

Cleveland/Cuyahoga County Homelessness Continuum of Care Coordinated Intake Request for Qualifications

Instructions: Review **Part I. RFQ Activities and Design Specifications** for background and context. Complete narrative questions in **Part II. Organization Profile and Response** and complete the accompanying project budget using the template provided in **Part III. CI Budget**. Review and complete **Part IV. Application Checklist** to ensure all required processes are complete and all required documents are included with the application.

Part I. RFQ Activities and Design Specifications

Background

The Cuyahoga County Office of Homeless Services (OHS), the lead Continuum of Care (CoC) entity for Cleveland/Cuyahoga County CoC, published a Coordinated Intake (CI) Assessment in January of 2024. That Assessment identified recommendations for CI redesign to promote greater operational efficiencies, participant outcomes, and alignment with the Cleveland/Cuyahoga Strategic Action Plan for Homelessness. To implement the CI Assessment recommendations, OHS has redefined basic CI functions and is releasing this **Request for Qualifications** (RFQ) to identify CI operators.

Coordinated Intake services are organized into the following discrete functions, each of which has several subcomponents:

1. Access – Call Center (*)
2. Access – In Person (not open for applications, informational purposes only)
3. Assessment
4. Housing Unit Acquisition
5. Housing Navigation
6. Coordinated Intake Administration (*)

OHS is seeking responses from qualified entities for each of these functions. Not all functions or subcomponents must be performed by the same entity. Service providers may perform the functions and all subcomponents within the organization or via subrecipient agreements with partner agencies. **Please note the following exception:** Functions indicated with an asterisk (*) and their related subcomponents must be provided by a single entity. No subrecipient agreements will be allowed.

Contract Term

The contract terms may vary depending on the funding source and component. The earliest anticipated contract start date would be 2/1/25.

Potential Funding Available (subject to availability and verification):

Cuyahoga County HHS Levy	\$310,000
CoC Coordinated Entry	\$500,000
CoC Coordinated Entry Expansion	\$468,045
County ESG	\$180,464
TOTAL Expected	\$1,458,509

CI Functions

1. Access – Call Center (Currently funded at approximately \$215K)

Provide a system-level access point that is a streamlined and centralized process for households in the CoC to access assistance when experiencing a housing crisis. Access occurs through a telephone-based call center.

- **Triage:** Initiate a response to the CoC participant's housing crisis. Determine the nature of the housing crisis and route eligible participants to appropriate CoC and/or community resources. Collect minimal participant-identifying data in HMIS or another comparable database.

2. Access – In Person (please refer to Exhibit 1: CI Design Summary Table)

- **Intake:** Collect *Universal Data Elements* (UDEs) and related participant information in HMIS. Enroll participant in CI and/or other available CoC crisis response programming.
- **Diversions:** Identify immediate crisis resolution strategies using participant resources, community services and resources, and available housing supports.

3. Assessment (Currently funded at approximately \$500K)

Based on a standardized assessment process, gather information on each participant household's vulnerability, needs, preferences and barriers. The CI Assessment tools, as defined by the CoC, help to determine what housing and services interventions best suit the household's needs and immediate situation. CI Available is administered via phone, in-person, and at shelter for single adults.

- **Basic CI Assessment:** Collect *Program Specific Data Elements* (PSDEs) and related participation information and enter data into HMIS. Related information includes housing and homelessness history, income amounts and sources, and housing barriers screening. Assess eligibility for various CoC and other system resources and manage enrollment into crisis housing (emergency shelter) for designated populations.
 - i. Track shelter bed inventory and availability for Families, Youth, and highest vulnerability Single Adult populations
 - ii. Manage Emergency Shelter access for Families, Youth, and highest vulnerability Single Adult populations
- **Comprehensive CI Housing Assessment:** Identify housing options and recommend a *housing plan* based on completion of the *Vulnerability Index*. Conduct eligibility scan and make presumptive eligibility determinations for CoC and other system resources. Enter participant housing plan information in HMIS.
- **Diversions/Rapid Exit:** Conduct initial and ongoing identification of immediate crisis resolution strategies using participant resources, community services and resources, and available housing supports. Provide mediation support to assist participant households in negotiating safe, appropriate housing placements, even if temporary. Provide linkages to community and CoC resources and assistance. Assist participant households in pursuing the following exits from the system:
 - i. Diversion
 - ii. Diversion + temporary Emergency Shelter stays
 - iii. Rapid Exit

4. Housing Unit Acquisition (New Programming/Pilot up to 3 staff)

Working with property owners and property management companies, secure local units for use by eligible CoC participants who are signing leases through Rapid Exit, Rapid Rehousing, and Tenant-based Permanent Supportive Housing projects.

