

**IN THE COUNTY LEGISLATURE OF JACKSON COUNTY, MISSOURI**

**A RESOLUTION** authorizing the County Executive to execute an agreement with the Mid-America Regional Council to subcontract with Shepherd Center of Kansas City Central, for its Senior Companion Program, at a cost to the County not to exceed \$20,000.00.

**RESOLUTION NO. 18076**, January 28, 2013

**INTRODUCED BY** Theresa Garza Ruiz, County Legislator

WHEREAS, the Shepherd Center of Kansas City Central has submitted a funding request as a sub-contracting agency of the Mid-America Regional Council (MARC), for its Senior Companion Program; and,

WHEREAS, this program will provide assistance to low-income individuals in Jackson County who are 55 years of age or older and are in need of in-home support services; and,

WHEREAS, in the past this County-funded program was provided by Westport Cooperative Services Corporation, which has now merged with the Shepherd Center of Kansas City Central; and,

WHEREAS, the execution of this Cooperative Agreement with MARC, in the amount of \$20,000.00, to be passed-through to Shepherd Center of Kansas City Central, is in the best interest of the health, welfare, and safety of the citizens of Jackson County; now therefore,

BE IT RESOLVED by the County Legislature of Jackson County, Missouri, that the County Executive be and hereby is authorized to execute a Cooperative Agreement with MARC, authorizing a subcontract with Shepherd Center of Kansas City Central, in the amount of \$20,000.00, in a form to be approved by the County Counselor; and,

BE IT FURTHER RESOLVED that the Director of Finance and Purchasing be and hereby is authorized to make all payments, including final payment on the agreement.

Effective Date: This Resolution shall be effective immediately upon its passage by a majority of the Legislature.

APPROVED AS TO FORM:

*Greg D. Hallen*  
Chief Deputy County Counselor

*W. Stephen Neff*  
County Counselor

Certificate of Passage

I hereby certify that the attached resolution, Resolution No. 18076 of January 28, 2013, was duly passed on February 19, 2013 by the Jackson County Legislature. The votes thereon were as follows:

Yeas 8

Nays 0

Abstaining 0

Absent 1

2.19.13  
Date

*Mary Jo Spino*  
Mary Jo Spino, Clerk of Legislature

There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.

ACCOUNT NUMBER: 002 7902 56789  
ACCOUNT TITLE: Health Fund  
MARC  
Outside Agency Funding  
NOT TO EXCEED: \$20,000.00

*January 24, 2013*  
Date

*D. [Signature]*  
Director of Finance and Purchasing

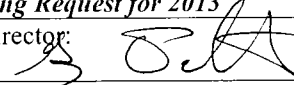
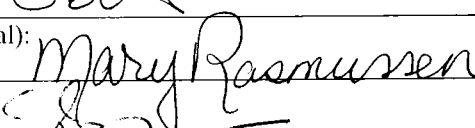
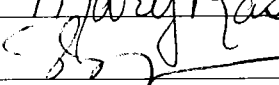
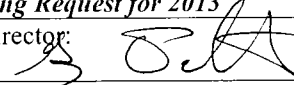
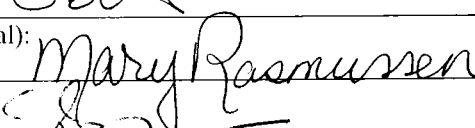
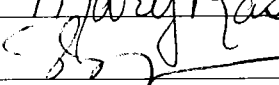
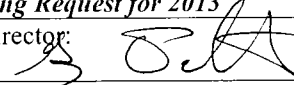
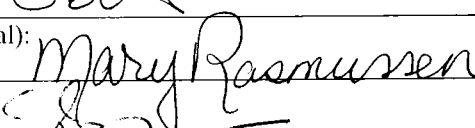
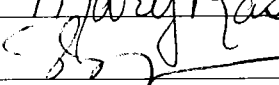
# REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/Ord No.: 18076

