

**AGREEMENT**  
**(Housing Resources Commission)**

**THIS AGREEMENT**, made by and between **JACKSON COUNTY, MISSOURI**, a Constitutional Home Rule Charter County of the First Class of the State of Missouri, acting by and through its **Housing Resources Commission**, hereinafter referred to as "the County" and a Missouri not-for-profit corporation, **HOPE HOUSE, P.O. BOX 577, LEE'S SUMMIT, MO 64063**, hereinafter referred to as "Contractor".

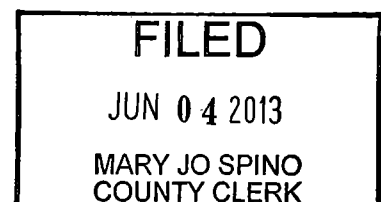
**WHEREAS**, on June 4, 1991, the voters of Jackson County authorized the County Legislature to impose a \$3.00 user fee on all instruments recorded with the County's Department of Records, the proceeds of which fee is to be used to provide funds for assistance to homeless persons; and,

**WHEREAS**, the County actually imposed said fee by Ordinance No. 1986, dated June 10, 1991; and,

**WHEREAS**, by Ordinance No. 2030, dated September 3, 1991, the Legislature created the Housing Resources Commission and designated said Commission as the agency of the County responsible for determining the allocation and distribution of the proceeds of the user fee; and,

**WHEREAS**, the Commission has reviewed Contractor's proposal for the expenditure of County user fee funds for the purpose of providing assistance to homeless persons in Jackson County; and,

**WHEREAS**, the Commission has determined that it is in the best interests of the County's citizens to provide funding to Contractor according to the terms and conditions



hereof;

**NOW, THEREFORE**, it is agreed by and between the parties as follows:

1. **SERVICES**. Contractor shall use the proceeds of this Agreement solely for the purpose of providing assistance to homeless persons in Jackson County, Missouri. Contractor agrees to use the funds as set out on the Housing Resources Commission Funding Request Form, attached hereto as Exhibit A.

2. **PAYMENT**. The County shall pay to Contractor a total amount not to exceed \$10,000.00 for the purpose of providing assistance to homeless persons in Jackson County, Missouri. One quarter of this sum, or \$2,500.00, shall be paid to Contractor on a quarterly basis for the periods ending March 31, 2013, June 30, 2013, September 30, 2013, and December 31, 2013, upon receipt of Contractor's invoice and supporting documentation, provided that Contractor has submitted to the County the report(s) required under Paragraph 3 and Paragraph 5 hereof. Each quarter's payment will be issued after Contractor has submitted the required invoices and supporting documentation for reimbursement.

3. **REPORTS/OTHER DOCUMENTATION**. Under this Agreement, Contractor shall submit appropriate reports, including copies of invoices and cancelled checks and/or a copy of the face of the check and corresponding bank statements and other documentation, as requested by the Housing Resources Commission staff to show that funds paid to Contractor by the County are being used for the purpose of providing assistance to homeless persons in Jackson County, Missouri. If the reports submitted do not satisfactorily demonstrate appropriate expenditures of County funds, payments

are subject to downward adjustment to reflect the amounts actually spent on allowable services provided during the previous quarter. The final request for payment shall include a Quarterly Report and an Annual Report, which shall set out the program objectives and accomplishments, and a final reconciliation of funds. The Annual Report shall be submitted no later than January 31, 2014. Section 67.1071, R.S.Mo., specifically requires the Annual Report to include "statistics on the number of persons served by the agency, and shall include the results of an independent audit of expenditures of funds received by Contractor pursuant to this Agreement. Failure to submit said reports, including the Annual Report, shall result in the loss of future funding by the County.

4. **MAINTENANCE OF ACCOUNTS.** The parties recognize that this funding by the County serves to improve the quality and effectiveness of homelessness programs in Jackson County, Missouri. It is, therefore, declared as the express intent of the parties that the services to be rendered hereunder shall be in addition to those deemed necessary and required to maintain the efficient and effective operation of Contractor in its normal duties, and that none of the funds paid by the County pursuant to this Agreement shall serve to reduce any funds budgeted, or to be budgeted, by Contractor for operations as they exist at the time of this Agreement. Contractor shall not commingle the County's funds and shall keep funds received under this Agreement separate from all other Contractor funds and accounts until expended as herein provided.

