

County of Albany

Harold L. Joyce Albany County Office Building 112 State Street - Albany, NY 12207

Legislation Text

| File #: TMP-2770, Version: 1 | | |
|---|--|--|
| REQUEST FOR LEGISLATIVE ACTION | N | |
| Description (e.g., Contract Authorizat Contract Authorization for Clinical Preve | ion for Information Services): ontion Services with Community Maternity Services | |
| Date: | October 1, 2021 | |
| Submitted By: | Scott McNelis | |
| Department: | Children, Youth and Families | |
| Title: | Contract Administrator | |
| Phone: | 7306 | |
| Department Rep. | | |
| Attending Meeting: | Moira Manning, Commissioner | |
| Purpose of Request: | | |
| ☐ Adopting of Local Law | | |
| ☐ Amendment of Prior Legislation | | |
| $\hfill\square$ 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 AMENDMEN | те | |
| CONCERNING BUDGET AMENDMEN | <u>15</u> | |
| Increase/decrease category (choose a | all that apply): | |
| ☐ Contractual | | |
| ☐ Equipment | | |
| ☐ Fringe | | |
| ☐ Personnel | | |
| ☐ Personnel Non-Individual | | |

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|---|--|
| □ Revenue | |
| 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 | <u>ZATIONS</u> |
| Type of Contract: ☐ Change Order/Contract Amendment ☐ Purchase (Equipment/Supplies) ☐ Lease (Equipment/Supplies) ☐ Requirements ☐ Professional Services ☐ Education/Training ☐ Grant | |
| Choose an item. Submission Date Deadline Click ☐ Settlement of a Claim ☐ Release of Liability | or tap to enter a date. |
| ☐ Other: (state if not listed) | Click or tap here to enter text. |
| Contract Terms/Conditions: | |
| Party (Name/address): Community Maternity Services 27 North Main Ave Albany, NY 12203 Additional Parties (Names/addresses): | |
| Click or tap here to enter text. Amount/Raise Schedule/Fee: Scope of Services: Supports designed to prevent children and your from foster care and their families | \$428,561 Prevention Services Program with Community and Recreational th from entering foster care, and to provide services for youth discharged |
| 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: | Yes ⊠ No □ Title 4 of Article 6 of the Social Services Law, sections 409 through 409- |

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Yes ⊠ No □ Is there a Fiscal Impact: Yes ⊠ No □ Anticipated in Current Budget:

County Budget Accounts:

Revenue Account and Line: AA6071 03670 04617 04670 Revenue Amount:

\$180,424 \$ 98,569 \$ 6,000

Appropriation Account and Line: AA6071 44046 Appropriation Amount: \$428,561

Source of Funding - (Percentages)

Federal: 24.4 State: 42.1 County: 33.5

Local: Click or tap here to enter text.

Term

Term: (Start and end date) 1/1/2022 - 12/31/2022

Length of Contract: 12 Months

Impact on Pending Litigation Yes ☐ No ☒

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

Previous requests for Identical or Similar Action:

Resolution/Law Number: 20-353, 19-425, 18-469, 17-381, 16-363, 15-353, 14-386, 13-477, 12-

480, 12-82, 11-144

Date of Adoption: 10/13/20, 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

<u>Justification</u>: (state briefly why legislative action is requested)

Please see attached