



## CUYAHOGA COUNTY COUNCIL

### HEALTH, HUMAN SERVICES & AGING COMMITTEE

CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS

4<sup>th</sup> FLOOR

#### MEETING AGENDA

WEDNESDAY, MARCH 4, 2026—1:00 P.M.

#### Committee Members

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

#### 1. CALL TO ORDER

#### 2. ROLL CALL

#### 3. PUBLIC COMMENT

#### 4. APPROVAL OF MINUTES FROM THE FEBRUARY 4, 2026 MEETING

#### 5. MATTERS REFERRED TO COMMITTEE

- a) R2026-0048: A Resolution awarding a total sum, not to exceed \$10,000, to the Canopy Child Advocacy Center for general operations from the District 3 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.
- b) R2026-0065: A Resolution authorizing an amendment to Agreement No. 3853 with Cuyahoga County Board of Developmental Disabilities for Medicaid Home and Community-based Services for youth with developmental disabilities for the period 1/1/2024 – 3/31/2027 to extend the time period to 12/31/2027, and for additional funds in the amount not-to-exceed \$1,400,000.00, effective upon signatures of all parties; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.

#### 6. PRESENTATION

- a) Addiction Services in our Jail – Brandy Carney, Director Public Safety & Justice Services and Katie Davis Bellamy, Chief Executive Officer, MetroHealth Community Health Centers

#### 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

CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS

4<sup>th</sup> FLOOR

#### MEETING MINUTES

WEDNESDAY, FEBRUARY 4, 2026—1:00 P.M.

#### Committee Members

Yvonne M. Conwell, Chair | Dist. 7  
Martin J. Sweeney, Vice Chair | Dist. 3  
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Robert E. Schleper, Jr. | Dist. 6

#### 1. CALL TO ORDER

**Vice Chairman Sweeney called the meeting to order at 1:02 p.m.**

#### 2. ROLL CALL

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

#### 3. PUBLIC COMMENT

**Loh addressed the Committee regarding homeless shelter services, challenges and funding.**

#### 4. APPROVAL OF MINUTES FROM THE JANUARY 21, 2026 MEETING

**A motion was made by Mr. Casselberry, seconded by Mr. Schleper and approved by unanimous vote to approve the minutes from the January 21, 2026 meeting.**

**A motion was made by Mr. Sweeney, seconded by Mr. Casselberry and approved by unanimous vote to excuse Committee Chair Yvonne Conwell and Committee member Michael Houser from the meeting.**

#### 5. MATTER REFERRED TO COMMITTEE

- a) R2026-0024: A Resolution awarding a total sum, not to exceed \$10,000, to the Village of Healing for general operations from the District 8 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.

**Ms. Jaqueline Bradshaw, Director of Programs and Grants Management for the Village of Healing, addressed the Committee regarding Resolution No. R2026-0024. Discussion ensued.**

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

**On a motion by Mr. Casselberry with a second by Mr. Schleper, Resolution No. R2026-0024 was considered and approved by unanimous vote to be referred to the full Council agenda for second reading.**

- b) R2026-0046: A Resolution authorizing an amendment to Contract No. 3013 with Lutheran Metropolitan Ministry for operations and case management services for a 400-bed Men's Emergency Shelter, located at 2100 Lakeside Avenue, Cleveland, and for facilitation and coordination of overflow shelter services for single adults and families at various locations for the period 1/1/2023 – 12/31/2025, to extend the time period to 9/30/2026, to amend the budget terms, and for additional funds in the amount not-to-exceed \$4,350,000.00 effective 11/1/2025; 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.