5. **SUBMISSION OF DOCUMENTS.** No payment shall be made under this Agreement unless Contractor shall have submitted to the County's Director of Finance

and Purchasing: (1) a written proposal setting out in detail the intended use of the County's funding, including the target population to be served; (2) Contractor's IRS Form 990 from the previous fiscal or calendar year; (3) a statement of Contractor's total budget for its most recent fiscal year; and (4) a detailed explanation of actual expenditures of the County's funds (pertains to final payments and payments on contracts for future years). If Contractor has previously received funding from the County, to be eligible for future payments, Contractor must submit either an audited financial statement for Contractor's most-recent fiscal or calendar year by March 31 of the following year, or a certified public accountant's program audit of the County's funds by January 31 of the following year. Any documents described herein which were submitted to the Director of Finance and Purchasing as a part of an application for funding need not be resubmitted to qualify for payment. No payment shall be made if Contractor is out of compliance on any other County contract, or has not paid county taxes on all properties owned by Contractor and assessed by the County.

6. **AUDIT**. The parties agree that the County may, for any reason and at any given time, examine and audit the books and records of Contractor pertaining to its finances and operations. Further, Contractor agrees to establish and adopt such accounting standards and forms as recommended by the County prior to receipt of the County's first distribution of funds under the terms of this Agreement. The forms used to document expenditure of these funds may be changed from time to time by the County.

7. **DEFAULT**. If Contractor shall default in the performance or observation of any covenant, term or condition herein contained to be performed by Contractor, the County

shall give Contractor ten days written notice, setting forth the default. If said default shall continue and not be corrected by Contractor within ten days after receipt of notice from the County, the County may, at its election, terminate this Agreement and withhold any payments not yet made to Contractor. Said election shall not, in any way, limit the County's rights to sue for breach of this Agreement.

8. **TERM.** The term of this Agreement shall commence January 1, 2013, and shall continue until December 31, 2013.

9. **LIABILITY.** No party to this Agreement shall assume any liability for the acts of the other party, its officers, agents, or employees.

10. **CONFLICT OF INTEREST.** Contractor warrants that no officer or employee of the County, whether elected or appointed, shall, in any manner whatsoever, be interested in or receive any benefit from the profits or emoluments of this Agreement.

11. **EMPLOYMENT OF UNAUTHORIZED ALIENS PROHIBITED.** Pursuant to §285.530.1, RSMo, Contractor assures that it does not knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri and/or Jackson County, and shall affirm, by sworn affidavit and provision of documentation, its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services. Further, Contractor shall sign an affidavit, attached hereto and incorporated herein as Exhibit B, affirming that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services.

12. **INFORMATIONAL REPORTING.** A representative of Contractor shall attend

meetings of the County Legislature and the Housing Resources Commission when so requested by either of the above-referenced entities. The representative shall be prepared to answer any questions concerning payments made pursuant to this Agreement.

13. **TERMINATION**. Except as provided in Paragraphs 7 and 16 hereof, this Agreement may be terminated by either of the parties upon thirty days written notice to the other party.

14. **SURPLUS FUNDS**. Any surplus funds not spent at the end of this Agreement term shall be returned to the County by the fifteenth of the month following the termination of this Agreement. These funds shall not be subject to reappropriation. The term "surplus funds" refers only to those funds that have not been committed for costs or purposes by purchase order, contract, or other formal documentation within the Agreement term.

15. **PERFORMANCE REVIEW**. The performance of this Agreement shall be subject to review by the County or its designated agent. The County's Housing Resources Commission Director shall review the performance of this Agreement according to his/her responsibilities. Contractor agrees to file all required forms with the Housing Resources Commission Director. The Housing Resources Commission may provide to Contractor a list identifying specific areas funded by the proceeds of this Agreement to be reviewed or audited. The Housing Resources Commission and Contractor shall agree on the definition and scope of a review audit of each specific area identified. Contractor shall conduct internal review of each specific area identified and

shall provide its findings to the Commission. The parties recognize that all books, records, accounts, and any other documents in the possession of the County relative to the funding of this Agreement, are public records and open for inspection and photocopying in accordance with Chapter 610, R.S.Mo.

16. **REMEDIES FOR BREACH.** Contractor agrees to faithfully observe and perform all of the terms, provisions, and requirements of this Agreement, and Contractor's failure to do so constitutes a breach of this Agreement. In such event, Contractor consents and agrees as follows:

- A. The County may, without prior notice to Contractor, immediately terminate this Agreement; and
- B. The County shall be entitled to collect from Contractor all payments made by the County to Contractor for which Contractor has not yet rendered services in accordance with this Agreement, and to collect the County's reasonable attorney's fees, court costs and service fees if it is necessary to bring action to recover such payments.

