## 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, OPERATION BREAKTHROUGH, INC., 3039 TROOST, KANSAS CITY, MO 64109, hereinafter referred to as "Contractor".

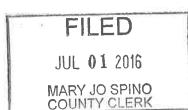
WHEREAS, on June 4, 1991, the voters of Jackson County authorized the County Legislature to impose a \$3.00 user fee on all instruments recorded with the County's Department of Records, the proceeds of which fee is to be used to provide funds for assistance to homeless persons; and,

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. <u>SERVICES</u>. 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. The budget Organization submitted as part of Exhibit A is considered final and non-changeable. If Organization encounters unforeseen circumstances that require a change to Organization's budget, Organization shall submit a written request to the Housing Resources Commission no later than October 28, 2016. Any changes to the budget must be approved by the Jackson County Legislature.
- 2. TERMS OF PAYMENT. The County shall pay to Contractor a total amount not to exceed \$11,000.00 for the purpose of providing assistance to homeless persons in Jackson County, Missouri. One quarter of this sum, or \$2,750.00, shall be paid to Contractor on a quarterly basis for the periods ending March 31, 2016, June 30, 2016, September 30, 2016, and December 31, 2016, 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. The County reserves the right to audit all invoices and to reject any invoice for good cause. The County retains the right to deduct from an invoice of Organization any overpayment made by the County on a

prior invoice. The County retains the right to make invoice corrections/changes. The County will not reimburse sales tax expense.

Under this Agreement, 3. REPORTS/OTHER DOCUMENTATION. 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. 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.

Organization must notify the County in writing on Organization's letterhead, within five working days of the following changes:

- a. Organization name, address, telephone number, administration, or board of directors
- b. Organization funding that will affect the program under this contract
- c. Liability insurance coverage
- d. Management or staff responsible for providing services pursuant to this contract

- e. Any proposed or actual merger or acquisition either taken by the Organization or toward the Organization
- 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. <u>SUBMISSION OF DOCUMENTS</u>. 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, or a certified public accountant's program audit of

the County's funds. 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. <u>EQUAL OPPORTUNITY</u>. Organization shall maintain policies of employment as follows:
  - A. Organization and Organization's subcontractor(s) shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, age, disability, or national origin. Organization shall take affirmative action as set forth to ensure that applicants are employed and employees are treated without regard to their race, religion, color, sex, age, disability, or national origin. Such action shall include, but not be limited, to the following: recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Organization agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the policies of non-discrimination.
  - B. Organization and Organization's subcontractor(s) shall, in all solicitation or advertisements for employees placed by them or on their behalf, state that all qualified applicants will receive consideration for employment without regard to race, religion, color, sex, age, disability, or national origin.

- §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.
- 8. <u>AUDIT</u>. 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.
- 9. **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.

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.
- 11. **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.

- 12. <u>SEVERABILITY</u>. 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.
- 13. <u>INDEMNIFICATION</u>. 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.
- 14. **INSURANCE**. Organization shall maintain the following insurance coverage during the term of this Agreement.
  - A. Organization shall maintain Commercial General Bodily Injury and Property Damage Liability insurance, each in a combined single limit of One Million Dollars (\$1,000,000) each occurrence for bodily injury and property damage liability.
  - B. Organization shall maintain, if any motor vehicles are used in the performance of the Services, Commercial General Bodily Injury and Property Damage Liability insurance, and Automobile Liability insurance including owned, non-owned, or hired vehicles, each in a combined single limit of One Million Dollars (\$1,000,000) each occurrence for bodily injury and property damage liability.