**Mr. David Merriman, Director of the Department of Health and Human Services; Ms. LeVine Ross, Director of the Office of Homeless Services; Ms. Maria Foschia, President and Chief Executive Officer and Ms. Erin Kray, Director of Housing & Shelter for Lutheran Metropolitan Ministry addressed the Committee regarding Resolution No. R2026-0046. Discussion ensued.**

**Committee members asked questions of Ms. Ross, Ms. Foschia and Ms. Kray pertaining to the item, which they answered accordingly.**

**On a motion by Mr. Casselberry with a second by Mr. Schleper, Resolution No. R2026-0046 was considered and approved by unanimous vote to be referred to the full Council agenda with a recommendation for passage under second reading suspension of the rules.**

- c) R2026-0047: A Resolution authorizing an amendment to Contract No. 3014 with Young Women's Christian Association of Greater Cleveland, Ohio dba YWCA Greater Cleveland for operation and case management services at the Norma Herr and Walton Road Women's Shelters for the period 1/1/2023 - 12/31/2025 to extend the time period to 10/31/2026, to amend terms, and for additional funds in the amount not-to-exceed \$2,113,995.00, effective 1/1/2026; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.

**Ms. LeVine Ross; Ms. Helen Forbes Fields President and Chief Executive Officer and Ms. Lisa Fuente, Director of Finance, YWCA Greater Cleveland, addressed the Committee regarding Resolution No. R2026-0047. Discussion ensued.**

**Committee members asked questions of Ms. Ross, Ms. Forbes-Fields and Ms. Fuente pertaining to the item, which they answered accordingly.**

**On a motion by Mr. Casselberry with a second by Mr. Schleper, Resolution No. R2026-0047 was considered and approved by unanimous vote to be referred to the full Council agenda with a recommendation for passage under second reading suspension of the rules.**

6. MISCELLANEOUS BUSINESS

**There was no miscellaneous business.**

7. ADJOURNMENT

**With no further business to discuss, Chairman Sweeney adjourned the meeting at 1:37 p.m., without objection.**

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0048

Sponsored by: <b>Councilmember Sweeney</b>	<b>A Resolution</b> awarding a total sum, not to exceed \$10,000, to the Canopy Child Advocacy Center for general operations from the District 3 ARPA Community Grant Fund; and declaring the necessity that this Resolution become immediately effective.
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**WHEREAS**, Cuyahoga County received \$239,898,257 from the Federal Government through the American Rescue Plan Act (“ARPA”); and

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

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

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

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

**WHEREAS**, the Cuyahoga County Council desires to provide funding from the District 3 ARPA Community Grant Fund in the amount \$10,000 to the Canopy Child Advocacy Center for general operations; and

**WHEREAS**, the Canopy Child Advocacy Center estimates approximately 1,530 children will be served annually through this award; and

**WHEREAS**, the Canopy Child Advocacy Center estimates approximately 20 permanent and temporary jobs will be created or retained through this project; and

**WHEREAS**, the Canopy Child Advocacy Center estimates the total cost of the project is \$3,070,896.99; and

**WHEREAS**, the Canopy Child Advocacy Center indicates the other funding source(s) for this project includes:

- A. \$11,500 from the Community West Foundation

- B. \$93,750 from the Cleveland Foundation
- C. \$5,000 from the Andrews Foundation; and

**WHEREAS**, the Canopy Child Advocacy Center is estimating the start date of the project will be March 2026 and the project will be completed by February 2027; and

**WHEREAS**, the Canopy Child Advocacy Center requested \$10,000 from the District 3 ARPA Community Grant Fund to complete this project; and

**WHEREAS**, the Cuyahoga County Council desires to provide funding in the amount of \$10,000 to the Canopy Child Advocacy Center to ensure this project is completed; and

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

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

**SECTION 1.** That the Cuyahoga County Council hereby awards a not-to-exceed amount of \$10,000 to the Canopy Child Advocacy Center from the General Fund made available by the American Rescue Plan Act revenue replacement provision for general operations.