17. **SEVERABILITY.** If any covenant or other provision of this Agreement is invalid, or incapable of being enforced by reason of any rule of law or public policy, all other conditions and provisions of this Agreement shall, nevertheless, remain in full force and effect; and no covenant or provision shall be deemed dependent upon any other covenant or provision unless so expressed herein.

18. **ASSIGNMENT.** Contractor shall not assign any portion or the whole of this Agreement without the prior written consent of the County.

19. **DISCONTINUANCE OF PROGRAM**. In the event Contractor should elect to discontinue this program, or file for bankruptcy, or participate in a reorganization, or go out of existence, or should a court of competent jurisdiction render a final decision in any way invalidating this Agreement or its purposes, Contractor shall remit any proceeds of this Agreement as are unexpended to the County.

20. **APPROPRIATION OF FUNDS**. Contractor and the County recognize that the County intends to satisfy its financial obligation to Contractor hereunder out of funds annually appropriated for that purpose by the County. County promises and covenants to make its best efforts to appropriate funds in accordance with this Agreement. In the event no funds or insufficient funds are appropriated and budgeted, or are otherwise unavailable by any means whatsoever for payment due hereunder, County shall immediately notify Contractor of this occurrence and this Agreement shall terminate on the last day for which appropriations were received, without penalty or expense to the County of any kind whatsoever, except as to the portions of the payment amounts herein agreed upon for which funds shall have been appropriated and budgeted or are otherwise available, or at any time after the last date that County has paid for the Services, if earlier.

County further agrees:

- a. That any funds authorized or appropriated for services rendered under this Agreement shall be applied to the payments hereunder until all such funds are exhausted.



b. That County will use its best efforts to obtain authorization and appropriation of such funds including, without limitation, the inclusion in its annual budget, a request for adequate funds to meet its obligation under this Agreement in full.

21. **CONFIDENTIALITY.** Contractor's records concerning the identities of those participating in its programs shall be strictly confidential; the County shall be entitled to examine said records in performing its audit and review functions, but shall not disclose said identities to any third party in any fashion.

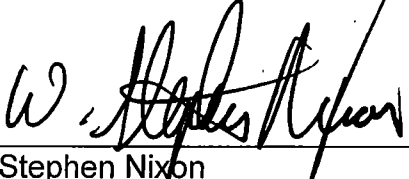
22. **COMPLIANCE WITH RFP.** At all times in connection with the performance of its services hereunder, Contractor agrees to comply with and abide by the General Conditions, Specifications, and Guidelines contained in the County's RFP No. 94-12. Failure to comply with the terms of the RFP shall be a breach, remediable under Paragraph 16 hereof. In the event of a conflict between any provision of this Agreement and a provision of the County's RFP No. 94-12, the provision of this Agreement shall govern.

23. **INDEMNIFICATION.** Contractor shall indemnify, defend and hold the County harmless from any and all claims, liabilities, damages, and costs (including reasonable attorney's fees directly related thereto) including but not limited to violation of civil rights and/or bodily injury to or death of any person and for damage to or destruction of property if and to the extent caused by the negligence, willful misconduct or omissions of Contractor during the performance of this Agreement.

24. **INCORPORATION.** This Agreement incorporates the entire understanding and agreement of the parties.

IN WITNESS WHEREOF, the County and Contractor have executed this Agreement this 4<sup>th</sup> day of June, 2013.

APPROVED AS TO FORM:

  
\_\_\_\_\_  
W. Stephen Nixon  
County Counselor

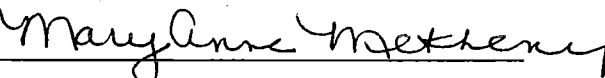
JACKSON COUNTY, MISSOURI

By   
\_\_\_\_\_  
Michael D. Sanders  
County Executive

ATTEST:

  
\_\_\_\_\_  
Mary Jo Spino  
Clerk of the Legislature


HOPE HOUSE

By   
\_\_\_\_\_  
Title CEO  
Federal Tax I.D. 43-1265685

**REVENUE CERTIFICATE**

I hereby certify that there is a balance otherwise unencumbered to the credit of the appropriation to which this Agreement is chargeable, and a cash balance otherwise unencumbered in the treasury from which payment is to be made, each sufficient to meet the obligation of \$10,000.00, which is hereby authorized.

