/31/2024	\$300,000	TBD	TBD

Service/Item Description (include quantity if applicable). Indicate whether <input checked="" type="checkbox"/> New <u>or</u> <input type="checkbox"/> Existing service or purchase. This Agreement is for services provided by the County Sanitary Engineering Division for sanitary and storm cleaning, maintenance, and repairs in the City of Lakewood in the revenue generating amount of up to \$300,000 in 2024.
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 will be providing sanitary and storm sewer cleaning, televising, maintenance, and repairs as requested to the City of Lakewood. This is a revenue generating, direct bill agreement.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input type="checkbox"/> No NA

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

City of Lakewood 12650 Detroit Road Lakewood, OH 44107	Chris Gordon Public Works Director
Vendor Council District: 2	Project Council District: 2
If applicable provide the full address or list the municipality(ies) impacted by the project.	All work will be in Lakewood

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

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.  
 Revenue Generating – For deposit only- PW715100-52000-SWDMSC17

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

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

Provide status of project.

New Service or purchase  Recurring service or purchase

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

Reason: This is a revenue generating agreement with a new City and it took some time to work through the details on the agreement with the City.

Timeline: Project/Procurement Start Date (date your team started working on this item):	11/9/2023
Date documents were requested from vendor:	11/20/2023
Date of insurance approval from risk manager:	11/20/2023
Date Department of Law approved Contract:	11/20/2023
Date item was entered and released in Infor:	12/21/2023

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

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

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

HISTORY (see instructions): New Agreement- No History

**BC2024-35**

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

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
(O) Original	4043	Love Train Ministries	7/1/2023- 6/30/2024	\$19,249.95	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 vendor shall deliver the Motivational Youth-Juvenile Justice Program as a group leadership services, along with mentoring services. Funding for this contract is not-to-exceed \$19,249.95.
For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement Age of items being replaced: n/a How will replaced items be disposed of?
Project Goals, Outcomes or Purpose (list 3): Vendor to provide one-on-one mentoring meeting through structured activities and community service opportunities. Vendor to provide ongoing monthly support meetings to participants. Vendor shall deliver motivational Youth-Juvenile Justice Program as a group series to male youth ages eleven (11) to eighteen (18).
If a County Council item, are you requesting passage of the item without 3 readings. <input checked="" 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: Love Train Ministries 1141 E. 74 <sup>th</sup> Cleveland, Ohio 44103	Owner, executive director, other (specify): Mary K. Williams- Founder/Director
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 # if applicable <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) RFP Exemption- County Code 501.12(D)	<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 ( ).
	<input type="checkbox"/> Government Purchase

Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received? RFP Exemption- County Code 501.12(D) this is a grant funded contract.	<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 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. This project is funded 100% by the RECLAIM grant.
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):
Payment Schedule: <input type="checkbox"/> Invoiced <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> One-time <input type="checkbox"/> Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: The delay is due to RECLAIM grant notification and award process, and in addition to vendors' delayed submission of documents	
Timeline: Project/Procurement Start Date (date your team started working on this item):	4/10/2023
Date documents were requested from vendor:	9/6/2023- last document received by vendor 12/15/23
Date of insurance approval from risk manager:	11/2/2023
Date Department of Law approved Contract:	11/6/2023
Date item was entered and released in Infor:	12/19/2023
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):
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**BC2024-36**

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

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
(O)	4046	Girl Scouts of Northeast Ohio	7/1/2023- 6/30/2024	\$19,462.50	Pending	Pending

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase. The vendor shall engage female youth in STEM programming, entrepreneurship opportunities, and outdoors life skills. Those referred to the program shall be girls ages twelve (12) to seventeen (17) years of age. Funding shall not exceed \$19,462.50 for a term starting July 1, 2023, until June 30, 2024.

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

Project Goals, Outcomes or Purpose (list 3): The primary goal of this program is to engage youth in pro-social activities and career development. The youth will be engaged in activities to expand critical thinking and how to engage in the world around them.