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

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

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

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

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





**Cuyahoga County  
Council**

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

**COUNTY AMERICAN RESCUE PLAN ACT APPLICATION**

<b>APPLICANT INFORMATION:</b>	
<b>Name of Requesting Entity (City, Business, Non-Profit, etc.):</b> Canopy Child Advocacy Center	
<b>Address of Requesting Entity:</b> 1711 East 27 <sup>th</sup> Street, Cleveland, Ohio 44114	
<b>County Council District # of Requesting Entity:</b> Ward 7	
<b>Address or Location of Project if Different than Requesting Entity:</b>	
<b>County Council District # of Address or Location of Project if Different than Requesting Entity:</b>	
<b>Contact Name of Person Filling out This Request:</b> Jennifer Johnson	
<b>Contact Address if different than Requesting Entity:</b>	
<b>Email:</b> jjohnson@canopycac.org	<b>Phone:</b> 216-574-4325
<b>Federal IRS Tax Exempt No.:</b> 84-3398528	<b>Date:</b>

## PROJECT DESCRIPTION

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

General Operating Funds Request

Canopy Child Advocacy Center serves as the coordinated community response to child abuse in Cuyahoga County. As the county's only fully accredited Child Advocacy Center (CAC) through the National Children's Alliance, Canopy provides a safe, child-friendly environment where children and families affected by abuse can access comprehensive, trauma-informed services at no cost to them. By centralizing care in one location, Canopy minimizes re-traumatization while ensuring timely access to critical support.

Services include recorded forensic interviews, victim advocacy, evidence-based mental health treatment, specialty medical care delivered in our on-site medical facility, and coordinated multidisciplinary case review. Canopy convenes a highly collaborative multidisciplinary team (MDT) consisting of law enforcement, child protective services, prosecutors, medical providers, mental health professionals, and victim advocates. This team approach streamlines investigations, reduces duplication, and promotes child safety, healing, and long-term well-being.

A cornerstone of Canopy's work is victim advocacy. Family Advocates support children and non-offending caregivers from intake through case resolution, helping families navigate the criminal justice process, preparing court proceedings, and connecting to essential community resources. These services are especially critical, as children and families referred to Canopy are often experiencing acute crisis and instability.

Without a coordinated CAC model, children may be required to recount their experiences to multiple professionals—on average around 15 times—significantly increasing trauma and distress. Since opening in November 2018, Canopy has served nearly 4,300 children, with every child being offered family advocacy and support services. General operating funds are essential to sustaining this comprehensive, collaborative model and ensuring uninterrupted access to services for vulnerable children and families across Cuyahoga County.

Canopy provides services year-round, with weekly MDT case review meetings and services ongoing throughout the life of each case. Program progress and effectiveness are tracked through the number of children served, utilization of services, service provision, and outcomes related to multidisciplinary coordination and case resolution.

**Project Start Date:**

3/1/2026

**Project End Date:**

2/28/2027

**IMPACT OF PROJECT:**

**Who will be served:**

Canopy serves children experiencing sexual abuse, severe physical abuse, neglect, human trafficking, and those at risk of human trafficking up to age 21. The majority of Canopy’s clients are black, female, and between the ages of 0–12, most of whom are experiencing sexual abuse.

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

1,530 children were served in 2025

**Will low/moderate income people be served; if so how:** Most children served reside in some of Cleveland’s lowest-income neighborhoods, including Hough, Central, and Slavic Village. Families in crisis access a single, child-friendly center offering recorded forensic interviews, victim advocacy, mental health treatment, and specialty medical care at no cost, removing financial barriers to care. Canopy and its multidisciplinary team (MDT) partners collaborate to reduce trauma, prevent further harm, and ensure equitable access to comprehensive services for low- to moderate-income children and families.

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

Canopy’s work is deeply embedded in the Cuyahoga County community and strengthens existing systems that serve children and families affected by abuse. As the county’s coordinated community response hub and first point of care for children in crisis, Canopy works in close collaboration with community partners to ensure timely, trauma-informed intervention.

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

20 Jobs retained- funding will contribute to ensuring that when different funding sources change, we will remain able to contribute to staff salaries.

Zero jobs created

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

By centralizing forensic, medical, advocacy, and mental health services in one child-friendly location, the program reduces travel for families and professionals, lowering transportation-related emissions. A shared multidisciplinary facility minimizes duplication of space, equipment, and resources, supporting more efficient and sustainable service delivery. Coordinated processes further reduce redundant documentation and administrative waste.