June 3, 2013  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Director of Finance and Purchasing  
Account #043-7001-56789  
7001 2013 017



**HOUSING RESOURCES COMMISSION FUNDING REQUEST FORM  
2013 BUDGET**

415 E 12th Street, 2nd Floor  
Kansas City, MO 64106

Email: [hrc@jacksongov.org](mailto:hrc@jacksongov.org)

Section A: Organization or Agency Information ..... page 1  
Section B: Agency's 2012 and 2013 Revenue Information ..... page 2  
Section C: Individual Program Budget ..... page 3  
Section D: Program Information ..... pages 4-10

**Section A: Organization or Agency Information**

Name: Hope House, Inc.

Full Address- City, State & Zip Code: P.O. Box 577, Lee's Summit, MO 64063

Phone No: 816-461-4188

Fax: 816-257-9350

Website Address: [www.hopehouse.net](http://www.hopehouse.net)

Federal Tax ID No: 43-1265685

Fiscal Year Cycle: FY2013 (10/1/12-9/30/13)

Executive Director:

MaryAnne Metheny

Name and Title of Principal Contact Person:

MaryAnne Metheny, Chief Executive Officer

Phone No: 816-461-4188, ext. 331

Email Address: [mmetheny@hopehouse.net](mailto:mmetheny@hopehouse.net)

Major Program Activity (ies) - Check Only Those Activities For Which You Are Requesting Funding:

Personal Services (Case Manager)

Bednights  Emergency Shelter  Transitional Living

Mortgage/Rent Assistance  Utilities  Other - Food Clothing

Submittal of this request has been authorized by:

*MaryAnne Metheny*

Date:

*11-30-12*

## Section B: Agency's 2012 and 2013 Revenue Information

### Agency's 2013 Projected Revenue Information

| Funding Entity                      | Agency's 2013 Total Projected Revenue Source You Will Request 2013 Funding From  | Projected Amount    | % of Total Revenue |
|-------------------------------------|--|---------------------|--------------------|
| Federal                             | Departments of Justice, Agriculture, HUD, & HHS                                  | \$ 966,680          | 25                 |
| State                               | Department of Social Services & Public Safety                                    | \$ 283,898          | 7                  |
| Jackson County                      | COMBAT, Mental Health Levy, Domestic Violence Board, Housing Resources Commision | \$ 326,549          | 8                  |
| Other Counties                      | N/A  | \$ -                | 0                  |
| City                                | City of Independence   | \$ 10,929           | 0                  |
| Charity/Donations                   | Corporate, Churches, Individuals, Service Organizations, & Foundations           | \$ 1,160,772        | 30                 |
| Fundraisers                         | Corporations & Individuals   | \$ 554,385          | 14                 |
| Other                               | Court Fees, United Way, Interest, Program Fees, Endowment                        | \$ 574,172          | 15                 |
| <b>2013 Total Projected Revenue</b> |  | <b>\$ 3,877,385</b> |                    |

### Agency's 2012 Revenue Information

| Funding Entity            | Agency's 2012 Total Revenue Source You Received Funding From  | Amount              | % of Total Revenue |
|---------------------------|---|---------------------|--------------------|
| Federal                   | Departments of Justice, Agriculture, HUD, & HHS   | \$ 1,055,255        | 27                 |
| State                     | Department of Social Services & Public Safety   | \$ 234,209          | 6                  |
| Jackson County            | COMBAT, Mental Health Levy, Domestic Violence Board, Housing Resources Commision, Christmas In the Park | \$ 366,910          | 9                  |
| Other Counties            | N/A   | \$ -                | 0                  |
| City                      | City of Independence  | \$ 10,929           | 0                  |
| Charity/Donations         | Corporate, Churches, Individuals, Service Organizations, & Foundations                                  | \$ 870,145          | 23                 |
| Fundraisers               | Corporations & Individuals  | \$ 580,441          | 15                 |
| Other (please list)       | Court Fees, United Way, Interest, Program Fees, Endowment   | \$ 744,930          | 19                 |
| <b>2012 Total Revenue</b> |   | <b>\$ 3,862,819</b> |                    |

If your agency received funding from Jackson County in 2012, please identify the funding source, amount and program name below.

| Jackson County Funding Source                  | Yes                                 | No                                  | Amount            | Program Name                          |
|--|-------------------------------------|-------------------------------------|-------------------|---------------------------------------|
| COMBAT   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | \$ 20,485         | Substance Abuse Treatment             |
| Mental Health Levy                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | \$ 283,375        | Comm. Mental Health & Innovatlons     |
| Board of Services for Developmentally Disabled | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | \$ -              |                                       |
| Domestic Violence Board                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | \$ 57,049         | DV Shelter funds (general operations) |
| Housing Resources Commission                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | \$ 5,000          | Bednights                             |
| Outside Agency Program                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | \$ 1,000          | Christmas In the Park (bednights)     |
| <b>2012 Total Jackson County Funding</b>       |                                     |                                     | <b>\$ 366,910</b> |                                       |