- C. Organization agrees to provide the County with certificates of insurance evidencing the above described coverage prior to the start of Services, and annually thereafter, if required by the County. Such certificates shall provide that the applicable insurance policies have been endorsed to provide a minimum of thirty days advance notice to the County in the event of cancellation, non-renewal, or reduction in limits by endorsement.
- 15. **TERM**. The term of this Agreement shall commence January 1, 2016, and shall continue until December 31, 2016, unless sooner terminated pursuant to paragraph 9, 16, or 20 hereof. If this Agreement is terminated by either party, the County shall pay only for those services actually performed by Organization as verified by the County's audit.
- 16. **TERMINATION**. This Agreement may be terminated for any reason or no reason by either of the parties upon thirty (30) days' written notice to the other party's designated fiscal representative. All services and payments shall continue through the effective date of termination. Termination of this Agreement shall not constitute a waiver of the rights or obligations which the County or Organization may be entitled to receive as provided in this Agreement, or be obligated to perform under this Agreement for services prior to the date of termination. Should this Agreement terminate, all County written materials of any kind must be delivered and returned by Organization to the County within ten (10) days of the termination of this Agreement.
- 17. **STANDARD OF CARE**. Organization shall exercise the same degree of care, skill, and diligence in the performance of the Services as is ordinarily possessed and

exercised by professionals operating under similar circumstances.

18. **FINANCIAL CONTACT**. Organization shall designate a fiscal representative to act as a liaison between the parties to resolve any problems, complaints, or special circumstances encountered in the billing of the services agreed upon here.

Fiscal Representative Q. Troy Thomas 415 E. 12<sup>th</sup> Street, Suite 100 Kansas City, MO 64106 Operation Breakthrough, Inc. Marsha Gillespie 3039 Troost Kansas City, MO 64109 (816) 632-9525

- 19. **COMPLIANCE**. The performance of this Agreement shall be subject to review by the County. The County Compliance Review Officer shall review this contract according to his responsibilities as set out in Chapter 6 of the Jackson County Code. Organization shall file quarterly compliance reports as required by the County Compliance Review Office. The County warrants that all books, records, accounts, and any other documents in the possession of the County relating to this Agreement are public records open for inspection in accordance with Chapter 610, RSMo.
- 20. **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.

- 21. **TRANSFER AND ASSIGNMENT**. Organization shall not assign or transfer any portion or the whole of this Agreement without the prior written consent of the County.
- 22. **ORGANIZATION IDENTITY**. If Organization is merged or purchased by another entity, the County reserves the right to terminate this Agreement. Organization shall immediately notify the county in the event it is merged or purchases by any other entity.
- 23. <u>CONFIDENTIALITY</u>. 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.
- 24. <u>INFORMATIONAL REPORTING</u>. 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.
- 25. **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.

- 26. 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.
- 27. **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.
- 28. <u>COMPLIANCE WITH RFP</u>. 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. 49-13. Failure to comply with the terms of the RFP shall be a breach, remediable under

Paragraph 20 hereof. In the event of a conflict between any provision of this Agreement and a provision of the County's RFP No. 49-13, the provision of this Agreement shall govern.

29. <u>INCORPORATION</u>. This Agreement incorporates the entire understanding and agreement of the parties.

APPROVED AS TO FORM:

JACKSON COUNTY, MISSOURI

W. Stephen Nixon County Counselor Frank White, Jr.
County Executive

ATTEST:

OPERATION BREAKTHROUGH, INC.