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: One Girl Scout Way Macedonia, Ohio 44056	Owner, executive director, other (specify): Jane Christyson- Chief Executive Officer
Vendor Council District:	Project Council District:



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

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process.  / *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /  RFP Exemption- County Code 501.12(D)	<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? RFP Exemption- County Code 501.12(D) this is a grant funded contract.	<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. This project is funded 100% by the 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:  Invoiced  Monthly  Quarterly  One-time  Other (please explain):

Provide status of project.	
<input checked="" type="checkbox"/> New Service or purchase <input type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: The delay is due to RECLAIM grant notification and award process, and in addition to vendors' delayed submission of documents.	
Timeline: Project/Procurement Start Date (date your team started working on this item):	4/10/2023
Date documents were requested from vendor:	9/6/2023- Inspector General Registration completed 12/12/23
Date of insurance approval from risk manager:	11/4/2023
Date Department of Law approved Contract:	11/6/2023
Date item was entered and released in Infor:	12/19/2023
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):

**BC2024-37**

Title	Family and Children First Council/ The Ohio State University Contract for 1/1/2024 to 12/31/25 RQ#13403 The purpose of the contract is to provide planning, coordination, and facilitation services for the Youth Advocacy and Leadership Coalition.
Department or Agency Name	Family and Children First Council
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	4038	The Ohio State University	1/1/2024 – 12/31/2025	\$290,000.00	Pending	Pending

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

Requesting approval of a contract as indicated in the chart above or with The Ohio State University in the amount of or not-to-exceed \$290,000.00 for the period 01/01/2024-12/31/2025.  
 This is a Contract.  
 -The not to exceed amount is Two Hundred Ninety Thousand Dollars (\$290,000.00) for the term of the contract.

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):

- Engaging and empowering families
- Sharing accountability
- Building community capacity
- Coordinating systems and services at the local level, expanding the scope to add local government, communities and families throughout the state.

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 Ohio State University College of Food, Agricultural, and Environmental Sciences 1960 Kenny Road, Columbus, OH 43210-1063 Ohio State University Extension, Cuyahoga County 12200 Fairhill Road, Cleveland, Ohio 44120	The CEO is Katherine Groeniger.
Vendor Council District:	Project Council District:
2	All of Cuyahoga County
If applicable provide the full address or list the municipality(ies) impacted by the project.	All of Cuyahoga County

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> (Provide RQ# for formals, informal as applicable) <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. An RFP was issued 2023 with OSU being the only responding vendor.  *See Justification for additional information.
The total value of the solicitation: \$290,000.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 10 /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 type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase
	<input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input type="checkbox"/> Contract Amendment (list original procurement)
	<input type="checkbox"/> Other Procurement Method, please describe:

Is Purchase/Services technology related <input checked="" type="checkbox"/> No <input type="checkbox"/> 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(S): (No acronyms – General Fund, HHS Levy, Capital, etc.). Include % if more than one source Health and Human Services Levy %100	
Is this approved in the biennial 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 and if late, include timeline for lateness:	
<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: Vendor sent documents late. I explained to them the need for turning documents in a reasonable time.	
Timeline: Provide details for the items listed below in the box to its right. Project/Procurement Start Date (date your team started working on this item):	6/22/23
Date documents were requested from vendor:	11/14/23, 11/15/23, 11/27/23, 11/28/23, 11/29/23, 11/30/23, 12/1/23, 12/4/23, 12/5/23, 12/7/23, 12/11/23, 12/14/23
Date of insurance approval from risk manager:	12/14/23

Date Department of Law approved Contract:	12/14/23
Date item was entered and released in Infor:	12/14/23
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction. There was discussion with the vendor surrounding the insurance requirements and contract language.	
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 BC2021-222 5/10/2021 BC2022-697 11/14/2022

**C.- Exemptions**

**BC2024-38**

Title	Medical Examiner's Office Request for Alternative Procurement process for purchase of DNA kits, other chemicals and supplies as needed for Forensic DNA Casework Testing through a Purchase Order award to Promega Corp for the period 1/1/2024 thru 9/30/2024 in the amount of \$22,202.37
Department or Agency Name	Medical Examiner's Office
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	PO	Promega Corp	01/01/2024-09/30/2024	\$22,202.37		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. Medical Examiner's Office Request for Alternative Procurement process for purchase of DNA kits, other chemicals and supplies as needed for Forensic DNA Casework Testing through a Purchase Order award to Promega Corp for the period 1/1/2024 thru 9/30/2024 in the amount of \$22,202.37, thru grant funding in relation to BC2023-601, approval of Agreement No. 3731 between the Medical Examiner's Office and the Couty Prosecutor. Funding Source Dept. of Justice, Office of Justice Programs, Bureau of Justice Affairs FY21 National Sexual Assault Kit Initiative (SAKI) grant.