Sponsor(s): Theresa Garza Ruiz

Date: Jan. 28, 2013

<p>SUBJECT</p>	<p>Action Requested  <input checked="" type="checkbox"/> Resolution  <input type="checkbox"/> Ordinance</p> <p>Project/Title: <b><u>A resolution authorizing the County Executive to execute a Cooperative Agreement with the Mid-America Regional Council to sub-contract with the Shepherd Center of Kansas City Central for the furnishing of the Senior Companion Program at a cost to the County not to exceed \$20,000 Needed For the January 28, 2013 Agenda.</u></b></p>										
<p>BUDGET INFORMATION  <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$20,000</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$0</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$20,000</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers)</td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM/TO</td> <td><b>Health Fund 002-7902-56789</b></td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:  <input type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in annual budget); estimated value and use of contract:          Department: Estimated Use: \$          Prior Year Budget (if applicable):          Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$20,000	Amount previously authorized this fiscal year:	\$0	Total amount authorized after this legislative action:	\$20,000	Amount budgeted for this item * (including transfers)	\$	Source of funding (name of fund) and account code number; FROM/TO	<b>Health Fund 002-7902-56789</b>
Amount authorized by this legislation this fiscal year:	\$20,000										
Amount previously authorized this fiscal year:	\$0										
Total amount authorized after this legislative action:	\$20,000										
Amount budgeted for this item * (including transfers)	\$										
Source of funding (name of fund) and account code number; FROM/TO	<b>Health Fund 002-7902-56789</b>										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date):          Prior resolutions and (date) Res # 17777 1/7/2012 (Marc Pass Through Including Westport Cooperative)</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, &amp; phone): Cindy Wallace – Audit Assistant 881-3312</p>										
<p>REQUEST SUMMARY</p>	<p>Seeking An Allocation Transfer And Name Change For An Outside Agency Funding Proposal. On January 1, 2013 Westport Cooperative Services Corporation merged with Shepherd Center of Kansas City Central, With New Address &amp; Tax ID as shown on the attached proposal for funding. Shepherd Center of Kansas City Central Will Continue As A MARC Pass Through Contract And Westport Cooperative Services Corporation Will Cease To Exist.</p> <p>This contract will be administered by Mid America Regional Council (MARC) as a MARC pass-through contract. This should be drafted and held by the Counselor's Office while awaiting agency compliance with Executive Order 04-18.</p> <p>Shepherd Center of Kansas City Central (formerly Westport Cooperative Services, Inc.) \$20,000</p>										
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing &amp; Department)  <input type="checkbox"/> Business License Verified (Purchasing &amp; Department)  <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)b</p>										
<p>ATTACHMENTS</p>	<p><b><i>Agency Funding Request for 2013</i></b></p>										
<p>REVIEW</p>	<table border="1"> <tr> <td>Department Director: </td> <td>Date: 1.23.13</td> </tr> <tr> <td>Finance (Budget Approval): <i>If applicable</i> </td> <td>Date: 1/24/13</td> </tr> <tr> <td>Division Manager: </td> <td>Date: 1/24/13</td> </tr> <tr> <td>County Counselor's Office:</td> <td>Date:</td> </tr> </table>	Department Director: 	Date: 1.23.13	Finance (Budget Approval): <i>If applicable</i> 	Date: 1/24/13	Division Manager: 	Date: 1/24/13	County Counselor's Office:	Date:		
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Division Manager: 	Date: 1/24/13										
County Counselor's Office:	Date:										

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the \_\_\_\_\_ Fund in \_\_\_\_.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance #
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

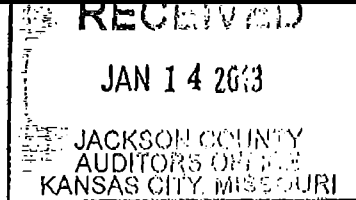




# OUTSIDE AGENCY FUNDING REQUEST FORM 2013 BUDGET

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

Email: [auditor@jacksongov.org](mailto:auditor@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 - 8
Section E: Summary of Request by Program .....	page 9

## Section A: Organization or Agency Information

Name: Shepherd Center of Kansas City Central

Address: 5200 Oak Street, Kansas City, MO 64112

Phone No: 816-444-1121

Fax: 816-444-1177

Website Address: <http://www.sccentral.org>

Federal Tax ID No: 43-0994417

Fiscal Year Cycle: Calendar (January - December)

Executive Director: Pamela Seymour

Name and Title of Principal Contact Person: Pamela Seymour - Executive Director

Phone No: 816-444-1121

Email Address: [pseymour@sccentral.org](mailto:pseymour@sccentral.org)

Submittal of this request has been authorized by:

*Pamela Seymour*

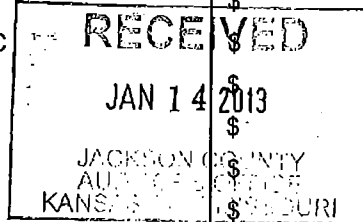
Date:

1/14/2013

## 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		\$ 347,233	39
State		\$ -	0
Jackson County	Outside Agency Program, MARC	\$ 34,000	4
Other Counties		\$ -	0
City		\$ -	0
Charity/Donations		\$ 58,750	7
Fundraisers		\$ 76,800	8
Other	In Kind Contributions, Foundations/Corporate	\$ 371,900	42
<b>2013 Total Projected Revenue</b>		<b>\$ 888,683</b>	



