

## County of Albany

112 State Street Albany, NY 12207

## Legislation Text

File #: TMP-1866, Version: 1		
REQUEST FOR LEGISLATIVE ACTION		
Description (e.g. Contract Authorizat	ion for Information Sorvices):	
Description (e.g., Contract Authorization for Information Services): Contract Authorization for Clinical Prevention Services with Trinity Alliance		
Date: Submitted By: Department: Title: Phone: Department Rep. Attending Meeting:	August 31, 2020 Scott McNelis Children, Youth and Families Contract Administrator 7306 Moira Manning, Commissioner	
Purpose of Request:	Molia Marifiling, Commissioner	
□ Adopting of Local Law □ Amendment of Prior Legislation □ Approval/Adoption of Plan/Procedure □ Bond Approval □ Budget Amendment □ Contract Authorization □ Countywide Services □ Environmental Impact/SEQR □ Home Rule Request □ Property Conveyance □ Other: (state if not listed)	Click or tap here to enter text.	
CONCERNING BUDGET AMENDMENTS		
Increase/decrease category (choose a  ☐ Contractual ☐ Equipment ☐ Fringe ☐ Personnel ☐ Personnel Non-Individual	all that apply):	
Revenue		

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Increase Account/Line No.: Source of Funds: Title Change:	Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.
CONCERNING CONTRACT AUTHORI Type of Contract:  ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☐ Grant	ZATIONS
Choose an item. Submission Date Deadline Click Settlement of a Claim Release of Liability Other: (state if not listed)	or tap to enter a date.  Click or tap here to enter text.
Contract Terms/Conditions:	
Party (Name/address): Trinity Alliance of the Capital Region, In 15 Trinity Pl Albany, NY 12202	nc
Additional Parties (Names/addresses): Click or tap here to enter text.	
Amount/Raise Schedule/Fee: Scope of Services: from entering foster care, detention or s	\$1,456,677 Prevention programming focuses on preventing children hortening their stay if placed in either.
Bond Res. No.: Date of Adoption:	Click or tap here to enter text. Click or tap here to enter text.
CONCERNING ALL REQUESTS	
Mandated Program/Service: If Mandated Cite Authority: through 409-b	Yes ⊠ No □ Title 4 of Article 6 of the Social Services Law, sections 409

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Yes ⊠ No □ Is there a Fiscal Impact:

Anticipated in Current Budget: Yes ⊠ No □

County Budget Accounts:

Revenue Account and Line: AA6071 03670 04615 04670 Revenue Amount:

\$614,572 \$440.645 \$24.764

Appropriation Account and Line: AA6071 44046

Appropriation Amount: \$1,456,677

Source of Funding - (Percentages)

Federal: 50.6 State: 18.3 County: 31.1

Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2021 - 12/31/2021

Length of Contract: 12 Months

Yes □ No 🏻 Impact on Pending Litigation

If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: 19-424, 18-472, 17-382, 16-364, 15-354, 14-393, 13-485, 12

-474, 12-75, 11-141

Date of Adoption: 10/15/19, 10/9/18, 10/10/17, 9/12/16, 9/14/15, 10/14/14,

11/12/13, 12/3/12, 3/12/12, 4/11/11

**Justification**: (state briefly why legislative action is requested)

Please see attached