Mary Jo Spino

Clerk of the Legislature

Title

Federal Tax I.D. 43-0971560

#### 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 \$11,000.00, which is hereby authorized.

June 29 2016

Director of Finance and Purchasing

Account #043-7001-56789

PC 70012016008



# 2016 HOUSING RESOURCES COMMISSION FUNDING REQUEST EXHIBIT A

EXHIBIT A RES. 19057

415 E 12th Street, 2nd Floor Kansas City, MO 64106 Email: hrc@jacksongov.org

| Total Amount   | Requested:        | 11,(    | 000               | _        | ency Request<br>sly Funded | <b>O</b> |
|--|-------------------|---------|-------------------|----------|----------------------------|----------|
| Name:  |                   |         |                   |          |                            |          |
| Operation Breakthrough, Inc.   |                   |         |                   |          |                            |          |
| Address:   | City:             |         |                   | State:   | Zip Code:                  |          |
| 3039 Troost Avenue   | Kansas City       |         |                   | МО       | 64109                      |          |
| Phone No:  | Website:          |         |                   |          |                            |          |
| (816) 756-3511 www.operationbreakthrough.org   |                   |         |                   |          |                            |          |
| Federal Tax ID No:   |                   |         |                   |          |                            |          |
| 43-0971560   |                   | Fis     | scal Year         | Cycle:   | 11/1 - 10/31               |          |
| Executive Director/President:  |                   | Phone   | No.               | Email:   |                            |          |
| Mary Esselman, CEO   | (81               | 16) 329 | 9-5200            | marye@   | operationbreakthro         | ugh.org  |
| Principal Contact:   |                   | Phone   | No.               | Email:   |                            |          |
| Marsha Gillespie, Grants Mg  | r. (98            | 81) 63  | 2-9525            | marshag( | @operationbreakthrou       | igh.org  |
|  |                   |         |                   |          | 5                          |          |
| Please classify your programs primary function from the following types of services: |                   |         |                   |          |                            |          |
| Permanent Housing  | <b>✓</b> E        | Emerger | ncy <b>Ass</b> is | tance    |                            |          |
| Transitional Housing   | Emergency Shelter |         |                   |          |                            |          |
| Bednights  |                   | Other   | Case Ma           | anagemen | nt                         |          |



Agency Name: Operation Breakthrough

Program: Supportive Housing Prograr

| Funding Entity      | Source Description                     | 2015<br>Actual | 2016<br>Projected |
|---------------------|--|----------------|-------------------|
| Federal             | Head Start/Early Head Start/USDA       | \$ 1,837,841   | \$ 1,662,862      |
| State               | MO DSS (childcare assistance)          | \$ 510,678     | \$ 602,759        |
| Jackson County      | COMBAT, JCCMHF, HRC, Outside Agency    | \$ 160,108     | \$ 171,432        |
| City of Kansas City | CDBG                                   | \$ 140,000     | \$ 140,000        |
| Charity/Donations   | Charitable Donations                   | \$ 1,822,950   | \$ 2,015,150      |
| Fundraisers         | Annual Dinner/Auction, other FR events | \$ 1,013,323   | \$ 1,360,000      |
| Other               | Foundation Grants, Misc Revenue        | \$ 1,377,478   | \$ 1,429,254      |
|                     |  | \$ 6,862,378   | \$ 7,381,457      |

| Does your agency have cash reserves? • Yes  If so, what is the current balance? \$2,966,437 | ○ No   |  |  |  |  |
|---|--|--|--|--|--|
| Please check all Jackson County sources your agenc  | y received funding from in 2015:                                 |  |  |  |  |
| Board of Services for Developmentally Dis  COMBAT  Domestic Violence Board                  | Housing Resources Commission  Mental Health Levy  Outside Agency |  |  |  |  |
| List partnerships with other Jackson County homeless services agencies:                     |  |  |  |  |  |
| MO Dept of Mental Health Shelter Plus Care Program operating in Kansas Cit                  | y, MO), Amethyst Place   |  |  |  |  |