- **Housing Identification and inspections:** Ongoing identification and management of active list of rental properties available to CoC system participants. Perform and complete initial NSPIRE and/or HQS inspections until unit passes or is deemed no longer viable.

5. Housing Navigation

Based on options identified during Assessment, assist participants throughout the entirety of the process of securing housing (i.e., identify unit, apply for unit, move into unit, warm hand-off with housing case manager). Support eligible CoC participants in securing necessary documentation and submitting completed housing applications (identification, birth certificate, employment payment records, housing applications, **USHAP** etc.).

- **Rapid Resolution:** Ongoing identification of immediate crisis resolution strategies using participant resources, community services and resources, and available housing supports.
- **Housing Location:** Assist clients in locating units by matching with available inventory or other options within the community. Match options could include inventories from CMHA, the unit acquisition team, and other CoC-specific programs.
- **Universal Supportive Housing Application Process (USHAP):** Collect and enter required data, forms, and certifications in HMIS to support the application and placement process for CoC-sponsored housing programs.

6. Coordinated Intake Administration

Prioritize resources for the most vulnerable people with the highest needs as identified through **CI Intake, Assessment** tools, and **USHAP** processes. The prioritization criteria, established in the Cleveland/Cuyahoga CoC CI policies and procedures, are designed to match households with the most appropriate resources available. Maintain and manage BNL in HMIS for Chronic, Youth, Veterans, Singles and Families

- **By Name List (BNL) Management:** Provide regular oversight and review of all BNL functions in Cleveland/Cuyahoga County's instance of HMIS in conjunction with the CoC/HMIS Lead Agency. This is to be provided for all participants who have a completed BNL and/or Housing Offer Assessment in HMIS.
 - Youth & Young Adult**
 - Veterans**
 - Families**
 - Single Adults**
- **Referral/Slotting:** Manage the referral process by connecting eligible participants to qualifying resources as slots become available. Housing programs request referrals from CI when they have vacancies in their projects.
 - Verify completeness and accuracy of USHAP Packet Manage USHAP packet review and certification process. Manage USHAP candidate screenings.
 - Provide liaison support to critical CoC and CI housing partners (Cuyahoga OHS, CMHA, EDEN, etc.)
 - Match participant preferences and housing needs with available inventory.
 - Match existing participants with available inventory (PSH transfers or Moving On)
 - Manage participant and housing slotting meetings, including all communication, prospective applicant rights and grievance adjudication, and tracking of status in HMIS
 - Produce and manage a "Hotlist" of prospective USHAP participants who require specialized contact and engagement.

- **Resource Availability Management:** Maintain a list of CoC referral projects with up-to-date information about unit availability, unit attributes, eligibility criteria, and funding source requirements.
- **Collaboration With CoC Lead**
 - i. Participant in CoC system planning and strategy meetings to assess effectiveness, impact and usefulness of CI tools and processes. Recommend updates, refinements, and, if applicable, comprehensive changes to CI tools and processes.
 - ii. Assess historical and future projected PSH unit turnover and vacancies that will be available over a 12-month period (use results to gauge number of active USHAP packets in the pool on any given day to fill expected vacancies). Maintain a minimum of at least 30% or more than the average number of USHAP packets needed every month in the USHAP PSH pool to fill occupancies available within the system.
 - iii. Review HMIS data with OHS HMIS administration staff every month to identify priority prospective USHAP participants who are homeless with severe service needs and who will be invited by the CI Administrator to submit a Cleveland/Cuyahoga CoC USHAP housing packet.
 - iv. Facilitate system case conferencing meetings to review prospective USHAP participants who are HUD chronically homeless, have long periods of episodic homelessness with severe service needs, or are homeless with severe service needs. Identify contact and engagement plans for identified persons.