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 primary goal of the project is to purchase specialized DNA extraction, quantification and amplification kits for the DNA Lab to complete forensic DNA casework testing for the Medical Examiner's Office expeditiously, as needed during the grant period.
If a County Council item, are you requesting passage of the item without 3 readings. <input type="checkbox"/> Yes <input checked="" 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):
Promega Corporation 2800 Woods Hollow Road Madison, WI 53711	William A. Linton, Chairman and 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. We have put these products out for competitive bids in the past and while Promega may have distributors, these distributors cannot compete in price and delivery when it comes to purchasing directly from the manufacturer of these specialized products. The implementation of this RFP Exemption will free up valuable procurement time by allowing a smoother approval process. *See Justification for additional information.
The total value of the solicitation:	<input checked="" type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date

Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review?: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> .	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i> :	<input type="checkbox"/> Government Purchase
	<input checked="" 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 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. NA	
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.	
Dept. of Justice, Office of Justice Programs, Bureau of Justice Affairs FY21 National Sexual Assault Kit Initiative (SAKI) grant.	
Is funding for this included in the approved budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "no" please explain):	
Payment Schedule: <input checked="" type="checkbox"/> Invoiced <input 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:	<i>OnBase 12/18/2023</i>
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: n/a	
If late, have services begun? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions):

**BC2024-39**

Title	Family and Children First Council/ Family Centered Services and Supports(FCSS) State FY24-25 for the Alternative Procurement 1/1/2024 to 12/31/25 The purpose of the alternative procurement is to process applications and invoices with various vendors.
Department or Agency Name	Family and Children First Council
Requested Action	<input 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 checked="" type="checkbox"/> Other (please specify): Alternative Procurement

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) Alt. Proc		Various Vendors	7/1/2023 – 6/30/2025	\$816,235.02	7/1/2023	BC2023-436
(A-1 to Alt. Proc)		Various Vendors	7/1/2023 – 6/30/2025	\$21,412.98	Pending	Pending

<p>Service/Item Description (include quantity if applicable). Indicate whether <input type="checkbox"/> New <u>or</u> <input checked="" type="checkbox"/> Existing service or purchase.</p> <p>Requesting approval of additional funding to the Alternate Procurement as indicated in the chart above with Various Vendors in the additional amount of \$21,412.98 or not-to-exceed \$837,648.00 for the period 07/01/2023-6/30/2025. \$418,824 per year for a total of \$837,648.00 for both years. This is an alternative procurement.</p> <p>-The not to exceed amount is Eight Hundred Thirty Seven Thousand Six Hundred Forty Eight(\$837,648.00) for the term of the alternative procurement.</p>
<p>For purchases of furniture, computers, vehicles: <input type="checkbox"/> Additional <input type="checkbox"/> Replacement</p> <p>Age of items being replaced: _____ How will replaced items be disposed of?</p>
<p>Project Goals, Outcomes or Purpose (list 3):</p> <ul style="list-style-type: none"> <li>• To allow various vendors to be paid through the alternative procurement method</li> </ul>



• To provide flexible wraparound services to families at the local level and reduce the amount of children/youth in congregate care

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):
Various Vendors	Various
Vendor Council District:	Project Council District:
	All of Cuyahoga County
If applicable provide the full address or list the municipality(ies) impacted by the project.	All of Cuyahoga County

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ # <i>if applicable</i> (Provide RQ# for formals, informal as applicable) <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. Alternative Procurement Process *See Justification for additional information.
The total value of the solicitation: \$837,648.00 Additional Funds \$21,412.98	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 10 /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, <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 checked="" 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"/> No <input type="checkbox"/> 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(S): <i>(No acronyms – General Fund, HHS Levy, Capital, etc.). Include % if more than one source</i> State Funding Allocation 75% Federal Funding Allocation from the State 25%
Is this approved in the biennial 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 checked="" type="checkbox"/> Other (please explain): Payment for invoices will be paid as they are received until all funding is exhausted.