## Section B 2016 Program Budget Request Program: Supportive Housing Progra

Agency Name: Operation Breakthrough

| Direct Expenses        |   | Amount<br>Requested |                                     |  |                      | Check If Used w<br>Matching Fund |
|------------------------|---|---------------------|-------------------------------------|--|----------------------|----------------------------------|
| Shelter Assistance     | by JaCo<br>\$50 Per Night Per Client<br>\$300 Per Year Per Client<br>\$100 Per Night Per Family | . toquasiou         | Total # Clients Your Program Serves | # Cilents<br>Served with<br>JaCo Funds | # Nights             |                                  |
| Bed Nights             | \$500 Per Year Per Family   |                     |                                     | ,                                      | · = <u>0</u>         | [_]                              |
| Transitional Housing   |   |                     | <del></del>                         | ,                                      | = 0                  |                                  |
| Emergency Shelter      |   |                     |                                     |  | ± <u>0</u>           |                                  |
| Client Mortgage        | Once Per Year Per Client  |                     |                                     |  |                      |                                  |
| Client Rent            | Once Per Year Per Client  |                     |                                     |  |                      |                                  |
| Client Utilities       | \$300 Per Client  | \$ 3,100            |                                     |  |                      |                                  |
| Client Transportation  | \$50 Per Client<br>\$100 Per Family   |                     |                                     |  |                      |                                  |
| Cheric Hallsportation  | \$50 Per Client   |                     |                                     |  |                      |                                  |
| Food                   | \$100 Per Family  |                     |                                     |  |                      |                                  |
| Clothing               | \$50 Per Client<br>\$100 Per Family   |                     |                                     |  |                      |                                  |
| Other: Please Detail I | Below   |                     |                                     |  |                      |                                  |
|                        |   |                     |                                     |  |                      |                                  |
|                        |   |                     |                                     |  |                      |                                  |
|                        |   |                     |                                     |  |                      |                                  |
|                        |   | 1                   |                                     |  |                      |                                  |
|                        |   |                     |                                     |  |                      |                                  |
| Tota                   | I Direct Expenses   | \$ 3,100            |                                     |  |                      |                                  |
|                        |   |                     |                                     |  |                      |                                  |
| lirect Expenses        |   |                     |                                     |  |                      |                                  |
| Salaries               |   |                     |                                     |  |                      |                                  |
| Salaries               |   |                     |                                     |  |                      |                                  |
| Case Manager           |   | \$ 7,900            |                                     |  |                      |                                  |
| Fringe Benefits        |   |                     |                                     |  |                      |                                  |
| Other: Please Detail   | Below   |                     |                                     |  |                      |                                  |
|                        |   |                     | Tot                                 | al Program                             | ı Cost               |                                  |
|                        |   |                     | Total program o                     | ost regardles                          | s of                 | \$ 285,475                       |
|                        |   |                     | Jackson County                      | / Funding you                          | are requesting.      |                                  |
| Total                  | Indirect Expenses   | \$ 7,900            | _                                   |  |                      |                                  |
| Total Req              | uest for Funding  | \$ 11,000           | Estimate of Cos                     | st Per Particia                        | nt 786.              | \$ 789                           |
|                        |   |                     |                                     |  | are accepted to 1753 | MII.                             |

Agency Name: Operation Breakthrough, Inc.

**Program:** Supportive Housing Program

| <b>Primary Prog</b> | iram Type |
|---------------------|-----------|
|---------------------|-----------|

Client Utilities

Assistance Type | Client Utilities

Is this program sustainable without Jackson County's funding.

NO

Detail the main objective of the program.

Operation Breakthrough's Supportive Housing Program serves the low-income familles of children enrolled in the Center's educational programs. With 87% of familles living below the federal poverty level, nost of our families have a history of housing and food insecurity and unfunder-employment. We assist these families by:

- 1) Enrolling children in the Center's childcare programs and assigning each family a case manager to assess and address critical needs;
- 2) Securing Dept, of Mental Health housing vouchers for homeless families who qualify for the Shelter Plus Care program;
- Finding suitable housing, based on each family's individual needs;
- 4) Providing Intensive case management, for as long as the family is enrolled in the program; and,
- Providing emergency financial assistance to secure housing or to prevention impending homelessness.

With the assistance of their case manager, families secure housing in private rental units in the Kansas City metropolitan area or on the Amethyst Place transitional housing program campus at 26th & Troost. Families pay approximately 30% of their income on rent, with the reat subsidized through the Missouri Department of Mental Health Shetter Plus Care program. Families are able to remain in the rogram as long as they actively participate in intensive case management and comply with other program criteria. Services are individualized to clients' specific needs and goels; activities include class in parenting, economic titeracy and household management; individual and/or group therapy; and scaletance with job search or education. Clients in the program are required to maintain a drug free lifestyle nd are required to pass random drug screenings. In the last 12 months, 18 families received intensive case management as a requirement of their housing placement.

in addition to helping homeless families find housing, the program provides utility assistance to families on the verge of losing housing due to outstanding utility bills. Over the past 12 months, Operation treakthrough provided utility assistance to a total of 134 families.

in addition to case management, housing support, utility assistance and other emergency aid (food, clothing, diapers, household goods, hygiene products), Operation Breakthrough provides call nd mental health services as part of our integrate approach to care for the whole family. Other on-site components include educational childcare, health, dental and therapeutic services for children from 6 eks to 13 years.

