### INVITATION FOR BID



Missouri Department of Corrections Fiscal Management Unit Purchasing Section 2729 Plaza Drive, P.O. Box 236 Jefferson City, MO 65102

Buyer of Record:
Beth Lambert
Purchasing Manager
Telephone: (573) 526–6494
Beth.Lambert@doc.mo.gov

W-00

# ORIGINAL

# RFA SDA480-010 ADDENDUM 001

Community Reentry Funding Western Region & Eastern Region

Contract Period: Date of Award — June 30, 2020

Date of Issue: June 12, 2019

Page i of 57

**Bids Must Be Received No Later Than:** 

2:00 p.m., June 27, 2019

Sealed applications must be delivered to the Missouri Department of Corrections, Purchasing Section, 2729 Plaza Drive, Jefferson City, MO 65109, or P.O. Box 236, Jefferson City, Missouri 65102. The applicant should clearly identify the RFA number on the lower right or left-handed corner of the container in which the application is submitted to the Department. This number is essential for identification purposes.

We hereby agree to provide the services and/or items, at the price quoted, pursuant to the requirements of this document and further agree that when this document is countersigned by an authorized official of the Missouri Department of Corrections, a binding

	d herein, shall exist. The authorized signer of suspended or debarred by the federal go	r of this document certifies that the awardee (named below) and each overnment.
Program Title:	Journey to New Life Housing for Sex C	Offenders
Company Name:	Journey to New Life, Inc	
Mailing Address:	3120 Troost Ave	
City, State, Zip:	Kansas City, MO 64109	
Telephone:	816-960-4808	Fax: <u>816-960-20</u> 6
Federal EIN #:	46-3435417	State Vendor #:
Email:	gkw.journeytonewlife@hotmail.com	
Authorized Signature	: Deorgia K Walker	er, Executive Director  Application Date: 6/24/19
NOTICE OF AWA	ARD:	
This application is acc	epted by the Missouri Department of Corr	ections as follows:
Juli	Kempker	Contract No. SDA48001006 9/21/19

Julie Kempker, Director, Division of Probation and Parole

Date

### **Application Summary Form**

THIS FORM MUST BE COMPLETED IN	Y FUND APPLICATION SUMM I ITS ENTIRETY AND SUBMIT FOR AWARD.	
Please select geographic area in accordance with th	e map attached: See Attachment 1	Amount of DOC Funds Requested:
Western Region City/County Kansas City/Jack   Clay	son, Cass and	\$ 50,000
Eastern Region City/County		
Program Title: Journey to New Life Housing for Sex Does this program complement another application? Provide a unique name descriptive of service or prog	YesNoName:	tted
Applicant Agency and Address:	Project Director Name, Phone, 1	
Journey to New Life, Inc	RITA FLYNN	
3120 Troost Ave	816-960-4808	
Kansas City MO 64109	816-960-2056	Marine Control of the
Signature/Title Date Steorge K. Walker 6124119	aflynn ejtnloag	
Leorga K. Walker 6/24/19  Anticipated Outputs: (number of offenders	Estimated Cost per Offender:	# of Paid Staff: 8
supervised by DOC to be served by the proposed project): 15		# of Volunteers: 6
We propose to place 15 sex offenders in permanent howill secure housing for these offenders by paying the intensive wrap around supportive services for the first and/or less intensive support services.	ousing. Using a housing first mode rental deposit and first three months	l known as Rapid Rehousing, we s of rent. We will provide
In-Kind Contributions: Applicant must identify all in-kind contributions which include "contributions other than cash." While these contributions usually add real value to a project, they do not require an additional cash outlay (e.g. donated labor, materials and services).  Applicants must provide in-kind and identify in-kind contributions their organizations will make to this project and how those contributions will help sustain the project. The funding resulting from an award of the RFA shall be considered seed funding to start initiatives with a strong sustainability plan indicated.		
Attach a page identifying in-kind contributions.		

Journey to New Life was founded September 1, 2013 by Rita Flynn, Sr. Rose McLarney and Georgia Walker because we believed that at least four major categories of former offenders were being underserved by the social services agencies in Kansas City for housing: sex offenders, veterans with chronic disabilities, women, and those with serious mental illnesses who also suffered from addictions. Our vision was to create a welcoming service center in the central city where all would be welcome for emergency assistance and as many as possible would be assisted in finding housing. Since our founding we have served approximately 950 emergency assistance clients each year and provided over \$ 200,000 worth of crisis assistance items, i.e. food, clothing, prescription assistance, identification, personal hygiene, work related items such as uniforms, boots, tools, cell phones, and bus passes. At a cost of \$ 815,500, we have assisted 638 persons and their families attain permanent housing providing financial resources and casemanagement services. The proposed grant will target sex offenders to gain access to permanent housing.

### RATIONALE FOR TARGETING SEX-OFFENDERS

There are specific reasons for developing a program to explicitly target sex-offenders for housing. First of all, a great many of the housing programs and the re-entry programs in Kansas City are unwilling or unable to serve this population adequately. Secondly, there is a significant reluctance of landlords to rent to sex offenders because of the stigma attached to sex offenders by other rental clients and neighbors. Therefore, the landlords fear that their properties will lose value if sex-offenders are permitted to occupy their rental units. Thirdly, there are so many areas of the city and properties that fall within the boundaries within which sex-offenders are excluded from living according to state and local laws. There are difficulties finding places sometimes which will meet these boundary exclusions. At any given time during the last two years, we have always had at least 20 to 30 sex-offenders on our housing case load. With the anticipated closure of the Kansas City Community Release Center we have had a surge in demand for housing for all offenders who are being forced to find home plans as quickly as possible. But this is particularly true for the many sex offenders who have been housed at KCCRC for long periods of time because of inability to find a suitable home plan. Because of this closure, we have been receiving many calls from the various state institutions requesting home plans for persons due to be released. Finally, it does require some specialized expertise to handle a caseload of ex-offenders. While still at the Turnaround Program of Catholic Charities, Rita Flynn, Jeff Page and Georgia Walker all were accustomed to handling as many as 36 sexoffenders at a time. This expertise requires a willingness to provide acceptance and support for offenders who have seriously hurt very vulnerable victims. We feel that our staff has the willingness, sensitivity and cautious temperament to handle successful re-entry for this population. Rita Flynn, Program Director, will oversee this program and supervise the staff efforts. Jeff Page will be the case manager for this project. Together the two of them each have decades of experience as parole officers and supervisors and as re-entry experts. In addition we have six very experienced volunteer re-entry specialists who will be assisting them.

### **OUR HOUSING AND RE-ENTRY MODEL**

We are constantly seeking resources to expand our capacity to do the housing piece of our program. We are passionate about using what is known as "the housing first" model which is the evidence-based practice of putting people into safe and affordable housing as rapidly as possible and then providing wrap-around services based upon the assessment of risks and needs of the individual client. This is a proven model which leads to positive outcomes such as:

- decreased use of addictive substances,
- increased compliance with mental health treatment,
- lower levels of criminal recidivism,
- decreased use of expensive emergency room visits,
- higher levels of life satisfaction,
- better management of chronic health conditions and
- lower risk of returning to homelessness or to prison.

We are enthusiastic about this evidence-based model from the housing service sector and have found that it works extremely well along with evidence-based practices from community corrections in order to reduce recidivism.

### ANTICIPATED TIMELINE FOR THE SERVICES

Upon first encountering an ex-offender who needs housing we utilize a HUD recommended assessment instrument which has proven to have high validity and reliability for predicting the best housing intervention strategy for a given individual or family. This instrument is called the Service Prioritization Decision Assistance Tool (SPDAT). This is a well-tested evidence-informed approach to assessing an individual's or family's acuity for attaining housing. Across multiple components, the tool prioritizes who to serve next and why, while concurrently identifying the areas in the person's life where support is most likely necessary in order to avoid housing instability. It fosters the development of a system of agency triage so that more resources are directed to those most in need rather than just serving everyone with the same array of costly services.