Provide status of project and if late, include timeline for lateness:	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	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 funding allocation approval letter was received after the initial Alternative Procurement was approved for FY24-25.	
Timeline: Provide details for the items listed below in the box to its right. Project/Procurement Start Date (date your team started working on this item):	6/15/23
Date documents were requested from vendor:	na
Date of insurance approval from risk manager:	na
Date Department of Law approved Contract:	na
Date item was entered and released in Infor:	12/21/2023
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction. There was discussion with the vendor surrounding the insurance requirements and contract language.	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) The original alternative procurement was approved on 7/10/23.	
Have payments be made? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain) The original alternative procurement was approved on 7/10/23.	

HISTORY (see instructions):
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Original  
 BC2023-436 7/10/23  
 BC2021-393 07/27/21  
 BC2021-27 01/19/21  
 BC2019-833 11/25/19  
 BC2018-933 12/17/18

**D. - Consent Agenda**

**BC2024-40**

Title	Public Works – Contract amendment - Fleet Master Contract – RQ6380
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council’s Journal Date	Approval No.
(O)		Various Vendors – see below	12/7/2021 – 12/6/2023	\$1,415,000.00	12/7/2021	R2023-0266
	1889	Applied Maintenance Supplies & Solutions, LLC.			12/7/2021	R2023-0266
	1890	Car Parts Warehouse, Inc.;			12/7/2021	R2023-0266
	1891	Crown Cleaning Systems & Supply, Inc. dba Crown Cleaning Systems;			12/7/2021	R2023-0266
	1892	Jack Doheny Company;			12/7/2021	R2023-0266
	1893	Lakefront Automotive Parts, Inc.			12/7/2021	R2023-0266
	1894	North Coast Two-Way Radio, Inc.;			12/7/2021	R2023-0266
	1895	Northcoast Equipment Specialists, Inc.;			12/7/2021	R2023-0266
	1896	Parks Authority, LLC			12/7/2021	R2023-0266
	1897	RH Auto & Truck Glass			12/7/2021	R2023-0266
	1898	Rich’s Towing & Service, Inc.			12/7/2021	R2023-0266
	1899	Rieth’s Automotive Supply Co., dba Fleetwise Truck Parts;			12/7/2021	R2023-0266

	1900	Rush Truck Centers of Ohio, Inc. dba Rush Truck Center, Cleveland;	12/7/2021	R2023-0266
	1901	The Goodyear Tire & Rubber Company;	12/7/2021	R2023-0266
	1902	United Towing Services, Inc.	12/7/2021	R2023-0266
A-1	3393	(fka1893) changed name from Lakefront Automotive Parts to Genuine Parts Co. dba NAPA Auto Parts	6/5/2023	BOC-ION item
A-2	1889 1890 1891 1892 3397 1894 1895 1896 1897 1898 1899 1900 1901 4045 (fka 1902) 3397 (fka 1893)*	Amending various contracts as listed – no additional funds	Ext. 2/29/2024	pending

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
This request is to extend the current Fleet Master Contract until 2/29/2024, adding no new funds.

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 master contract provides various items, parts, and service to the Fleet Division of Public Works. By amending the contract, this will ensure no interruption of services while the new, multi-year contract is approved.

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):
See last page	

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

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

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

Provide status of project.	
<input type="checkbox"/> New Service or purchase <input checked="" type="checkbox"/> Recurring service or purchase	Is contract late <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, In the fields below provide reason for late and timeline of late submission
Reason: Waiting on vendors to submit documents and sign the contract	
Timeline: Project/Procurement Start Date (date your team started working on this item):	Matix created for Amendment 11/15, Matrix email for vendor name change 11/27, emailed Amendment 11/30
Date documents were requested from vendor:	11/16/23
Date of insurance approval from risk manager:	
Date Department of Law approved Contract:	11/27/23
Date item was entered and released in Infor:	12/13/23
Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction:	
If late, have services begun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (if yes, please explain)	
Have payments be made? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please explain)	