Exhibit 1: CI Design Summary Table

CI Role & Primary Activities	CI System Management Function	Outcomes	OHS Current Investment Distribution
<p>1. Access – Call Center</p> <ul style="list-style-type: none"> • Manage initial crisis response through phone screening. • Determine the nature of the housing crisis and route to appropriate community resources. • Divert from homelessness system if possible • Route all imminently and literally homeless callers to CI Assessment • Hours of operation: business hours 	<ul style="list-style-type: none"> • Triage • Diversion • Referral to CoC resources 	<ol style="list-style-type: none"> 1. Community resource referral 2. Diversion from CoC system 3. CoC crisis resource referral 	<p>3.5 FTEs Triage</p>
<p>2. Access – In Person</p> <ul style="list-style-type: none"> • Manage initial crisis response through in-person screening. • Determine the nature of the housing crisis and route to appropriate community resources as applicable. • Complete CI Intake for all imminently and literally homeless participants • Hours of operation: business hours and as needed evenings and weekends <p>Note: Street Outreach programs and Single Adult shelters perform this function as a standard operational practice. Street Outreach programs and Single Adult shelters are not expected to receive County funding for this activity.</p>	<ul style="list-style-type: none"> • Triage • CI Intake • Diversion & Rapid Exit 	<ol style="list-style-type: none"> 1. Community resource referral 2. Diversion from CoC system 3. CoC crisis resource referral 4. Overnight shelter enrollment 5. CI enrollment <ol style="list-style-type: none"> a. UDEs b. CI Intake 	<p>3.0 FTEs</p> <p>*Standard operations for Street Outreach programs and Single Adult shelters.</p> <p>Cuyahoga County is not planning CI funding investments for this intake activity.</p>
<p>3. Assessment – Phone or In-Person</p> <ul style="list-style-type: none"> • Determine housing needs, housing barriers, severity of service needs for all participants (Singles, Families, Youth) • Assess acuity and provide connection to rehousing resources for all populations • Manage ES availability and referral process for Families, Youth, and highest vulnerability Single Adults. • Hours of operation: business hours 	<ul style="list-style-type: none"> • Basic CI Intake & Assessment • Comprehensive CI Assessment • ES enrollment for special populations • Diversion/Rapid Exit • Referral to CoC housing resources 	<ol style="list-style-type: none"> 1. Diversion 2. Emergency Shelter enrollment (special populations) 3. Diversion + overnight Shelter 4. Rapid Exit 	<p>4.0 FTEs CI Intake</p> <p>1.0 FTEs Diversion</p>
<p>4. Housing Unit Acquisition</p> <ul style="list-style-type: none"> • Recruit landlords and property management companies • Secure units for use by CoC program participants • Conduct unit inspections for NSPIRE and/or HQS • Hours of operation; business hours 	<ul style="list-style-type: none"> • Unit Acquisition • Housing search support 	<ol style="list-style-type: none"> 1. Rapid Exit 2. PH-RRH Exit 3. PH-PSH Exit 	<p>0.0 FTEs Locators</p>

<p>5. Housing Navigation</p> <ul style="list-style-type: none"> Facilitate housing resolution strategy Assist participants with housing search, application, and move-in process Assist with completion of USHAP packet for eligible participants Hours of operation; business hours and as needed evenings and weekends 	<ul style="list-style-type: none"> Housing search support Housing application support 	<ol style="list-style-type: none"> Rapid Exit PH-RRH Exit PH-PSH Exit 	<p>4.0 FTEs Navigators</p>
<p>6. CI Administration</p> <ul style="list-style-type: none"> By Name List Management – Identify participants who are eligible and prioritized for CoC-funded housing (PH-RRH, PH-PSH, PH-OPH) Maintain list of current and imminent vacancies in all CoC RRH and PSH projects USHAP Packet Review and Referral Management Slotting and Referral management process Hours of operation; business hours, as needed evening hours and weekends 	<ul style="list-style-type: none"> Triage (Families, Youth, & Vulnerable Adults) Intake (Families, Youth, & Vulnerable Adults) Diversion & Rapid Exit Project Vacancy Management USHAP Management Prioritization Management Project Referral Management 	<ol style="list-style-type: none"> Active By Name List/Registry Management Rapid Exit PH-RRH Exit PH-PSH Exit PH-OPH Exit 	<p>5 FTEs</p>

Part II. Organization Profile & Proposed Response

Instructions: Complete a separate form Part II for Applicant Organization and each implementing Partner Organization

Applicant Organization Name	
Implementing Partners (If Applicable)	
Subrecipient 1 Organization Name (If Applicable)	
Subrecipient 2 Organization Name (If Applicable)	
Subrecipient 3 Organization Name (If Applicable)	
Unique Entity Identifier Number	
Employer/Taxpayer Identification Number	

For narrative responses, please provide detailed yet succinct responses.