The score on the SPDAT predicts whether the individual needs permanent housing with one of three different levels of support. Some will need long term supportive services to wrap around them and long-term financial support for that housing (this is called Permanent Supportive Housing). Many will only need short term supportive services to become able to support themselves in permanent housing within three months with the benefit of earned income or some form of government economic support such as Social Security disability, SSI or regular pension income (this is called Rapid Re-Housing). Many others will simply need assistance in obtaining employment services and to find landlords willing to rent to ex-offenders and then they are able to access housing with less intensive assistance. The current grant will target those who

score in the middle range on the SPDAT and are predicted to need short-term case-management support from three to six months and rental assistance for no more than three months. We have clients which fit into each of these three categories and we now have some city and federal grants to support the delivery of the first two types of housing. The proposed grant is designed to expand our capacity to serve 15 additional sex-offenders who score at the level of needing the Rapid Re-Housing program.

On day one we will explain our programs, assess and address the client's basic needs for identification, food, clothing, personal hygiene, transportation, cell phone, prescription assistance, etc. These are critical things any human being will need to get started again with their new life. All of these things are the type of first concerns anyone might reasonably expect to obtain even prior to finding their housing. Most of our clients would describe our provision of emergency services as generous and very supportive.

In the first seven days of entering this program, we will assess the risks and needs and the strengths and weaknesses of the client. We will get started immediately on determining what level of rent that they will ultimately be able to pay on their own and begin providing them with housing options based upon their preferences of area within the city and type of housing. We have spent a great deal of time cultivating landlord willingness to support housing options for sex-offenders. We have been successful in finding willing landlords because they know that we will stay connected and supportive of our clients to insure their success. By the third day a housing unit will be selected, it will be inspected for suitability using a rigorous Housing Quality Inspection regime required HUD and a rent reasonableness comparison to insure that the landlord will only be charging a fair market price for the housing. A lease will be signed and our agency will move furniture and household items in to the residence to make it habitable and the client will move into the unit. During the first week, the client typically will have 10 to 15 hours of contact with his or her case-manager and re-entry specialist.

Immediately after the individual is housed, case-management will begin working with the client using a trauma-informed, strength-based model to help the client develop both short and longer term goals and the strategies needed to accomplish those goals. Our case-managers use a motivational interviewing strategy to enhance intrinsic motivation in offenders and offer a great deal of positive reinforcement. We have a very definite welcoming atmosphere in our office and pride ourselves on treating each individual with great respect and confidentiality. During this next phase the case-manager and re-entry specialist will begin advocating for the client to attain re-instatement or application for benefits for which the individual may be qualified to receive (i.e., food stamps, Medicaid, SSI or SSDI, TANF, etc). This might be accomplished on-line or by personal visit to the appropriate office.

During these early first days referral appointments are set up, as suggested by assessed client risks and needs, for such services as employment support (work readiness, job coaching, and other employment services), substance abuse treatment, mental health treatment, sex-

offender treatment, and medical care. Furthermore, during these early days the case-manager explains various classes and groups that we have available in our office to facilitate their successful re-entry into society and sign them up for mentoring or any other of our services they may wish to try. All of this needs to be tailored to client preferences for what goals they wish to pursue first and how much time they may have available after addressing service assignments given to them by their parole officer.

We have been cautious to not create services that other agencies are doing quite well. However, we have expanded our services to include other useful programs that we have found helpful to support the successful re-entry of our clients and to help them maintain their housing. We have established a one-year, one-on-one mentoring program, offer a weekly relapse prevention support group, provide a five week course in anger management and conflict resolution using a restorative justice model, offer a six week budgeting and personal finance course and now will be starting a cognitive-behavioral psychological support group. We have an on-site opthamologist who comes weekly to perform eye exams and then provides our clients with a free pair of glasses. We partner with many other area organizations which offer employment readiness, medical care, psychological/psychiatric care, substance abuse treatment, and domestic violence support and advocacy. Because of our existing agency relationships, we are frequently able to get appointments set up quickly for our clients. Our primary agency relationship for men is Benilde Hall, which is our resource for substance abuse treatment, psychological counseling and psychiatric care.

During the first three months, the client will meet weekly with their case-manager and reentry specialist. Typically, these meetings may be of one to two hours in length, depending on what is being accomplished. Frequently, there will be two to three phone contacts with the client and case-manager to help support the client. At least once per month, the meeting will take place within the home of the client and this will involve both the case manager and the re-entry specialist in the out of the office contacts. During the fourth thru the six month, the clients will meet one to two times per month with the re-entry specialist under the guidance and supervision of the case-manager. If any problem or new issue arises during the second three-month period, the case manager will re-engage more closely and will be the one to remain in contact with the parole officer if any issue arises.

Part of the success of our agency has been due to the excellent employment services offered to ex-offenders by the Employment Program at Bishop Sullivan Center here in Kansas City. They have the best employment success we have experienced in getting people employed in the best jobs imaginable. Over the years, they have developed such a wide assortment of "felon-friendly" employers who are willing to give our clients a chance when they meet their high expectations for reliable, responsible work for a just wage. We absolutely require those who wish to be in one of our housing programs to work with Bishop Sullivan for attaining employment if they are able to work. We have had good success in getting people into

employment relatively quickly so that they can reasonably be able to take over all of their own rental expenses on their own after three months.

For those with developmental or mental illness conditions, we often refer our clients to the Missouri Vocational Rehabilitation services offered by the State of Missouri. A number of our clients have been able to gain employment through the help provided by this service. For those who are judged by this agency to be unemployable we become advocates for gaining them access to mainstream benefits which will make it possible for them to financially support their own housing after three months. To speed up this process of getting re-instated with SSI or other program or to apply for the first time, our agency is working to develop the capacity through the SOAR program to facilitate the application process. In this program the case-manager does much of the leg-work to accumulate the medical records of the client and build the evidence for their need for assistance. This is proving to be a very successful program in Kansas City. This length of time required for certification for SSI has been reduced to an average of three months, the percentage of first-time claim denials have dramatically been reduced, and the need for hiring expensive legal representation has been reduced significantly. We will soon be providing this service for our clients at Journey To New Life.

The model we have developed includes case-management over the course of the first three critical months of approximately 45-50 hours of case-management time for direct visits, phone calls, and home visits and much of that time is matched by 25-30 hours of re-entry specialist time in the first three months. In the fourth thru sixth months the experienced re-entry specialist will spend another 15-20 hours of direct contact with the client by in person visits and phone visits. Furthermore, the client also has regular contact throughout the six month program with his or her mentor in one-on-one visits and in monthly mentor-mentee gatherings. We have several former offenders who are no longer on supervision who provide helpful support and guidance to our clients.

### **BUDGET REQUEST:**

The primary request for money in this grant is to ask for \$ 9,750 to pay for rental deposits for 15 clients (\$ 650 X 15) and \$ \$29,250 to pay for 3 months of rent for 15 clients (\$ 650 X 3 X 15). Housing is the main service that we are offering to these clients. However, in addition this grant requests funding for what we consider to be three critical services: phone, monthly bus passes and food. Providing a cell phone is essential to maintain frequent contact between the staff and the client. Furthermore, it is almost impossible to get a job without a way for employers to contact you to set up interviews and/or make job offers. Therefore, we request \$ 150 per client to provide a cell phone to the client for the first three critical months. We also consider that the monthly bus passes are essential for attaining a job, for getting to appointments, and staying in contact with the case-management staff. Therefore, we request \$ 150 per client to purchase three monthly bus passes. Third, we believe that it is critical to have food in the first months when you lack the resources to pay for it. Therefore, we request \$ 433 to purchase food

for the client for three months. So our request in this grant is for \$50,000 which would provide us with an average of \$3,300 per client to help them get started on the journey to a new life. While other services and products will be supplied to the clients during the time they are in the program at no cost to the grant. However, these five things we are budgeting for are so important to their success in the program that we are requesting grant funds in order to provide them to our clients.