### Agency's 2012 Revenue Information

Funding Entity	Agency's 2012 Total Revenue Source You Received Funding From	Amount	% of Total Revenue
Federal		\$ 292,752	36
State		\$ -	0
Jackson County	Outside Agency Program, MARC \$7,000	\$ 34,000	5
Other Counties		\$ -	0
City		\$ -	0
Charity/Donations		\$ 58,830	6
Fundraisers		\$ 42,212	5
Other (please list)	Program Income, Foundations, Corporate	\$ 387,096	48
<b>2012 Total Revenue</b>		<b>\$ 814,890</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 type="checkbox"/>	<input type="checkbox"/>	\$ -	
Mental Health Levy	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Board of Services for Developmentally Disabled	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Domestic Violence Board	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Housing Resources Commission	<input type="checkbox"/>	<input type="checkbox"/>	\$ -	
Outside Agency Program	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 20,000	Senior Companion Prog.
<b>2012 Total Jackson County Funding</b>			<b>\$ 20,000</b>	

**Did your agency receive funding or resources in 2012 from either of the following?**

Mid America Regional Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$ 14,000
Harvesters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$ -



## Section C: 2013 Program Budget

*Complete a separate program budget for each program your agency is applying for funding.*

**Agency Name:** Shepherd Center of Kansas City Central

**Program Name:** Senior Companion Program

<b>Personal Services</b>			
For each salary request below please attach a job description or duties.			
Position / Title	Annual Salary	% of Salary to be funded by Jackson Co.	Amount of Salary to be funded by Jackson County
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
<b>Total Salaries</b>			\$ -
<b>Total Fringe Benefits</b>			\$ -
<b>Total Personal Services</b>			<b>\$ -</b>
<b>Contractual Services</b>			
Senior Companion stipends, meals and transportation			\$ 20,000
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
<b>Total Contractual Services</b>			<b>\$ 20,000</b>
<b>Supplies</b>			
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
<b>Total Supplies</b>			<b>\$ -</b>

**Total Program Request \$ 20,000**

## Section D: 2013 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

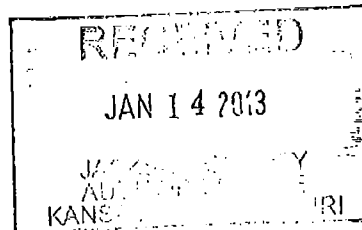
Agency Name: Shepherd Center of Kansas City Central

Program Name: Senior Companion Program

### Proposed Program

Detail functions to be performed by each program.

Senior Companions are low-income individuals, 55 years of age and older who provide companionship and in-home support services to homebound elders in Jackson County, Missouri. Senior Companions also provide respite and support for the elders' caregivers. Simple meal preparation, personal grooming assistance, social interaction, medication reminders, exercise support and escort to medical appointments are examples of services provided. A written care plan is developed for each client/companion placement. SCs are expected to serve a minimum of 15 hours per week. For their efforts Senior Companions receive 1) a \$2.65 hourly stipend; 2) \$1.50 daily meal allowance; 3) reimbursement of transportation expenses to and from the client's home; 4) 40 hours of pre-service training; 5) a 4 hour monthly inservice training meeting; 6) annual physical exam and recognition. Each Senior Companion receives professional supervision and support from one of the Senior Companion "stations".



## Section D: 2013 Program Information

*Complete a separate program information sheet for each program your agency is applying for funding.*

**Agency Name:** Shepherd Center of Kansas City Central

**Program Name:** Senior Companion Program

<b>Participants</b>	
Identify the number of participants by County that each program serves.	
Jackson, MO	150 Clients, 92 Senior Companion Volunteers
Clay, Platte, Cass, MO	
Wyandotte, Johnson, KS	
Other Missouri	
<b>Target Population</b>	
Describe target population and demographics to be served by each program.	
<p>Senior Companions serve homebound elderly persons in Jackson County who are at risk of being unnecessarily institutionalized due to unmet physical, mental and/or social needs. The service also benefits family caregivers of these individuals by providing respite for these individuals. Senior Companions are individuals who are 55 years of age or older (average age is 73) whose incomes are at or below 200% of the federal poverty level (\$1,805 monthly). All are residents of Jackson County.</p>	
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">RECEIVED</p> <p style="text-align: center;">JAN 14 2013</p> <p style="text-align: center; font-size: 0.8em;">JACKSON COUNTY COURT CLERK'S OFFICE KANSAS CITY, MISSOURI</p> </div>	
Would you provide these services to anyone at your door?	<b>Answer Yes</b>
Is anyone denied services?	<b>Answer: No. Referrals</b>
What level of indigents. 200% poverty level and below.	
Please classify your program from the following types by percentage of your agency's overall service	
Senior Program	95%
Indigent Program (Below Poverty Level)	50%
Senior Indigent Program	80%
What criteria do you have for the clients you serve?	
<p>Senior Companions must have incomes at or below \$1,805 per month. Clients served by Senior Companions have no income restrictions, but must be homebound or unable to perform all daily living tasks.</p>	