HISTORY (see instructions): see chart above

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):
Applied Maintenance 14790 Foltz Pkwy Strongsville, OH 44146	Scott Schuenaman / Sales
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
Car Parts Warehouse 5655 Pearl Road Parma, OH 44129	Tony DiFiore/VP
Vendor Council District:	Project Council District:

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

Vendor Name and address:	Owner, executive director, other (specify):
Crown Cleaning System 7770 Harvard Avenue Cleveland, OH 44105	Geoff Boecker / VP
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
Jack Doheny Companies 777 Doheny Court Northville, MI 48167	Steve Shafer / President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
North Coast Two Way Radio Inc. 1425 Industrial Ave S #102 Cleveland, OH 44137	Edward Spehar / Sales
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
Northcoast Equipment Specialists 271 Depot St. Berea, OH 44017	Ron Masek / Sales
Vendor Council District:	Project Council District:

If applicable provide the full address or list the municipality(ies) impacted by the project.	
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Vendor Name and address:	Owner, executive director, other (specify):
Parts Authority, LLC 3 Dakota Drive, Ste 110 New Hyde Park, NY 11042	Randy Buller / Principal
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
RH Auto Truck Glass 27104 Sprague Road Olmsted Township, OH 44138	Raimund Hendke / Owner
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
Rich's Towing and Service 20531 First Avenue Middleburg Hts., OH 44130	Shelly Gorczyca / Office Manager
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
Rieth's Automotive Supply Co. Inc dba Fleetwise Truck Parts 1452 West 25 <sup>th</sup> Street Cleveland, OH 44113	Harvey Rieth / President
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	



Vendor Name and address:	Owner, executive director, other (specify):
Rush Truck Centers of Ohio Inc. 12970 Snow Rd. Parma, OH 44130	Justin Lakin / Parts-Service Sales Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	Owner, executive director, other (specify):
The Goodyear Tire & Rubber Company 200 Innovation Way Akron, OH 44316	Richard Bevington / Senior Manager
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

Vendor Name and address:	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.	

Vendor Name and address:	Owner, executive director, other (specify):
Genuine Parts dba NAPA Auto Parts 6811 Broadway Avenue Cleveland, OH 44105	Marty Hughes / Sales Representative
Vendor Council District:	Project Council District:
If applicable provide the full address or list the municipality(ies) impacted by the project.	

**BC2024-41**

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

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2367	CATTS Construction, Inc.	N/A	\$4,714,327.77	April 26 <sup>th</sup> , 2022	R2022-0095
A-1	2367	CATTS Construction, Inc.		-\$499.29	April 17 <sup>th</sup> , 2023	BC2023-242
A-2	2367	CATTS Construction, Inc.		-\$238,919.35	PENDING	

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

This project includes the resurfacing of Wolf Road from Sutcliffe Drive to Clague Road, including a six-foot widening of Wolf Road from Dover Center Road to Clague Road to accommodate five-foot wide bike lanes adjacent to the travel lanes, driveway apron replacement, drainage improvements, signing and pavement markings on Wolf Road from Sutcliffe Drive to Clague Road and Clague Road from Wolf Road north to Lake Road. The total project length is 2.47 miles. The anticipated start-completion dates are 5/16/2022 to 8/16/2023.

The various increases and decreases were required to perform the plan intent. There were minor decreases to around 65 different items. One large decrease was due the amount of full depth repairs that were required.

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):
CATTS Construction, Inc. 21223 Aurora Rd. Warrensville Hts. OH 44146	Michael Dempsey

Vendor Council District: 9	Project Council District: 1
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: \$4,305,379.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 1 / 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 ( 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, <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> : Only Bid Submitted that was acceptable.	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  We accepted the only bid.	<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 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:  Invoiced  Monthly  Quarterly  One-time  Other (please explain):

Provide status of project.