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

By integrating forensic interviews, victim advocacy, medical care, and mental health services within one child-friendly setting, this initiative demonstrates a proven, trauma-informed model that reduces system fragmentation and re-traumatization. Its success provides a scalable framework for expanding coordinated services, informing policy and funding decisions, and supporting the development of new education, intervention, and prevention initiatives.

**FINANCIAL INFORMATION:**

**Total Budget of Project:**

\$3,070,896.99

Salaries, professional services, benefits, insurance, occupancy, utilities and "other"

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

Community West Foundation, \$11,500

Cleveland Foundation \$93,750

Andrews Foundation \$5,000

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

**\$10,000**

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

Canopy works to raise diversified funding throughout our fiscal year. There are specific organizations that align with Canopy's mission and support general operating. Canopy fundraises thru annual appeals, yearly fundraisers, and major gifts donors in order to continue to support general operating funds. With the opportunity that this funding will provide, Canopy is confident that we will be able to work to secure other sources that will contribute to funding general operations.

**DISCLAIMER INFORMATION AND SIGNATURE:**

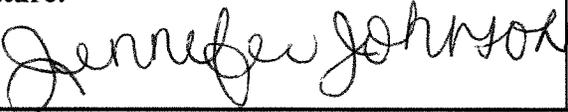
**Disclaimer:**

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

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

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

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

<b>Printed Name:</b> Jennifer Johnson	
<b>Signature:</b> 	<b>Date:</b> 1/30/26

<b>Additional Documents</b>
<b>Are there additional documents or files as part of this application? Please list each documents name:</b>
W9
Bureau of Workers Compensation Certificate
Certificate of Liability Insurance
Proof of Registration as a County Vendor
Proof of Registration with the County Inspector General's Office

# County Council of Cuyahoga County, Ohio

## Resolution No. R2026-0065

<p>Sponsored by: <b>County Executive Ronayne/Department of Health and Human Services/Division of Children and Family Services</b></p>	<p><b>A Resolution</b> authorizing an amendment to Agreement No. 3853 with Cuyahoga County Board of Developmental Disabilities for Medicaid Home and Community-based Services for youth with developmental disabilities for the period 1/1/2024 – 3/31/2027 to extend the time period to 12/31/2027, and for additional funds in the amount not-to-exceed \$1,400,000.00, effective upon signatures of all parties; authorizing the County Executive to execute the amendment and all other documents consistent with this Resolution; and declaring the necessity that this Resolution become immediately effective.</p>
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**WHEREAS**, the County Executive/Department of Health and Human Services/Division of Children and Family Services recommends an amendment to Agreement No. 3853 with Cuyahoga County Board of Developmental Disabilities for Medicaid Home and Community-based Services for youth with developmental disabilities for the period 1/1/2024 – 3/31/2027 to extend the time period to 12/31/2027, and for additional funds in the amount not-to-exceed \$1,400,000.00, effective upon signatures of all parties; and

**WHEREAS**, the primary goals of this project are to: (a) provide appropriate housing and services for children with developmental disabilities. and (b) transition youth into the adult developmental disabilities system; and

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

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

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

**SECTION 1.** That the Cuyahoga County Council hereby authorizes an amendment to Agreement No. 3853 with Cuyahoga County Board of

Developmental Disabilities for Medicaid Home and Community-based Services for youth with developmental disabilities for the period 1/1/2024 – 3/31/2027 to extend the time period to 12/31/2027, and for additional funds in the amount not-to-exceed \$1,400,000.00, effective upon signatures of all parties.