### MATCHING RESOURCES SUPPLIED BY AGENCY

Journey To New Life will supply all of the labor and employee benefits for this program and no cost to the grant. The model requires the utilization of a 0.40 FTE case-manager at an average annual cost of \$ 16,000 plus an additional \$ 4,000 in benefits. The agency will also be supplying the expertise of a 0.25 FTE experienced volunteer re-entry specialist at an average annual value of \$ 7,500. During the months that these clients will be in our program, we can conservatively estimate that they will receive an additional array of products and services that total at least \$ 750 to pay for household furnishings, utilities, personal hygiene, medical and dental co-pays, prescriptions, and work-related things such as uniforms, tools, and work clothes/boots. These items will be expected to total at least \$ 11,250 in agency funds over the course of the year for 15 clients served in this program. The value of other classes and services provided by our agency will depend entirely on the needs of the clients and in which programs which they choose to participate. The cost of these services collectively will exceed \$ 15,000. When we add in the overhead of space rental, liability and property insurance, maintenance, utilities, etc; it is clear that the agency will more than match the \$ 50,000 we are requesting in this grant in what we are contributing to this project.

### CORE PERFORMANCE MEASURES

Of course our primary desired outcomes are for each individual client to successfully complete their re-entry into society, not return to prison and maintain their placement in permanent housing beyond the grant project. However, there are a number of important performance measures that we will be tracking to help insure that individual clients will have the support they need to succeed. We utilize the Mid-America Assistance Coalition (MAAC) database to track the outcome indicators which we feel are important to measure. The following indicators are listed in Exhibit D:

Basic Needs and Emergency Services

Outcome: Attainment of basic needs and emergency services

Birth Certificate/ID

15 clients

100% will have basic needs met

Personal hygiene

15 clients

15

15 clients

**Employment** 

Food

Outcome: Improved employment

	Cell phone	10 clients	100% of the ten clients who are
	Job readiness	10 clients	employable will find full-time work
	Work clothes/tools	10 clients	
Hous	sing		
Outc	ome: Attainment of housing		
	Rental assistance	15 clients	100% will attain permanent housing
			90% will maintain housing for 6 months
Men	al Health		
Outc	ome: Reduced mental health ris	sks	
	Sex offender treatment	15 clients	100% will receive financial assistance
			for sex offender tx & assessment
	Anger management	10 clients	70% will complete courses in anger
	Conflict Resolution	10 clients	Management & conflict resolution
Subs	tance Abuse		
Outc	ome: Reduced substance abuse		
	Relapse prevention	10 clients	70% of clients will complete 3 months of
			Weekly relapse prevent support groups
Т	ala antatian		

Transportation

Outcome: Attainment of transportation

Monthly bus pass 15 clients 100% of clients will receive

Transportation for three months

### APPLICANT'S EXPERIENCE AND EXPERTISE

Rita Flynn has 49 years of experience working with this population including 26 years with Missouri Department of Corrections Probation and Parole and retired in 2000 as District Administrator. Next she worked for two years as a Kansas City, KS parole officer. She then worked as a substance abuse counselor at WRDCC. She worked for 10 years as Program Manager at Catholic Charities Turnaround Program. She then co-founded Journey to New Life with Sr. Rose McLarney and Georgia Walker. For the past five years she has served at Program Director for Journey to New Life.

Jeff Page has 45 years of experience working with this population including 33 years with Department of Corrections in Connecticut and Iowa working in Probation and Parole and retired in 2006 as Division Manager of Iowa Probation and Parole. He then worked as Case Manager and Job Developer for Catholic Charities Turnaround Program for 7 years. For the past four years he has been a Case-Manager for Journey to New Life.

Georgia Walker has 20 years experience working with this population. For 8 years she served in various positions at the Center for Women in Transition and for the last 4 years as the Assistant

Director. With Sr. Rose McLarney she established a Residential Release Center for women in St. Louis with Department of Corrections funding. She helped co-found a coalition of St Louis re-entry agencies to serve persons who were released to the St Louis area after maxing out their sentences. She served as the administrator of a \$ 1,000,000/year grant from the Department of Corrections to serve 200 persons who had returned to St. Louis after they had 12-12'd. While in St. Louis she made monthly visits to Vandalia to conduct re-entry classes with women in the re-entry unit. When she moved to Kansas City she began working for two years with Catholic Charities Turnaround Program as a Case-Manager. There she made regular monthly visits to Chillicothe to the women's prison and to WMCC in Cameron to conduct re-entry classes for persons soon to be released to the Kansas City area. She then worked for 3 years as the Program Specialist for the Homeless Services Coalition of Greater Kansas City where she monitored the performance of more than 40 homeless agencies on their HUD grants. In that capacity she also provided technical support and education to those agencies and established a data quality control program for monitoring performance standards of the agencies throughout the metropolitan KC area. For the past five years she has been the Executive Director of Journey to New Life.

Sr. Rose McLarney has 20 years experience working with this population. For 10 years she was the Director of the Center for Women in Transition. During her tenure she worked closely with Nancy McCarthy to develop a coalition of re-entry agencies and also founded the statewide organization called Missouri Restorative Justice Association. With Georgia Walker she founded a transitional housing program for women coming out of prison and the separate Release Center for Women. She then worked for 2 years at Catholic Charities Turnaround Program where she administered four \$ 100,000 Missouri Department of Corrections Re-Entry grants to establish mentor programs for offenders in four P&P Districts in the Western Region. In that capacity she worked closely with Tim Wolfe, Lisa Weisman, Sherry Morlang and Collin Smith. For the past five years she has been co-founder of the Journey to New Life and serves as the Chair of the Board of Directors.

All of these principal employees of Journey To New Life have had extensive contact with persons in Jeff City Central Office, Regional Directors, District Administrators and Probation & Parole officers both in St Louis and Kansas City. All of us have been involved with Institutional Parole Officers and other institutional workers to help individuals transition to the outside. Our two other Case-Managers, Administrative Assistant and six experienced volunteer re-entry specialists have additional years of experience delivering social services. Two of the re-entry specialists are retired physicians, two of the specialists are former ex-offenders who have completed their time of supervision and two others are retired professionals.

Journey To New Life currently is sub-contractor on three HUD housing grants: one to serve Case-Management and Housing Placement in a Rapid Re-Housing Program and two to serve Case-Management and Housing Placement in Permanent Supportive Housing Programs for

disabled persons. The clients in all three grants are ex-offenders and they are the only HUD grants in the Kansas City metropolitan area that are targeted to ex-offenders. In addition we are the recipient of a local City of Kansas City Emergency Solutions Grant (ESG) to Rapidly Re-House homeless ex-offenders.

### PREFERENCES OF DEPARTMENT OF CORRECTIONS

We believe that that we should receive the total of 10 points for preferences. This grant request targets services for supported housing for sex offenders. Our Case Management follows the principles of "Trauma Informed Care" and all of our Case Managers have received training in recognizing trauma as a core component in designing treatment services. Furthermore, all of our service delivery utilizes evidence-based principles both from the world of community corrections and the world of housing providers.

### **SUBMISSION IS MANDATORY**

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:		Journey To New Life	
	R	Reference Information (Prior Services	Performed For:)
Name of Company	Reference y:	Missouri Department of Corrections	
	of Reference	Kansas City Reentry Center	
Company	<b>y:</b>	651 Mulberry, Kansas City, MO 64101	
Reference Name:	e Contact Person	Todd Warren, Warden Beth Johnson, Assistant Warden	Emily A. Johnson
Contact	Person Phone #:	(816) 842-7467	(573) 884-5473
Contact laddress:	Person e-mail	Todd.Warren@doc.mo.gov Beth.Johnson@doc.mo.gov	johnson.emi@missouri.edu
Dates of	Prior Services:	July, 2017June 2018, July, 2018Jun	e 2019, July, 2019June, 2020
Dollar V Services:	alue of Prior	\$ 300,000/year	
	on of Prior Performed:	Assisting offenders with their reentry process both by providing classes to prepare individuals pre-release for reentry and for providing goods, services, classes, housing and case-management post release. Individual needs assessment and case plans are development for each participant. This year we have served 367 men in this program	

Deorgia K Walker	6/14/1
Authorized Signature of Applicant	Date

### SUBMISSION IS MANDATORY

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:	Journey To New Life	
I	Reference Information (Prior Services Performed For:)	
Name of Reference Company:	Missouri Department of Corrections	
Address of Reference	2729 Plaza Drive	
Company:	P.O. Box 236, Jefferson City, MO 65102	
Reference Contact Person Name:	Ken Chapman, Reentry Manager Emily A. Johnson	
Contact Person Phone #:	(573) 522-1206 (573) 884-5473	
Contact Person e-mail address:	Ken.Chapman@doc.mo.gov johnson.emi@missouri.edu	
Dates of Prior Services:	July, 2016June 2017, July, 2017June 2018, July, 2018June, 2019	
Dollar Value of Prior Services:	\$ 50,000/year, \$ 25,000, \$ 25,000	
Description of Prior Services Performed:	Provided case-management and housing for sex-offenders. We served more than the grant promised with more services than originally specified. However, the demand is greater than the resources provided by the grant.	