How does your program measure success? Over what period of time?

The success of Operation Breakthrough's Supportive Housing Program is measured by the number of families who are able to meet program requirements for a minimum of one year. Program criteria include paying rent, working cooperatively with their case manager, and attending all required classes and workshops. In addition, clients complete an agency-developed Likert scale to indicate their state of well-being in four life domains (relating to housing, financial, emotional/mental health, and relationships) at intake and monthly thereafter. Case Managers also compelte a quarterly assessment of functioning; results from both measures are used to analyze the effectiveness of case management and clients' progress toward family goals.

Agency Name: Operation preaktimough

## **Target Population**

Program: Supportive Housing

| Describe target population and demographics to be served.   |
|---|
| Operation Breakthrough serves 381 children from 6 weeks to 13 years and the children's 215+ parents/caregivers. 84% of families are African American/bi-racial and 87% live below the federal poverty level; 95% of families are headed by single women.                                |
| Are your services available to anyone? Yes No   |
| If not, please check criteria used for the participants you serve and explain below.  |
| ✓ Age   |
| Gender Geographic Family Status   |
| Explain: Housing support and social services are available only to families who have children enrolled in childcare programs. Enrollment is open to children from 6 weeks to 13 years; families must meet Head Start income guidelines. Priority is given to families who are homeless. |
| Service Delivery Area   |
| Identify your specific service delivery area by zip code or geographical boundary.  |
| A majority of families live in zip codes 64109, 64130, 64128 and 64127. All live in Jackson County, MO  |
| Yes No  |
| Is your agency a member of MAAC Link?   |
| Do you participate in Full Continuum of Care?   |
| Do you keep a list of participants for this program?  |
| Identify the number of clients this program serves.   |
| Total # served # served from Jackson County # served from Other Areas  134 0  |
| Are these Clients: O Duplicated   |

**Agency Name:** Operation Breakthrough

Program: Supportive Housing Progr

### **Outcomes**

| List up to 5 outcomes related to this program.  1. Provide affordable housing and necessary support  | Please check if the outcome is measurable. to ho                 |  |  |  |  |
|--|--|--|--|--|--|
| 2. Assist families in increasing their overall well-being  | in 4 I   |  |  |  |  |
| 3. Help parents provide stability for their children and   | , whei   |  |  |  |  |
| 4.   |  |  |  |  |  |
| 5.   |  |  |  |  |  |
|  |  |  |  |  |  |
| Summa  Your application will not be considered complete without a the requirements listed below to complete the funding req  | inswering all questions. All applicants must fulfill             |  |  |  |  |
| Please check the box acknowledging you understand you  | r organization's responsibility to the following.                |  |  |  |  |
| Reviewed the Non-Allowable Expenses Reviewed Executive Order 04-18 to deem your agency in compliance if funding is awarded and approved.  Include the Jackson County Logo and credit Jackson County in marketing efforts and provide the Auditor's Office with copies. |  |  |  |  |  |
| Your organization will submit the following with the Outside  Certificate of Liability Insurance valued at a manual aggregate  Missouri Secretary of State Certificate of Goo  Missouri Secretary of State Annual Registration   | ninimum of \$1 million per occurance or \$2 million and Standing |  |  |  |  |
| Signature:   | -,030,000  |  |  |  |  |
| Date Submitted: 10/23/2015   |  |  |  |  |  |
| SA   | <b>NVE</b>   |  |  |  |  |
| - PR   | RINT   |  |  |  |  |

#### **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 **Operation Breakthrough**, **Inc.**, 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, **Operation Breakthrough**, **Inc.**, 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.)

| Myhl                                  | Many Esselman |
|---------------------------------------|---------------|
| Authorized Representative's Signature | Printed Name  |
| LEO                                   | 6-22-16       |
| Title                                 | Date          |
| mission, and my commission            | June 22,2016  |
| Signature of Notary                   | Date          |

C. OATES

Notary Public - Notary Seal
STATE OF MISSOURI
Jackson County

My Commission Expires April 22, 2017
Commission # 13469297