**PERSONAL SERVICES**

For each salary request below please attach a job description of duties

| Position / Title (Case Managers Only)   | Annual Salary | % of Salary to be funded by Jackson Co HRC | Amount of Salary to be funded by Jackson Co HRC |
|---|---------------|--|---|
| <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>RECEIVED</b><br/> <b>FEB 01 2013</b><br/>                     JACKSON COUNTY<br/>                     AUDITORS OFFICE<br/>                     KANSAS CITY, MISSOURI                 </div> |               |  | \$ -  |
|   |               |  | \$ -  |
|   |               |  | \$ -  |
|   |               |  | \$ -  |
|   |               |  | \$ -  |
| Fringe Benefits (limited to 20% of salaries)  |               |  | \$ -  |
| <b>Total Personal Services</b>  |               |  | <b>\$ -</b>                                     |

**SHELTER ASSISTANCE - Bednights, Emergency Shelter, Transitional Living**

Maximum \$50 Per Individual / \$100 Per Family (Total \$300 Individual / \$500 Family)

| Type:<br>Bednights, Emergency Shelter, or Transitional Living | Unit Cost | Number of Units | Total Item Cost | 2013 Jackson County HRC Request | Matching Funds | Total Item Cost    |
|---|-----------|-----------------|-----------------|---------------------------------|----------------|--------------------|
| Emergency Shelter   | \$30      | 35,492          | \$1,064,760     | \$10,000                        | \$1,054,760    | \$1,064,760        |
| Transitional Housing  | \$30      | 5,283           | \$158,490       | \$0                             | -              | \$158,490          |
| <b>Total Shelter Assistance</b>                               |           |                 |                 | <b>\$ 10,000</b>                |                | <b>\$1,223,250</b> |

**MORTGAGE / RENTAL ASSISTANCE**

Client must provide statement of arrears or foreclosure from landlord (on letterhead) to qualify

| Type:<br>Mortgage or Rent                 | Unit Cost | Number of Units | Total Item Cost | 2013 Jackson County HRC Request | Matching Funds | Total Item Cost |
|---|-----------|-----------------|-----------------|---------------------------------|----------------|-----------------|
|   |           |                 |                 |                                 |                |                 |
| <b>Total Mortgage / Rental Assistance</b> |           |                 |                 | <b>\$ -</b>                     |                |                 |

**UTILITIES**

Client must provide statement of arrears on utility company letterhead to qualify

|                        | \$300 Maximum Per Client | Number of Units | Total Item Cost | 2013 Jackson County HRC Request | Matching Funds | Total Item Cost |
|------------------------|--------------------------|-----------------|-----------------|---------------------------------|----------------|-----------------|
|                        |                          |                 |                 |                                 |                |                 |
| <b>Total Utilities</b> |                          |                 |                 | <b>\$ -</b>                     |                |                 |

**OTHER (Food, Clothing)**

Maximum of \$50 Per Individual / \$100 Per Family Per Year

| Type:<br>Please Describe                     | Unit Cost | Number of Units | Total Item Cost | 2013 Jackson County HRC Request | Matching Funds | Total Item Cost |
|--|-----------|-----------------|-----------------|---------------------------------|----------------|-----------------|
|  |           |                 |                 |                                 |                |                 |
| <b>Total Other</b>                           |           |                 |                 | <b>\$ -</b>                     |                |                 |
| <b>TOTAL 2013 JACKSON COUNTY HRC REQUEST</b> |           |                 |                 |                                 | <b>\$</b>      | <b>10,000</b>   |

## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

### Agency History / Background

*Briefly describe your agency's history and background.*

In 1982, police in Independence, MO, repeatedly responded to domestic violence incidents in the same homes because there were no available beds at Kansas City's shelters. Barbara Potts, then Mayor of Independence, and a group of concerned citizens met to discuss the need for a domestic violence shelter in eastern Jackson County. The doors of Hope House's first shelter opened in a small home just six months later on January 1, 1983. As more women and children came to Hope House requesting residential and outreach support, the shelter and support services were consolidated in 1995 into a four-building campus. Following three domestic violence homicides in Lee's Summit, Hope House opened a similar facility there in 2002. A capital campaign completed in 2011 grew and enhanced the agency's physical facilities. Today, the agency offers a full-spectrum of services through two agency-owned campuses in Independence and Lee's Summit. Nightly providing safe refuge to at least 122 adult and child domestic abuse survivors, Hope House is Missouri's largest domestic violence shelter and the sole such agency in eastern Jackson County. It is committed to providing culturally competent, trauma informed care to more than 15,000 survivors each year, including 5,000 hotline callers. Hope House programming is guided by its mission to break the cycle of domestic violence by providing safe refuge and supportive services that educate and empower women and their children. Hope House will advocate social change that protects and engenders a person's right to live a life free of abuse.