Deorgia K Walker	6/14/19
Authorized Signature of Applicant	Date

### SUBMISSION IS MANDATORY

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:		Journey To New Life	
	R	Reference Information (Prior Services Performed For:)	
Name of Company	Reference	Missouri Department of Corrections, District 4W	
	of Reference	1330 Brush Creek	
Company	<b>7:</b>	Kansas City, MO 64110	
Reference Name:	e Contact Person	Gail Bynum, District Administrator Scott Hymer, Parole Officer	
Contact F	Person Phone #:	(816) 753-8320	
Contact F address:	Person e-mail	Gail.Bynum@doc.mo.gov Scott.Hymer@doc.mo.gov	
Dates of	Prior Services:	Journey House: September, 2015 til the present. Now opening Peace House, too.	
Dollar Va Services:	alue of Prior	\$ 200,000/year from private, corporate & foundation contributions	
	on of Prior Performed:	Provides home plans for approximately 100 women released from Chillicothe or Vandalia per year. Provide them with 90 days of free room, board, case management and various reentry goods, services, educational classes and recovery support. Once they have obtained employment or access to economic program benefits, we place them in permanent housing and continue to provide wrap around services for an additional six to nine months. Can double number served with second house.	

Deorgia K Walker	6/14/19
Authorized Signature of Applicant	Date

### SUBMISSION IS MANDATORY

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:	Journey To New Life
	Reference Information (Prior Services Performed For:)
Name of Reference Company:	City of Kansas City, Missouri Neighborhoods & Housing Services
Address of Reference	4400 Blue Parkway
Company:	Kansas City, MO 64130
Reference Contact Person Name:	Kimberly Harris, Contract Manager
Contact Person Phone #:	(816) 260-0388
Contact Person e-mail address:	Kimberly.Harris@kcmo.org
Dates of Prior Services:	2013-14, 2014-15, 2015-16, 2016-17, 2017-18, 2018-19
Dollar Value of Prior Services:	HUD Permanent Supportive Housing \$ 150,547/year
Description of Prior Services Performed:	Placement of justice involved individuals with disabilities into permanent supportive housing. Provide them with case-management, wrap around services and education to prevent a return to homelessness. Serve 13 individuals per year on this type of housing and support.

Devi	gia K Walker	6/14/19
Authorize	d Signature of Applicant	Date

### SUBMISSION IS MANDATORY

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:	Journey To New Life
]	Reference Information (Prior Services Performed For:)
Name of Reference Company:	City of Kansas City, Missouri Neighborhoods & Housing Services
Address of Reference	4400 Blue Parkway
Company:	Kansas City, MO 64130
Reference Contact Person Name:	Kimberly Harris, Contract Manager
Contact Person Phone #:	(816) 260-0388
Contact Person e-mail address:	Kimberly.Harris@kcmo.org
Dates of Prior Services:	2014-15, 2015-16, 2016-17, 2017-18, 2018-19
Dollar Value of Prior Services:	HUD Mohart Road Home Rapid Rehousing \$ 174,101/year
Description of Prior Services Performed:	Placement of justice involved individuals into permanent housing. Provide them with case-management, wrap around services and education to prevent a return to homelessness. Serve 40 individuals per year on this type of short term economic support for housing and longer-term reentry and recovery support.

9Seo	rgic	K	Walker		6/14/19
Authorized	d Signa	ture	of Applicant	Date	

### SUBMISSION IS MANDATORY

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:	Journey To New Life				
	Reference Information (Prior Services Performed For:)				
Name of Reference Company:	City of Kansas City, Missouri Neighborhoods & Housing Services				
Address of Reference	4400 Blue Parkway				
Company:	Kansas City, MO 64130				
Reference Contact Person Name:	Florence Kinard Wilson, Contract Manager				
Contact Person Phone #:	(816) 513-4515				
Contact Person e-mail address:	Florence.Kinard@kcmo.org				
Dates of Prior Services:	2015-16, 2016-17, 2017-18, 2018-19, 2019-20				
Dollar Value of Prior Services:	HUD ESG Essential Services & Rapid Rehousing \$ 117,269/year				
Description of Prior Services Performed:	Provides emergency shelter and rapid rehousing to individuals with a history of involvement with the justice system. Provides them with case management and wrap around services to prevent a return to homelessness or relapse.				

Leogia K Walker	6/14/19
Authorized Signature of Applicant	Date

### SUBMISSION IS MANDATORY

### PRIOR EXPERIENCE OF APPLICANT

Organization Name:	Journey To New Life				
]	Reference Information (Prior Services Performed For:)				
Name of Reference Company:	US Department of Housing & Urban Development Office of Community Planning and Development				
Address of Reference	400 State Ave, RM 200				
Company:	Kansas City, KS 66101-2406				
Reference Contact Person Name:	Jeffrey P. Heimerl, CPD Representative				
Contact Person Phone #:	(913) 551-6817				
Contact Person e-mail address:	Jeffrey.P.Heimerl@hud.gov				
Dates of Prior Services:	2016-17, 2017-18, 2018-19, 2019-20				
Dollar Value of Prior Services:	HUD New Life Rapid Rehousing for Veterans \$ 280,220/year				
Description of Prior Services Performed:	Placement of veterans who have a history of justice system involvement into permanent housing. Providing them with case-management and wrap around services to prevent a return to homelessness or prison. Program involves intensive psychological and recovery supportparticularly those for with service in active combat zones. We serve 50 to 60 veterans per year in this program.				

Deorgia K Walker	6/14/19
Authorized Signature of Applicant	Date

# EXPERTISE OF PERSONNEL

	(Copy and co	omplete this table for each key person proposed)
	Title of Position:	Executive Director
Name of	Person:	Georgia Walker
	tional Degree (s): include or university, major, and dates	BA – Sociology, University of Missouri; MA – Sociology, University of Missouri; MPhil & PhD– Sociology – University of Kansas
Licens Numbe applica		
Include comple	lized Training Completed.  dates and documentation of tion for all required training ed in this document:	HUD Housing Quality Standards Inspector Certification
service		Assistant Director, Center for Women In Transition – 10 years; Case Manager, Catholic Charities – 2 years; Program Specialist, Homeless Services Coalition – 3 years; Executive Director – JTNL - 6 years
application applic	e person's relationship to nt. If employee, number of If subcontractor, describe ast working relationships.	Employee – Executive Director, 6 years
	e this person's responsibilities past 12 months.	Administrative oversight – process payroll, enter financial data into QuickBooks, grant management & financial oversight of government grants and contracts
Previou dates.	s employer(s), positions, and	Center for Women in Transition 8/2000 – 8/2008; Catholic Charities 8/2008-5/2010; Serendipity Community Service 5/2010-2011; Homeless Services Coalition 1/2011-12/2013; JTNL 8/2013 - present
Identify experien	specific information about nce in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Soc	ial Work	
✓ Ree	ntry	Center for Women in Transition – managed residential facility, provided case management and mentoring services for persons who 12-12d; Executive Director – JTNL, administrative and financial oversight of agency
✓ Cou	nseling	
✓ Criı	ninal Justice	
✓ Cor	rectional Residential Facilities	