## Section D: 2013 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

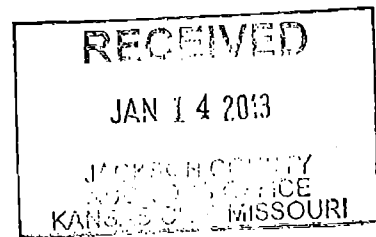
Agency Name: Shepherd Center of Kansas City Central

Program Name: Senior Companion Program

### Service Delivery Area

Identify your specific geographic service delivery area for each program.

All Senior Companions and their clients are residents of Jackson County.



### 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.

Senior Companions receive their monthly stipend and expense reimbursement at the monthly inservice meeting. They are paid by check drawn on Westport Cooperative Services' bank account. Monthly and quarterly financial reports, including a balance sheet and income/expense statements compared to the program budget are provided to Shepherd's Center Central Board of Directors. Physical exam expense are invoiced directly to the program by Dr. Julie Alvarez. Senior Companions and their clients are all resident of Jackson County. Documentation of resident is maintained in the offices of Westport Cooperative Services and is available for examination by authorized persons.

## Section D: 2013 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

Agency Name: Shepherd Center of Kansas City Central

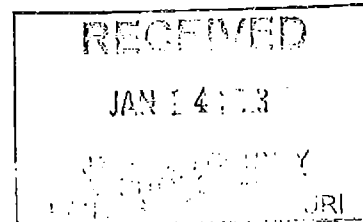
Program Name: Senior Companion Program

### Approach & Method

List the top three (3) objectives for each program.

1. Recruit, train and supervise 60 to 80 Senior Companions annually who are residents of Jackson County with 1 to 3 clients, also residents of Jackson County. Senior Companions will deliver a total of 70,000 hours of in-home service to homebound seniors.

2. Provide Senior Companion services to at least 150 homebound elderly persons in Jackson County during 2013.



3. Execute a "Memorandum of Understanding" with 8 Jackson County agencies serving homebound elders to help with training, placement and supervision of Senior Companions.

Detail specific methods you will use to achieve these objectives.

1. Shepherd's Center Central will provide Senior Companions with an hourly stipend of \$2.65, meal allowance and travel subsidy to enable them to serve homebound, frail, elderly persons. 2. Shepherd's Center Central will respond to requests for Senior Companion service by assessing client needs, assigning Companions to serve clients and providing supervision and support to the Senior Companion during the Companion's weekly service. 3. Westport Cooperative Services will execute a "Memorandum of Understanding" with 8 Jackson County agencies serving homebound elders to help with training, placement and supervision of Senior Companions assigned to their "station".

## Section D: 2013 Program Information

Complete a separate program information sheet for each program your agency is applying for funding.

Agency Name: Shepherd Center of Kansas City Central

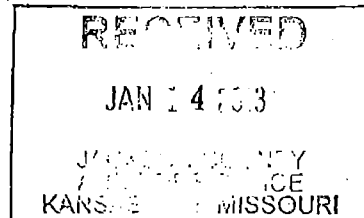
Program Name: Senior Companion Program

### 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.

Shepherd's Center Central maintains detailed records on Senior Companions and their clients. Senior Companions make monthly notes regarding their work with clients on the back of their timesheets. These are reviewed monthly for problems and successes. An in-depth evaluation of the program is done annually consisting of questionnaires specifically designed for clients, their families, for the SCs themselves and the cooperating agencies with whom we have Letters of Agreement. The results are analyzed and compiled into a written summary which compares results with program objectives and expected outcomes and makes recommendations regarding program activities.



### Notification

How will your organization make clients, the public and the media aware of the generous taxpayer funding received from Jackson County? (Please attach any examples)

Acknowledgement of funding by Jackson County taxpayers is printed in the Senior Companion Program brochures which are distributed throughout the County to social service agencies, potential clients and the general public. Acknowledgement of all funders, including Jackson County, is made at all programs, presentations and fund raising events. Jackson County officials are invited to, and have participated in the annual Senior Companion Recognition luncheon and other events.

**Section E: Summary of Jackson County Funding Request by Program**

**Agency Name:** Shepherd Center of Kansas City Central

**Program Name:** Senior Companion Program **Amount**

1.		\$	20,000
2.		\$	-
3.		\$	-

**Total Jackson County Funding Request for All Programs** \$ 20,000

Is there anything Jackson County can do to help your operation run more efficiently?