Programs today include:

- **Emergency Shelter:** Along with providing access to and monitoring emergency shelter, Women's Advocates answer the 24-hour crisis hotline and provide support, advocacy, and resource referrals for women. Strengths-based case management emphasizes self-sufficiency, housing, and health.
- **Transitional Housing:** For six to 24 months, Housing Advocates provide housing-specific case management, resource referrals, and employment guidance to survivors residing in onsite or scattered site units.
- **Children's Services:** Children's Advocates provide activities that promote positive child development and parent/child interaction while Child/Family Therapists provide individual, group, and family therapy. At no time does Hope House offer counseling with the abusive individual.
- **Adult Therapy:** Therapists provide individual and group counseling, support groups, and addictions counseling to adult survivors.
- **Court:** Court Advocates provide information, support, and safety planning to survivors of domestic violence in twelve area courts including order of protection court. They also partner with five local police departments to implement and respond to lethality assessment screenings.
- **Legal:** Two contract attorneys and a paralegal provide a holistic civil legal assistance program to address the broad range of civil legal issues encountered by survivors.
- **Guardian:** Therapists/master's-level therapy interns provide monitored exchange and supervised visitation services to eliminate contact between custodial and non-custodial parents during custody exchanges for visitation.
- **BridgeSPAN:** At participating hospitals and clinics, Hospital Advocates provide direct services 24-hours a day to patients identified as domestic violence survivors, training for medical personnel, and assistance with protocol development.
- **Dental Clinic:** Volunteer dentists provide oral examinations, cleanings, x-rays, cavity fillings, and extractions in an onsite clinic.

Although the demands for shelter services have steadily increased over the past few years, agency funding has significantly decreased. Funding for Hope House's Emergency Shelter Program is vital to the safety of local adults and children.

## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

### Proposed Program

#### Detail functions to be performed by each program

Hope House respectfully requests \$10,000 from the Jackson County Housing Resources Commission to fund emergency shelter bednights for survivors of domestic violence and their children, or the cost to feed, clothe, and house a person for one night. Rendered homeless by their circumstances, domestic violence survivors and their children demonstrate complex, unique needs to which Hope House's services cater. Hope House offers secure, monitored shelter 24 hours a day, and staff are trained in the dynamics of domestic violence including relevant issues such as safety planning and confidentiality. Potential clients access shelter by calling the agency's 24-hour hotline and are accepted immediately as their need dictates and as space allows. Upon arrival, clients' basic needs for food, clothing, personal items, clean and safe beds, and support are addressed. An intake is also completed.

Hope House's Emergency Shelter Program utilizes a strengths-based, trauma-informed case management philosophy. Hope House's Women's Advocates partner with survivors of domestic violence to help them heal from the abuse they have endured and begin their lives anew. Within 72 hours of entering shelter, clients meet with a Women's Advocate for an initial advocacy session, the purpose of which is to complete a safety plan, provide crisis intervention, and discuss available services. At the first meeting with the assigned (ongoing) Woman's Advocate, the advocate and client complete a strengths assessment, which begins to outline the client's goals for the time they reside in shelter. This meeting also provides an opportunity to introduce options such as filing for an order of protection and/or Crime Victim's Compensation. Advocates and clients continue to meet throughout the client's stay. Advocates assist clients with exploring transportation options to accomplish their goals, and Hope House provides bus passes and cab fare to clients when possible. Hope House also has limited funds available to assist clients with rent deposits, utilities, car repairs, prescription medications, identification, and work uniforms. To stay attuned to trends and available resources, shelter personnel participate in the Homeless Services Coalition, the Mid America Assistance Coalition's Community Resource Connection meetings, and other collaborative networks. Children's Advocates partner with Women's Advocates to support survivors who enter shelter with children and youth. Children's Advocates provide targeted case management services, such as assistance with obtaining immunizations and ensuring that children/youth are enrolled in and have transportation to school. Children's Advocates also facilitate age-appropriate activities for children/youth.