Authorized Signature of Applicant

6/24/19

### **EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

(Copy and complete this table for each key person proposed)			
	Title of Position:	President, Board of Directors	
Name of Perso	on:	Sister Rose McLarney	
		BSN – Avila University, 1958-62; MSN – St. Louis University, 1965-68; graduate courses toward MBA – August College, 1975-77	
License(s)/C Number(s), applicable:	ertification(s), expiration date(s), if		
Include date completion	Training Completed. s and documentation of for all required training this document:		
service pr	ears experience in area of coposed to provide. In working with offenders?	Executive Director, Center for Women In Transition, St. Louis MO, 10 years; Mentor Coordinator, Catholic Charities TurnAround program, 2 years	
applicant. If years. If	erson's relationship to employee, number of subcontractor, describe orking relationships.	Charter/Founding Member of JTNL; Board of Directors, President	
Describe this over the past	person's responsibilities	Developed policies and procedures for agency; facilitated monthly BOD meetings; recruited and oriented BOD members; assist with fundraising efforts; solicit major gifts	
Previous emp	ployer(s), positions, and	Adjunct Instructor – Restorative Justice, Avila University, 2010-present; Mentor Coordinator – Catholic Charities, 2008-2010; Executive Director – Center for Women in Transition, 1999-2008; Vice President – Planning & Marketing, St. Joseph Medical Center	
Identify specience in	ific information about	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience	
✓ Social W	ork		
✓ Reentry		Mentor Coordinator – Catholic Charities TurnAround	
✓ Counselin	✓ Counseling		
✓ Criminal	Justice	Adjunct faculty Avila University – Restorative Justice	
✓ Correctio	onal Residential Facilities		

Authorized Signature of Applicant Larger & Walker

C/Z4/19
Date

(Copy and complete this table for each key person proposed)

	(Copy and complete this table for each key person proposed)		
	Title of Position:	Program Director	
Name of l	Person:	Rita Flynn	
1	ional Degree (s): include or university, major, and dates	BA – Criminal Justice, University of California	
License Number applicat			
Include complet	zed Training Completed. dates and documentation of ion for all required training d in this document:	Defensive tactics, Verbal Judo, Reality Therapy, Cognitive Thinking, Firearms Training, Probation & Parole Officer	
service	of years experience in area of proposed to provide. nce in working with offenders?	50 years experience working with offender population – 33 years in Probation & Parole (CA, MO, & KS); Retired as MO P&P District Administrator; 10 years Program Manager – Catholic Charities TurnAround; Founder & Program Director – JTNL	
applican years.	person's relationship to t. If employee, number of If subcontractor, describe st working relationships.	Employee – Program Director, 6 years	
	this person's responsibilities past 12 months.	Manage HUD housing grants, Supervise staff & volunteers; Conduct pre-release interviews at KC Release Center; Provide case management services to KCRC clients	
Previous dates.	s employer(s), positions, and	Catholic Charities, TurnAround Program Manager 2003-2013; KS DOC, Parole Officer – 2001-2003; MO DOC, Probation & Parole Officer 1980-2000; Buch County Juvenile 1971-77; LEAA 1978-80; WRDCC Riverside County, CA Probation 1970-71	
Identify experien	specific information about ce in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience	
✓ Soci	al Work		
✓ Reei	ntry	Program Director, JTNL – 2013 – present; TurnAround Program Manager, Catholic Charities 2003-2013	
✓ Cou	nseling		
✓ Crin		WRDCC Riverside CA Probation; MO Probation & Parole; Buch Co Juvenile; LEAA; KS Parole	
✓ Corr	ectional Residential Facilities	WRDCC - Substance Abuse Counselor in therapeutic community	

Authorized Signature of Applicant

Date 6 /24/19

### **EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

	Title of Position:	Case Manager
Name of I	Person:	Jeff Page
	onal Degree (s): include or university, major, and dates	BA – Human Relations, University of Miami; MS – Guidance & Counseling, Southern Connecticut State College
License Number applicab		CPR June 2015
Include complet	zed Training Completed. dates and documentation of ion for all required training d in this document:	
service	of years experience in area of proposed to provide. ace in working with offenders?	45 years working with offender population as parole officer and reentry case manager
applican years.	person's relationship to t. If employee, number of If subcontractor, describe st working relationships.	Employee – Case Manager, 6 years
	this person's responsibilities past 12 months.	Assist clients secure permanent housing after incarceration. Provide case management services for Veterans and Sex Offenders, make referrals as needed
Previous dates.	employer(s), positions, and	Conn DOC Adult Probation Officer 1973-75; IA DOC Adult Parole Officer, Office Manager & Division Manager 1975-2006;
Identify experien	specific information about ce in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Soci	al Work	Conn DOC Adult Probation Officer 1973-75; IA DOC Adult Parole Officer, Office Manager & Division Manager 1975-2006;
✓ Reer	ntry	Conn DOC Adult Probation Officer 1973-75; IA DOC Adult Parole Officer, Office Manager & Division Manager 1975-2006;
✓ Cou	nseling	Conn DOC Adult Probation Officer 1973-75; IA DOC Adult Parole Officer, Office Manager & Division Manager 1975-2006;
✓ Crim	inal Justice	Conn DOC Adult Probation Officer 1973-75; IA DOC Adult Parole Officer, Office Manager & Division Manager 1975-2006;
✓ Corr	ectional Residential Facilities	Conn DOC Adult Probation Officer 1973-75; IA DOC Adult Parole Officer, Office Manager & Division Manager 1975-2006;

Authorized Signature of Applicant / Leorgia K Walker

6/24/15 Date

### **EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

Title of Position:	Operations Director
Name of Person:	Susie Roling
Educational Degree (s): include college or university, major, and dates	BSW & MSW – University of Missouri
License(s)/Certification(s), Number(s), expiration date(s), if applicable:	LMSW – Does not expire
Specialized Training Completed. Include dates and documentation of completion for all required training identified in this document:	Trauma Informed Care, Framework for Understanding Poverty, Strengths Based Case Management Training
Number of years experience in area of service proposed to provide. Experience in working with offenders?	23 years of service working with Death Penalty cases & offenders
Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.	Employee – Operations Director, 4 years
Describe this person's responsibilities over the past 12 months.	Day to day oversight of facility, Supervise staff and volunteers, Direct case management services, make referrals as needed, Admin support, Grant management & oversight
Previous employer(s), positions, and dates.	Operation Breakthrough, Social Worker 2004-2014; Chicato Legal Aid to Incarcerated Mothers 2003-2004
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Social Work	12 years – clinical social work
✓ Reentry	6 years – Case Manager & Operations Director
✓ Counseling	12 years – therapeutic clinical case management
✓ Criminal Justice	23 years – advocate for death row offenders
✓ Correctional Residential Facilities	l year

Authorized Signature of Applicant / Heorgia K Walber

Date ( / 2 4 / 1/9

EXPERTISE OF PERSONNEL
(Copy and complete this table for each key person proposed)

(Copy and Co	mplete this table for each key person proposed)
Title of Position:	ReEntry Specialist
Person:	Tom Cotton
• ,	BA – University of Illinois – Pre Med, 1962 MD – University of Illinois – General Medicine, 1965
r(s), expiration date(s), if	
dates and documentation of tion for all required training	
r of years experience in area of proposed to provide.	2008 to present
nt. If employee, number of If subcontractor, describe	Volunteer - ReEntry Specialist, Board of Directors
e this person's responsibilities	Assess client needs; refer to case managers for long term needs and goals; community mentor
s employer(s), positions, and	
-	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
ial Work	
ntry	Volunteer – Catholic Charities TurnAround, 2008-2015
nseling	Volunteer – Catholic Charities TurnAround, 2008-2015
minal Justice	
rectional Residential Facilities	
	Title of Position:  Person:  tional Degree (s): include or university, major, and dates  e(s)/Certification(s), r(s), expiration date(s), if ble:  lized Training Completed. dates and documentation of tion for all required training ed in this document:  r of years experience in area of proposed to provide. ence in working with offenders?  e person's relationship to nt. If employee, number of If subcontractor, describe ast working relationships.