1. Has the organization ever received a federal grant, either directly from a federal agency or through a State/local agency? YES NO

1a. If YES, please provide the federal agency grant, year, and amount of funds received in the last five years (2020 to present)

Federal Agency	State/Local Agency (if applicable)	Grant / Program Name	Years/Grant Term	Amount

2. Describe your organization’s experience in effectively utilizing federal funds and performing the activities proposed in the CI Redesign application.

Describe how your organization has successfully utilized federal funds in other projects. Provide examples that illustrate experience such as:

- (a) working with Coordinated Intake and addressing housing and supportive service needs;
- (b) financial system that tracks resources to ensure that spending is on track, not over under budget
- (c) track and report data

3. Describe your organization's financial management structure.

Include how your organization has a functioning accounting system that is operated in accordance with generally accepted accounting principles or has designated a fiscal agent that will maintain a functioning accounting system for your organization in accordance with generally accepted accounting principles. If your project application includes a subrecipient(s), specifically address your plan for fiscal controls and accounting procedures to assure proper dispersal of and accounting for federal funds in accordance with the requirements of 2 CFR part 200. Include how finance staff work with program staff to ensure appropriate use of resources.

4. Describe the specific CI activities (from the chart in Part I) that your agency is proposing to operate, manage, and/or coordinate. Describe your agency's relevant experience operating CI or other similar participant CI-like systems. Identify the specific staff roles (not individual names, but operational functions) and FTEs (full time equivalent) staff proposed to successfully fulfill each of the functions and outcomes of the CI activity.

Please limit your responses to Q2, Q3, and Q4 to not more than 3 pages.

Data and Technology Questions

Total 15 points. Please limit your responses to Q5 through Q11 to not more than 3 pages.

Data Structure and Experience

5. Describe your agency's experience specifically with HMIS. In your response, please describe:

- Years of experience
- Experience with using HMIS for reporting and analysis (not just data entry)
- Types of projects your agency has entered data on in HMIS

6. Describe your agency's experience with any other client-level data collection and reporting systems. In your response, please describe:

- The reporting software and data analysis tool(s) used
- Years of experience with these tool(s)
- Types of projects this tool is used to collect and report data on. Include as an attachment a sample report or template from this tool. Include with that report a summary description of what the data in the report is communicating and how that data could be used. Any client-identifying information in the report must be redacted.

Data Quality and Monitoring

7. Describe your agency's plan for monitoring ongoing project performance and data quality. In your response, please detail:

- Timeliness (i.e., how long it takes your agency to enter the data once it is received from the participant?)
- Data reconciliation (i.e., ensuring data alignment with multiple databases)
- Data completeness and integrity (i.e., minimizing missing data and data errors)

8. What would be your plan for monitoring and capturing Coordinated Intake data that is maintained outside of HMIS, such as housing lists, navigation scheduling, and by-name-lists? Your response should be tailored to the specific CI activities you are applying for.

9. What is your current plan for staff allocation as it relates to HMIS data entry? Please indicate your agency's plan to uphold the coordinated intake data requirements.

Data Security and Privacy

10. Describe technical safeguards your agency uses to protect client PPI (Personal Protected Information). Including, but not limited to HMIS. Please include in your description:

- Data storage
- Privacy protocols
- Staff training related to privacy
- Agency policy and procedures that support data privacy and technical services
- Steps that are taken in the event of a data breach (i.e., client-level data comprised)

Technology

11. Describe what technology equipment (i.e., laptops, mobile phones, hotspots, printers, etc.) you anticipate needing to operate, update, and/or purchase to equip the staff who will be hired to carry out the CI activity(ies) being applied for.

The budget submitted with this application should reflect any technology equipment that will need to be purchased, either with CoC funds or other funds the applicant is leveraging. If you anticipate not needing to purchase additional equipment, please state that.

Training Requirements

Total 35 points. Please limit your responses to Q12 through Q17 to not more than 2 pages.

12. Describe your plan and the timeline for ensuring all CI staff at your agency receive the expected orientation and training pertaining to CI redesign specifications as they are hired and onboarded.

13. Please describe any additional training your agency will provide to your staff.

14. Describe how your agency will provide on-going and annual training requirements for CI staff.

15. Describe how your agency will provide on-going staff development and support so that staff feel supported, encouraged, and empowered in their work.

16. Describe how staff will be supervised and supported to incorporate the knowledge and skills they gain through training in their day-to-day practice. In your response, identify how you will determine if the training staff receive is having an impact on their work.

17. Describe how you will receive feedback from users of the Coordinated Intake system to determine the effectiveness of staff training and to determine what additional training may be needed.