New Service or purchase  Recurring service or purchase

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

Reason: N/A

Timeline:

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

Date documents were requested from vendor:

Date of insurance approval from risk manager:

Date Department of Law approved Contract:

Date item was entered and released in Infor:

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

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

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

HISTORY (see instructions): See chart above

**BC2024-42**

Title	Airport Apron U & V
Department or Agency Name	Public Works
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	2511	Chagrin Valley Paving Inc.	N/A	\$524,707.50	July 5 <sup>th</sup> , 2022	R2022-0184
A-1	2511	Chagrin Valley Paving Inc.		-\$56,826.95	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>Reconstruct Taxilanes South- Taxilanes U and V at Cuyahoga County Airport will include pavement removal, clearing and grubbing, excavation and grading, pavement installation, storm drainage installation, NAVAID installation and electrical improvements. Dates are anticipated to be completed in the fall of 2022. (Delayed)</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): See above</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):
Chagrin Valley Paving, Inc. 17290 Munn Rd. Chagrin Falls, OH 44023	Kris Vakada
Vendor Council District: 6	Project Council District: 7
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
<p>RQ # <i>if applicable</i></p> <p><input checked="" type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ</p> <p><input type="checkbox"/> Informal</p> <p><input type="checkbox"/> Formal Closing Date: _____</p>	<p>Provide a short summary for not using competitive bid process.</p> <p>*See Justification for additional information.</p>
<p>The total value of the solicitation: \$524,707.50</p>	<p><input type="checkbox"/> Exemption</p>
<p>Number of Solicitations (sent/received) 1 / 1</p>	<p><input type="checkbox"/> State Contract, list STS number and expiration date</p> <p><input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date</p>
<p>Participation/Goals (%): ( %8 ) 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>.</p>	<p><input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).</p>
<p>Recommended Vendor was low bidder: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, <i>please explain</i>: <i>Low Bidder / ONLY Bidder</i></p>	<p><input type="checkbox"/> Government Purchase</p> <p><input type="checkbox"/> Alternative Procurement Process</p>

How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment ( <i>list original procurement</i> )
We accepted the lowest and only 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 80% ODOT Aviation Grant and 20% County General Funds. Breakdown: \$419,766.00 ODOT \$104,941.50 County
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
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**BC2024-43**

Title	Boston Rd. Bridge AMD #1 (FINAL)	
Department or Agency Name	Public Works	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
O	3205	Suburban Maintenance & Construction, Inc	N/A	\$1,177,263.81	April 11 <sup>th</sup> , 2023	R2023-0081
A-1	3205	Suburban Maintenance & Construction, Inc		-\$58,204.29	PENDING	

Service/Item Description (include quantity if applicable). Indicate whether  New or  Existing service or purchase.  
 The project consists of rehabilitation of the existing structure by replacing the concrete deck and approach slabs, constructing new bridge parapets, installing new bearings, painting the structural steel, sealing concrete surfaces, and providing new support for the sanitary force main attached to the bridge Hills. Anticipated dates are to 4/17/2023-10/17/2023.

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):
Suburban Maintenance & Construction 16330 York Rd. North Olmsted, OH 44133	Erick Urdzik
Vendor Council District: 5	Project Council District: 6

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: \$1,400,000.00	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) 3 / 2	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( 6% ) SBE ( 19% ) MBE ( 5% ) 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>For this project the engineer's estimate was \$1,400,000.00, and this was under by 15.9%.</i>	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?  <i>We accepted the lowest and best bid</i>	<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 (100% by County funds - \$7.50 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:  Invoiced  Monthly  Quarterly  One-time  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

The various increases and decreases were required to meet the plan intent. There were some new items totaling \$11,104.53 that were required to address unforeseen conditions.

**BC2024-44**

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](mailto: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](mailto:Info@Ret3.org)  
1814 E. 40th Street  
Cleveland, Ohio 44103  
Kenny Kovach-Director

SCRAP LIST

<u>Description</u>	<u>Serial numbers</u>
Blackcreek servers	LF04-002
Blackcreek servers	LF04-003
Blackcreek servers	LF04-004
Blackcreek servers	MA17-040
Blackcreek servers	LF04-007
Blackcreek servers	LF04-008
Blackcreek servers	LF04-009
Blackcreek servers	LF04-001
Blackcreek servers	LF04-005
Blackcreek servers	LF04-013
Blackcreek servers	LF04-015
Blackcreek servers	LF04-014
Blackcreek servers	LF04-011
Blackcreek servers	LF04-010
Blackcreek servers	LF04-024
Blackcreek servers	QE08-012
Blackcreek servers	LF04-01
Blackcreek servers	KJ12-033

**BC2024-45**

(See related items for proposed purchases for the week of 1/8/2024 in Section D above).