Port M. Lunce Deorgia K Walker
Authorized Signature of Applicant

& /24/15 Date

### **EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

	Title of Position:	ReEntry Specialist
Name of P	erson:	James Deeken
		BA – University of Missouri – Pre Med MD – University of Missouri – Dermatology
License( Number( applicabl	•	
Include completi	ted Training Completed.  dates and documentation of on for all required training d in this document:	
service	of years experience in area of proposed to provide. ce in working with offenders?	2008 to present
applicant years.	person's relationship to If employee, number of If subcontractor, describe t working relationships.	Volunteer - ReEntry Specialist
	this person's responsibilities past 12 months.	Assess client needs; refer to case managers for long term needs and goals
Previous dates.	employer(s), positions, and	
Identify s	specific information about ce in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Socia	ıl Work	
✓ Reen	try	Volunteer - Catholic Charities TurnAround, 2008-2015
✓ Coun	seling	
✓ Crim	inal Justice	
✓ Corre	ectional Residential Facilities	

Authorized Signature of Applicant

0 (24)(9 Date

### **EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

Title of Position: ReEntry Specialist			
Name of Person:	Judy Mann		
Educational Degree (s): college or university, major, and	AA – Harper College Include BA – Park College MA – University of Missouri – Kansas City, Counseling		
License(s)/Certification(s), Number(s), expiration date( applicable:	s), if		
Specialized Training Com Include dates and documental completion for all required t identified in this document:	cion of		
Number of years experience in service proposed to prop	rovide. present		
Describe person's relationsh applicant. If employee, numbers of subcontractor, do other/past working relationships	ber of escribe		
Describe this person's responsit over the past 12 months.	Assess client needs; refer to case managers for long term needs and goals; community mentor		
Previous employer(s), positions dates.	, and		
Identify specific information ab experience in:	Out Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience		
✓ Social Work	15 years – Leisure Care Corp		
✓ Reentry	Volunteer - Catholic Charities TurnAround, 2004-2013		
✓ Counseling	MA – Counseling		
✓ Criminal Justice	Facilitate presentation on Criminal Justice Day (w/Probation & Parole Ofcr)		
✓ Correctional Residential Fac	cilities VIC at WRDCC, Crossroads, Cameron SMCC and Chillicothe		

Authorized Signature of Applicant

Date ( 24/19

### **EXPERTISE OF PERSONNEL**

(Copy and complete this table for each key person proposed)

Title of Position:	Admin Specialist
Name of Person:	Angela Millwood
Educational Degree (s): include college or university, major, and dates	HS diploma – Bushwick High School
License(s)/Certification(s), Number(s), expiration date(s), if applicable:	
Specialized Training Completed. Include dates and documentation of completion for all required training identified in this document:	
Number of years experience in area of service proposed to provide. Experience in working with offenders?	2008 to present
Describe person's relationship to applicant. If employee, number of years. If subcontractor, describe other/past working relationships.	Volunteer – Admin Assistant
	Data Entry, Schedule Appts, Prepare Vouchers for Checks, Prepare Client Services Report
Previous employer(s), positions, and dates.	
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Social Work	
✓ Reentry	Volunteer – Catholic Charities TurnAround, 1992-2014, Volunteer – JTNL 2014-present
✓ Counseling	
✓ Criminal Justice	
✓ Correctional Residential Facilities	

Authorized Signature of Applicant / Lorgia K Walker

Date 6/24/19

### **EXHIBIT C**

### SUBMISSION IS MANDATORY

### LEGAL/CANCELLATION ACTIONS AGAINST APPLICANT

The applicant shall copy and complete this form for each legal action or cancellation of contract brought against the organization in the past 5 years. In addition, the applicant is advised that if such information is obtained by Department that is not included in the application, the application may not be considered.

Organizat	ion Name:	n/a
		Legal/Cancellation Actions Information From:
Name of C	ompany:	
Address of	Company:	
Contact Pe	rson Name:	
Contact Number:	Person Phone	
Contact address:	Person e-mail	
Date(s) of Cancellation	Legal Action or on:	
Reason for Contract:	Cancellation of	
Description	n of Legal Action:	
Resolution	of Legal Action:	
Lo	pora K Walke	6/24/19
Authorized S	Signature of Applic	eant Date

Exhibit D

Performance Measures

Instructions for how to complete this form and a sample can be found the next page.

Total Number of Clients Agency Proposes to Serve: 15

Category	Service	Proposed Clients	Outcome	Indicator (How do you know you are achieving the outcome?)	
Academic			Enhanced education		
	Birth Certificate/ID	15		100% will receive assistance through EA	
Basic Needs and	Personal Hygiene	15	Attainment of basic needs and	services; verified by client file and daily service log in CaseWorthy & MAAC database	
Emergency Services	Food	15	emergency services	log in Case worthy & MAAC database	
	Cell Phone	10		70% of clients will be employed full-time;	
Employment	Job Readiness	10	Improved employment	verified by pay stub, documented in client file,	
	Work tools.clothes	10		CaseWorthy & MAAC database	
Family			Increased family support		
Housing	Rental Assistance	15	Attainment of housing	100% will attain permanent housing; 90% will maintain housing for 6 months or more	
	Anger Management	10		100% will receive financial assistance for SO	
Mental Health	Conflict Resolution	10	Reduced mental health risks	assessment and treatment; 70% will complete 5 wk courses in anger management & conflict	
	SO Treatment Access	15		resolution	
Substance Abuse	Relapse Prevention	10	Reduced substance abuse	70% will complete 3 months of relapse prevention support groups	
Transportation	Monthly Bus Pass	15	Attainment of transportation	100% will receive 3 months of bus passes	
Vocational			Improved employment		

### **EXHIBIT E**

### SUBMISSION IS MANDATORY

### **TIMELINE**

The applicant shall complete this form to include each detailed step that will need to be taken to implement the project and to provide services during the entire contract period.

Task or Event	Start Date	Date to be Completed	Assigned Personnel
Needs Assessment		Ongoing	Case Manager
Addressing Basic Needs		Ongoing	Case Manager
Housing Counseling		Ongoing	Case Manager
+Locate Housing	, a	Ongoing	Case Manager
Perform Housing Inspection		Ongoing	Case Manager
Sign Lease		Ongoing	Case Manager
Move In		Ongoing	Case Manager
Supply Household Items		Ongoing	Case Manager
Make Appropriate Referrals		Ongoing	Case Manager
Schedule Applicable Groups, MH & treatment services		Ongoing	Case Manager
Est. Case Management Plan & Schedule		Ongoing	Case Manager
Groups of 5 clients would be processed through every 90 days; receiving intensive CM first 90 days; then monthly contact next 90 days			
Individualized CM plan per client's assessed needs			

### **EXHIBIT F**

### SUBMISSION IS MANDATORY

BUDGET DETAIL WORKSHEET
All Expenses Must Be Reasonable and Necessary

COMPLETED FORM MUST BE RETURNED WITH A	PPLICATION	Ţ.
A. Personnel (a breakdown in the number of hours each person is dedicated the project is to be provided)	0	
Name/Position	Calculation of Cost	Cost
	Subtotal	
B. Fringe Benefits (must be capped at 12%)		
Name/Position	Calculation of Cost	Cost
	Subtotal	
C. Staff Travel (mileage at \$0.37 /mile — Conus rate for any other expenses)  Purpose of Staff Travel (all staff travel must be for the <u>direct</u> benefit of the	Calculation of	
offender include location and type)	Cost	Cost
	Subtotal	
D. Direct Services (i.e. housing rental/lease, GED Testing)  ****ALL DIRECT SERVICES MUST BE PROVIDED TO THE OFFENDERS****		
	Calculation of	Cost
	Cost	9750
ental Deposit @ \$650 per client	650x15	7/30
	650x15 650x3x15	29250
months rent @ \$650 per client/mo		
months rent @ \$650 per client/mo months bus pass @ \$50 per client/mo	650x3x15	29250
Rental Deposit @ \$650 per client months rent @ \$650 per client/mo months bus pass @ \$50 per client/mo months phone @ \$50/mo per client/mo months food @ \$144/mo per client/mo	650x3x15 50x3x15	29250 2250
months rent @ \$650 per client/mo months bus pass @ \$50 per client/mo months phone @ \$50/mo per client/mo	650x3x15 50x3x15 50x3x15	29250 2250 2250

Page 36 2
ıbtotal
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ibtotal
\$50,000
\$50,000
\$30,000
-

### **EXHIBIT G**

### SUBMISSION IS MANDATORY

### **BUDGET NARRATIVE**

Applicant must provide justification and detailed description of all budget items listed in Exhibit E. NOTE: All expenses must be reasonable and necessary.

