



## CUYAHOGA COUNTY COUNCIL

### HEALTH, HUMAN SERVICES & AGING COMMITTEE

CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS

4<sup>th</sup> FLOOR

#### MEETING AGENDA

WEDNESDAY, NOVEMBER 5, 2025—1:00 P.M.

#### Committee Members

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

Revised 10/30/2025

#### 1. CALL TO ORDER

#### 2. ROLL CALL

#### 3. PUBLIC COMMENT

#### 4. APPROVAL OF MINUTES FROM THE OCTOBER 1, 2025 MEETING

#### 5. MATTER REFERRED TO COMMITTEE

- a) R2025-0308: A Resolution authorizing an amendment to Contract No. 3868 with The Salvation Army for supportive services for homeless men in the Pickup Assessment Sheltering Service (PASS) Transitional Housing Program for the period 10/1/2023 – 9/30/2025 to extend the time period to 9/30/2026, to amend the budget terms, and for additional funds in the amount not-to-exceed \$834,302.00, effective 10/1/2025; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.

#### 6. PRESENTATION

- a) Update on the Emergency Food Contract –  
Jennifer Kons, Vice President Community Impact, United Way of Greater Cleveland  
Jessica Morgan, Chief Programs Officer, Greater Cleveland Food Bank  
Julie Johnson, Chief Executive Officer, Hunger Network  
Emma Messett, Hunger Relief Program Director, Hunger Network

#### 7. MISCELLANEOUS BUSINESS

#### 8. ADJOURNMENT

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



## CUYAHOGA COUNTY COUNCIL

### HEALTH, HUMAN SERVICES & AGING COMMITTEE

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### MEETING MINUTES

WEDNESDAY, OCTOBER 1, 2025—1:00 P.M.

#### Committee Members

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Robert E. Schleper, Jr. | Dist. 6

#### 1. CALL TO ORDER

**Chairwoman Conwell called the meeting to order at 1:06 p.m.**

#### 2. ROLL CALL

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

**A motion was made by Ms. Conwell, seconded by Mr. Casselberry and approved by unanimous vote to excuse Mr. Sweeney from the meeting.**

#### 3. PUBLIC COMMENT

**Ms. Ebony Spano addressed the committee regarding funding, training, waivers and the assessment process by the Cuyahoga County Board of Developmental Disabilities.**

#### 4. APPROVAL OF MINUTES FROM THE SEPTEMBER 17, 2025 MEETING

**A motion was made by Mr. Schleper, seconded by Mr. Casselberry and approved by unanimous vote to approve the minutes from the September 17, 2025 meeting.**

#### 5. MATTERS REFERRED TO COMMITTEE

- a) None

#### 6. PRESENTATION

- a) Cuyahoga Developmental Disabilities Services, Medicaid Home and Community Based Waivers and Planning –  
Dr. Amber C. Gibbs, Chief Executive Officer & Superintendent  
Cuyahoga County Board of Developmental Disabilities

**Dr. Amber C. Gibbs, Chief Executive Officer & Superintendent of the Cuyahoga County Board of Developmental Disabilities, addressed the Committee and provided an overview of the services provided and clients served by the Board of Developmental Disabilities; described the three different types of waivers and provided data regarding those currently enrolled, associated costs per year for each type of waiver, continued growth and the 2025 waiver match expenditure projected for 2025; and concluded by addressing future levy funding to meet the needs of the Board.**

**Committee members asked questions of Dr. Gibbs pertaining to the presentation, which she answered accordingly.**

**7. MISCELLANEOUS BUSINESS**

**There was no miscellaneous business.**

**8. ADJOURNMENT**

**With no further business to discuss, Chairwoman Conwell adjourned the meeting at 1:48 p.m., without objection.**

# County Council of Cuyahoga County, Ohio

## Resolution No. R2025-0308

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

**A Resolution** authorizing an amendment to Contract No. 3868 with The Salvation Army for supportive services for homeless men in the Pickup Assessment Sheltering Service (PASS) Temporary Housing Program for the period 10/1/2023 – 9/30/2025 to extend the time period to 9/30/2026, to amend the budget terms, and for additional funds in the amount not-to-exceed \$834,302.00, effective 10/1/2025; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.

**WHEREAS**, the County Executive/Department of Health and Human Services/ Division of Community Initiatives/Office of Homeless Services recommends an amendment to Contract No. 3868 with The Salvation Army for supportive services for homeless men in the Pickup Assessment Sheltering Service (PASS) Temporary Housing Program for the period 10/1/2023 – 9/30/2025 to extend the time period to 9/30/2026, to amend the budget terms, and for additional funds in the amount not-to-exceed \$834,302.00; and

**WHEREAS**, this contract provides supportive services for the PASS Program, a Temporary Housing Program for homeless men; and

**WHEREAS**, the goals of the project are: (1) to provide basic, temporary housing and safety net services for 75 homeless men, (2) to quickly link clients with Rapid Re-Housing Assistance; and (3) to support clients in accessing earned income and benefits; and

**WHEREAS**, this project is funded 30% by Health and Human Services Levy Fund and 70% U.S. Department of Housing and Urban Development- Continuum of Care Rapid Rehousing Families; and

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

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

**SECTION 1.** That the Cuyahoga County Council hereby authorizes an amendment to Contract No. 3868 with The Salvation Army for supportive services for homeless men in the Pickup Assessment Sheltering Service (PASS) Temporary Housing Program for the period 10/1/2023 – 9/30/2025 to extend the time period to 9/30/2026, to amend the budget terms, and for additional funds in the amount not-to-exceed \$834,302.00.