**V – OTHER BUSINESS**

**Item of Note (non-voted)**

**Item No. 1**

Scope of Work Summary

The Department of Public Safety & Justice Services - Office of Emergency Management is requesting authority to accept a grant application in the amount of \$243,674 for the FY 2023 Emergency Management Performance Grant Program (EMPG). The dates of this grant award are 10/1/2022 - 12/31/2024. The grant agreement was received from the Ohio Emergency Management Agency (pass through) on 12/22/2023 and must be signed and returned by 2/23/2024.

This award is a 50% reimbursement grant of eligible expenses of the Office of Emergency Management. The grant award does not include any additional county match funds or, any obligations that the county contract with external service providers or vendors.

Procurement - Grant Award

Contractor and Project Information  
 Ohio Emergency Management Agency  
 Preparedness Grants Branch  
 2855 West Dublin Granville Road  
 Columbus, Ohio 43235

**Project Status and Planning**

The project is reoccurring to the county. The purpose of the Emergency Management Performance Grant (EMPG) Program is to provide federal funds to states to assist local, territorial, and tribal governments in preparing for all hazards. Title VI of the *Stafford Act* authorizes DHS/FEMA to make grants for the purpose of providing a system of emergency preparedness for the protection of life and property in the United States from hazards and to vest responsibility for emergency preparedness jointly in the Federal Government, states, and their political subdivisions. The Ohio Emergency Management Agency passes approximately 65% of EMPG funds through to county EMA's.

**Funding**

The project is funded by the Ohio Emergency Management Agency (OEMA) with funds received from the Department of Homeland Security/Federal Emergency Management Agency. The award is allocated annually using 25% as a base for each county; and 75% based on population. The Cuyahoga County FY 2023 award amount is \$243,674, which is a 17.3% reduction from FY22. County reimbursements will not exceed 50% of eligible expenses.

This is a continuation grant, previous awards listed below:

SFY 2010 - \$251,345.00  
 SFY 2011 - \$248,753.00  
 SFY 2012 - \$248,753.00  
 SFY 2013 - \$245,625.00  
 SFY 2014 - \$262,221.00  
 SFY 2015 - \$284,705.00  
 SFY 2016 - \$273,463.00  
 SFY 2017 - \$273,463.00  
 SFY 2018 - \$273,463.00 BC2018-723  
 SFY 2019 - \$273,463.00 BC2019-835  
 SFY 2020 - \$274,304.53 BC2020-515  
 SFY 2021 - \$306,507.00 BC2021-658  
 SFY 2022 - \$294,663.00 CON2023-22

**Item No. 2**

Title	Health and Human Services-2024- Western Reserve Area Agency on Aging-Older Americans Act/Senior Community Services	
Department or Agency Name	Department of Senior and Adult	
Requested Action	<input 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 checked="" type="checkbox"/> Other : Grant Award	

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC Approved/ Council's Journal Date	Approval No.
		Western Reserve Area Agency	01/01/2023- 12/31/2023	\$204,820.12	BC2019-720	9/30/2019
		Western Reserve Area Agency	01/01/2024- 12/31/2024	\$204,820.12	Pending	Pending

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

These funds support a range of services to assist older adults and support family caregivers.

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):  
Connect seniors and individuals with disabilities with available benefits such as medical insurance or utility discount plans.  
Coordinate services and individuals with disabilities.

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 address of the grantor is: Western Reserve Area Agency on Aging 1700 East 13 <sup>th</sup> Street Suite 114 Cleveland, OH 44106	E. Douglas Beach, Ph. D.
Vendor Council District: 7	Project Council District: County Wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

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

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> ). <i>Include % if more than one source.</i>  Grant funded by Western Reserve Area on Aging through the Older Americans Act/Senior Community Services
Is funding for this included in the approved budget? <input 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 reoccurs annually.
-----------------------------------------------------------

<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 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):		
CON2018-30-3/13/2018, CON18-109-11/13/2018, BC2019-720-9/30/2019		

**VI – PUBLIC COMMENT**

**VII – ADJOURNMENT**