### A. Personnel

None paid by this grant

**B. Fringe Benefits** 

None paid by this grant

C. Staff Travel

None paid by this grant

### D. Direct Services to the Offenders

- 1. Rent Deposit \$650/mo for 15 clients
- 2. 3 months of rent @ \$650/mo for 15 clients
- 3. 3 months transportation @ \$50/mo for 15 clients
- 4. 3 months cell phone @ \$50/mo for 15 clients
- 5. 3 months food @ \$144/mo for 15 clients

### E. Equipment/Supplies (Direct Services Only)

None paid by this grant

# EXHIBIT H PARTICIPATION COMMITMENT

Organization for the Blind/Sheltered Workshop and/or Service-Disabled Veteran Business Enterprise (SDVE) Participation Commitment – If the bidder is committing to participation by or if the bidder is a qualified organization for the blind/sheltered workshop and/or a qualified SDVE, the bidder must provide the required information in the appropriate table(s) below for the organization proposed and must submit the completed exhibit with the bidder's bid.

Organization for the Blind/Sheltered Workshop Commitment Table					
By con	By completing the table, the bidder commits to the use of the organization at the greater of 88,000 or 2% of the actual total doll it value of contract.				
a com	(The services performed or the products provided by the listed Organization for the Blind/Sheltered Workshop must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)				
Name of Organization for the Blind or Sheltered Workshop Proposed  Listed Organization for the Blind/Shelter  Workshop  The bidder should also include the paragraph me from the RFA which requires the product/serv organization for the blind/sheltered workshop proposed to perform and describe how the pro-		The bidder should also include the paragraph number(s) from the RFA which requires the product/service the organization for the blind/sheltered workshop is proposed to perform and describe how the proposed product/service constitutes added value and will be			
1.		Product/Service(s) proposed:			
		RFA Paragraph References:			
2.		Product/Service(s) proposed:			
		RFA Paragraph References:			

Total SDVE Percentage:

### **EXHIBIT H. continued**

SDVE Participation Commitment Table  (The services performed or the products provided by the listed SDVE must provide a commercially useful function related to the delivery of the contractually-required service/product in a manner that will constitute an added value to the contract and shall be performed/provided exclusive to the performance of the contract.)				
Name of Each Qualified Service Disabled Veteran Business Enterprise (SDVE) Proposed	Committed Percentage of Participation for Each SDVE (% of the Actual Total Contract Value)	Description of Products/Services to be Provided by Listed SDVE The bidder should also include the paragraph number(s) from the RFA which requires the product/service the SDVE is proposed to perform and describe how the proposed product/service constitutes added value and will be exclusive to the contract.		
1.	%	Product/Service(s) proposed:  RFA Paragraph References:		
2.	%	Product/Service(s) proposed:  RFA Paragraph References:		

%

issuance date)

### **EXHIBIT I**



### **DOCUMENTATION OF INTENT TO PARTICIPATE**

If the bidder is proposing to include the participation of an Organization for the Blind/Sheltered Workshop and/or qualified Service-Disabled Veteran Business Enterprise (SDVE) in the provision of the products/services required in the RFA, the bidder must either provide a recently dated letter of intent, signed and dated no earlier than the RFA issuance date, from each organization documenting the following information, or complete and provide this Exhibit with the bidder's bid.

~ Copy This Form For Each Organization Proposed ~ Bidder Name: This Section To Be Completed by Participating Organization: By completing and signing this form, the undersigned hereby confirms the intent of the named participating organization to provide the products/services identified herein for the bidder identified above. Indicate appropriate business classification(s): Organization for Sheltered **SDVE** the Blind Workshop Name of Organization: (Name of Organization for the Blind or Sheltered Workshop or SDVE) Contact Name: Email: Address (If SDVE, provide Phone #: MO Address): Fax #: City: State/Zip: Certification # (or attach copy of certification) SDVE's Website Certification Expiration Address: Date: SDV's Service-Disabled Veteran's (SDV) Name: Signature: (Please Print) PRODUCTS/SERVICES PARTICIPATING ORGANIZATION AGREED TO PROVIDE Describe the products/services you (as the participating organization) have agreed to provide: Authorized Signature: Authorized Signature of Participating Organization Date (Dated no earlier (Organization for the Blind, Sheltered Workshop, or SDVE) than the RFA

### **EXHIBIT L. continued**

MA

### SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE (SDVE)

If a participating organization is an SDVE, unless the Service-Disabled Veteran's (SDV) documents were previously submitted within the past five (5) years to the state agency, the bidder <u>must</u> provide the following SDV documents:

- a copy of the SDV's award letter from the Department of Veterans Affairs or a copy of the SDV's discharge paper (DD Form 214, Certificate of Release or Discharge from Active Duty); and
- a copy of the SDV's documentation certifying disability by the appropriate federal agency responsible for the administration of veterans' affairs.

(NOTE: The SDV's award letter, the SDV's discharge paper, and the SDV's documentation certifying disability shall be considered confidential pursuant to subsection 14 of section 610.021, RSMo.)

The bidder should check the appropriate statement below and, if applicable, provide the requested information.

No, I have not previously submitted the SDV documents specified above to the state agency and therefore have enclosed the SDV documents.

Yes, I previously submitted the SDV documents specified above within the past five (5) years to the state agency.

Date SDV Documents were Submitted:

Previous Bid/Contract Number for Which the SDV Documents were Submitted:

(if known)

FOR STATE USLOSIA)

SDV's Documents - Verification Completed By:

Procurement Officer

Date

### EXHIBIT J

### BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION. AND AFFIDAVIT OF WORK AUTHORIZATION

### **BUSINESS ENTITY CERTIFICATION:**

The applicant must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.

BOX A	To be completed by a non-business entity as defined below.
BOX B:	To be completed by a business entity who has not yet completed and submitted documentation
	pertaining to the federal work authorization program as described at
	http://www.dhs.gov/files/programs/gc 1185221678150.shtm.
BOX C:	To be completed by a business entity who has current work authorization documentation on file
	with a Missouri state agency including Division of Purchasing and Materials Management.

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. The term "business entity" shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

BOX V (TRREXITY NOT	1130 3151 351 31111		
I certify that (Company/Individual Name) <b>DOES NOT CURRENTLY MEET</b> the definition of a business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above, because: (check the applicable business status that applies below)			
I am a self-employed individual with no en	mployees; OR		
☐- The company that I represent employs the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.			
I certify that I am not an alien unlawfully present in the United States and if			
Authorized Representative's Name (Please Print)	Authorized Representative's Signature		
Company Name (if applicable)	Date		

Page 3

### **EXHIBIT J. continued**

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box B, do not complete Box C.)