Demonstrating Commitment to Cuyahoga/Cleveland CoC Goals and Objectives

Total 50 points. Not more than 2 pages.

Cuyahoga Strategic Action Plan for Homelessness, CoC Vision

1. Referencing the CoC's vision to reduce homelessness by 25% by 2027, as detailed in the Action Plan, describe how your agency will incorporate an adherence to this vision in the implementation of the CI service(s) you are applying for.

CoC Goals

2. Goal: Improve Engagement and Access - Describe how your agency's leadership and staff will activate practices that support this goal in its implementation of CI services. Describe how your agency will support the CoC's commitment to equity and inclusion throughout all CI activities and functions.

3. Goal: Improve Experience of Persons in Crisis Housing - Provide an example describing when or how your agency ensures all persons have equitable access to CI and crisis response resources.

4. Goal: Expand Housing Stabilization Capacity - Describe your agency's commitment to improving access to RRH, PSH and other permanent housing options for persons experiencing homelessness

6. Goal: Connect Clients to Income and Benefits - Describe your planned efforts to support the connection to benefits and employment supports. In your response, describe how income and benefit data will be analyzed, the frequency of the analysis, and how the analysis will be used to identify needed areas of change in the Coordinated Intake system. Also, indicate how potential system inequities will be identified through this analysis.

7. Goal: Build System Capacity - If data analysis demonstrates a need for change in Coordinated Intake system processes or policies, describe how your agency will pursue making those changes in a way that is transparent, in partnership with OHS, CI partners, and the CoC Advisory Board, and aligns with input provided by stakeholders (i.e., persons with lived experience, homeless service providers, etc.).

Part III. RFQ Budget

The RFQ budget and instructions are a separate Excel attachment.

Part IV. RFQ Application Checklist

Ensure that the following items are included with your application:

- Completed Part II Organization Profile & Proposed Response
- Budget
- Bureau of Workers Compensation certificate
- Certificate of Insurance compliant with included coverages (see ATTACHMENT A)

ATTACHMENT A

CUYAHOGA COUNTY Insurance Requirements

Contractor shall procure and maintain for the duration of the contract insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder and the results of that work by the Contractor, his agents, representatives, employees or subcontractors.

Nothing in this Agreement shall be construed to be a waiver of defenses or immunities afforded to the County under applicable law.

MINIMUM SCOPE AND LIMIT OF INSURANCE

Coverage shall be at least as broad as:

- a) **Worker's Compensation Insurance** as statutorily required by the State of Ohio.

For Contractors with employees working outside of Ohio, Worker's Compensation Insurance as required by the various state and Federal laws as applicable including Employers' Liability coverage with limits of no less than \$1,000,000 per accident for bodily injury or disease.

- b) **Commercial General Liability Insurance** with limits of liability not less than:

\$1,000,000 each occurrence bodily injury & property damage;
\$1,000,000 personal & advertising injury;
\$2,000,000 general aggregate;
\$2,000,000 products/completed operations aggregate.

Such insurance shall be written on an occurrence basis on the Insurance Services Office (ISO) form CG 00 01 or its equivalent. If a general aggregate limit applies, either the general aggregate limit shall apply separately to this specific project/location (ISO CG 25 03 or 25 04) or the general aggregate limit shall be twice the required occurrence limit.

This policy must include exclude, coverage for Sexual Abuse and Molestation in the same amount. This must be explicitly noted on the Certificate of Insurance.

- c) **Business Automobile Liability Insurance** covering any auto (symbol 1), or if contractor has no owned autos, hired (symbol 8) and non-owned autos (symbol 9). Such insurance shall provide a limit of not less than \$1,000,000 combined single limit (bodily injury & property damage) each accident;

Such insurance shall be written on an occurrence basis on the Insurance Services Office (ISO) CA 00 01 form or its equivalent.

- d) **Cyber Risk Insurance** for **all** vendors. This coverage shall respond to privacy and network security liability claims with limits of liability not less than:

\$3 million per occurrence;
\$3 million aggregate.

Coverage shall be sufficiently broad to respond to the duties and obligations as is undertaken by vendor in this agreement and shall include, but not be limited to, claims involving security breach, system failure, data recovery, business interruption, cyber extortion, social engineering, infringement of intellectual property, including but not limited to infringement of copyright, trademark, trade dress, invasion of privacy violations, information theft, damage to or destruction of electronic information, release of private information, and alteration of electronic information. The policy shall provide coverage for breach response costs, regulatory fines and penalties as well as credit monitoring expenses.