Beyond case management, families residing in shelter have access to individual and group therapy and a substance abuse counseling program. Additionally, since the parent/child relationship often suffers in situations of domestic violence as mothers have had to focus on appeasing the abuser to keep herself and her children safe, Hope House offers individual, group, and family counseling for children.

There is no minimum or maximum number of days someone may reside in the Emergency Shelter Program. In FY12, the average length of stay for clients in shelter at Hope House was 28 days, including women who stayed for only 24 hours and those who stayed for extended periods of time. Prior to exit, Women's Advocates work with clients to prepare an aftercare plan to help ease the transition from shelter to community. Hope House's Emergency Shelter Program enables survivors to rebuild their lives, become self-sufficient, and live free of abuse.

## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

| Participants   |   |
|--|---|
| Identify the number of participants by County that each program serves |   |
| Jackson, MO  | 882   |
| Clay, Platte,<br>Cass, MO  | 80  |
| Wyandotte,<br>Johnson, KS  | 77  |
| Other<br>Missouri  | 53 (Plus 31 from other KS and USA counties) |

**Target Population**

Describe target population and demographics to be served by each program

The economic climate has caused it to be more difficult for survivors to find employment, provide for their children, and access financial resources. Clients consequently are residing longer in shelter. In FY12 (10/1/11-9/30/12), Hope House sheltered 666 women and 457 children. Approximately 79% of sheltered clients reported Jackson County, Missouri as their county of residence prior to entering shelter; all are homeless in Jackson County upon entry into Hope House's shelter. Racial demographics of adult clients included 57% white, 29% African American, 8% multiracial, 2% Asian/Pacific Islander and 4% other. Eight percent (8%) were of Hispanic ethnicity. English was clients' primary language (97%), followed next by Spanish (2%). Women's ages varied: 34% were 17-29, 32% were 30-39, 23% were 40-49, 10% were 50-59, and 1% was 60 and older. The average woman entering shelter brought two children. Fifty-four percent (54%) of children were boys. Children's age ranges included 44% were 0-4 years old, 30% were 5-9, 22% were 10-14, and 4% were 15-17. Congruent with national data, an overwhelming 80% of Hope House shelter clients reported household incomes of \$9,999 or less; 41% reported no income at all. Just 1% reported incomes greater than \$30,000. In the coming year, Hope House anticipates serving approximately the same number of clients as it did last year and that clients will share a similar demographic composition. Hope House's current cost of sheltering a single client for one night is \$30.00.



## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

### Service Delivery Area

*Identify your specific geographic service delivery area for each program.*

Hope House is located in and primarily serves eastern Jackson County, which includes the cities of Blue Springs, Grain Valley, Grandview, Independence, Lee's Summit, Oak Grove, Raytown, Sugar Creek and Kansas City, Missouri. Hope House does not utilize geographic residency as a criteria for its services, and for safety reasons, adult and child survivors from other cities and states have relocated to Jackson County to utilize Hope House shelter services. Hope House communicates multiple times each day with other Kansas City area domestic violence shelters regarding available bed space; this ensures appropriate referrals among shelters if a hotline caller prefers a certain area of town and/or if a shelter is operating at capacity.

### Fund Separation

*Indicate what measures your agency will take to ensure that funds received from Jackson County will be utilized for the benefit of Jackson County residents.*

Generally, Hope House considers all shelter residents to be Jackson County residents since they are homeless due to abuse and residing in an emergency shelter in Jackson County. Hope House tracks clients' residency prior to their shelter entry through a database and spreadsheet.

## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

### Approach & Method

List the top three (3) objectives for each program

1. At least 70% of clients will report an increased sense of safety.

2. At least 85% of clients will have basic needs met for themselves and their children.

3. At least 85% of clients will complete a safety plan at initial advocacy.

### Detail specific methods you will use to achieve these objectives

Hope House takes multiple steps to assist survivors in achieving the desired objectives. For one, Hope House provides survivors and their children with a physically safe environment protected by secured gates, doors, and security cameras. In addition, the shelter facilities are designed to provide survivors with a homelike atmosphere. For example, residents are provided with a warm bed, clothes, personal care items, and three meals each day. Additionally, Women's Advocates are present in shelter 24-hours per day to assist survivors in determining a plan for moving forward with their lives through the provision of case management and advocacy, resource referrals, safety planning, and crisis intervention and access to a variety of support services such as individual and group therapy.

## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

### Evaluation

How can the success of each program be evaluated?

Indicate performance measures or statistics you will use to demonstrate the success of each program.