	BOX B - CURRENT BUSINESS ENTITY STATUS			
	ify that(Business Entity Named in section 285.525, RSMo pertaining to section 285	me) MEETS the definition of a business entity as .530.		
Authorized Business Entity Representative's  Name (Please Print)  Authorized Business Entity Representative's Signature				
]	Business Entity Name	Date		
]	E-Mail Address			
	As a business entity, the applicant must perform/provide each of the following. The applicant should check each to verify completion/submission of all of the following:			
	Enroll and participate in the E-Verify federal work authorization program (Website: http://www.dhs.gov/files/programs/gc_1185221678150.shtm; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;			
	AND			
	Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the applicant's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the applicant's name and the MOU signature page completed and signed, at minimum, by the applicant and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the applicant's name and company ID, then no additional pages of the MOU must be submitted;			
	AND			
	Submit a completed, notarized Affidavit of Work Exhibit.	Authorization provided on the next page of this		

### **EXHIBIT J, continued**

### **AFFIDAVIT OF WORK AUTHORIZATION:**

The application following A	ant who meets the section 285.525, RSM Affidavit of Work Authorization.	o, definition of a	ousiness entity must	complete and return the			
_Journey T Verify fedd are proposed duration of that _Joure an unautho	now _Georgia K Walker	ne) is enrolled ar spect to employee ices related to con e with subsection ame) does not and	nd will continue to s hired after enrollm intract(s) with the St 2 of section 285.530 will not knowingly	participate in the E- nent in the program who tate of Missouri for the 0, RSMo. I also affirm employ a person who is			
	ntion thereof, the facts stated above are ments made in this filing are subject to th						
Leo	row K Walker	Georgia K	K. Walker				
Authorized	ngia K Walker d Representative's Signature	Printed Name					
Exec	at Representative's Signature	6/24/19					
Title		Date		Manufacture Control Baylor Andrews			
akw.	journey to newlife Chotmail con	1 8626	86				
E-Mail Address		E-Verify Company ID Number					
	<b>fn</b> i	,					
Subscribed	abscribed and sworn to before me this of June 2019. I am						
commission	ned as a notary public within the County	of Jacks	State of				
(NAME OF COUNTY)  (NAME OF STATE)  (NAME OF COUNTY)  (NAME OF COUNTY)  (NAME OF COUNTY)							
(NA	ME OF STATE)	Apriles on 7 1992	(DATE)	2			
- J	levelle Smits	6)	(24/19	Special control of the Administration			
signature	of Notary	Date	,				
	***	My C	BRIELLE SMITS ommission Expires Jarch 14, 2020				



Jackson County Commission #11517942

### **EXHIBIT J. continued**

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box C, do not complete Box B.)

	BOX C = AFFIDAVIT ON FILE - CURR	ENT BUSINESS ENTITY STATUS				
define partici enroll the St univer	I certify that <u>Journey to New Life</u> (Business Entity Name) <u>MEETS</u> the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.					
<b>✓</b>						
Name of Missouri State Agency or Public University* to Which Previous E-Verify Documentation Submitted: Dept of Corrections  (*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University – St. Louis; Missouri Southern State University – Joplin; Missouri Western State University – St. Joseph; Northwest Missouri State University – Maryville; Southeast Missouri State University – Cape Girardeau.)  Date of Previous E-Verify Documentation Submission:						
Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted:(ifknown)						
	Georgia K Walker	Deorgia K Wallson				
A	uthorized Business Entity Representative's	Deorgia K Waller  Authorized Business Entity				
N	ame (Please Print)	Representative's Signature				
	Towney To New Life	6/14/19				
В	Journey To New Life usiness Entity Name	Date				
Ć	g walker@jtnl.org	862686				
E	-Mail Address	E-Verify MOU Company ID Number				
FOR I	DEPARTMENT USE ONLY					
Docum	nentation Verification Completed By:					
Pi	rocurement Officer	Date				

# RECONCILIATION SERVICES

June 24, 2019

Beth Lambert
Procurement Officer
Office of Administration
Division of Purchasing
301 West High Street, RM 630
Jefferson City, MO 65102

Dear Ms. Dawson,

On behalf of Reconciliation Services, please accept this letter of support of Journey to New Life, Inc., doing business in Missouri, submission in response to the State of Missouri's RFPS30034901701491, Post-Release Reentry Services. I believe that Journey to New Life is the provider best suited to deliver these services for the Department of Corrections. I am impressed with Journey's existing commitment to the local service provider landscape as well as their dedication to delivering the highest quality of services for all clients served throughout their agency. Therefore, we are pleased to be considered a community partner in their network of providers.

For more than 30 years, Reconciliation Services [RS] has worked to cultivate a community seeking reconciliation, to transform Troost from a dividing line into a gathering place, revealing the strength of all. We have innovated an intentional continuum of care following the RS Theory of Change, working to seek racial and economic reconciliation one heart at a time, through strengths-based Healthy Community Initiatives, our REVEAL Social and Mental Health Services, and Economic Community Building Initiatives.

Our REVEAL (Restore-Engage-Value-Encourage-Act-Lead) Program offers a comprehensive approach to individual and community healing through social services, case management, and therapeutic services. Our case managers help individuals and families meet urgent needs and accomplish immediate goals, assisting with: housing and utilities assistance; ID/document assistance; and dental and medical supplies, services, and prescriptions through our partnership with the KC Medicine Cabinet.

Additionally, we offer evidence-based, clinical support under the direction of a Licensed Clinical Social Worker (LCSW), through individual and group therapy and intensive case management for our client guests struggling with depression and the effects of trauma. This combined approach to mental health empowers individuals to build resilience, find healing from trauma and depression, find meaningful life

work, secure stable housing, and access the resources they need to have sustainable health and well-being.

Journey to New Life and Reconciliation Services are committed to best serving individuals returning from incarceration. To that end, Reconciliation Services will enter into a relationship with Journey to enable a strong network of community partnerships that directly increase client success upon reentry. Specifically, we will accept referrals from Journey for Therapy, ID, Birth Certificates and other legal documentations.

In closing, Reconciliation Services looks forward to providing important services to clients through linkages facilitated with Journey to New Life. JTNL has the experience and knowledge necessary to provide quality case management to the people of Missouri, particularly Kansas City reentrants, and I am excited that we have the opportunity to help connect and provide services to these clients in a meaningful and lasting partnership.

Sincerely,



**Gabriel Rop** 

**Programs and Operations Director** 

3101 Troost Avenue Kansas City, MO 64109 816-931-4751 Ext: 205(Direct) grop@rs3101.org

## **BishopSullivanCenter**

6435 Truman Road Kansas City, MO 64126

Phone: 816-231-0984 Fax: 816-231-3096 www.bishopsullivan.org 3936 Troost Kansas City, MO 64110 Phone: 816-561-8515 Fax: 816-531-2917

June 25, 2019

2220 Central Avenue

Kansas City, KS 66102

Phone: 913-906-8938

Fax: 913-871-9635

Beth Lambert
Procurement Officer
Office of Administration
Division of Purchasing
301 West High Street, RM 630
Jefferson City, MO 65102

Dear Ms. Lambert,

On behalf of Bishop Sullivan Center please accept this letter of support of Journey to New Life, Inc., doing business in Missouri, submission in response to the State of Missouri's RFPS30034901701491, Post-Release Reentry Services. I believe that Journey to New Life is the provider best suited to deliver these services for the Department of Corrections. I am impressed with Journey's existing commitment to the local service provider landscape as well as their dedication to delivering the highest quality of services for all clients served throughout their agency. Therefore, we are pleased to be considered a community partner in their network of providers.

Bishop Sullivan Center offers employment services, emergency assistance of rent and utility, food pantry and an evening meal in our "One City Café" dining area.

Journey to New Life and Bishop Sullivan Center are committed to best serving individuals returning from incarceration. To that end, Bishop Sullivan Center will enter into a relationship with Journey to enable a strong network of community partnerships that directly increase client success upon reentry. Specifically, we will accept referrals from Journey for employment services and any others needed, including housing and food assistance

In closing, Bishop Sullivan Center looks forward to providing important services to clients through linkages facilitated with Journey to New Life. JTNL has the experience and knowledge necessary to provide quality case management to the people of Missouri, particularly Kansas City reentrants, and I am excited that we have the opportunity to help connect and provide services to these clients in a meaningful and lasting partnership.

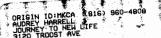
Respectfully

Kathleen Kennedy, MSW
Director of Employment Services
Bishop Sullivan Center

RECEIVED MO DEPT. OF CORRECTIONS PURCHASING SECTION

DATE: 10/2/0/19 TIME: 10: 1/10 m





BILL CREDIT CARD

KANSAS CITY, MO 64109 UNITED STATES US

10 MO DEPT OF CORRECTIONS FISCAL MANAGEMENT UNIT 2729 PLAZA DR

JEFFERSON CITY MO 65109



TRK# 7881 1143 8322

WED - 26 JUN 3:00P STANDARD OVERNIGHT

XX JEFA

65109 MO-US STL

# Expre