- e) **Umbrella/Excess Liability Insurance** to provide additional insurance limits for commercial general liability and/or automobile liability, with limits of liability not less than:

\$1,000,000 each occurrence
\$1,000,000 general aggregate
\$1,000,000 products/completed operations aggregate

Such insurance shall be written on an occurrence basis and be provided on a true “following form” or broader coverage basis. Such insurance may also be used to meet the limit requirements of the underlying insurance, so long as the total limit provided by the contractor is equivalent to the limits required in this contract for both primary and excess/umbrella coverage.

Insurance Coverage Terms and Conditions

1. Nothing in this Agreement shall be construed to be a waiver of defenses or immunities afforded to the County under applicable law.
2. All insurance policies of the Contractor required for this Contract, with the exception of Workers Compensation Liability shall:
 - (i) Name The County of Cuyahoga, its officers, officials, employees, and volunteers as additional insureds with respect to liability arising out of work or operations performed by or on behalf of the Contractor including materials, parts, or equipment furnished in connection with such work or operations.

- (ii) General liability coverage can be provided in the form of an endorsement to the Contractor's insurance (at least as broad as ISO Form CG 20 10 11 85 or if not available, through the addition of both CG 20 10, CG 20 26, CG 20 33, or CG 20 38; and CG 20 37 if a later edition is used).
3. All insurance policies of the Contractor required for this Contract shall:
- (i) Provide that, for each insurance policy provided above, coverage shall not be canceled except with notice to the County of Cuyahoga.
 - (ii) Grant the County of Cuyahoga a waiver of any right to subrogation which any insurer of said Contractor may acquire against the County of Cuyahoga by virtue of the payment of any loss under such insurance. Contractort agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether or not the County of Cuyahoga has received a waiver of subrogation endorsement from the insurer.
 - (iii) Be primary and non-contributory as respects the County of Cuyahoga, its officers, officials, employees, and volunteers for any claims related to the work or operations of the Contractor under this contract. Any insurance or self-insurance maintained by the County of Cuyahoga, its officers, officials, employees, or volunteers shall be excess of the Contractor's insurance and shall not contribute with it.
 - (iv) Provide the County of Cuyahoga with a Certificates of Insurance evidencing these coverages; as well as reference and provide evidence (via physical policy endorsement) and that each of the terms and conditions identified in Sections 2 & 3 have been met by the Contractor and their respective insurer(s).
4. The insurance required for this Contract shall be provided by insurance carrier(s) licensed to transact business and write insurance in the state(s) where operations are performed and shall carry a minimum A.M. Best's rating of A-VII or above, or a state regulated captive also licensed to transact business and write insurance in the state(s) where operations are performed
5. The terms of this Contract shall be controlling and shall not be limited by any insurance policy provision.
6. These insurance provisions shall not affect or limit the liability of the Contractor stated elsewhere in this Contract or as provided by law.
7. The Contractor shall require any and all of its subcontractors to procure, maintain, and pay premiums for the insurance coverages and limits of liability outlined above with respect to

products, services, work and/or operations performed in connection with this Contract.

8. The County reserves the right to require insurance coverages in various amounts or to modify or waive insurance requirements on a case-by-case basis whenever it is determined to be in the best interest of the County.
9. If the Bid/Proposal/RFQ specifies the need for higher limits of liability for any applicable insurance provision, the Bid/Proposal/RFQ specifications shall govern.
10. Where coverages are made on a claims-made basis the claims-made retroactive date on the policy shall be prior to the commencement of professional activity related to this Contract. Where Commercial General Liability is claims-made policy such General Liability policy shall provide coverage for claims arising out of the incidents that occur during the policy period, regardless of when claims are reported. The following language must be reflected on the Certificate of Insurance: "The General Liability policy shall provide coverage for claims arising out of the incidents that occur during the policy period, regardless of when claims are reported."
11. The Contractor shall furnish a Worker's Compensation Certificate and Certificate of Insurance evidencing the insurance coverages required herein are in full force and effect.
12. Acceptance of a non-conforming certificate of insurance by the County shall not constitute a waiver of any rights of the parties under this Contract.
13. The Certificates of Insurance evidencing these coverages shall contain the following language where applicable:

"Cuyahoga County and its officials, officials, employees and volunteers, are additional insureds on a primary and non-contributory basis (coverage is primary and non-contributory)," and a "Waiver of Subrogation in favor of the County."