Hope House evaluates the Emergency Shelter Program through the use of client surveys and through assessment of progress made toward identified goals. Specifically, Hope House measures clients' increased sense of safety by asking clients to complete a questionnaire at the initial advocacy session which occurs within 72 hours of intake and again after one week in shelter. On the questionnaire, clients are asked to assign a rating to their level of safety before coming to shelter and to assign a rating to their level of safety after being in shelter. The desired result is a two point improvement in the assigned rating. Secondly, Hope House strives to meet every client's basic needs. To measure this objective, clients are asked to respond to the basic needs question on the initial client satisfaction questionnaire at the initial advocacy session and again after one week in shelter. A positive outcome is determined by affirmative responses to the basic needs question that clients' needs of personal care items, food, clothing, and support were met. Lastly, Hope House aims for clients to have a safety plan in place to keep themselves safe. Every client is given a blank safety plan upon intake and also sets a goal with a Women's Advocate to complete the safety plan according to her unique situation. The desired result is the development of a personalized safety plan with a Women's Advocate within a client's first 72 hours in shelter.

## Section D: 2013 Program Information

Agency Name: Hope House, Inc.

Program Name: Emergency Shelter Bednights

### Mental Health

#### How does your agency deal with mental health due to homelessness?

Hope House has seen a steady rise in the number of domestic violence survivors entering shelter with a mental disability. From January 2007 to December 2011, the percentage of clients self-reporting mental disabilities rose from 23% to 31%. In FY12, 53% of clients reported past mental health hospitalizations, and 20% reported past suicide attempts (n=605). Additionally, 87% of adults and 64% of children exhibited signs of posttraumatic stress disorder (PTSD) (n=276 and 117, respectively). Serious mental health issues greatly increase the risk that a woman will become a victim of domestic violence and contribute significantly to her vulnerability in that relationship. To address survivors' mental health needs, Hope House is proud to boast a seasoned staff dedicated to working with homeless women and children impacted by domestic violence. The Therapy Department includes the Vice President of Clinical Services; one Assessment Specialist; four Women's Therapists, two of whom specialize in substance abuse treatment; and three Child/Family Therapists. All are master's level therapists, holding counselor or social work degrees, and are licensed or pursuing licensure. The team of nine has over 80 cumulative years of experience in the mental health field, 64 of which is in domestic violence specifically.

#### What programs does your agency have in place or utilize to address mental health issues for the homeless population?

Each new shelter client undergoes a mental health assessment with a licensed therapist or master's level intern within 72 hours of entry. Based upon the assessment, service recommendations are made. Services by target population include:

**Adults with severe mental illness:** As a whole, survivors with severe mental illness are unable or disinterested in participating in traditional individual and group therapies. Instead, interventions focus heavily on mental health related case management such as coordinating a long-term mental health care plan; accompanying clients to appointments and having consultations with providers to ensure that a client's current mental health status is accurately evaluated; monitoring clients' medication compliance, their continued stability in the shelter environment, and functional progress; and, in some cases, referring clients to an in-patient facility.

**Adults without severe mental illness:** The therapy program for shelter clients without severe mental health issues focuses on crisis intervention, group therapy that incorporates highly effective Energy Psychology approaches, numerous psycho-educational groups, and upon client request, individual therapy. Treatment plans largely focus on reducing the effects of trauma and the development of healthy coping strategies.

**Children:** Child/Family Therapists provide individual, group, and family therapy for children ages four and older. Like adults, the most common therapeutic issue for children is post-traumatic stress. Treatment focuses on reducing those effects, helping children feel safe, and improving their emotional and social functioning.

Exhibit B

WORK AUTHORIZATION AFFIDAVIT

As a condition for any service provided to the County, a business entity shall, by sworn affidavit and provision of documentation, affirm its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services.

Business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "business entity" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "business entity" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit.

Every such business entity shall complete the following affidavit affirming that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services. The completed affidavit must be returned as a part of the contract documentation.

This affidavit affirms that **Hope House**, is enrolled in, and is currently participating in, E-verify or any other equivalent electronic verification of work authorization operated by the United States Department of Homeland Security under the Immigration Reform and Control Act of 1986 (IRCA); and, **Hope House**, does not knowingly employ any person who is an unauthorized alien in conjunction with the contracted services.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

MaryAnne Metheny  
Authorized Representative's Signature  
Chief Executive Officer  
Title

MaryAnne Metheny  
Printed Name  
5/21/13  
Date

Subscribed and sworn before me this 21 day of May, 2013. I am commissioned as a notary public within the County of Jackson, State of Missouri, and my commission expires on September 5, 2016.

Angie Tuck  
Signature of Notary

5/21/13  
Date

**Sign &**