**SECTION 2.** That the County Executive is authorized to execute the amendment and all other documents consistent with this Resolution.

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

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

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

Yeas:

Nays:

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

First Reading/Referred to Committee: October 28, 2025  
Committee(s) Assigned: Health, Human Services & Aging

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

## PURCHASE-RELATED TRANSACTIONS

<b>Title</b>	OHS; Salvation Army; 2025-2026 Amendment 2 for Emergency Shelter and Rapid Rehousing for Single Adults
<b>Department or Agency Name</b>	Office of Homeless Services
<b>Requested Action</b>	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
0	3868	Salvation Army	10/1/23 – 9/30/24	\$794,821.00	11/28/23	R2023-0347
1	3868	Salvation Army	10/1/24 – 9/30/25	\$800,101.00	11/26/24	R2024-0428
2	3868	Salvation Army	10/1/2025 – 9/30/26	\$834,302.00	Pending	Pending

**Service/Item Description (include quantity if applicable).**

The Pickup Assessment Sheltering Service (PASS) Program provides Temporary Housing, Rapid Rehousing and Recovery Support Services to homeless men, serving 75 men at any given time and an average of 150 to 200 men annually. All participants are referred to the PASS Single Adult RRH program by Coordinated Entry. Persons go to CE directly from the streets or other literally homeless situations and are provided immediate shelter and a referral to PASS when beds are available. There are no barriers to referral to the PASS Single Adult RRH program. The overarching goal of the PASS Program is for the men to obtain permanent housing through the utilization of an Individualized Housing First Case Management Plan. This plan focuses on leveraging local resources and HUD Rapid Rehousing funds to transition homeless men into permanent placement. The PASS program also supports clients in accessing stable income and recovery supports. Goals are to provide basic temporary housing and safety net services for 75 homeless men at a time; Link clients with permanent housing; Support clients in accessing earned income and recovery supports.

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

**For purchases of furniture, computers, vehicles:** ☐ Additional   ☐ Replacement  
**Age of items being replaced:** \_\_\_\_\_ **How will replaced items be disposed of?** \_\_\_\_\_

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

- Provide basic temporary housing and safety net services for 75 homeless men at a time
- Link clients with permanent housing
- Support clients in accessing earned income and recovery supports

**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):
Salvation Army 440 West Nyack Rd. West Nyack, NY 10994	Michael Southwick, secretary
Vendor Council District:	Project Council District:
n/a – out of state corporate location	7
If applicable provide the full address or list the municipality(ies) impacted by the project.	Countywide

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ (Insert RQ# for formal/informal items, 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.  RFP exemption based on a subgrant award from the US Department of Housing and Urban Development for Rapid Rehousing for Singles.  *See Justification for additional information.
The total value of the solicitation:	<input type="checkbox"/> Exemption
Number of Solicitations (sent/received) /	<input type="checkbox"/> State Contract, list STS number and expiration date  <input type="checkbox"/> Government Coop (Joint Purchasing Program/GSA), list number and expiration date
Participation/Goals (%): ( ) DBE ( ) SBE ( ) MBE ( ) WBE. Were goals met by awarded vendor per DEI tab sheet review? <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain.  If no, has this gone to the Administrative Reconsideration Panel? If so, what was the outcome?	<input type="checkbox"/> Sole Source <input type="checkbox"/> Public Notice posted by Department of Purchasing. Enter # of additional responses received from posting ( ).
Recommended Vendor was low bidder: <input type="checkbox"/> Yes <input type="checkbox"/> No, please explain:	<input type="checkbox"/> Government Purchase  <input type="checkbox"/> Alternative Procurement Process
How did pricing compare among bids received?	<input checked="" type="checkbox"/> Contract Amendment - (list original procurement) RFP exemption <input type="checkbox"/> Other Procurement Method, please describe:

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

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

U.S. Department of Housing and Urban Development - CoC Rapid Rehousing Families 70%); Cuyahoga County Health and Human Services - Levy (30%)

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

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

**HS220125 – 55130 – HS-25-RRH-ADU:** US Department of Housing and Urban Development Rapid Rehousing for Singles grant

**HS260350- 55130 – UCH09999:** Health & Human Services levy

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

**Provide status of project.**

Ongoing

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

**Reason:** Accounting code error in infor; vendor had to update their COI as it had an expired policy. Vendor also had to send the contract through their corporate review before it was signed which took more than a week to return.