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

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

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

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

Yeas:

Nays:

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

First Reading/Referred to Committee: February 24, 2026  
Committee(s) Assigned: Health, Human Services & Aging

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

**PURCHASE-RELATED TRANSACTIONS**

Title	Division of Children and Family Services and Cuyahoga County Board of Developmental Disabilities Supportive Services agreement	
Department or Agency Name	Division of Children and Family Services	
Requested Action	<input type="checkbox"/> Contract <input type="checkbox"/> Agreement <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Revenue Generating <input type="checkbox"/> Purchase Order <input type="checkbox"/> Other (please specify):	

Original (O)/ Amendment (A-# )	Contract No. (If PO, list PO#)	Vendor Name	Time Period	Amount	Date BOC/Council Approved	Approval No.
O	3853	Cuyahoga County Board of Development Disabilities	1/1/2024 – 12/31/2025	\$1,400,000.00	12/1/2023	R2023-0334
A1	3853	Cuyahoga County Board of Development Disabilities	Eff upon executive signature – 3/31/2027	\$200,000.00	11/7/2025	BC2025-688
A2	3853	Cuyahoga County Board of Development Disabilities	Eff upon executive signature – 12/31/2027	\$1,400,000.00	Pending	pending

Service/Item Description (include quantity if applicable). When submitting an amendment, address any changes to the time period of the agreement, reduction or addition of funds, changes to the existing scope of services, changes to service rates/costs, and retroactive applicability of the changes, if any.  
 Division of Children & Family Services Cuyahoga County Board of Developmental Disabilities agreement for reimbursement for Medicaid Home and Community Based Services from 2026 - 2027

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):
1. Coordination of care and supports for youth in DCFS custody with disabilities that are eligible for and receiving services from CCBDD
  2. CCBDD is responsible for the coordination provision of housing for DD youth as part of the youth’s long-term transition of care plan.
  3. CCBDD supports and helps DD youth receive all the services needed.

In the boxes below, list Vendor/Contractor, etc. Name, Street Address, City, State and Zip Code. Beside each vendor/contractor, etc. provide owner, executive director, other (specify). If there are multiple vendors copy this table and complete for each vendor.

Vendor Name and address:	Owner, executive director, other (specify):
Cuyahoga County Board Developmental Disabilities 1275 Lakeside Ave East Cleveland, OH 44114	Amber Gibbs, Superintendent/CEO
Vendor Council District:	Project Council District:
7	County Wide
If applicable provide the full address or list the municipality(ies) impacted by the project.	

COMPETITIVE PROCUREMENT	NON-COMPETITIVE PROCUREMENT
RQ# _____ <input type="checkbox"/> RFB <input type="checkbox"/> RFP <input type="checkbox"/> RFQ <input type="checkbox"/> Informal <input type="checkbox"/> Formal Closing Date:	Provide a short summary for not using competitive bid process. This is a government-to-government agreement with the Board of DD. They are a government agency who provides Medicaid Waiver services to DD youth.  *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 checked="" 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  No  Yes If yes, list date of TAC approval and answer the questions below.

List date of TAC approval	Date:
---------------------------	-------

Check if item on IT Standard List of approved purchase and provide date of TAC approval.

Check if item is ERP related?  No  Yes.

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

FUNDING SOURCE: Please provide the complete, proper name of each funding source (No acronyms). Include % for each funding source listed. 65% Health and Human Services Levy and 35% Federal Title IV-E

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

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

HS215110/56110/UCH05510

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:

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:

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

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

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

HISTORY (see instructions):

## Department of Purchasing – Required Documents Checklist

Upload as “word” document in OnBase Document Management

Infor/Lawson RQ# (if applicable):	N/A
Buyspeed RQ# (if applicable):	N/A
Infor/Lawson PO # Code (if applicable):	AMND 2
CM Contract#	3853

Late Submittal Required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Why is the contract being submitted late?		
What is being done to prevent this from reoccurring?		

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			CM	BRM
Justification Form			CM	BRM
IG#			n/a	N/A
Annual Non-Competitive Bid Contract Statement <i>(See Contracts Checklist Glossary on the intranet for form requirements).</i>	Date:		n/a	N/A
Debarment/Suspension Verified	Date:	1/16/2026	CM	BRM
Auditor’s Findings	Date:	1/16/2026	CM	BRM
Independent Contractor (I.C.) Form	Date:		n/a	N/A
<i>Cover - Master contracts only</i>			n/a	N/A
Contract Evaluation – <i>if required provide most recent CM history on contract history table (see pg 2)</i>			CM	BRM
TAC/CTO Approval or IT Standards <i>(if required attach and identify relevant page #s or meeting approval number)</i>			n/a	N/A
Checklist Verification			cm	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	CM
Matrix Law Screen shot	CM
COI	N/A
Workers’ Compensation Insurance	N/A
Original Executed Contract (containing insurance terms) & all executed amendments	CM

## Department of Purchasing – Required Documents Checklist

### CONTRACT SPENDING PLAN

Time Period	Accounting Unit	Account Number	Activity Code	Account Category or Subaccount	Dollar Amount
Eff. upon Executive signature – 12/31/2026	HS215110	56110	UCH05510	<b>56110</b>	\$700,000.00
<b>1/1/2027 – 12/31/2027</b>	HS215110	56110	UCH05510	56110	\$700,000.00
			<b>TOTAL</b>		<b>\$1,400,000.00</b>

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

<b>CE/AG# (if applicable)</b>		N/A			
<b>Infor/Lawson PO# and PO Code (if applicable)</b>		AMND,GOVP			
<b>Lawson RQ# (if applicable)</b>		N/A			
<b>CM Contract#</b>		3853			
	Original Amount	Amendment Amount (if applicable)	Original Time Period/Amended End Date	BOC/ Resolution Approval Date	BOC/ Resolution Approval #
<b>Original Amount</b>	<b>\$1,400,000.00</b>		<b>1/1/24 – 12/31/25</b>	<b>12/1/23</b>	<b>R2023-0334</b>
<b>Prior Amendment Amounts (list separately) (A-# )</b>	<b>A-1</b>	<b>\$200,000.00</b>	<b>Eff. upon exec signature – 3/31/2027</b>	<b>11/7/2025</b>	<b>BC2025-688</b>
		\$			
		\$			
<b>Pending Amendment</b>	<b>A-2</b>	<b>\$1,400,000</b>	<b>Eff. upon executive signature – 12/31/2027</b>	<b>Pending</b>	<b>pending</b>
<b>Total Amendments</b>		<b>\$1,600,000</b>			
<b>Total Contract Amount</b>		<b>\$3,000,000</b>			

### PURCHASING USE ONLY

<b>Prior Resolutions:</b>	R2023-0334, BC2025-688
<b>CM#:</b>	3853
<b>Vendor Name:</b>	Cuyahoga County Board of Development Disabilities
<b>Time Period:</b>	1/1/2024-3/31/2027 EXT 12/31/2027
<b>Amount:</b>	\$1,400,000.00
<b>History/CE:</b>	YES
<b>EL:</b>	OK
<b>Purchasing Notes:</b>	
<b>Purchasing Agents Initials and date of approval</b>	BRM 1/27/2026

## CONTRACT EVALUATION FORM

<b>Contractor</b>	Cuyahoga County Board of Developmental Disabilities				
<b>Current Contract History: CE/AG# (if applicable) Infor/Lawson PO#:</b>	3853				
<b>RQ#</b>	n/a				
<b>Time Period of Original Contract</b>	1/1/2024 – 12/31/2025				
<b>Background Statement</b>	The primary goal of the project is the coordination of care and supports for youth in DCFS custody with disabilities that are eligible for and receiving services from CCBDD				
<b>Service Description</b>	Under this agreement CCBDD is responsible for the coordination and provision of housing for youth with developmental disabilities as part of the youth's long-term transition of care plan				
<b>Performance Indicators</b>	Support youth in DCFS custody with disabilities that are eligible for and receiving services from CCBDD				
<b>Actual Performance versus performance indicators (include statistics):</b>	CCBDD has worked collaboratively with DCFS to provide all needs for the youth served under this contract including housing and any other needed supports				
<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>	CCBDD has been a great partner in supporting DCFS youth who are aging out of care and eligible with there services. CCBDD has supported DCFS with some of our higher need youth who are at times difficult to maintain in a traditional placement setting, by identifying housing and appropriate supports.				
<b>Department Contact</b>	Carletta McCoy DCAP Karen Stormann DCFS				
<b>User Department</b>	Division of Children and Family Services				

Date	10/17/2025
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