**Timeline**

Project/Procurement Start Date (date your team started working on this item): 9/2/2025

Date documents were requested from vendor: 9/2/2025

Date of insurance approval from risk manager: 9/24/2025

Date Department of Law approved Contract: 9/24/2025

Detail any issues that arose during processing in Infor, such as the item being disapproved and requiring correction: Accounting code error, required a ticket to be put in

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

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

**HISTORY (see instructions):**

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

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in OnBase Document Management

Infor/Lawson RQ# (if applicable):	N/A
Buyspeed RQ# (if applicable):	N/A
Infor/Lawson PO # Code (if applicable):	EXMT
CM Contract#	3868

Late Submittal Required:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Why is the contract being submitted late?	Accounting code error in infor; vendor had to update their COI as it had an expired policy. Vendor also had to send the contract through their corporate review before it was signed which took more than a week to return.	
What is being done to prevent this from reoccurring?	Receive contract assignment earlier from OHS.	

TAC or CTO Required or Authorized IT Standard	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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Contract Amendments Reviewed by Purchasing				
			Department Initials	Purchasing
Briefing Memo			DWM	BRM
Justification Form			DWM	BRM
IG#	23-0271-REG 12/31/2027		DWM	BRM
Annual Non-Competitive Bid Contract Statement (See Contracts Checklist Glossary on the intranet for form requirements).	Date:		DWM	n/a
Debarment/Suspension Verified	Date:	9/16/25	DWM	BRM
Auditor's Findings	Date:	9/16/25	DWM	BRM
Independent Contractor (I.C.) Form	Date:	4/22/25	DWM	BRM
Cover - Master contracts only				n/a
Contract Evaluation – if required provide most recent CM history on contract history table (see pg 2)			DWM	BRM
TAC/CTO Approval or IT Standards (if required attach and identify relevant page #s or meeting approval number)			N/A	N/A
Checklist Verification			DWM	BRM

Other documentation may be required depending upon your specific item

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

Reviewed by Law	
	Department Initials
Agreement/Contract and Exhibits	DWM
Matrix Law Screen shot	DWM
COI	DWM
Workers' Compensation Insurance	DWM
Original Executed Contract (containing insurance terms) & all executed amendments	DWM

## Department of Purchasing – Required Documents Checklist

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account Number	Activity Code	Account Category or Subaccount	Dollar Amount
10/1/2025 – 12/31/2025	HS220125	55130	HS-25-RRH-ADU	55130	\$584,302.00
1/1/2026 – 9/30/2026	HS220125	55130	HS-25-RRH-ADU	55130	\$0.00
10/1/2025 – 12/31/2025	HS260350	55130	UCH09999	55130	\$27,000.00
1/1/2026 – 9/30/2026	HS260350	55130	UCH09999	55130	\$223,000.00
			<b>TOTAL</b>		<b>\$834,302.00</b>

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

CE/AG# (if applicable)		N/A			
Infor/Lawson PO# and PO Code (if applicable)		EXMT			
Lawson RQ# (if applicable)		N/A			
CM Contract#		3868			
	Original Amount	Amendment Amount (if applicable)	Original Time Period/Amended End Date	BOC/ Resolution Approval Date	BOC/ Resolution Approval #
Original Amount	\$794,821.00		10/1/2023 - 9/30/2024	11/28/23	R2023-0347
Prior Amendment Amounts (list separately) (A-# )		\$800,101.00	9/30/2025	11/26/24	R2024-0428
		\$			
		\$			
Pending Amendment		\$834,302.00	9/30/2026	Pending	Pending
Total Amendments		\$			
Total Contract Amount		\$2,429,224.00			

### PURCHASING USE ONLY

Prior Resolutions:	R2023-0347, R2024-0428
CM#:	3868
Vendor Name:	The Salvation Army
Time Period:	10/1/2023-9/30/2025 ext 9/30/2026
Amount:	\$834,302.00
History/CE:	Yes
EL:	ok
Purchasing Notes:	
Purchasing Agents Initials and date of approval	BRM 10/2/2025

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Salvation Army				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	3868				
<b>RQ#</b>	N/A				
<b>Time Period of Original Contract</b>	10/1/23 – 9/30/24				
<b>Background Statement</b>	Salvation Army was awarded a contract in 2024 to operate the PASS Rapid Re-Housing Program, which provides 75 shelter beds and rapid rehousing services at a point in time for homeless men.				
<b>Service Description</b>	The PASS Program provides temporary housing, referrals for Rapid Re-Housing, employment linkages, recovery support, and housing search assistance to homeless, adult men.				
<b>Performance Indicators</b>	Number of people assisted annually; exits to permanent housing.				
<b>Actual Performance versus performance indicators (include statistics):</b>	The Salvation Army served 147 unique individuals in 2024-2025. Of those who left the program, 40% exited to permanent housing.				
<b>Rating of Overall Performance of Contractor</b>	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>Poor</b>
<b>Select One (X)</b>		X			
<b>Justification of Rating</b>	The Salvation Army PASS Rapid Re-Housing Program has consistently met expectations for individuals exiting to PH, despite significant barriers faced by this population.				
<b>Department Contact</b>	Erin Rearden				
<b>User Department</b>	Office of Homeless Services				
<b>Date</b>	7/22/25				